

# Mother Support Task Force (MSTF)

## World Alliance for Breastfeeding Action



Photo by IBFAN

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**Making  
the breastfeeding  
world “go ‘round” and doubling knowledge  
and support by learning from each other and sharing experiences**

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## MOTHER SUPPORT TASK FORCE COMMENTS AND INFORMATION

### 1. My Mother Support Experience ... Paulina Smith, Coordinator

I would like to share my story about mother support. My husband's daughter, Odette, who is like a daughter to me, became pregnant last year at the age of 42 with her second husband. She has a son from her first marriage who is 16 years old. Odette always wanted another child—she is an absolutely wonderful mom—and her wish came true.

When she was three months pregnant, and a week before traveling to her new home in Hawaii, USA, she almost had a miscarriage—a very scary moment for us all. Fortunately, with special medication and bed rest for three months, she and the baby pulled through the difficulties. Because her husband's job commitment required him in Hawaii, Odette stayed here at home with us in Mexico for the remainder of her pregnancy. These were very special months where *mother support* came into our daily lives—moments I will always treasure.



The baby who wanted to see what life out of the womb was all about, arrived early—a few days before his Daddy arrived from Hawaii. I am a Natural Childbirth Coach and although I could not substitute for her husband, I did live and share some very special moments throughout Odette's labour and delivery. I provided her with all the *mother-support* that she needed. Little Ian came into the world after a natural childbirth and nursed within minutes. They stayed with us until Ian could travel and are now settling in nicely into their new home. I am left with an empty house full of absolutely delightful memories of a mother enjoying the company of her daughter and being there for her.

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### 2. MSTF Update: Paulina Smith, Coordinator

It is with great pleasure that I put *pen to paper*—or in today's world, *fingers to a keyboard!* to share my thoughts with you. So far, coordinating the Mother Support Task Force has only brought positive moments and many enjoyable challenges into my work day. Together with Rebecca Magalhães and WABA staff we have been organizing and planning for the State of the Art of Mother Support Summit to be held July 18 and 19, in Chicago USA, prior to the LLLI International Conference. This Summit will be dedicated to the seven Founders of La Leche League International who are celebrating 50 years of supporting breastfeeding mothers.

In the mid-fifties breastfeeding was at risk of disappearing in the USA. Mary Ann Kerwin, one of the Founders, explains, "I believe that never before in the history of the world had a resource as valuable as human milk been so widely discarded." Then in 1956, Mary Ann and six other successful breastfeeding mothers in the Chicago metropolitan area, decided to offer meetings to help friends and neighbors who wanted to breastfeed their babies but were encountering difficulties. Little did they imagine how great the need was for information, encouragement, and support!

The Summit will honor The Breastfeeding Mother – *Yesterday, Today and Tomorrow*. Many people, both those who will attend the Summit and those who can't, have been electronically dialoguing to bring to the forefront those components that have a positive effect on supporting the breastfeeding mother. They are also listing the obstacles that so very often come between the mother/baby breastfeeding dyad. The outcome of this e-dialogue will be of great importance because support for breastfeeding is a necessary element for any woman, irrespective of her circumstance, to succeed in her breastfeeding experience.

Together we need to strengthen the global development of and the networking among groups and organizations to work towards the improvement of Mother Support worldwide.

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If you are interested in being a country contact for GIMS and the MSTF, please email Paulina [smithpc@att.net.mx](mailto:smithpc@att.net.mx), Rebecca [RMagalhaes@Illi.org](mailto:RMagalhaes@Illi.org), or Prashant [psgangal@hotmail.com](mailto:psgangal@hotmail.com)

## MOTHER SUPPORT FROM DIFFERENT SOURCES

### 3. SABA: We make a Difference Locally and Officially: Negeya Elwaseela, Sudan

SABA is a non-profit, non governmental organization (NGO) established in August 1998. Its vision is that all children and mothers should enjoy a full and healthy life with all their rights secured and protected and where all children are nurtured in a caring and loving environment.

