

# Mother Support Task Force (MSTF)

WORLD ALLIANCE FOR BREASTFEEDING ACTION



Lindsay Calcerano, WABA 2012  
WBW Photo Contest

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Coordinator WABA MSTF: Anne Batterjee (Saudi Arabia)

Co-coordinators WABA MSTF: Pushpa Panadam (Paraguay),  
Dr. Prashant Gangal (India)

Editors: Pushpa Panadam, Rebecca Magalhães (USA)

Translators: Spanish – Marta Trejos (Costa Rica)

French – Juanita Jauer Steichen, Stéphanie Fischer (France)

Portuguese – Anely Uriarte (Paraguay), Pajuçara Marroquim (Brasil)

Arabic – Seham Basrawi (Saudi Arabia)

MOTHER SUPPORT TASK FORCE (MSTF)

## *Breastfeeding creates a lifetime of love*



There's no doubt about it – breastfeeding establishes a bonding, sense of intimacy and closeness that lasts a lifetime. The knowledge that you have literally given yourself to your child – that he needed no one but you to satisfy his every need, help him grow, nurture his being – is a gift beyond measure. For an infant, breastfeeding is his lifeblood – he could not survive without you. For a toddler, breastfeeding is his anchor – his world is expanding, yet he is not ready for independence. For an older child, breastfeeding is his comfort – Mama can still hold him in her arms and chase the world away with sweet nourishing milk. The bond of breastfeeding is forever. Family is special, but mother is sacred.

– <http://www.thebreastintentions.com/index.html>



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## MOTHER SUPPORT TASK FORCE COMMENTS AND INFORMATION

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### 1. Bonding Beyond Breastfeeding: Anne Batterjee, Coordinator, WABA MSTF

**A**lmost anyone who has chosen to breastfeed their infant knows about bonding. It is described as the magical link between mother and child that is both emotional and physiological. It is an amazing and wonderful part of motherhood, yet I often wonder about the depth of the meaning of that feeling.

After I moved into “grandmotherhood”, I rarely thought about it until two recent events brought it to mind. I don’t think I ever realized that not only does “bonding” never end, but it goes beyond that child you once held in your arms and nourished. The deep feeling can suddenly surprise you when you look at your grandchild! a small part of you and your child.

Last month, when several dear friends lost their parents and loved ones, I listened to beautiful eulogies and thought of what we leave behind. Then I read an amazing eulogy in which the daughter spoke of her mother as being one of “those mothers.” Through my tears, it came to mind that perhaps that is the real miracle of bonding. It is a closeness that sets mothers apart. You’re never quite prepared for the feelings that your first grandchild’s birth inspires.

I recently read an article that expressed the feeling so well that I would like to share it:

*Even an experienced pediatric nurse like Mary Schoenberg, 57, of Basking Ridge, N.J., (USA) was surprised by how much joy the arrival (of her grandchild) brought her, and how quickly. “You won’t know how wonderful it is until it happens. All of a sudden you feel a rush of emotion, and they are yours forever.”*

I thought of that for a few days and then realized that must also be what I felt, as I watched my granddaughter during her high school commencement. I felt a ferocious need to protect and support her - she was not just a grandchild, but a part of me and mine.

I have now come to recognize that special connection between a grandparent and grandchildren. It can be so powerful that it takes your breath away and brings tears to your eyes. But what promotes such a strong bond across generations?

Bonding between infants and their caretakers is much-studied, but still remains a mysterious process. Traditionally, most of the research has focused on the connection between a mother and her baby, as it was believed that an infant had to form an attachment to one primary person in order to develop securely. More recent studies, however, indicate that this is not necessarily true. In fact, infants are not only capable of forming attachments to multiple caregivers, says Sharon Ryan Montgomery, a clinical child psychologist, but they may reap some developmental benefits from these multiple attachments. The initial bond that forms between grandparents and grandchildren, certainly, can be beneficial, powerful, and long-lasting.

How grandparents become attached to new grandchildren can vary greatly, even within families. Factors such as how many grandchildren one has, how far away they live, and how often they visit, all play a part. And while they’re no substitute for holding a child in your arms, baby Web pages, parent blogs, and Web cameras can help grandparents connect to long-distance newborns. According to Montgomery, the bond is most dependent on how involved grandparents are in their grandchildren’s lives.

Maintaining the bond with a grandchild can be difficult, as you try to balance your own desire to be with the child with the needs of the new parents. It is hard to find a happy medium when your instinct is to grab the child and run. At the same time, it can be wonderful after a long and tedious day to hand the little one back to mom. I guess it's all about teamwork and "unconditional love."

So when you first gaze into the eyes of a newborn grandchild or offer a finger for the infant to grasp, remember that the magic of bonding begins right at that moment and that it can truly be the start of a lifelong relationship.

Read more: <http://www.grandparents.com/gp/content/activitiesandevents/everyday-activities/article/have-you-bonded-with-your-grandchild.html#ixzz22x0nA6S9>

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Anne Batterjee, Coordinator  
WABA Mother Support Task Force  
Email: [annebatterjee@gmail.com](mailto:annebatterjee@gmail.com)

## 2. MSTF Update: MSTF Coordinator

WABA received a request asking for existing mother support groups in countries around the world. It should be a simple task of directing the person to the Mother Support E-map found in <http://www.waba.org.my/whatwedo/gims/emap.htm>

The E-map, however, does not have all the existing breastfeeding mother support groups nor peer counseling groups in the world. If you facilitate a mother support group or run a breastfeeding peer counseling group and your group is not included in the E-map, please do write to WABA: [waba@waba.org.my](mailto:waba@waba.org.my). The Criteria and Guidelines Framework for inclusion is available on the E-map page.

It is important that families, future parents, breastfeeding advocates, counselors, and health professionals are able to access information for where mothers or future mothers can get help or support to breastfeed. A complete E-map would be the ideal place to start.

In a global world, support does not necessarily mean face-to-face, telephone help or home or hospital visits within the same town. Support through emails and social network groups extend beyond countries and continents. An E-map will provide that necessary global contact.

## MOTHER SUPPORT FROM DIFFERENT SOURCES

### 3. Lebanese Association for Early Childhood Development (LAECD): Iman El-Zein El-Salah, Lebanon

The Lebanese Alliance for Breastfeeding Action (LABA) was launched in 2001. In 2006 the name was changed to Lebanese Association for Early Childhood Development (LAECD). LABA and LAECD celebrate World Breastfeeding Week (WBW) every year.



From 1992 to 2004 we celebrated on TV channels where we discussed WBW slogans. Information (3 brochures and a booklet with a guide for medical and paramedical personnel) was distributed to Baby Friendly Hospitals (BFH) and at doctors' meetings. Television spots on a successful start to breastfeeding; on skin to skin, rooming in, positioning and breastfeeding on demand, with a small documentary, were broadcast on various TV stations.

LAECD continues to work at counseling, home visits and training leaders in mother-to-mother support groups and health professionals. In 2011 LAECD, in coordination with the Ministry of Health following the WBTi (World Breastfeeding Trends Initiative), assessed the Lebanese situation on all breastfeeding issues. Following the assessment, a National committee and a National program for optimal infant and young child feeding were created.

This year 18 public and private hospitals joined the Baby Friendly Hospital Initiative (BFHI). Some of the other activities of LAECD were:

- 12 -17 March 2012: 28 participants were trained in the 40-hour course of Training of Trainers (TOT) with the participation of international experts.
- 15 May 2012: Decision makers' workshops for the 18 hospitals.
- 10 -11 July 2012: Training of 12 external assessors by international expert.
- Translation of 20-hour WHO/UNICEF course on BFH Breastfeeding promotion and support into Arabic by LAECD team with World Vision support. (In draft, for WHO acceptance through our external trainer Dr. Randa Saadeh, who will attend our second 20-hour course.)
- 16 -18 July 2012: 20-hour course for 45 staff members from 10 hospitals.
- A lecture on Breastfeeding, the Code and the Lebanese law in emergency situations in Bikaa, an area with Syrian immigrants.
- In mid-September we will accelerate the training of all hospital staff.

A new law for maternity leave is in process to be enacted in the parliament. The new law will increase maternity leave from 8 weeks 4 days for the public and 6 weeks for the private sector to 10 weeks for both sectors.



Participants in the 40-hour course with the trainers.



Milk expression session in the 20-hour course.



Participants in the 20-hour course practising antenatal education.



A participant in 20-hour course session practicing back massage to increase milk expression.



A group working on few articles of the Lebanese law.



Participant presenting articles from the Lebanese law after discussing it with her group.

Iman El-Zein El-Salah, LAECD IYCF coordinator, MPH, HBE, PSPA,  
WABA member and IBFAN Arab, World advisory committee member  
Email: imanzeinsalah@yahoo.com

#### 4. A Mother's Greatest Gift – Initiating Breastfeeding in Temples: Vasumathi Muthuramu, Malaysia

On Sunday, 29th July 2012, Mother-to-Mother Peer Support (MMPS), a breastfeeding support group in Penang, organized a talk at Sri Veeramakaliamman Temple, Jelutong, Penang, Malaysia. The talk, titled *A Mother's Greatest Gift*, was conducted in Tamil.\* It was our first attempt to reach out to Malaysians of Indian origin as we felt that breastfeeding could be challenging in this community. We decided to 'go to them' rather than wait for them 'to come to us.'

The initial contact was made by Pushpa Panadam, a LLL leader from Paraguay whose mother lives in Jelutong. Later, members of MMPS met with the temple committee to emphasize the importance of breastfeeding and the necessity for breastfeeding awareness and support. I suggested allocating a breastfeeding room or a corner in the temple for mothers to breastfeed in comfort. The committee members, many of them young, were very supportive and a date for a talk was fixed within a week of our meeting.

We prepared 600 flyers in English and Tamil and distributed them to various temples in Bayan Baru, Gelugor and Jelutong. Publicity via social network was done by both the temple and MMPS.

Sabrina Sunderraj, Jeya Aravin and I met to plan the talk, deciding to do it in an informal manner. We wanted our audience to know that breastfeeding is possible and that there is a support group to help them. Since this was our first attempt, both Jeya and I were unsure as to the number of people who would attend.

On the day of the talk we arrived at 6.15pm to set up a table with materials for distribution and to put up posters and banners. After the temple prayers, we started our talk at 7.30pm. About 30–35 people, single, married, elderly women and men, and young families, attended our talk. Women sat close to us while some of the men stood slightly further.

I started with a prayer and then introduced ourselves and our group. Selvi Odian, a mother who is still breastfeeding her 30 month old son and is a vegetarian, shared her emotion-filled breastfeeding experience. The audience was really touched. It was amazing to find that everyone stayed until the talk ended.

We touched on the following topics – *Why breastfeeding is considered as 'a mother's greatest gift?'* – *Why women stop believing in breastfeeding* – *What and how to prepare for breastfeeding* – *Advertisements by formula company* – *Hospital practices and what is needed especially when giving birth in a private hospital* – *Importance of support group.*

I emphasized the vital needs of the baby – love and food – both which breastfeeding fulfils. We also discussed the need for mothers to be strong to ensure the right of babies to be breastfed. Jeya spoke on the challenges we normally face when doing something good, but how to resolve these challenges with determination. It is the same for breastfeeding. It is important to prepare for breastfeeding prior to childbirth and seek people who have breastfed successfully for support.



*Registration of the participants*



*Vasumathi introducing the event.*



*Jeya Aravin giving her session.*



*Selvi sharing her breastfeeding experience.*

I showed advertisements for formula milk and explained how mothers may be influenced by them into choosing formula feeding instead of breastfeeding. We shared the dangers of formula feeding. Again, I stressed the importance of support from all levels: husband, mother, mother-in-law, work place and mother support group.

Many, including the young and even men, were very attentive throughout the talk, yet no one asked questions during the talk. Getting feedback was difficult. However, some mothers approached us with questions during refreshments, which were provided by the temple committee. Perhaps they were more comfortable talking individually. Some of them were surprised that there is a group to help them to breastfeed and a few elderly women blessed us for doing this. We felt so happy. I felt that we helped them to think positively about breastfeeding. The talk ended at 9.00pm.

The highlight of the event was that a breastfeeding room is already under construction within the temple premises. I never thought that the committee would be so efficient as to start building immediately. It was overwhelming. Once the room is completed, the temple may be the first temple in Malaysia to have a breastfeeding room. We hope more and more temples will follow their example. We plan to recognize the work done by the Temple committee during our World Breastfeeding Week 2013 celebration.