SABA's mission is to work through different mobilizing mechanisms and approaches, guided by the relevant UN declarations, Millennium Development Goals (MDGs), WABA'S Ten Links, the Global Strategy for Infant and Young Child Feeding (GSIYF) and World Health Assembly (WHA) subsequent resolutions. In its 8 years, SABA has succeeded in forming and building 37 Mother Support Groups (MSG) in 6 states. These groups are qualified to play an extended role beyond the core mission of protecting, promoting and supporting optimal infant feeding. They are registered as women CBOs (Community Based Organizations) working as community development agents addressing all social change issues.

SABA promotes skills and knowledge through an integrated health package and CBO management. This is accompanied by continuous upgrading of specialized and advanced concepts on maternal and child health and nutrition [WIC]. We advocate baby friendly cultural and institutional communities. SABA MSGs utilize a number of effective tools and channels like: mother to mother support; child to mother message; baby friendly students; breastfeeding; midwives and many other innovative methods and dynamics during international days, national weeks, school annual programs and World Breastfeeding Week (WBW).

Since its establishment SABA leads a Baby\Mother Friendly Village Midwives (VMW) Initiative as our home delivery is about 87%. Hence village midwives spearhead Exclusive Breastfeeding (EBF) promotion, as breastfeeding, not EBF, is the feeding pattern practiced by most Sudanese mothers. EBF at three months is only 19%. SABA's work with the VMW initiative is highly regarded by funding agencies and by the health executive staff. We have in fact recently completed a VMW training project for 50 women funded by Canadian Aid: entitled VMW (Village Midwife), training these women as health educators and community leaders. They are essential for early initiation of breastfeeding.

At SABA, we are dedicated and morally committed to our message: We believe we make a difference locally and at the official policy level.

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Negeya Elwaseela, mother to 4 sons and a grandmother,  
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### 4. Conversation on Breastfeeding: Night Nursing - Each family, A Different Experience: Amigas do Peito, Brazil

We often hear about babies who breastfeed frequently during the night. When very little, this is the way babies keep their energy levels up and stimulate production, since night nursing increases prolactin levels, the hormone responsible for milk production. The mother usually adapts to this pattern or takes short naps during the day to compensate.

When she returns to work, it is possible that the baby misses her and tries to compensate by waking up more often during the night. Women who have gone through this often recommend: "Who knows if you just relax it will stop bothering you; we are much more resilient than we think we are. I have five children and this happened every time I went back to work. After just 'letting go' I realized what really made me tired was worrying about not sleeping, not waking up on time, being too exhausted, not being able to function, and things like that... And a huge amount of energy went into all that worrying. After I 'discovered' that it would all end some day and I would survive... it really stopped bothering me so much." Others suggest: "If you try playing with the baby a lot before going to bed and nursing more often from the time you get home until bedtime, it might help."

Some time later, some mothers end up discovering that "Today I have to force myself to remember those times for they have all but passed completely. We really do forget! And we are talking about years of night nursing!"

The truth is there is not *one way* of dealing with this situation. With older children it is possible to negotiate and try to set limits by showing them that breasts must sleep in order to rest and produce more milk the next day, or establish nursing only during the day, or limit night nursing to only one nursing. Some toddlers will keep on waking at night even when they have stopped nursing and nursing in these cases might allow these toddlers to fall asleep faster.

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From Boletim Peito Aberto: submitted by Maria Lúcia Futuro Mühlbaue,  
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## **5. Woman, Mother, Member of Amigas do Peito, three time South American Women's Rugby Champion: Amigas do Peito, Brazil**

Mika, a young athlete from an Amigas do Peito mother's group in Niterói, Brazil, and her four-month old daughter went to the South American Rugby Championship in Chile in January of this year (2007).

Mika is the most experienced player in the Brazilian team and has played rugby and been in competitions since her teen years. Until this year, she was team leader, stepping down only because she was nursing her child during breaks.