It was a very good and positive start for breastfeeding promotion at religious places. We hope to organize similar talks on breastfeeding and maybe doing it soon at another temple. *'Make Penang Breastfeeding Friendly' is on its way to becoming a reality*

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**Vasumathi Muthuramu**, Certified Breastfeeding Peer Counselor and MMPS core mom. She breastfed her elder son for more than two years and is still breastfeeding her second son who is 4 years old. She is doing her Masters in Social Work (MSW) in University Science Malaysia.  
Email: vasumathimuthuramu@hotmail.com

\* *Mother to Mother Peer Support (MMPS) is a breastfeeding support group based in Penang, started by a group of mothers passionate and interested in advocating publicly the awareness of breastfeeding. The group is fully operated and sustained by volunteers with a mutual interest in helping, guiding and supporting other mothers to breastfeed.*

\* Tamil is a South Indian language spoken by at least 70 per cent of Malaysians of Indian origin

## **5. Breastfeeding Mother Support in Lebanon: Nadiya Dragan, Lebanon**

My name is Nadiya Dragan and I am a Ukrainian national. Four years ago, I married my husband who is Lebanese and moved to Lebanon, a lovely, small but densely populated country in the Middle East. It is known for its varied tourist attractions – warm and welcoming Mediterranean Sea, busy nightlife in downtown Beirut, picturesque mountains, and, of course, its famous Cedar Tree forests. Soon after marriage, I got pregnant and when my baby was born our journey into breastfeeding began. I found breastfeeding to be more complicated

than what I expected, but my determination helped us overcome initial difficulties. These were solved once I bought the “Womanly Art of Breastfeeding” by La Leche League International.

Unfortunately, breastfeeding is not the norm in Lebanon - formula feeding is. An exclusively breastfeeding mother is usually “greeted” with great surprise, pure disbelief and sincere concerns that she might be “starving her baby” if she is not giving at least one formula bottle a day to her baby. There are many misconceptions about breastfeeding that society keeps on “whispering” into the mother’s ear that undermines her confidence (“Breastmilk is not as good as formula”, “Mother’s milk might be bad for her baby or not fat enough”, “These days mothers cannot produce enough milk”, “It’s impossible to breastfeed twins”, “Working moms cannot breastfeed so it’s better not even to start” etc.)

However, the great news is that according to a national study by Batal et. Al (2006), 95% of all women in Lebanon initiate breastfeeding after birth. This shows that even though there is a lot of negative pressure from society and lack of support from medical professionals, mothers still want to breastfeed! The sad part is that, according to that same study, only about 10% of those mothers who initiated breastfeeding are able to continue until 6 months. And I presume in urban areas, like Beirut, there would practically be no mothers at all who are able to maintain breastfeeding this long.

When I learned to enjoy my own breastfeeding experience with my daughter, I suddenly realized that simple information on how to establish and maintain lactation is all that a new mother in Lebanon might need. Soon I became a breastfeeding counsellor and the very first La Leche League Leader in Lebanon!

It is such a joy to help mothers learn about breastfeeding and then watch them succeed and enjoy this beautiful way of mothering, just like we did with my daughter till she self-weaned at 2 years and a half.

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**Nadiya Dragan**, LLL Leader, breastfeeding counselor, Lebanon  
 Email:nadiya.dragan@gmail.com

**Editors’ Note:** *Nadiya has helped many mothers and you will read Nadiya’s and some of these mothers’ breastfeeding experience in the next section.*

## 6. Mother Support in Thailand: Meena Sobsamai, Thailand

Mother-to-mother support in Thailand is becoming more active. There are support groups, both formal and informal, available in communities. Since the Baby Friendly Hospital Initiative (BFHI) was re-launched in Thailand in 2009, the 10<sup>th</sup> step required that Baby Friendly Hospitals (BFH) have their own parenting school programs and regular mother-to-mother support groups in the hospitals and also extend these to the communities. Health volunteers initiate the support system in the community and work closely with the community hospital. That is the formal support that is available at every BFH here in Thailand.

Informal support groups are both face-to-face and online. There are more natural (face-to-face) support groups in the rural communities but fewer in cities. However, more online support is now available for everyone.

Here are some of the informal mother to mother support groups available to families. Many of them are for both Thai and English speakers.

**Thai Breastfeeding Mom:** This is a volunteer Thai-mom online group which is very active. After the last meeting during World Breastfeeding Week – Breastfeeding in the Garden which was highly successful – the meetings are now bi-monthly.

This group was started a year ago by a couple from the Breastfeeding Center to provide breastfeeding support for moms. Their activities are available at: [www.facebook.com/thaibreastfeeding](http://www.facebook.com/thaibreastfeeding)



*Breastfeeding in the Garden – WBW 2012.*



*Flashmob, WBW 2011 at Siam Paragon, a big department store in Bangkok.*



*Childbirth and Breastfeeding Foundation – Parenting Leave – It's time for Dad: Parenting leave to support his wife to breastfeed.*

**BAMBI (Babies and Mothers of Bangkok International):** BAMBI, a project of Childbirth & Breastfeeding Foundation of Thailand (CBFT) was founded in 1982 by Melanie Habanananda, a midwife from United Kingdom, married to Dr. Tanit Habanadha, an obstetrician and gynaecologist. Dr. Tanit, Melanie and 3 other Thai professionals founded Childbirth & Breastfeeding Foundation of Thailand. Support through friendship is the slogan of the group in following CBFT's mission to protect, promote and support natural birth and breastfeeding. BAMBI is a mother-led volunteer organization run by volunteer moms who are mainly expatriates in Bangkok.

BAMBI's activities include a Bumps & Babies meeting every Thursday, Baby Play Group in many areas of Bangkok, Buddies' mom, WOMBLES (Working Mother Over Stress Lets Eat Out) BAMBI's Magazine, Charity Project and many more. For further information visit [www.bambiweb.org](http://www.bambiweb.org) and [www.cbftthai.org](http://www.cbftthai.org)

**Pattaya BAMBI Group:** If you live in the Pattaya/ Rayong area and are keen to meet other mothers with babies and toddlers, please join us for our coffee morning at The Holiday Inn, No. 1 Beach Road, Pattaya 94000. Future meetings will be held on the 3<sup>rd</sup> Monday of every month. Leader for this group is Tamara Ryan 080-6086-223 or [bambi\\_pattaya@bambiweb.org](mailto:bambi_pattaya@bambiweb.org)



*BAMBI celebrates 30 years.*

Working Mothers; WOMBLES is a group of working mothers (paid /charity work) who meet on the second Thursday of the month for dinner in Bangkok. Pregnant women and mothers thinking about returning to the workforce are also welcome. If you are interested in joining, please email bambi.wombles@gmail.com



**Bangkok Breastfeeding Café@Bigknit49 (BCB):** BCB is a breastfeeding support group that meets every Tuesday 9.30 –11.30am. It is a place where women can meet, encourage and support each other with breastfeeding issues. Visit their facebook page at <https://www.facebook.com/pages/Bangkok-Breastfeeding-Cafe/>

**Meena Sobsamai**, Nurse, Midwife, IBCLC, Graduate Diploma in Childbirth Education, IBLCE Coordinator for Thailand. Email: sobsamai@yahoo.com

**7. Reaching Our Sisters Everywhere (ROSE):  
Tenesha Turner, Georgia, USA**

Reaching Our Sisters Everywhere, Inc. (ROSE) is a national organization with culturally specific education, encouragement, and support to increase breastfeeding initiation and duration in the African-American community. We are a non-profit organization designed to decrease breastfeeding disparities in African-American communities across the nation.

The rate at which African-American mothers breastfeed is significantly lower than that of any other ethnic group in the USA. Research has proven that breastfeeding has an essential role in the health and wellbeing of women and infants. Breastfeeding is protective in combating breast cancer in women, infant mortality and low birth weight. We must construct the actions necessary to provide strategies for the African-American communities to reclaim its tradition of breastfeeding.

ROSE coordinated a successful two day conference, *Reclaiming an African-American Tradition*, July 19-20, 2012 in Atlanta, Georgia, with speakers and participants from throughout the United States. We celebrated the fantastic activities already happening, and made plans to continue and/or create awareness and projects to support the African-American breastfeeding mother.

In order to assist in the effort of increasing the rates of African-American mothers who breastfeed, ROSE will pursue the following objectives:

- Educate health care providers and community organizers on methods to provide culturally sensitive breastfeeding support.
- Transform the knowledge gained into an attainable action plan.
- Create ROSE membership that will connect advocates nationwide.

If you have any questions, please feel free to contact us at [BreastfeedingRose@gmail.com](mailto:BreastfeedingRose@gmail.com)  
Phone: 404-719-4297 website: [www.BreastfeedingRose.org](http://www.BreastfeedingRose.org)



*BREASTFEEDING It Rocks! Tenesha Turner of ROSE.*

**Tenesha Turner**, CLC, WIC Breastfeeding Peer Counselor, Rockdale County Health Department, Conyers, Georgia, USA

## 8. Community Education Strategy:

### Mimi de Maza, Guatemala

Totonicapán is an area in the western region of Guatemala. The west has the most number of indigenous population. Totonicapán is located in the highlands where temperatures can be very low, especially affecting communities in the mountain areas. This department has the highest rates of chronic malnutrition (stunting), 82.2%, in the country among children below five years old.



*The support group was in Kiché (the language). All the mothers spoke, laughed and had a good time. The place of the group is Nimasac, San Andrés Xecul, Totonicapán, Guatemala. The Peer counselor is Cata.*

Since 2010, with financial support from the Spanish government through the Millennium Development Goals Achievement Fund, WFP (World Food Programme), UNICEF, UNV (United Nations Volunteers), PAHO (Pan American Health Organization), FAO

(Food and Agricultural Organization) and UNFPA (United Nations Population Fund) have been working with national government institutions. The common objective is to reduce chronic malnutrition among children less than 3 years old, pregnant women and breastfeeding mothers in 40 communities of Totonicapán.

I am in charge of the Community Education Strategy, one of the interventions which involves mothers in the communities. Four community educators have been trained and are in charge of working with about 300 Peer Counsellors (PC) elected by their communities. These educators review seven specific topics with PCs:

*The reality of my community, Chronic and acute malnutrition, Breastfeeding, Complementary feeding with demonstrations of nutritious meals for children starting with solids, Feeding during and after an illness, The use of public health services such as monitoring of child development (weight and height), Immunization, Micronutrient supplementation, De-worming, and Prenatal control.* These women have also been trained in Counselling skills and leading mother-to-mother support groups.

In the last six months they have been working with women in their communities through support groups with the topics mentioned above. At present, there are 235 active peer counselors. About 300 meetings have been held in which 4,313 pregnant women and breastfeeding mothers have participated.

In December 2012 when the joint program comes to an end, an evaluation will be carried out. We will be able to show the impact of mothers in the communities sharing their experiences with key messages that strengthen what they know in these kinds of situations.

**Mimi de Maza**, IBCLC, has 4 children and 7 grandchildren and is expecting number 8. She has been an LLL Leader in Guatemala for more than 25 years and is the LLLI Core person for WABA. She was elected this year to be a WABA Steering Committee member. Mimi has served as LLL Guatemala's (LLLG) Area Coordinator for Leaders, the Latin American Regional Administrator for Leaders and served on the LLLI Board of Directors for six years. She worked on the LLLI Child Survival Project for more than 10 years training peer counselors in infant feeding and mother-to-mother support in Guatemala. She worked in the Nutrition program of the Ministry of Health for 7 years and was in charge of the Breastfeeding Component that includes BFHI and training public health personnel. She currently works for the World Food Program and is responsible for the Community Education Strategy.

Email: mimimaza@hotmail.com

## 9. TAHN Foundation – Pioneer in Peer Counseling:

### Rukhsana Haider, Bangladesh

The "Training and Assistance for Health and Nutrition" (TAHN) Foundation, established in 2000, is currently working in urban Dhaka and in rural Chittagong in Bangladesh. The Foundation, a non-political social organization, was started by dedicated, internationally recognized professionals to provide health and nutrition services, especially to the underprivileged.

TAHN Foundation is the pioneer peer counseling organization in Bangladesh. Since the program started in 2000, it has been mostly funded by myself (Rukhsana) with help from friends, which is one of the reasons only a small number of peer counsellors can be supported. To be trained as peer counsellors, the participants should have at least 10 years of schooling and belong to the lower middle socio-economic group. The programme is monitored once every 2 weeks by a programme staff, using checklists, and data is computerised and analysed from feedback provided by the peer counsellors on a monthly basis. Currently, there are 5 peer counsellors in urban Dhaka and 5 in rural Chittagong, each being responsible for about 60 mothers at any one time.



We started the peer counseling programme by adapting the WHO/UNICEF Breastfeeding and Infant and Young Child Feeding (IYCF) counseling courses to produce a simpler version for lay persons. Since then, we have assisted in further adapting this training course for training community outreach workers. Nationally, it is being used by Alive & Thrive (initiative of Academy for Educational Development earlier, and now of Family Health International 360) for training the BRAC front line staff to promote and support IYCF. Up to now, several thousand community outreach workers have been trained. BRAC is a development organisation dedicated to alleviating poverty by empowering the poor to bring about change in their own lives and is now the largest non-governmental organization in the world.

In August 2009, TAHN's proposal "*Empowering women and adolescents for improving infant and young child nutrition in urban and rural Bangladesh*" was selected as a winner from over 1000 applicants to the World Bank's South Asia Regional Development Marketplace (SARDM) for innovations in infant nutrition. The impressive results led to its selection as one among five case studies presented at a regional World Bank knowledge sharing meeting in June 2012. As a result of our participation in the South Asian Infant Feeding Research Network (SAIFRN), and the Regional Training of Trainers that we organized and conducted from 27–30 August, 2012 in Dhaka, peer counselling research and interventions to improve infant and young child practices and nutrition will be implemented in the trainees' home countries. SAIFRN has members from five countries in South Asia (Bangladesh, India, Nepal, Pakistan and Sri Lanka) and provides a forum for presenting research ideas and disseminating research results.

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**Dr Rukhsana Haider**, MBBS, MSc, IBCLC, PhD, WABA Steering Committee member  
 Chairperson/TAHN Foundation of Bangladesh  
 Email: tahn.bd@gmail.com website: <http://www.tahn.net>  
 Email: rhaider4@yahoo.com

## MOTHER SUPPORT – BREASTFEEDING MOTHERS RELATE THEIR EXPERIENCES

### 10. Womanly Art of Breastfeeding – My Support: Nadiya Dragan, Lebanon

**M**y name is Nadiya Dragan. I live in Lebanon. When I gave birth and started breastfeeding about 3 and a half years ago, I found I knew very little about breastfeeding. I knew I wanted to breastfeed but it appeared to be more difficult than I thought! I had sore nipples and breastfeeding brought tears to my eyes every time my daughter wanted to nurse. Everyone told me that pain is normal in breastfeeding, but I knew this was not right, especially as I also had lumps in my breasts and high fever (plugged ducts and mastitis).



Local medical professionals did not seem to be able to help, so I started searching online for information and the name La Leche League (LLL) showed up on almost every site. We did not have an LLL Leader in Lebanon at that time, so I quickly ordered the latest edition of the LLL book on breastfeeding called "**Womanly Art of Breastfeeding.**"

As soon as I received it, I read the part on proper positioning and how to make breastfeeding comfortable. The first time I followed the instructions in the book, I felt immediate relief from pain. Within a couple of days, my nipples started to heal and breastfeeding became less painful each time! By the end of the week, I was completely pain-free and for the first time in 3 months I could smile while breastfeeding and feel that amazing beautiful bond with my daughter that breastfeeding can bring! I was so happy!



I continued reading the book and learned more about how to maintain my milk supply, how to express milk if I need to go out, why it is important to avoid formula and how to breastfeed a growing baby! This book helped us to continue breastfeeding for as long as my daughter wanted!

My daughter self-weaned when she was 2 and a half years and she has never tasted formula in her life! She is a healthy and happy child! Breastfeeding also helped us to feel close to her and this is something I will always cherish!

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**Nadiya Dragan**, LLL Leader, Breastfeeding Counselor, Lebanon  
 Email: nadiya.dragan@gmail.com

**Editors' Note:** Below are experiences from 2 mothers who received help and support from Nadiya. Thank you Nadiya.

### **11. Breastfeeding with Information and Support:** **Hanan Saleh, Lebanon**

I am the mother of two, a three-year old girl and a boy born on 30 June 2012. With Dana my first child, I had no idea what growth spurts were. I thought I did not have enough breast milk so I introduced formula to supplement and continued to breastfeed her. Dana, however, preferred my breast to the bottle so I had no problem giving her both.



At six months with another growth spurt, I decided to stop breastfeeding her completely. It turned out to be a big mistake. Within one month she was admitted to the emergency room for two days and stayed on at the hospital for another 5 days. She developed big, red spots on her face and body. It looked like major burn marks on her skin due to an unknown allergic reaction. The results from the tests done showed all was normal. The doctor suggested stopping the formula for 3 days to see if her allergic reaction stopped. It did but returned when formula was reintroduced. We then knew for certain that the allergy was from the milk.

We were told that babies less than one year old can suddenly become intolerant to lactose! The only answer the doctor could give was that as long as I breastfed her, the additional formula did not affect her. Once I stopped breastfeeding, her body reacted. I fed her soya milk until one year. She had been gaining 1 to 1.4 kilos each month but stopped gaining weight completely, not even a single gram until one year. When she was one year old, my doctor asked me to introduce formula slowly and she started to gain weight. Now at 3 years old, she weighs 13 kilos (28.7 pounds) and is growing taller. We feel that she is heading in the right direction.

After my bad experience with formula and my regret in not continuing to breastfeed my daughter, I now have an amazingly healthy boy, Nadeem. He is exclusively breastfed and I have no intention to stop until he decides it is enough.

I want to specially thank Nadiya Dragan, a La Leche League Leader, for her loving support. I attended 2 breastfeeding seminars given by her before he was born. I learned how I can avoid sore nipples, what to do when my baby is having growth spurts and how to maintain a good milk supply. In the space of 40 days, my baby gained 2 kilos (4.41 pounds) and grew 7 cm (2.76 inches) in length.



I am a proud breastfeeding mother and I breastfeed everywhere, whenever, however..... it does not matter. My son is the one who decides how often to nurse. One time, I counted the number of times he breastfed – it reached 17 times a day! As long as my baby boy is happy, I am happy.

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**Hanan Saleh**, Breastfeeding Counselor and Lecturer in Lebanon, Writer for “Moms & to Be” Magazine, Moderator of Facebook group “Breastfeeding in Lebanon”.  
Email: hanan.z@hotmail.com

## 12. Breastfeeding is Worth the Effort:

**Julie Khoury, Lebanon**

My name is Julie Khoury and I am Lebanese. I did not know anything about breastfeeding, so I did not think about whether I would breastfeed or not. Breastfeeding was not a subject that was discussed openly. Luckily for my daughter and me, we met Nadiya, a breastfeeding counselor, in an event for moms and babies where she spoke briefly on the importance of breastfeeding, leaving us something to think about.

A few weeks later, I received an email from Nadiya, inviting us to a breastfeeding seminar. To be honest, I hesitated whether to go or not. But my husband encouraged me to attend because he thought it might be very exciting to know more about the subject.

After the seminar, we were fully convinced of the importance of breastfeeding for my daughter’s life and in our relationship as mother and daughter. In the hospital I was clear enough NOT to give my daughter any formula and this is exactly what happened.

When I went home, however, I faced a problem with excess milk supply and sore nipples. But with my determination and Nadiya’s help, I overcame the tough period. Later, breastfeeding and pumping was an easy and smooth decision.

I am a working woman and I pump at work. It is not easy, but when I think of the importance of my milk in my daughter’s life, I forget everything else and continue to pump. Now I am starting my 11th month of breastfeeding and I am so happy that I am giving my daughter nutrition and health. I will surely continue to breastfeed and pump as long as my daughter wants.

Believe me, moms and future moms, you can never know what breastfeeding is really like, unless you try. Do not miss it. Please give breastfeeding a chance for your baby to live a healthy and happy life. It is WORTH THE EFFORT.

My daughter NEVER tasted formula.

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**Julie Khoury**

Email: jlkhoury@teletrade.com.lb

## 13. Back to Nursing at the Breast with Proper Help:

**Saadia Hameduddin, Saudi Arabia**

As a first time mother, it never crossed my mind that breastfeeding could be anything but easy. The first few days of my newborn’s life proved me right – I nursed him frequently and on demand. He had wet diapers and poopy diapers, and was a wonderfully amicable baby.

As the days passed, my tiny infant nursed more frequently and for longer duration. I still nursed on demand and for as long as he wanted. It was exhausting, but wonderful.

Then...family intervened. After hearing it often enough, I became convinced and fell victim to the myth of low milk supply. I was accused of starving my son just to hang onto a dream of breastfeeding. Women around me who hadn't successfully breastfed, bullied me into believing that my body, like theirs, had failed.

In retrospect, I should have just stuck to my guns and done the right thing. Being inexperienced and scared, I didn't. My son was introduced to formula while I cried in my room. As the days went by, he drank more formula and nursed less. I couldn't live with that reality, so I bought a breast pump and went on to pumping 12 times a day for weeks. Between the pumping sessions, transferring milk to bottles, feeding, washing and sterilizing equipment after every use, I could never keep up with my baby's demands and would supplement with formula. It was hard work and things were getting better but it was not good enough.

When I felt like I was at my breaking point, Allah (God) opened a door – and what a door! I came across a board certified lactation consultant. I credit her for where I am now. Not only did she help me wean my baby off the bottle and back to nursing at my breast, but she also validated all my beliefs about breastfeeding and gave me the knowledge to become a vocal proponent of this phenomenal gift that God gave women.

As my son nears his 2nd birthday and our wonderfully intimate breastfeeding relationship gradually draws to an end, I look at my healthy and spirited toddler and realize that I wouldn't change a thing.

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**Saadia Hameduddin** -I am a first time, stay at home mother to a fun loving 21 month old boy. I'm an LLL member, in training to be a Peer Counsellor and hope to eventually be a Board Certified Lactation Consultant. I'm a firm believer in attachment and playful parenting, and am passionate about natural, chemical free living. Email: saadia.hamed@gmail.com

#### 14. Miles of Travel Made Easy:

**Natalia Smith, Myanmar and Paulina Smith, Mexico**

##### **Natalia**

For the past year, I have been living in Yangon, Myanmar. When I found out I was pregnant, to be closer to family, my husband and I decided that our baby would be born in the USA. My son, Liam, was born in July and when he was four weeks old, we travelled from the USA to Mexico where we have our permanent home. I was a bit anxious to go on the plane with such a small baby. I was not sure how I would calm him if he became upset, especially as he loves having me walk around holding him. Well, breastfeeding was the answer! The sling I use enabled me to breastfeed him through check-in, through security and through boarding. Once on board, my anxiety levels diminished as I realized that the one thing that will always calm him was right there – breastfeeding. By the time the flight arrived in Mexico, everyone was congratulating us on having such a good baby.



*Liam in a sling.*

Once this first trip was over, I began to worry about our next trip- flying to Myanmar. This trip involved four different planes and more than 24 hours of travel. And to make things a little bit more complicated, we were also travelling with our small dog, Petunia, in-cabin. I could only think, if nursing kept my baby happy the last trip, it would work this time as well.

##### **Paulina**

And I her mother, Paulina Smith, was confident that for Natalia, traveling those many miles while breastfeeding her little one was going to be easy. And that is how it was. Liam cried for only about 15 minutes during the entirety of the trip. He nursed, he slept, I walked him around, he smiled at the plane crew and ... nursed again. No anxiety, no stress; just a very satisfied baby and a very happy mom.

**Editors' Note:** *If you have breastfed your baby or are breastfeeding your baby or know of someone who is breastfeeding their baby, please share your/their experience.*

### 15. Ben Affleck Wants You to Breastfeed: Michele Zipp, USA

**B**en Affleck (an American actor, film director, writer, and producer) is part of the initiative to make sure **all kids across the globe make it to their 5th birthday**. And he wants moms to breastfeed more.

Affleck and Secretary of State Hillary Clinton hobnobbed together (socialized) at the Child Survival Call to Action, (held from June 14–15, 2012 in Washington, D.C., USA), to end child mortality, hosted by the USA, Ethiopia, India, and UNICEF. Ben, himself, called the rates of children dying before reaching age 5 “abhorrent” and “unacceptable” and one of the initiatives he is behind is **increasing breastfeeding rates, along with better health care for children and vaccines**, particularly in nations where disease is rampant and claiming far too many lives.

Affleck has founded an organization called the Eastern Congo Initiative, which helps the communities there – educating and empowering – to reduce the child death rates. Yes, he’s a dad and he cares.