Liz Morena, Mika's daughter, was the 2007 Brazilian team's baby athlete and spent all her time on the bench in the arms of her mother's team members, nursing during breaks and dressed in green and yellow. With both parents playing rugby for Brazilian teams she was once again the main attraction for Latin American coaches and players and noticed by spectators.

Mika had already participated in the Women's Rugby Championship in São Paulo, Brazil when Liz Morena was only three months old. Now they have returned to Brazil as **three time South American Women's Rugby Champions**.

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From Boletim Peito Aberto: submitted by Maria Lúcia Futuro Mühlbaue,  
E-mail: [amigasdopeito@amigasdopeito.org.br](mailto:amigasdopeito@amigasdopeito.org.br)

## **MOTHER SUPPORT - BREASTFEEDING MOTHERS RELATE THEIR EXPERIENCES**

### **6. Knowing the Importance of Breastfeeding Inspired Me! Josephine Nalugo, Uganda**

It was Monday the 19<sup>th</sup> of February, 2007 at 11:30 in the morning, when I left home for the hospital feeling my contractions coming on and off. I did not find it easy leaving my 2 year, 10 month old daughter Chantal crying as she wanted to come with me. I took with me brochures I had made on Save One Million Babies- Initiate Breastfeeding during the First Hour which I gave out to about 12 mothers and left some with the hospital staff. This was possible thanks to WABA who had sent me the materials on the World Breastfeeding Week and the 2007 calendar, which encouraged me to share the message with others.

At 5:23pm my baby Charlene was born weighing 3.1 kg (6.82 lbs). Twenty minutes later, I asked for my baby in order to initiate breastfeeding and she responded positively.

The next day before I was discharged from the hospital, I asked my brother to bring Chantal to meet her baby sister and to avoid being asked when we got home where I got the baby from. We reached home and settled in. I am grateful that I had a person to help me at home because the first week was challenging. This gave me time to exclusively breastfeed my baby.

It has not been easy breastfeeding my baby and also supporting my older child as their father abandoned us, but knowing the importance of breastfeeding inspired me. Every time my baby smiles I feel happy and I want every breastfeeding mother to experience this too. This has encouraged me to help especially young mothers like me to prepare to breastfeed and learn about breastfeeding - *a light to our children's future*. Sharing with other breastfeeding mothers has also confirmed the need for greater support for breastfeeding mothers in terms of love, caring for the baby, food, water, and learning more about the importance of breastfeeding, to enable them to exclusively breastfeed their babies.

I felt happy and encouraged to continue with exclusive breastfeeding when I took my baby at six weeks for immunization and she weighed 4.6kg (10.12lbs).

I would like to thank my daughter Chantal and my family for their support as it has enabled me to breastfeed Charlene exclusively and learn to love her more. My fear however is in returning to work in 3 weeks' time and leaving my baby at home at 2 months and 3 weeks because I feel I have no other option. Even if I want to take my baby to work with me, it is very difficult as I travel by taxis which ferry 15 people every morning and evening. I worry about my baby contacting infections, of tiring her as the journey is an hour both ways. At times one has to fight to enter a taxi due to the large numbers of people waiting.

There is enough space at work to keep my little baby but I have no one to care for her since my caregiver looks after my daughter Chantal at home. She still has not started school. There are day care centres on my way to work but they are too expensive and beyond my budget.

Despite such challenges I am planning to express my breastmilk for Charlene, teach my caregiver how to take care of the baby and Chantal and do part of the house work before leaving for work which should give my care giver time to care for my 2 "Queens." I am also preparing Chantal every day to be a good girl and not demand too much attention but it is not easy. She sometimes asks to be carried too when I am carrying the baby.

Finally, I encourage all breastfeeding mothers to exclusively breastfeed their babies in spite of the challenges we face. I also call upon fathers to support their breastfeeding wives. We can have a healthy world with healthy babies when we support breastfeeding mothers.