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The article was adapted from a post by Michele Zipp on June 28, 2012. [http://thestir.cafemom.com/baby/139425/ben\\_affleck\\_wants\\_you\\_to](http://thestir.cafemom.com/baby/139425/ben_affleck_wants_you_to)

### 16. Longer-Term Breastfeeding: a Father’s Perspective:

**Mark Calaway, UK**

Longer-term breastfeeding continues into a time when the child is no longer a baby and is becoming more of a person. As the storm over the May 2012 issue of Time magazine begins to subside, countless people have had their say about longer-term breastfeeding across blogs, radio programmes and newspaper columns. Opinions have come from doctors, breastfeeding experts, older moms, younger mothers, and random people on the street ... almost everyone except the partner of a longer-term breastfeeder.

My wife, Arianne, still breastfeeds our two-and-a-half-year-old daughter, Molly, and has been subjected to some very unpleasant criticism for doing so. Nonetheless, she continues because it is best for Molly’s development. I am phenomenally proud of Arianne and how she has persevered over the years.

In my circle of friends, there are dads whose partners exclusively formula fed, those who were breastfeeders and others who are longer-term breastfeeders. Naturally, our opinions on the topic vary.

It’s an unfortunate reality that many women who breastfeed beyond six months are regarded as weird. My wife has even faced hostility from strangers on the street. Across the world and in much of Europe the length of time a mother breastfeeds is the parents’ business, and what we call longer-term breastfeeding is common. In Britain and America, however, a natural process has been tainted with our own socio-cultural beliefs – including the belief that breastfeeding and sex are connected.

Perhaps this is because longer-term breastfeeding continues into a time when the child is no longer a baby and is becoming more of a person. Even though the infant knows nothing of sex and gender politics, we project our own hang-ups on to the child and declare that breastfeeding beyond an arbitrarily determined point is dangerous and unnatural.

However, in societies where children are allowed to nurse for as long as they want, they usually self-wean with little or no input from the mother and there are fewer arguments and less emotional trauma. For us, it looks like Molly is beginning to wean herself, but the time scale is up to her.

My friends and I might have varying degrees of enthusiasm for longer-term breastfeeding, but we agree on one thing: ultimately the only thing that matters is that mother and child are both happy. And if they want to continue, nobody should try to stop them.

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The above article was adapted from the guardian.co.uk, Thursday 7 June, 2012.  
<http://www.guardian.co.uk/lifeandstyle/2012/jun/07/extended-breastfeeding-fathers-perspective>

## **17. WABA Men's Initiative (MI) Calls For Breastfeeding Action:**

**James Achanyi-Fontem, Cameroon**

The WABA Men's Initiative (MI) recommends exclusive breastfeeding for the first six months and continued breastfeeding for at least two years of a child's life as the natural and healthy start to life. Studies have repeatedly shown that any amount of breastfeeding results in greater protection from illness and reduces incidence of obesity as well as many other benefits for baby and mother. In certain African communities, due to the lack of supportive services, whether structural or cultural, more intervening efforts and education are needed to help close the gaps of awareness regarding breastfeeding.

On the other hand, it has been noted that half the number of women with children younger than one year work outside their homes. To ensure that these mothers can work to support their families and also breastfeed, work places must be baby-friendly. Employers should provide paid time for working mothers to breastfeed or express milk in a private and clean space. The MI e-newsletter is calling on policy makers, public health officials at all levels of government, and the broader public to support efforts to increase the incidence of breastfeeding among women.

The January to June 2012 issue of the E-Newsletter can be down loaded at: [http://www.waba.org.my/whatwedo/mensinitiative/pdf/mi\\_e\\_jun2012\\_eng.pdf](http://www.waba.org.my/whatwedo/mensinitiative/pdf/mi_e_jun2012_eng.pdf)

The contents of this issue include:

- Happy Father's Day
- MI Calls For Breastfeeding Action
- World Health Assembly Resolution
- 7th Pan-Commonwealth Forum (PCF) to be Held in Nigeria in 2013
- Breastfeeding and Me
- Breastfeeding: How Dads Help
- India Gender Equality Takes New Direction
- Breastfeeding Mothers March
- World Breastfeeding Week 2012
- Status Of Indian Girls After Marriage
- COL (Commonwealth of Learning) Educating mothers with community radio

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**James Achanyi-Fontem**, Coordinator, Men's Working Group  
 Email: [camlink2001@yahoo.com](mailto:camlink2001@yahoo.com)

*The Global Initiative for Father Support (GIFS) was launched at the Global Forum II, Arusha, Tanzania, 2002 to support Fathers of breastfeeding children.*

*In October 2006, in Penang, Malaysia, the WABA Men's Initiative was born. To learn more about how you can be involved, please contact the Coordinator of the Men's Working Group (MWG) James Achanyi-Fontem<[camlink2001@yahoo.com](mailto:camlink2001@yahoo.com)> or the Regional Focal Persons:*

*Europe – Per Gunnar Engblom [pergunnar.engblom@vipappor.se](mailto:pergunnar.engblom@vipappor.se)*

*Africa – Ray Maseko [maseko@realnet.co.sz](mailto:maseko@realnet.co.sz)*

*South Asia – Qamar Naseem [bveins@hotmail.com](mailto:bveins@hotmail.com)*

*Latin America & Caribbean Arturo Arteaga Villaroel [arturoa36@hotmail.com](mailto:arturoa36@hotmail.com)*

For further information on the WABA Men's Initiative see: <http://www.waba.org.my/whatwedo/mensinitiative/index.htm>

## BREASTFEEDING ADVOCATES – New Directions

Many individuals around the world are working faithfully and with dedication to support mothers in their breastfeeding experiences. In *New Directions* we would like to honour MANY breastfeeding advocates. Please send 3-5 sentences (75 words or less) on the person you feel should be recognized for promoting, protecting and supporting breastfeeding. Longer articles are also welcome.

### 18. Mrs Olinda Mugabe, Creating Breastfeeding Awareness and Networks: Diogo Bartolomeu Mboa, Mozambique

**M**rs Olinda Mugabe, a graduate nurse, worked for the Ministry of Health and the Central Hospital in Mozambique as the Executive Director for AMODEFA – The Mozambican Association for the Family Development. The main activity of AMODEFA is Reproductive and Sexual Health which includes family planning.

When she was at AMODEFA, she established KINDLIMUKA (Wake up), an association for people with HIV. She sensitized the group and enabled them to share their situation on radio and television. Mrs Olinda Mugabe helped another group – HOCOSIDA (Men against AIDS) – on how they could implement their activities, strategies and raise funds for the implementation of their activities.



*Mrs Olinda Mugabe with the children*

In 2000, Mrs Olinda left for Swaziland to work for IBFAN Africa as Representative of Lusophone Countries. Before she left Mozambique, she founded REENCONTRO – The Mozambican Association for Support and Development of Orphaned and Vulnerable Children. She was President of Reencontro until her return in 2005 when she became its Executive Director.

Reencontro initially supported only children but later extended support to care givers as well. This was because when care givers become sick, they cannot care for the children. Reencontro helps care givers who are HIV positive and those who are sick. Reencontro provides support in the following areas: Education; Food and Nutrition; Healthy – Home based care, Psychosocial support; Counselling; Home; Citizenship registration and Housing. Reencontro takes care of 7,000 children in Maputo (1,419) and Gaza Provinces (5,581).

In Mozambique initially 5 hospitals were under the Baby Friendly Hospital Initiative (BFHI). However, when HIV started in Mozambique many persons, including health authorities, did not have enough information on HIV/AIDS to support mothers. Doctors told mothers that they couldn't continue breastfeeding when they have HIV. BFHI came to a stop as many, including Mrs. Olinda Mugabe, did not know what to do or what was right for mothers and babies.

On 24<sup>th</sup> October 2005, a National Meeting took place in Maputo at the Ministry of Health to Revitalize the National Committee on Breastfeeding of which Mrs. Olinda is a member. The country's situation at that time indicated that children under 5 years of age, 41% suffered from malnutrition and micro nutrients deficiency, and 74% of anaemia. The situation also indicated that 64.7% babies were breastfed on the first day and 80% of children from 6 to 9 months received inadequate complementary food.

In 2007, Mrs Olinda contacted other Non-Governmental Organizations (NGOs) working in different areas, to form a breastfeeding network with Reencontro. This meant several meetings to explain to the NGOs about breastfeeding, its importance, benefits etc. From these meetings, on 4th October 2008, the Mozambique Breastfeeding Network composed of 9 NGOs, was formed to promote, protect and support breastfeeding. It was known as IBFAN Mozambique. In its first General Assembly, Mrs Olinda Mugabe was elected as the President of IBFAN Mozambique and I was elected as the 2nd Vice-President.

**Diogo Bartolomeu Mboa**, a teacher, worked with AMODEFA from 1998-2001 as Program Department Secretary, Secretary of Financial Department. From 2001-2002, Youth Coordinator (volunteer) for JOLUSI (Orphaned Youth Against AIDS) in Reencontro. Reencontro works with teachers, nurses, doctors, psychologists. Diogo was Project and Program Assistant and Executive Director Assistant. Currently he is the Information officer and fundraiser, writing project proposals, reports and planning, working directly with Mrs Olinda Mugabe. His other duties are Mozambican Focal Point for the Father Support Group and he has created a group of 50 men who support Breastfeeding called HOCAN-in Portuguese (Community Men Child Friendly). He is also Coordinator for The Mozambican Youth for the youth network in Mozambique. The Mozambican Youth Group promotes debates and sensitizes adolescents and youth in schools to discuss problems affecting youth and finding solutions. In the communities they talk about breastfeeding, its importance and benefits to families, communities, provinces, the country and the world.  
Email: diogomboia@hotmail.com



### 19. Honouring 3 women: Rebecca Magalhães, USA

I have 3 women I would like to honour as Breastfeeding Advocates:

- 1. Pajuçara Marroquim** – Maceió, Alagoas, Brasil: Pajuçara was expecting her first baby when she attended the LLL Group meeting that I started in 1979 – LLL Maceió. Thirty-three years later, with 3 adult daughters, she is well known and respected by countless mothers who have breastfed because of her help. She kept the LLL Group going when I left Brasil; she educated students on breastfeeding as a University nutrition professor; and she supported breastfeeding in low-income communities. I am deeply grateful to my dear friend, Pajuçara.
- 2. Sônia Elaine (Magalhães) Heath** – Kewanee, Illinois, USA: I remember clearly when Sônia was born – a daughter after 3 sons! Now an adult mother with 2 teenage daughters, she brings me much joy and pride. After breastfeeding her daughters, she trained as a breastfeeding counsellor and with her gentle, patient and caring approach, she has encouraged and helped many mothers breastfeed their children. I respect and admire her as a mother, as a voice for breastfeeding and as a breastfeeding advocate.
- 3. Pushpa Panadam** – Asunción, Paraguay: I don't remember when I first met Pushpa – it seems as though I have known her forever! :) What I do know is that she is talented, committed, compassionate and dedicated to her family. I am continually impressed at the many ways in which she supports breastfeeding and how she willingly gives her time and energy for this cause. It is my pleasure to work with her on this e-newsletter. I just wish we didn't live on two different continents!



*Pajuçara Marroquim and Rebecca.*



*Seated, left to right: Sonia, Rebecca, Cara (Sonia's daughter); Standing: Tatiana (Sonia's daughter).*



*Pushpa and Rebecca.*

**Rebecca Magalhães**, LLL Leader, Co-Editor/MSTF e-Newsletter, LLL Alumnae Rep/Illinois, mother of 5 children, grandmother of 12 breastfed grandchildren with no. 13 expected in 2013, Illinois/USA  
Email: beckyann1939@yahoo.com

## 20. Karin Cadwell, PhD, RN, FAAN, ANLC, IBCLC, USA: Cindy Turner-Maffei, USA

On the day she, Karin Cadwell, was born her mother, Lena, was asked to provide mother's milk for another baby whose mother did not breastfeed, and who was not able to digest formula. Karin grew up hearing stories of how her mother had saved that baby's life -- clearly making milk was a family superpower!

Karin gave birth to her own firstborn child far from home. With only unhelpful advice from her health care workers, she relied solely on La Leche League's book - **Womanly Art of Breastfeeding**. Never one to accept status quo, Karin vowed to change the education of health workers to give them information and skills needed to support breastfeeding women. If she, the daughter of a milk goddess, couldn't breastfeed easily, how could other mothers do so?



*Karin Cadwell.*

Several decades later, Karin has succeeded in many endeavours to surround new mothers with knowledgeable caregivers. She created 2 companies, Health Education Associates and the Healthy Children Project, that provide low-cost, high-quality educational media and have trained tens of thousands of health care workers and mother-to-mother supporters. The Healthy Children Project has also served as the launching pad for many national and international projects, including the United States Breastfeeding Committee, US GLOPAR, Baby-Friendly USA, Union Institute & University's BS (Bachelor of Science) and MA (Masters) programs, and collaborations to improve breastfeeding and skin-to-skin in hospitals around the world. Brilliant thinker, creator, and steadfast champion for mothers and babies, I give thanks for her boundless energy and persistent innovations.

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Cindy Turner-Maffei, MA, ALC, IBCLC, Faculty, Healthy Children Project, Inc. Massachusetts, USA  
Email: [cindy@centerforbreastfeeding.org](mailto:cindy@centerforbreastfeeding.org) website: <http://www.centerforbreastfeeding.org/>

### NEWS FROM THE BREASTFEEDING WORLD

#### 21. Protecting Breastfeeding with New Policies: Alive & Thrive news

**T**here is much to celebrate in Vietnam during World Breastfeeding Week. In a period of five days in June, the National Assembly of Vietnam passed two landmark pieces of legislation in support of child nutrition.

The Assembly extended paid maternity leave from 4 to 6 months to address a barrier to 6 months of exclusive breastfeeding. Vietnam's leadership then expanded the ban on advertising of breastmilk substitutes from 6-24 months and included feeding bottles.

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<http://www.aliveandthrive.org/newsletter/2012/august/03/issue-9-august-2012-alive-thrive-news-viet-nam-passes-landmark-legislation>

#### 22. Baby Bubbly at the Cinema Waiting Rooms: Connie Mooi, Malaysia

When I distributed breastfeeding flyers, materials or gave out information on breastfeeding at the Mother-to-Mother Peer Support (MMPS) booth, I usually received weird looks from those who were either too old or too young for breastfeeding; the young being shy and the older were mean. So I asked myself what I could do to increase breastfeeding awareness to these persons. I thought: many people go to the cinemas (movies), especially the young and those who are of child-bearing age. The more they see videos or information on breastfeeding, the more it will become normal.

Thinking that it would be good if cinemas showed this advertisement/spot, I sent an email on behalf of MMPS asking Golden Screen Cinemas (GSC) if they could screen the Baby Bubbly in their cinemas before a movie starts.

Baby Bubbly is a 45-second 3D animated public service announcement that highlights the importance of initiating breastfeeding in the first hour of a child's life. This animated breastfeeding spot was produced by UNICEF and WHO. See -<http://www.youtube.com/watch?v=I1Oltm7mA48>

They were very supportive and wrote to me immediately. However, due to the quality of the video which was done for TV spots and not for the big screen, they were only willing to show it on TVs in the waiting areas. If we wanted it for the big screen, we would need to adapt it, which would be very expensive.

MMPS is one of the main organizers of the **Make Penang Breastfeeding Friendly** campaign so GSC agreed to screen the video only in GSC Penang – Gurney Plaza, Queensbay Mall, Sunway Carnival Mall. They started showing it in June this year and it is still being shown. Although I have not gone to the movies, I did ask some of the members on the MMPS Facebook page as to the reaction of the audience. I was told that people kept looking at the TV screens.

I feel Baby Bubbly is effective because it is a cartoon and well done to catch people's attention. Most importantly it plants the "breastfeeding" seed in the minds of movie goers.

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**Connie Mooi**, mother to Teoh Yin Yue (6 years old, breastfed for 26 months) and Teoh Zao Yang (21 months old, still breastfeeding), Certified Nutritional Consultant ( American Association of Nutritional Consultants), core mother of MMPS, Administrator of the Facebook page and blog for MMPS and Project Manager of Make Penang Breastfeeding Friendly campaign.  
Email: [conniemjs@gmail.com](mailto:conniemjs@gmail.com)

### 23. Panel on National Infrastructure Support for Mother to Mother Support and Peer Counseling: Rebecca Magalhães, USA

From July 31<sup>st</sup> to August 2<sup>nd</sup>, 2012, in Washington D.C., I was one of 15 persons on an expert panel that discussed Mother to Mother (M2M) infrastructure in the United States. A short description of that meeting follows:

A fifteen member expert panel on mother-to-mother support and peer counseling met in Washington, D.C. from July 31 through August 2, 2012. The purpose of the meeting, which was hosted by the American Breastfeeding Institute (ABI) with the support of the Healthy Children Project (HCP), was to explore national infrastructure support for mother-to-mother support and peer counseling. The panel carefully considered the recommended actions of *The Surgeon General's Call to Action to Support Breastfeeding* relative to mother-to-mother and peer support for breastfeeding mothers. The panel also developed strategies to address identified infrastructure needs.



*Front row/Left to Right:  
Terriann, Grace, Marian, Morgan, Tenesha*

*Back row/Left to Right:  
Norma, Linda, Rebecca, Cindy, Allison, Carol, Karin, Amal, Amy.  
Missing from photo: Kimberly*

Those attending were: Kimberly Allers/Black Breastfeeding 360; Karin Cadwell/HCP; Grace Damio/Hispanic Health Council; Morgan Henderson/Nursing Mothers Council; Carol Kolar/ABI and HCP; Rebecca Magalhães/WABA; Norma Ritter/Breastfeeding USA; Terriann Shell; Amy Shaw/La Leche League USA; Linda Smith/ABI; Amal el Tawil/Egyptian Lactation Consultant Association; Marian Tompson/LLLI Historian Reference; Tenesha Turner/Reaching Our Sisters Everywhere; Cindy Turner-Maffei/HCP; Allison Walsh/Lamaze International.

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**Rebecca Magalhães**, LLL Leader, Co-Editor/MSTF e-Newsletter, LLL Alumnae Rep/Illinois, mother of 5 children, grandmother of 12 breastfed grandchildren with no. 13 expected in 2013, Illinois/USA  
Email: beckyann1939@yahoo.com

## 24. Dr. Carlos Gonzalez in Paraguay

### Dr. Carlos Visits Hospital Reina Sofia: Marta Bareiro, Paraguay

Dr. Carlos Gonzalez arrived early in the morning on 23<sup>rd</sup> August 2012 for the 1st International Breastfeeding Seminar in Paraguay and visited the Maternal Infant Hospital of Reina Sofia de la Cruz Roja Paraguaya the very same morning. The Hospital was accredited in 1994 as the First Baby Friendly Hospital and in 2008 was the only hospital to be reaccredited.

Dr. Carlos gave a conference on Drugs and Breastfeeding to more than 60 people which included department heads, medical residents, pediatricians, gynecologists, obstetricians, nurses, students and volunteers. Due to the enthusiasm and participation of the audience, he exchanged experiences and knowledge on this theme for 2 hours.



*Dr. Marta Bareiro introducing  
Dr. Carlos Gonzalez*

Dr. Carlos also visited the different sections of the Department of Neonatology.



*The audience enjoying the session at Hospital Cruz Roja.*

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**Marta Bareiro**, Pediatrician, Head of the Department of Neonatology of the Hospital Reina Sofia  
Email: martabareiro11@gmail.com

### 1<sup>st</sup> International Breastfeeding Seminar and LLL event on Natural Childcare: Pushpa Panadam, Paraguay

Dr. Carlos Gonzalez, a pediatrician from Spain and breastfeeding advocate, author of best sellers related to childcare and breastfeeding in Spanish – *Mi Niño No Me Come, Besame Mucho, Un Regalo por Toda la Vida* – among others, was the main conference speaker for the 1<sup>st</sup> International Breastfeeding Seminar in Paraguay. The theme of the Seminar, held on the 24<sup>th</sup> and 25<sup>th</sup> August, 2012 and organized by the Paraguayan Pediatric Society and the Ministry of Health, was **Lactancia Materna, un Compromiso de Todos** (Breastfeeding, a Commitment by Everyone).

The number of participants during both days was astounding, with almost 800 health professionals, breastfeeding counsellors and students being exposed to the many aspects of breastfeeding issues. Some of the topics addressed in the seminar were- *Current Breastfeeding Situation in Paraguay; Impact of birth practices on breastfeeding; Prolonged breastfeeding; Human Milk Bank in Paraguay; Practices that support breastfeeding; and Drugs and Breastfeeding.*

La Leche League of Paraguay organized a separate event on the evening prior to the Seminar. The talk by Dr. Carlos Gonzalez on Crianza Natural y Lactancia Materna (Natural Childcare and Breastfeeding ) for parents, educators and family members was attended by almost 300 people, which included the Minister of Health who gave the introductory speech.

At both events LLL Paraguay distributed breastfeeding information pamphlets and sold Dr. Carlos' books.



*Dr. Carlos with the Pediatric Society Breastfeeding Committee.  
Left to right – Dr. Natalia Meza,  
Dr. Marta Bareiro, Dr. Carlos Gonzalez,  
Dr. Marta Herrera and Dr. Mirian Ortigoza*



*Medical students at the seminar.*



*Dr. Carlos talking to LLL Leaders – Lily de Verón and Mercedes, prior to the start of the event for families organized by LLL Paraguay.*

**Pushpa Panadam**, LLL Leader, Paraguay  
Email: [pushpapanadam@yahoo.com](mailto:pushpapanadam@yahoo.com)

## 25. Global Report on Right to Food and Nutrition Watch 2012 LAUNCHED!

WABA announced the launch of the global report Right to Food and Nutrition Watch 2012, entitled “**Who Decides About Global Food and Nutrition? – Strategies to Regain Control.**” The publication gives a multitude of examples of the severe violations of the right to food and nutrition that the current food system is provoking.

“In terms of the food security of the first food, the global breastfeeding movement continues to call for greater vigilance around the more aggressive marketing of baby and toddler foods, using new promotional avenues on the internet, especially social networking, via mothers’ clubs, educational foundations targeting students, and as business interest NGOs etc. These tactics serve to keep global breastfeeding rates low over decades despite various efforts by the Ministries of Health in countries, and by breastfeeding advocates,” notes Sarah Amin, Executive Director of the World Alliance for Breastfeeding Action (WABA).

For more information see <http://www.rtfn-watch.org>

The report can be downloaded at: [http://www.rtfn-watch.org/fileadmin/media/rtfn-watch.org/ENGLISH/pdf/Watch\\_2012/R\\_t\\_F\\_a\\_N\\_Watch\\_2012\\_eng\\_web\\_rz.pdf](http://www.rtfn-watch.org/fileadmin/media/rtfn-watch.org/ENGLISH/pdf/Watch_2012/R_t_F_a_N_Watch_2012_eng_web_rz.pdf)

## 26. Exercising during the Breastfeeding Years:

**Jen Palmer, U.S.A.**

For Aimee Teslaw, making time for cardio, Pilates, yoga, biking, dog walking, swimming and playing outdoors with her children is important for a healthy lifestyle. So is breastfeeding. Aside from the occasional plugged duct, she says exercising hasn’t negatively impacted her milk supply. Teslaw, a Breastfeeding USA member in Barrington, Illinois, said she isn’t a lifelong athlete but began exercising in college and continues to work out both on her own and with her children. “I love exercising as much as I love breastfeeding!” she says. “It’s all part of my personal wellness plan.”



Research shows moderate exercise doesn’t affect milk supply, milk composition or baby’s growth. Lactic acid levels have been shown to increase somewhat when a mother exercises to maximum intensity, described as exhaustive exercise, but there are no known harmful effects to the baby. A couple of small studies found no difference in immunologic factors after moderate exercise, but showed a decrease in immune boosting proteins after exhaustive exercise. Levels return to normal within an hour and the impact on baby is unlikely to be significant.

While some mothers anecdotally report difficulty consuming enough calories to exercise while breastfeeding, an Australian study found no impact on infant growth. Researchers examined 587 mothers and found that for their babies age 6 – 12 months, exercise had not decreased breastfeeding duration. At a year, exercise had no significant impact on baby's growth. The findings applied to both women exclusively breastfeeding and those who said they did "any" amount of breastfeeding.

Sharon Knorr, IBCLC and Breastfeeding USA board member, says breastfeeding mothers would have to reach a high level of exercise and diet restriction to experience a drop-off in milk production. That's why mothers who are calorie-restricted, such as in famine-stricken areas of Africa, are still able to produce adequate milk. "We urge mothers to start slowly in any diet or exercise program and work up to their goal over a period of time, especially if they had never done much dieting or exercise before pregnancy," Knorr said.