Josephine Nalugo, Single Mother of 2 daughters, Executive Director, Children In Africa, a Community Based Organisation, Uganda.  
The mission of Children in Africa is to promote equal opportunities for vulnerable children through Health, Education, family support, moral and spiritual upbringing.  
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**Editors' Note:** *On 17<sup>th</sup>. May Josephine writes: Yes, I'm back at work buckling my baby every day. It has not been easy for me and her. She now has a cold and cough because of the dusty road to and from work. I haven't settled in yet but I'm happy she is breastfeeding exclusively.*

## 7. Nursing – An Awe Inspiring Miracle of Nature: Odette Smith, USA

I grew up knowing that breastfeeding was the best option for babies and that therefore I would naturally breastfeed when I became a mom. My mother (my dad's wife) dedicates her life to the promotion of breastfeeding and has been involved professionally and as a volunteer with La Leche League and other breastfeeding organizations for more than 30 years. I watched both my younger sisters thrive on my mom's milk and loving care and always knew I wanted to give the same gift to my children. What I did *not* know is how much of a challenge breastfeeding would be with my first child.

My first-born son, Dario, was born 16 years ago with a bilateral cleft lip and palate which made it impossible to suck on my breast, even after his first two surgeries. However, with the support of my mom and other LLL Leaders in Mexico, I pumped my milk for 8 months and gave it to him first with a dropper and then a bottle. It all sounds quite simple but there were many days when I felt like giving up since my milk never seemed to be enough and the whole process of pumping and feeding my baby would take two hours and Dario would be hungry every two hours, even at night time! What kept me going was seeing how healthy Dario was. Not once did he get a cold, diarrhea, or an ear infection in those 8 months.

Now, at the age of 43, I have been blessed with another beautiful son, Ian, who is 5 months old\*. Breastfeeding without the previous complications is so easy and rewarding that I don't understand why any mother would choose to bottle-feed. I just put him to the breast wherever we are—at the beach (we live in Hawaii), in a restaurant, on a plane—wherever we go his milk comes too! No pumps or bottles to lumber around, no sterilizing—the perfect nourishment always ready for him. I am not denying that there have been difficult days, such as when Ian is going through a growth spurt and wants to nurse all day and night, or after his shots or when he is teething and he refuses the breast, or at the very beginning when I thought the pain of him nursing was almost worse than labor! But all in all, nothing could be more perfect than nursing my precious little baby. After the miracle of having a baby grow inside me and giving birth—*nursing is another awe inspiring miracle of nature*. It is the gift of my whole being: nourishment, health, love, and comfort—all packed into one precious moment we share—mother and baby. What other moment could be so complete!



Odette Smith, a proud and happy mother of two wonderful boys--Dario (16) and Ian (5 1/2 months). She has a Masters degree in mental health counseling and teaches online graduate courses in Developmental Psychology and Cross-cultural Counseling for Seton Hall University, New Jersey, USA. Above all she enjoys working as a therapist with children and their parents.

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**\*Editors:** Note Paulina's article above

## FATHER SUPPORT

### 8. Update on GIFS/Men's Working Group (MWG): Peter Breife, Sweden

The Men's Working Group (MWG), a subgroup within WABA, was formed in October 2006 in Penang, Malaysia at an inaugural meeting in conjunction with a WABA Gender Training Workshop. See <http://www.waba.org.my/men/index.htm> for vision, mission etc.

The main activity of the MWG right now is the Regional Snapshot project. The aim of this project is basically to produce a tool that gives us a better idea of the men/father support situation in different countries (or regions) so that we can strategize our Men's work more effectively.

Diogo Mboa of Mozambique, Qamar Naseem of Pakistan, Arturo Arteaga Villarroel of Mexico, James Achanyi Fontem of Cameroon have agreed to work on this project. I am coordinating it and Julianna Lim is our contact at the WABA Secretariat in Penang. This group will meet this summer at the Mother Support Summit prior to the LLLI conference in Chicago, USA, where we will present our work and discuss next steps. Anyone interested is most welcome to contact us through [waba@streamyx.com](mailto:waba@streamyx.com).



Peter Breife, Coordinator of the Regional Snapshot Project for the WABA MWG, Sweden

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*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, WABA's Men's Initiative was born. To learn more how you can be involved, please contact the Co-coordinators of the Men's Working Group (MWG) Per Gunnar Engblom [pergunnar.engblom@vipappor.se](mailto:pergunnar.engblom@vipappor.se), Ray Maseko [rmaseko@realnet.co.sz](mailto:rmaseko@realnet.co.sz) or the Regional Focal Persons:*

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*Or see website: <http://www.waba.org.my/men/index.htm>*

### 9. Breastfeeding Adventure: Pedro Canahuati, USA

You could say that breastfeeding is in my blood and ingrained in my psyche. My mother, *Judy Canahuati*, loves to boast about how my sister and I nursed well beyond our toddler years. She started the LLL chapter in Honduras and was instrumental in launching a successful mother-to-mother support program in Spanish speaking countries, perhaps the world. I remember countless afternoons tagging along with my mother after school and visiting other mothers on the verge of hysteria because of their difficulties breastfeeding. As a child, I myself could rattle off the benefits of nursing as easily as I could my phone number. When my wife gave birth to our son, Ethan, I never imagined our experience would be so trying and emotionally packed. Eventually nursing was rewarding for all of us but as a male unable to really help, it was difficult to watch. I tried adding input where I could but lacking functioning breasts that made milk, much of it was just more stress on my wife.

My wife, Sarah, had a difficult pregnancy: an emergency cerclage\* four months on bed rest, and a two week stint in the hospital during her second trimester due to threatened pre-term labor. Our son Ethan was born five and a half weeks early via C-section and was swiftly taken to the Neonatal Intensive Care Unit (NICU) for observation within minutes of his birth. Sixteen hours after his delivery, Sarah met Ethan for the first time. With the help of our *amazing* lactation consultant (read: amazing, super-hero, world would have crumbled without her), we overcame a nasty nurse bent on keeping Sarah from seeing and nursing him and Ethan was able to latch on like a champ.

Our focus was on getting Ethan home but the NICU required he be 5 lb (2.27 kg) and have barely measurable bilirubin levels (a milestone we later found out was only imposed by that particular NICU). This meant sacrificing

our desire to keep artificial nipples away from him in the interest of minimizing his time in the NICU and increase his weight more rapidly. Ethan became quickly accustomed to bottles and pacifiers and it was difficult to transition him to the real nipple once at home. We tried finger-feeding with a supplemental nursing system, but it proved too much for our already exhausted brains and bodies. Again, our super-hero lactation consultant rescued us and suggested a nipple shield because of Sarah's flat nipples and Ethan's premature age and lack of developed sucking reflex. A few exhausting weeks later, he was nursing well, albeit in small doses.

We survived on pre-pumped frozen milk when Sarah was recovering from a kidney infection that required her to be hospitalized for a week when Ethan was three months old. Due to a constantly changing combination of antibiotics, she could not nurse him during that time. Although she had her pump at the hospital, pumping was exhausting and frustrating when her supply started to drop. It was an incredibly emotional time for all of us. Ethan couldn't understand why mom was not in bed with us, why he had to take milk from a bottle or a Dixie cup and why he couldn't be with mom. Sarah felt like she was failing as a mother, having to be apart from her nursing infant. An herb sold through our local organic food store was very helpful in getting Sarah's milk supply back up.

As the months progressed, we fought with various other issues including: colic, baby reflux, day/night confusion, sore nipples, milk blisters, nursing strikes, and slow weight gain, not to mention stress from our mothers who had differing opinions about nursing through the difficult times, and unsupportive comments from a few friends. We were envious of our friends who had a baby five weeks younger than ours whose major problem was she nursed too much! Ethan wanted to nurse less and less. At about six or seven months, he was completely rejecting one breast.

Throughout all this I pleaded repeatedly with my wife to go to her local LLL mother-to-mother support group. I tried explaining that it wasn't group therapy, rather a way for her to share her experience, get tips, meet other mothers and realize she wasn't the only one. I tried finding articles that talked about our problems. I even read through the LLL trainer's manual during nights when Ethan was sleeping restlessly and required I stay next to him all night long. I was often on night duty so Sarah could get some semblance of rest. But she was battling an unfortunate bout of Post-Partum depression and I failed to see the signs or was ignorant to them and I finally realized that my strong persistence only made matters worse so I stopped and hoped things would settle into a groove. They eventually did.