The above article was adapted with permission from Breastfeeding USA Horizons, August 2012, Volume 2, Issue 6. Breastfeeding USA website: <https://breastfeedingusa.org/>

**Editors' Note:** *Exercising and Breastfeeding see:*  
<http://kellymom.com/bf/can-i-breastfeed/lifestyle/mom-exercise/>

## **27. Breastfeeding Adopted Babies in the Muslim World:** **Modia Batterjee and Anne Batterjee, Saudi Arabia**

In most Islamic countries adoption is discouraged for fear of doing something against Islamic teachings. Islamic teachings say that to adopt a child and give him or her a name different from his biological family is wrong. However, there are many children who are brought into this world with unknown origins.

Muslim families foster children in their homes, but problems can arise as the child reaches adulthood. A foster parent of the opposite sex may feel uncomfortable in the presence of the child. A problem may also arise if the child is given a name but not accompanied by rights nor inheritance accorded to the biological children of the family. The one exception to the rule is breastfeeding. Breastfeeding an infant or child under the age of two years can improve the child's adoptive situation.

The Holy Quran clearly states "Let another woman suckle (the child) on the (mother's) behalf" (65:6). This supports the notion that when another woman other than the birth mother, that is any lactating woman, can be the milk mother of a child and give that child the same birth rights as her own. It is agreed that in order for her to accomplish this she must feed an infant three to five satisfying feeds. A satisfying feed is approximated at around 50ml of expressed breast milk; as soon as she has completed these feeds, she is considered a milk mother and rights to the child just as much as his biological mother. This means the child will be a child to her husband, a sibling to her children and a relative to all extended family members.

Most women can breastfeed whether they have recently given birth to a baby or not. I helped two ladies who adopted and breastfed infants around the age of four months old. Both managed to lactate and produce 250 ml of expressed breastmilk under my supervision. Adoptive breastfeeding is a beautiful option for couples who want a child and for a child who needs loving parents. Adoptive breastfeeding is a tool that can be used to improve lives. It forces the biological relationship to be primary to rearing an adoptive infant. Through breastfeeding, nature has given women a means to give life, improve circumstances and correct social problems.

Here are two success stories on adoption and breastfeeding from AlBidayah Center:

Mrs. F.A, 28 years old, divorced, has no children of her own. She went to the orphanage with her mother to adopt a baby, and was sent to AlBidayah Center. We tried to convince F.A. that she could feed the baby using a breastfeeding pump to stimulate production of her own milk. Although she wasn't fully convinced that it was possible, she tried it and after three weeks she was able to feed the baby.

Mrs. Z.A., 32 years old, was pregnant, but sadly miscarried in her seventh month. Six years later, she made a decision to adopt a baby from the orphanage. Her sister was breastfeeding her own child and so Z.A. took her along so that she could be the milk mother, thus qualifying Z.A. as the aunt. The orphanage sent the two ladies to AlBidayah Center for Breastfeeding. Here we explained to her what could be done to produce milk herself. We told her to pump every two hours during the day and every four hours at night to stimulate her breasts. After one month of the process, the mother succeeded in collecting the required amount of milk and fed the baby. The baby was hers and she became his mother.

Our goal at AlBidayah Center is to give hope and a solution for any woman longing for children and to provide families for as many infants as possible in the best possible way.

**Anne Batterjee**, CEO AMB Group, Al Bidayah Center, Batterjee Medical Services, Member/LLLI Board of Directors, LLLI Leader and PCP Administrator, IBFAN Arab World, Coordinator/WABA Mother Support Task Force, Jeddah, Saudi Arabia  
Email: [annebatterjee@gmail.com](mailto:annebatterjee@gmail.com)

**Dr Modi Batterjee**, IBCLC, DHA, Albidayah Breastfeeding Resource and Women's Awareness Center, VP HR AMB Group, Jeddah, Saudi Arabia  
Email: [modiab73@gmail.com](mailto:modiab73@gmail.com)

*Anne shares – The touching results of adoptive breastfeeding have been so dramatic, that Dr. Modia and I are determined to do everything we can to help the hundreds of abandoned infants in our country to be a part of a family. We started first with the orphanage of the Ministry of Social Affairs and now with a local private orphanage. Today, we are the only authorized center to support the process of adoptive nursing and to verify that adoptive mothers actually provide the required amount of breastmilk to their infants.*

## BREASTFEEDING RESOURCES

### 28. International Code Documentation Centre (ICDC) Legal Update

The latest issue of ICDC Legal Update (July 2012) is available for downloading!  
[http://www.ibfan.org/art/LU-Jul\\_2012-ICDC.pdf](http://www.ibfan.org/art/LU-Jul_2012-ICDC.pdf)

Highlights of this issue include:

- World Health Assembly tackles conflicts of interest
- Courting mothers in the Gulf
- Ever-changing Evenflo
- Nestlé's PPP (Popular Position Products): where they stumbled
- USA:-States go bag free
  - Newark Mayor takes money from Nestlé
- Philippines:-DoH (Department of Health) versus multinationals
  - Revealing studies

**Raja Abdul Razak**, Publications Support, IBFAN-ICDC, Penang.  
Email: [ibfanpg@gmail.com](mailto:ibfanpg@gmail.com)

## 29. The 10<sup>th</sup> Step and Beyond: Mother Support for Breastfeeding

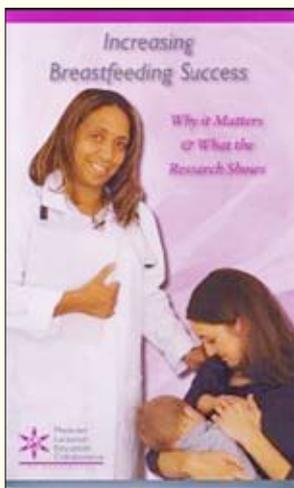
The 10<sup>th</sup> Step and Beyond: Mother Support for Breastfeeding explores how different programs have supported the 10<sup>th</sup> step of the Ten Steps for Successful Breastfeeding. Virginia Thorley and Melissa Clark Vickers, Editors, have brought together key people from countries around the world to describe what they are doing to support mothers to breastfeed. From Baby Cafes to La Leche League to male peer counsellors, the chapter authors in this book discuss the role mother support plays in helping mothers meet their breastfeeding goals. In Chapter 17, Virginia Thorley discusses why good programs fail and the ongoing need for financial sustainability.

In conclusion, mother support is not just providing a mother-to-mother breastfeeding support group, it is also about the shopkeeper who encourages the mother to breastfeed in his shop, the passerby who smiles and congratulates the mother on feeding her baby in the best way, the employer who provides breastfeeding breaks, and the legislator who helps pass laws to prevent discrimination against breastfeeding mothers and improve mother-baby-friendly working conditions. It is about all of us working together to support the breastfeeding mother and make breastfeeding the normal way to feed a baby.

The book is for hospitals, non-governmental organisations providing mother support, state and national Departments of Health, UN workers and anyone interested in improving support for breastfeeding in the community. When all these individuals and agencies work together to support the breastfeeding mother, the health of mothers and their babies will benefit.

This book will give you ideas about tried-and-true methods of support that can be duplicated in your community to better support breastfeeding mothers and help you plan how to overcome pitfalls that can cause your program to fail.

[http://www.ibreastfeeding.com/catalog/p306/The-10th-Step-and-Beyond:-Mother-Support-for-Breastfeeding/product\\_info.html?osCsid=hn5h25o7ke13j15eej4to169n5](http://www.ibreastfeeding.com/catalog/p306/The-10th-Step-and-Beyond:-Mother-Support-for-Breastfeeding/product_info.html?osCsid=hn5h25o7ke13j15eej4to169n5)



## 30. Increasing Breastfeeding Success

Increasing Breastfeeding Success was created by a team of seasoned professionals. This unique product provides you with 10 self-contained PowerPoint lectures on specific breastfeeding topics.

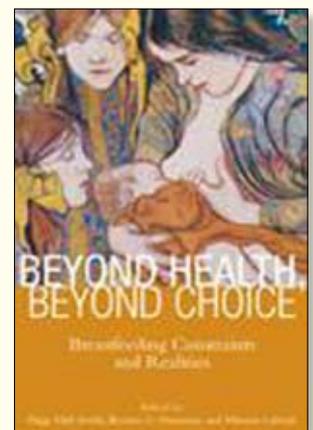
The product contains: 10 presentations, handouts, bibliographies, citations, learning objectives, guidelines for discussion, even the posters and session evaluation forms.

Perfect for hospitals, WIC (Women, Infants and Children) clinics, medical and/or nursing schools, Departments of Health, physician offices ... and any organization that works to promote and protect breastfeeding!

<http://platypusmedia.com/increasing-breastfeeding-success>

## 31. Beyond Health, Beyond Choice, Breastfeeding Constraints and Realities

Beyond Health, Beyond Choice is a multidisciplinary collection of essays written by thirty-seven contributors that examines the role of feminist theory in the promotion of breastfeeding by public health authorities. The essays are arranged thematically and consider breastfeeding in relation to health care; work and family; embodiment (specifically breastfeeding in public); economic and ethnic factors; guilt; violence; and commercialization. By examining women's experiences, the editors attempt to reframe the discussion to better inform public health approaches and political action.



The editors are Paige Hall Smith, Bernice L. Hausman and Miriam Labbok. Paige is associate professor of public health education and director of the Center for Women's Health and Wellness at the University of North Carolina at Greensboro.

Bernice is a professor of English at Virginia Tech and the author of *Mother's Milk: Breastfeeding Controversies in American Culture* and *Viral Mothers: Breastfeeding in the Age of HIV/AIDS*.

Miriam is professor and director of the Carolina Global Breastfeeding Institute in the Department of Maternal and Child Health in the Gillings School of Global Public Health, University of North Carolina at Chapel Hill.

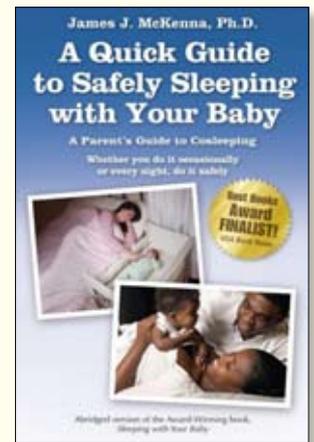
[http://rutgerspress.rutgers.edu/acatalog/beyond\\_health\\_beyond\\_choice.html](http://rutgerspress.rutgers.edu/acatalog/beyond_health_beyond_choice.html)

### 32. A Quick Guide to Safely Sleeping with Your Baby

Sleeping with your baby has been the norm for almost all cultures through the ages. In this abridged version of our award-winning book, *Sleeping with Your Baby*, a worldwide recognized infant authority provides the latest information on the scientific benefits of co-sleeping. The booklet instructs parents on how to create safe sleep environments. Complete with extensive resources and sections on minimizing hazards and risks, this booklet explains why and how to sleep with your baby. The *Quick Guide to Safely Sleeping with Your Baby* contains all the key facts from *Sleeping with Your Baby* in an accessible and attractive format.

James J. McKenna, PhD is the Edmund P. Joyce CSC Chair in Anthropology and directs the Mother –Baby Behavioral Sleep Laboratory at the University of Notre Dame. A leading authority on breastfeeding issues in relationship to SIDS and bed sharing safety, he is a sought-after speaker at medical, parenting, and policy conferences around the world.

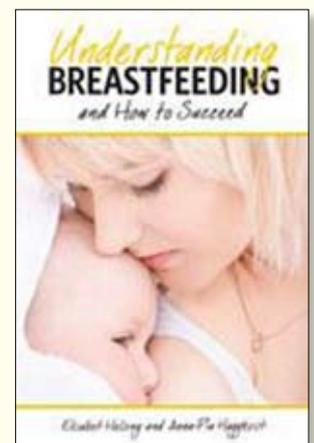
The book is also available in Spanish – *Una guía rápida para dormir sin peligro con su bebé*  
<http://www.platypusmedia.com/node/149>



### 33. Understanding Breastfeeding

*Understanding Breastfeeding* is a highly readable and encouraging introduction to the topic. It is filled with practical advice. You will find solutions to problems large and small, as well as topics ranging from sore nipples to the feeding of a premature baby. The book also provides a fascinating insight into the varied and irregular history of breastfeeding from ancient times to the present. Why was it that in the past healthy well-to-do women so often entrusted their precious infants to the care of professional wet nurses? What led generations of physicians to draw up rules that made it impossible for many mothers to breastfeed? And how and why did science and common sense triumph in the end?