When Ethan was six months old, Sarah started going to the nursing mother's support group offered by the hospital at which Ethan was delivered. It wasn't exactly what I had hoped for, but it gave her a sense of community and she even found herself offering advice and support to newer moms going through those difficult first few weeks. This group was a turning point for my wife and gave her the confidence I had hoped she would find so much earlier in our son's life.

Ethan never nursed past the ten minute mark and when he did, it was mostly at night when he was half asleep; even that was rare. He was easily distracted and would only nurse in one place and in one position. Any deviation meant a melt-down. This easy distraction made it difficult for Sarah to nurse in public as much as she wanted to and it meant typically nursing him in the car. Sarah was determined and would not quit.

After Delta's ignorant flight-attendant decided to remove a breastfeeding mother from a departing plane because she was nursing her baby, Sarah decided to join one of the sit-ins at our local airport and she and Ethan nursing-in-public were in the background on the 6pm news! That was an incredibly proud and happy moment for me.

It's somewhat of a blur but somewhere between 7 and 9 months, Ethan was definitely set in his groove. He nursed more at night from one breast and seemed content to nurse during the day if he felt somewhat hungry or if he needed comfort. At about 11 months, he started to teeth and that meant he would bite Mom very hard which brought a full range of other problems we're dealing with now.

I'll never let it be said that women aren't the strong ones. Even with my upbringing, I would have thrown in the towel months ago. I adore and admire my wife for battling all these problems and coming out the other side with a healthy, happy breastfed baby. Looking back, I wish it had been easier but the bond Sarah and Ethan now share is one that was forged through tears, pain, difficulty and finally, joy. I am delighted.



Pedro Canahuati, Director of Operations, NameMedia, Inc.

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**Note:** \* *cerivial cerclage is the placement of stitches in the cervix to hold it closed. It may prevent the cervix from opening before the 37<sup>th</sup>. week of pregnancy and triggering preterm labour and delivery.*

**Editors' Note:** *If you are a father supporting breastfeeding, or know of someone working with a father support group, please submit your story.*

## NEWS FROM THE BREASTFEEDING WORLD

### 10. Meet Audrey Naylor: What Would the World be Like Without Audrey Naylor? Janine Schooley and Ann Brownlee, USA

*Many individuals around the world are working faithfully and with dedication to support mothers in their breastfeeding experiences. In this issue, the Editors and the MS TF would like to highlight [Audrey Naylor, USA](#).*

If the theme of the movie "It's a Wonderful Life" were applied to the world of breastfeeding, and Audrey Naylor had the title role played almost as well by Jimmy Stewart, what would we see? We would likely see a world very different than the one we live in today. Would we have the Ten Steps to Successful Breastfeeding? Would we have the Baby-Friendly Hospital Initiative? Would we have WABA? Hard to say... As Audrey would be the first to exclaim, there have been so many people who have contributed to these and other milestones related to the promotion, protection and support of optimal infant and young child feeding that it is neither accurate nor appropriate to claim exclusive influence of any one person. But clearly, Audrey's particular stamp, her influence, and the force of her spirit has been felt in these and many other key events in the world of breastfeeding over the years. She was at Innocenti and Innocenti 15. She was there at the birth of WABA. She and her colleague of many decades, Ruth Wester, were instrumental in the shaping of the Ten Steps and the BFHI (Baby Friendly Hospital Initiative). But perhaps the most lasting and powerful influence Audrey has had and one that is incontrovertible, is her influence on the expertise and motivation of hundreds of "Wellstart Associates", multidisciplinary health professionals from over 60 countries around the world.

Having worked with Audrey for many years, we can honestly say that no one was as influential as she was on crafting the Lactation Management Education Program of Wellstart and its powerful impact on the professional and personal lives of so many that continues to multiply and expand all these years later. Watching Audrey teach was always an inspiration. Only Audrey could elicit such respect from hard boiled obstetricians, chiefs of departments, heads of hospitals, and top ministry officials. Even if she were talking about something as seemingly "soft" as lactation in whales, she was able to combine hard science, clinical expertise, irrefutable logic and persistent dedication in a way that no one else could. You could see these skeptical health professionals transform before your eyes into people who would follow her anywhere out of respect and admiration.

Audrey was a true "mentor" for both of us. We learned so much from Audrey about integrity, commitment, quality, and intelligence coupled with passion. Audrey is not one to compromise, and yet she is likely to be the one yelling the loudest on any rollercoaster ride in Disneyland. She is a world renowned expert in the complex field of lactation, and yet she has never left her pediatric roots, her connection with children and the playful side of life. Thank you Audrey for all of this and more!

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Janine Schooley is currently Vice President for Technical Services and Program Development at Project Concern International (PCI) in San Diego, California, USA.

Prior to joining PCI in 2000, Janine was Associate Director at Wellstart International where she worked in various capacities since 1985.

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Ann Brownlee is currently a Clinical Professor at UCSD Medical School and works as an international health consultant for the World Health Organization, UNICEF, and other organizations. She served as the Senior Advisor for Program Development, Evaluation and Research for Wellstart International from 1990 to 2000.

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**Editors' Note:** *If you know of a breastfeeding advocate who works with mother support that you would like to see featured in this newsletter, please submit an article describing the person and his/her work.*

## 11. Public Breastfeeding in the United States: Melissa R. Vance, USA

People in the United States hold a wide variety of views on breastfeeding in public. While many people support public breastfeeding, others will express distaste or take offense by the sight of a mother nursing her child.

It is not illegal to breastfeed in public anywhere in the United States, but in some places mothers may be legally asked to leave places. Many states have passed laws regarding breastfeeding. Forty-five states have laws addressing breastfeeding in public. Thirty five provide that a mother has a right to breastfeed in public. There are several states which have laws stating that breastfeeding in public is not a criminal act. Five states (Idaho, Pennsylvania, Nebraska, Massachusetts and North Dakota) have no laws at all. Additionally, there is a law that states a woman has a right to breastfeed on any property owned by the United States government.

Depending on the law of the state in which a mother resides or is visiting, a mother may be asked to leave a restaurant, store or other space. For example, Texas has a law stating a mother may breastfeed in public; however, a private business owner also has the right to order a person to leave the premises. Even where laws exist, mothers often find that many people are simply not aware of the laws. If you will be visiting the United States, you may want to find out what the law is in the state(s) you will be.

For specific laws, visit <http://www.lalecheleague.org/Law/LawBills.html>

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Melissa R. Vance is a lawyer, LLL Leader and a member of the LLL Legal Advisory Council. She has two boys, ages 16 and 12, and lives in New Jersey. She can be reached at [mrvance12@hotmail.com](mailto:mrvance12@hotmail.com)

## 12. World Breastfeeding Week 2007: Liew Mun Tip, Malaysia

The text of the World Breastfeeding Week (WBW) 2007 Action Folder is now available on the website <http://worldbreastfeedingweek.org/downloads.htm>. WABA is currently designing the Action Folder and will upload it on this webpage as soon as possible.

The Chinese version of the Action Folder is also available on the webpage. The Spanish and French versions are being translated, and will be uploaded when available.

You can translate the WBW 2007 materials and adapt the Action Folder and other materials to suit your country's needs. Please let WABA know if you are doing so, and we can send you the reproduction kit CD. Please feel free to write to us.

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Liew Mun Tip,  
International WBW 2007 Coordinator  
Email: [waba@streamyx.com](mailto:waba@streamyx.com)

## 13. Call for Nominations: Celebrating Mothers in Action

*Celebrating Mothers: Global Portraits to Inform and Inspire* is a forthcoming illustrated book to feature mothers around the world who are making the world a better place for women and children through their social advocacy. Its mission is to spotlight 20 mothers internationally who are finding solutions that address important issues in their community and mobilizing other mothers to do the same. The book is a collaborative effort between international women's networks including the Association for Research on Mothering (ARM) and Mothers Acting Up, and will benefit many nonprofit coalitions working to support women worldwide.