Authors of the book are two well-known Scandinavian authors and breastfeeding activists, Dr. Elisabet Helsing and Anna-Pia Häggkvist, IBCLC and nurse. Dr. Helsing is believed to be the person most responsible for making Norway the most baby- and mother-friendly country on earth. Originally written in Norwegian, this book has been updated and translated into English.



[http://www.ibreastfeeding.com/catalog/p290/Understanding-Breastfeeding-and-How-to-Succeed/product\\_info.html](http://www.ibreastfeeding.com/catalog/p290/Understanding-Breastfeeding-and-How-to-Succeed/product_info.html)

### 34. Free Lectures from health-e-learning

e-health-learning (<http://www.health-e-learning.com/resources/free-lectures>) brings you free lectures which you can listen to at your convenience.

The free lectures (in English) are on the following:

- Brian Palmer: The Anatomy of Breastfeeding – 67 mins
- Bev Pownall – Baby Friendly or Mission Impossible? – 36 mins

- George Kent – Regulating Infant Formula – 69 mins
- Kathy Houg – Empowering Youth as Breastfeeding Advocate – 32 mins
- Linda Smith – Impact of Swaddling on Breastfeeding Infants – 33 mins
- Panel Discussion – Challenges for LC’s – 35 mins
- Bridget Ingle – Common Clinical Breastfeeding Issues – 42 mins
- Sue Cox – Anatomy and Physiology of the Breast and Lactation – 50 mins
- Karolyn Vaughan – IBLCE Exam Requirements – 66 mins
- Elise Chapin – Repaving the Pathway to Breastfeeding Support – 30 mins
- Lida Lhotska – Whatever Happened to Health for All? – 62 mins
- James Akre – What is the Problem with Breastfeeding? – 55 mins
- Karleen Gribble – Infant Feeding in Emergencies – 68 mins

### 35. Clinical Lactation Journal

Clinical Lactation Journal is the Official Journal of the United States Lactation Consultant Association. Clinical Lactation Journal is now open access. Please see: [www.clinicallactatin.org](http://www.clinicallactatin.org)

Volume 3 Issue 3, the latest issue is available for download at: <http://media.clinicallactation.org/3-3/CL3-3.pdf>

Articles include:

- The Quiet Underground Is Quiet No More: Kathleen A. Kendall-Tackett, Ph.D., IBCLC, RLC, FAPA
- Lactation after Perinatal, Neonatal, or Infant Loss: Melissa Cole, IBCLC, RLC
- Marijuana Use and Breastfeeding: Carrie W. Miller, MSN, RN, CNE, IBCLC, RLC
- Biomedical Ethics and Peer-to-Peer Milk Sharing: Karleen D. Gribble, BRurSc, Ph.D.
- Social Support Improves Breastfeeding Self-Efficacy in a Sample of Black Women: Deborah McCarter-Spaulding, Ph.D., RN, IBCLC, RLC, Rebecca Gore, Ph.D.

### CHILDREN AND BREASTFEEDING

*Please send us your children’s breastfeeding stories, quotes, or experiences. This could be something your breastfed child said or did; something an older child did to promote breastfeeding, or even a story you saw or read that pertained to children and breastfeeding.*

### 36. Out of the Mouths of Babes!

**J**ACK (age 3) was watching his Mother breastfeeding his new baby sister... After a while he asked: ‘Mom why have you got two? Is one for hot and one for cold milk?’

Mikey’s Funnies is generously hosted by Agathon Group, website development and hosting with a ministry heart: <http://www.agathongroup.com/>

Mikey’s Funnies can also be accessed through [www.facebook.com/mikeysfunnies](http://www.facebook.com/mikeysfunnies)

### 37. Baby Instructions: Alice Ziring, USA

These are “Baby Instructions”, as dictated by my 4.5 year old granddaughter after 8 days of experience with her new baby brother: “Baby Instructions” title and numbering were part of the dictation... :-)

1. Rock them gently
  2. Kiss them
  3. Give them lots of attention
  4. Feed them
  5. Try to make them go to sleep
  6. ...and me be the big sister
- “Oops..and I forgot one... sing songs.”

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**Alice Ziring**, LLL Leader since 1975, Bellevue PM Group in Seattle area, two adult sons and three grandchildren, Seattle, Washington, USA

### **38. Breastfeeding Mantra: Pushpa Panadam, Paraguay**

Spring cleaning recently, I found a letter written in early May 1997 to my mum, which I did not send. It was about my children.

*...Jiva prays for his Kumar mama (uncle Kumar), his papi, his titi (he says, "Ohm titi" and then laughs).*

I read the letter to my 19 year old daughter who laughingly said, "but mum, to Jiva at that age, that was most important." Jiva was then 1 year 10 months and his titi (my breasts) were heaven!!

## **GRANDMOTHERS and GRANDFATHERS SUPPORT BREASTFEEDING**

### **39. I am the granddaughter and the daughter of milk, and the story has been repeated in my own life: Tere Heredia, Peru**

**M**y mother was a social worker at a sugar company in the Nepena Valley, Chimbote, Peru. Towards the end of her pregnancy, she travelled to Trujillo (3 hours away), the city where her mother lived and where she planned to give birth. I was born by vaginal birth in Hospital Lazarte in Trujillo. However, before I was 3 months old, my mother had to return to work. Now she comments: "Why did I not take you with me?"



*I am the granddaughter and the daughter of milk and the story has been repeated in my own life.*

She left me in the care of my grandmother (mother to 10 children). My grandmother relates:

*Each time I carried you, you searched for my breast. In those first days I bought evaporated milk "Gloria", but it was difficult for you to take the bottle. During the nights when you slept with me, I would offer you my breast to see if you could be contented and sleep.*

*You sucked and sucked. During the day I also gave you my breast thinking that you could be entertained and you played but I never thought that your sucking would stimulate release of the milk in my breast. When I realized it, I was producing milk. I was afraid that my milk would not be good for you but you preferred my milk to the bottle, so I decided to breastfeed you as I had done with my children. Once in a while when I did not have much I would give you the other milk in a cup.*

*I raised you according to my standards and rules. I raised you with my heart and my milk. You are my daughter not because I raised you but because I breastfed you.*

I am the mother of a son who is 4 years old who I breastfed until he was 3. Part of this time I lived in Bolivia, and my neighbour became my good friend. She had a daughter who was the same age as mine and my neighbour could not breastfeed her. I wanted to try relactation with her but her available times and her work did not allow for it.

I still remember as if it were yesterday when my neighbour came crying to my house and said: "Tere, please breastfeed my daughter, because it is the best for her. I know you can do it." And that was how it was. I breastfed that beautiful girl, in addition to my little boy until I had to return to Peru.

History repeated itself. I am the daughter of milk and the mother of milk of a girl who is not mine.

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The story in Spanish has been translated and adapted with permission from the author Tere Heredia, [tp\\_heredia@yahoo.com](mailto:tp_heredia@yahoo.com). The article is available at <http://www.asociacionsina.org/2012/01/21/soy-nieta-e-hija-de-leche/>

## BREASTFEEDING, HIV and AIDS

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### 40 Premasticating Food for Weaning African Infants: A Possible Vehicle for Transmission of HIV:

Elke R. Maritz, MD<sup>a</sup>, Martin Kidd, PhD<sup>b</sup>, Mark F. Cotton, MD, PhDa

**BACKGROUND:** Although premastication of food for weaning infants might have nutritional benefit, it is also associated with transmission of pathogens. We investigated premastication practices in Cape Town, South Africa, in lower socioeconomic status care givers of infants below 2 years of age.

**METHODS:** A previously reported questionnaire was adapted for South African conditions. A convenience sample of infant care givers was captured at public maternal/peadiatric and HIV outpatient clinics and home visits.

**RESULTS:** We interviewed 154 care givers, 92% of whom were the biological mothers (median age: 29). Of these, 70% were black, and 29% were coloured. There were 106 (69%) care givers who practiced premastication. The median age of infants who received premasticated food was 6 (interquartile range: 4–6) months. Forty-six (43%) infants were teething, and 44 (42%) had oral mucosal lesions while receiving premasticated food. Fifty-five (52%) care givers reported an oral condition, mostly bleeding gums, mouth sores, and thrush, and 41 (39%) care givers reported blood in the food. Premasticating care givers had a significantly lower educational level than those care givers who did not engage in this practice. Premastication practices were cultural (40%), habit (20%), and on mother's advice (75%). Reasons for premastication were to pretaste (68%), encourage eating (61%), estimate food temperature (85%), and homogenize food (60%).

**CONCLUSIONS:** Counsellors and care givers should be aware of the adverse effects of premastication. Education should include advice to avoid premastication and to seek health advice for oral conditions in the caregiver and child. More studies are needed to better define the extent and risks of premastication, including its possible role in increasing HIV-1 transmission.

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#### Author Affiliations

- <sup>a</sup>Stellenbosch University and Children's Infectious Diseases Clinical Research Unit, Department of Pediatrics and Child Health, Tygerberg Children's Hospital, Cape Town, South Africa; and
- <sup>b</sup>Centre for Statistical Consultation, Stellenbosch University, Cape Town, South Africa

### 41. Milk sharing and formula feeding: Infant feeding risks in comparative perspective?:

Karleen D. Gribble<sup>1</sup>, and Bernice L. Hausman<sup>2</sup>

The advent of Internet forums that facilitate peer-to-peer human milk sharing has resulted in health authorities stating that sharing human milk is dangerous. There are risks associated with all forms of infant feeding, including breastfeeding and the use of manufactured infant formulas. However, health authorities do not warn against using formula or breastfeeding; they provide guidance on how to manage risk. Cultural distaste for sharing human milk, not evidenced-based research, supports these official warnings. Regulating bodies should conduct research and disseminate information about how to mitigate possible risks of sharing human milk, rather than proscribe the practice outright.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3395287/>

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1. School of Nursing and Midwifery, University of Western Sydney
2. Department of English, Virginia Tech; Department of Interprofessionalism, Virginia Tech Carilion School of Medicine

Corresponding Author: Karleen Gribble School of Nursing and Midwifery, University of Western Sydney, Locked Bag 1797, Penrith. NSW. 2751. Australia Email: karleeng@uws.edu.au

## WEBSITES AND ANNOUNCEMENTS

### 42. Check out these Websites

#### e-WABALink

Issue 1/2012 January – April 2012

[http://www.waba.org.my/resources/wabalink/pdf/ewaba\\_link\\_1204.pdf](http://www.waba.org.my/resources/wabalink/pdf/ewaba_link_1204.pdf)

Issue 2/2012 May – August 2012

[http://www.waba.org.my/resources/wabalink/pdf/ewaba\\_link\\_1209.pdf](http://www.waba.org.my/resources/wabalink/pdf/ewaba_link_1209.pdf)

#### Sharing Breast Milk: What's Right For You? James Akre

<http://babygooroo.com/2012/06/sharing-breast-milk-what%E2%80%99s-right-for-you/>

**Massachusetts hospitals eliminate formula marketing**, becoming the nation's second "bag-free state." Boston, USA – As of July 1, 2012, all 49 Massachusetts maternity facilities have voluntarily eliminated the formula company diaper bags, traditionally given to new moms at hospital discharge. Massachusetts became the nation's second "bag-free" state after Rhode Island's seven hospitals eliminated the bags in 2011. The achievement will be celebrated on July 18, at 10:30 am at Nurse's Hall at the State House, in an event that includes Dr. Lauren Smith, medical director of the Massachusetts Department of Public Health.

<http://massbreastfeeding.org/index.php/2012/massachusetts-hospitals-eliminate-formula-marketing-becoming-the-nations-second-bag-free-state/>

#### Scaling up Nutrition Movement

Can scaling up nutrition interventions happen fast, and have an impact? Alive & Thrive and a coalition of partners in Bangladesh have shown that it's possible.

<http://www.youtube.com/watch?v=YnU2t5Fcs4I>

#### Carlos Gonzalez: the doctor who wants parents to break the rules

Ten years after the launch of his bestselling book about children and food, Dr Carlos Gonzalez has turned his attention to wider parenting issues.

<http://www.guardian.co.uk/lifeandstyle/2012/may/28/carlos-gonzalez-doctor-parents-break-rules>

**WABA's International Youth Day statement** by Jenan S Johnson, WABA's Youth Representative on How to partner with youth in building a better future

<http://www.waba.org.my/pdf/st-iyd2012.pdf>

#### My Baby Growth Chart – Easily compare your baby's growth with the standards of the World Health Organization

<http://www.appseez.com/mybabycharts/>

**Is it time for airlines to take a stand on breast-feeding?** August 25, 2012

<http://www.guardianadvocate.com> promote the need for child care and places for breastfeeding for employees in their workplaces

[http://womensenews.org/story/books/120902/african-american-womens-legacy-political-power?utm\\_source=email&utm\\_medium=email&utm\\_campaign=email](http://womensenews.org/story/books/120902/african-american-womens-legacy-political-power?utm_source=email&utm_medium=email&utm_campaign=email)

**Breastfeeding Today**

Issue 12, May 2012 <http://viewer.zmags.com/publication/95fdfcea#/95fdfcea/1>  
 Issue 13, June 2012 <http://viewer.zmags.com/publication/d5ee8f6f#/d5ee8f6f/1>  
 Issue 14, August 2012 <http://viewer.zmags.com/publication/5f3b8aed#/5f3b8aed/1>

**Breastfeeding advocates promote the need for daycare and breastfeeding**

[http://womensenews.org/story/books/120902/african-american-womens-legacy-political-power?utm\\_source=email&utm\\_medium=email&utm\\_campaign=email](http://womensenews.org/story/books/120902/african-american-womens-legacy-political-power?utm_source=email&utm_medium=email&utm_campaign=email)

**43. Announcements: Past and Future Events**

- 1 May – 15 June 2012:** GOLD 2012 – Global Online Lactation Discussions. <http://www.goldconf.com/>  
 Christina Smillie, MD FAAP IBCLC FABM, GOLD Keynote Speaker on April 24th - *Keep it Simple: What mothers and babies already know, how they think, and why this matters!*
- 25 June – 4 July 2012:** A 10 day training course 'Struggle for Health', organised within the framework of the People's Health Assembly (PHM) International People's Health University (IPHU) will accommodate around 50 young health activists from across the globe with a majority drawn from Sub-Saharan Africa. <http://www.phmovement.org/es/node/6335>
- The main course will be preceded by a mandatory online preparation during the period 12 April – 20 May 2012. All applicants are also encouraged to register to participate in the Third People's Health Assembly (PHA3) which will be held in Cape Town South Africa (6 – 11 July 2012).
- 5 – 6 July 2012:** A South African National Health Assembly will focus on national issues and in particular the proposed national health insurance for South Africa. International participants will be invited to participate.
- 6 to 11 July 2012:** Third People's Health Assembly (PHA3), University of the Western Cape, Cape Town, South Africa. See <http://www.phmovement.org/en/pha3>  
 Information is also available in French and Spanish.
- 25 – 29 July 2012:** 2012 ILCA (International Lactation Consultant Association) Conference and Annual Meeting Call to Action: New Perspectives in Human Lactation, JW Marriott Orlando Grande Lakes Orlando, Florida, USA. <http://ilca.omnicms.com/ilca/2012ILCA/collection.cgi>  
<http://www.ilca.org/i4a/pages/index.cfm?pageID=3972>
- 1 – 7 August 2012:** 20<sup>th</sup> World Breastfeeding Week – Understanding the Past-Planning the Future -Celebrating 10 years of WHO/UNICEF's Global Strategy for Infant and Young Child Feeding
- 3 – 4 August 2012:** The Big Latch On is indeed happening in 2012! This year, the Big Latch On is going global. The dates are Friday and Saturday August 3 and 4 at 10:30am. [www.biglatchon.org](http://www.biglatchon.org)
- 19 – 23 August 2012:** National Breastfeeding Meeting (Encontro Nacional de Aleitamento Materno ) in Fortaleza, Brasil. The meeting is organized by IBFAN Brasil.
- 24 – 25 August 2012:** 1<sup>st</sup> International Breastfeeding Seminar, Asuncion, Paraguay
- 6 – 8 September 2012:** 12<sup>th</sup> Congreso de Pediatría Social y 7mo Congreso Argentino de Lactancia Materna
- 12 September 2012:** World Breastfeeding Celebrations and Make Penang Breastfeeding Friendly (MPBF) project. Celebration is from 10.30 am –10.00pm, at Queensbay Mall. Events include MMPS annual - One Minute Simultaneous Breastfeeding
- 13 – 16 September 2012:** 2<sup>nd</sup> Chinese LLLI Breastfeeding Peer Counselling Programme in Beijing. For information contact Ivy Makelin, LLL Leader in Beijing at [babameemee@gmail.com](mailto:babameemee@gmail.com).
- 2 – 4 November 2012:** International Breastfeeding Congress – the Science Behind the Art of Breastfeeding and the 10<sup>th</sup> Latin-American LLLI Workshop, Hotel Dann Carlton, Medellín, Colombia. Celebrating 35 years of LLL Colombia and World Breastfeeding Week. For further information please contact Ana Milena Puerta, [contactica@une.net.co](mailto:contactica@une.net.co); [ana.puerta@contacticacomunicaciones.com](mailto:ana.puerta@contacticacomunicaciones.com) or [contacto@lllcolombia.org](mailto:contacto@lllcolombia.org) or <http://www.facebook.com/CongresoInternacionalDeLactanciaMaterna>

**16 November 2012:** A bilingual (Mandarin – Chinese and English) seminar for Health Professionals- Promoting Favorable Births and Supporting Successful Breastfeeding, organized by La Leche League Beijing, China and Beijing United Family Hospital (BUFH). The seminar will be held at BUFH. Keynote speaker – Linda J. Smith, lactation consultant, childbirth educator, author, and internationally-known consultant on breastfeeding and birthing issues. For further information see:  
[http://www.muruhui.org/ztbg\\_detail.asp?id=531](http://www.muruhui.org/ztbg_detail.asp?id=531)  
 or email: LaLecheBeijing@gmail.com

**28 November – 1 December 2012:** The Global Breastfeeding Initiative – Working Together to Increase Rates, Madrid, Spain.  
<http://2012.excellence-in-paediatrics.org/content/initiative/global-breastfeeding-initiative-%E2%80%93-working-together-increase-rates>

**6 – 9 December 2012:** Babies need Mom-made not Man-made: Let's protect every breastfeeding mother. World Breastfeeding Conference, New Delhi, India  
 For further information see: [www.worldbreastfeedingconference.org](http://www.worldbreastfeedingconference.org)

**3 – 5 May 2013:** United States Lactation Consultant Association (USLCA) 1<sup>st</sup> National Conference, Gateway to Excellence, St. Louis, Missouri, USA. For further information email [info@uslca.org](mailto:info@uslca.org)

**28 – 30 May 2013:** The 3<sup>rd</sup> Global Conference, Women Deliver 2013, will be held in Kuala Lumpur, Malaysia. Please check the website for regular updates and announcements, and sign up for our newsletter to stay up to date.  
<http://www.womendeliver.org/conferences/>

#### 44. Readers Share

I notice that you publish the newsletter in Portuguese. Here in Queenstown (New Zealand) we have a relatively large immigrant Brazilian population and I am currently attempting to identify suitable breastfeeding resources in Portuguese to loan to families. Are you able to forward this email onto someone who might be able to suggest some such resources and from where I can obtain them?

Many thanks and kind regards,  
*Catkin Bartlett, Wakatipu & Central Otago Breastfeeding Peer Support Counsellor Administrator*

I read the newsletter and I think it would be interesting for the people working with me to read ... but not in English. The Spanish version will be needed, where can I find it? I'm working in a hospital in the Psychological Ward helping teen mothers. In the group I'm the only mother, the rest of my co-workers are young girls in their 30s, without kids...

*Cristina Trevisan, Argentina*

Dear Change-Agent Friends,  
 Attached is one of the best existing e-newsletter (for mother support) in the world. It is suitable especially for pregnant (women), new mothers and breastfeeding women. You can subscribe to this free e-newsletter of World Alliance for Breastfeeding Action and forward it further to other women to support a strong mother-child relationship.

You may incorporate the concepts of these vital subjects of Breastfeeding and Infant & Young Child Feeding into your own lives as well as in the community oriented women programmes. Together, turning concepts into action.

*Hidayatullah Neakakhtar, Resource Centre for Development Alternatives, Pakistan*

## NEWSLETTER INFORMATION

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### 45. Submission of Articles and Next Issue

**W**e welcome articles of interest for this newsletter which may be any actions taken, specific work done, investigations and projects carried out from different perspectives and from different parts of the world which have provided support to women in their role as breastfeeding mothers. We are interested in articles that support GIMS for Breastfeeding and that address support from fathers, children and grandparents.

The guidelines for contributing an article are as follows:

Up to, but not exceeding 250 words.

Name, Title, Address, and e-mail of the author

Affiliation

Brief biography (5-10 lines)

Web site (if available)

Please be specific in including details where relevant: names of places, persons and exact dates.

If there is a lot of information, please write a summary of 250 words or less, provide a website url or link for readers to access the full report or article.

### 46. How to Subscribe/ Unsubscribe to the Newsletter

Please share this newsletter with your friends and colleagues. If they would like to receive the newsletter, please ask them to email: [gims\\_gifs@yahoo.com](mailto:gims_gifs@yahoo.com) and specify the language (English, Spanish, French, and Portuguese) in which they would like to receive the newsletter.

For further information, please write to: Pushpa Panadam [pushpapanadam@yahoo.com](mailto:pushpapanadam@yahoo.com) and Rebecca Magalhães [beckyann1939@yahoo.com](mailto:beckyann1939@yahoo.com)

### Support Breastfeeding – Support the MSTF E-Newsletter MSTF Coordinator and Editors

The first issue of the MSTF E-Newsletter was sent out in the last quarter of 2003 and the newsletter is entering its 9<sup>th</sup> full year. The first eight issues of the newsletter were published in three languages: English, Spanish and French. The Portuguese version of the newsletter first appeared in Vol. 3 No 4 in 2005. The newsletter in Arabic and Chinese first appeared in Vol 9 No 1 in 2011.

The newsletter is a means of communication that reaches out to breastfeeding mothers, fathers, organizations and supporters sharing stories and information. The newsletter helps all of us who work in breastfeeding to feel supported and appreciated in what we do and to improve how we help mothers, fathers, families and communities in breastfeeding.

However, our newsletter needs support too. You can help by disseminating each issue of the newsletter and letting us know:

1. how many are receiving it directly from the newsletter editors
2. how many are downloading it from the WABA website
3. how many are receiving it through you, a subscriber
4. how many are reading the newsletter through printed copies from your organization when there is no easy access to internet.

*The opinions and information expressed in the articles of this issue do not necessarily reflect the views and policies of WABA, the Mother Support Task Force and the Newsletter Editors. For further information or topic discussion, please email the authors directly.*



The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations concerned with the protection, promotion and support of breastfeeding worldwide based on the Innocenti Declaration, the Ten Links for Nurturing the Future and the WHO/UNICEF Global Strategy for Infant and Young Child Feeding. Its core partners are International Baby Food Action Network (IBFAN), La Leche League International (LLL), International Lactation Consultant Association (ILCA), Wellstart International, and the Academy of Breastfeeding Medicine (ABM). WABA is in consultative status with UNICEF and an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC).

WABA, PO Box 1200, 10850 Penang, Malaysia • Tel: 604-658 4816 • Fax: 604-657 2655

Please be informed that WABA has now changed its email address to the following:

1. General matters: [waba@waba.org.my](mailto:waba@waba.org.my)
2. Information & queries: [info@waba.org.my](mailto:info@waba.org.my)
3. World Breastfeeding Week: [wbw@waba.org.my](mailto:wbw@waba.org.my)

Website: [www.waba.org.my](http://www.waba.org.my)

**The MSTF is one of seven task forces that support the work of the World Alliance for Breastfeeding Action**

### *Breastfeeding creates a lifetime of love*

There's no doubt about it – breastfeeding establishes a bonding, sense of intimacy and closeness that lasts a lifetime. The knowledge that you have literally given yourself to your child – that he needed no one but you to satisfy his every need, help him grow, nurture his being – is a gift beyond measure. For an infant, breastfeeding is his lifeblood – he could not survive without you. For a toddler, breastfeeding is his anchor – his world is expanding, yet he is not ready for independence. For an older child, breastfeeding is his comfort – Mama can still hold him in her arms and chase the world away with sweet nourishing milk. The bond of breastfeeding is forever. Family is special, but mother is sacred.

– <http://www.thebreastintentions.com/index.html>