Please submit your organization's nomination(s) for exemplary women who are:

- mothers (birth or adoptive) to children under age 15,
- involved in advocacy for women's or children's issues at a local or national level,
- initiating positive change in their communities and inspiring other mothers to do the same

Mothers selected for profile in the book will come from diverse countries and continents, various socioeconomic backgrounds, and from rural and urban environments. They could be volunteers working for small local organizations that are addressing regional family issues like access to healthcare, gender equity or affordable childcare, or they might be policy-makers initiating change for women on a larger scale, like removing barriers to education or employment. The common theme will be their ability to blend their roles as mothers within a larger concept of social responsibility, inspiring other mothers and children to identify issues that are important to them and take action.

Please submit nominations (limit 5 per organization) to [celebratingmothers@gmail.com](mailto:celebratingmothers@gmail.com). Submissions should include:

- 1) Name of individual
- 2) Description of social activism- work or volunteer affiliations
- 3) Country of origin and residence
- 4) Number of children and ages
- 5) Contact information (email, telephone, address, website)

Deadline for submissions is August 1, 2007. Please direct all questions to Amie Brooke Nelson, author at [celebratingmothers@gmail.com](mailto:celebratingmothers@gmail.com)



This information was extracted in its entirety from a posting on the CORE Group listserve, website: [www.coregroup.org](http://www.coregroup.org)

#### **14. Children for Breastfeeding, Inc.: The Philippines**

Children for Breastfeeding Inc., a Philippine-based advocacy group invites you to join them in establishing a new record for *"The most women in synchronized breastfeeding around the world."* The first attempt of establishing this record of synchronized breastfeeding is tentatively scheduled on August 7, 2007 during World Breastfeeding Week. Please visit the website for Guinness World Record on Simultaneous Breastfeeding in Multiple Sites at <http://www.breastfeedingphilippines.com> where you will also learn about our organization. Click the Sabay-sabay, Sumuso sa Nanay web banner to know more about simultaneous breastfeeding in multiple sites.

#### **BREASTFEEDING RESOURCES**

#### **15. How to Know a Health Professional is not Supportive of Breastfeeding: Dr. Jack Newman, Canada**

All health professionals say they are supportive of breastfeeding. But many are supportive only when breastfeeding is going well, and some, not even then. As soon as breastfeeding or anything in the life of the new mother is not perfect, too many advise weaning or supplementation. The following is a *partial* list of clues that help you judge whether the health professional is supportive of breastfeeding, at least supportive enough so that if there is trouble, s/he will make efforts to help you continue breastfeeding.

- 1. S/he gives you formula samples or formula company literature when you are pregnant, or after you have had the baby.**
- 2. S/he tells you that breastfeeding and bottle feeding are essentially the same.**
- 3. S/he tells you that formula x is best.**
- 4. S/he tells you that it is not necessary to feed the baby immediately after the birth since you are (will be) tired and the baby is often not interested anyhow**
- 5. S/he tells you that there is no such thing as nipple confusion and you should start giving bottles early to your baby to make sure that the baby accepts a bottle nipple.**
- 6. S/he tells you that you must stop breastfeeding because you or your baby is sick, or because you will be taking medicine or you will have a medical test done**
- 7. S/he is surprised to learn that your six month old is *still* breastfeeding.**
- 8. S/he tells you that breastmilk has no nutritional value after the baby is 6 months or older**
- 9. S/he tells you that you must never allow your baby to fall asleep at the breast.**
- 10. S/he tells you that you should not stay in hospital to nurse your sick child because it is important you rest at home.**
- 11. S/he does not try to get you help if you are having trouble with breastfeeding.**



Jack Newman, MD, FRCPC. © 2005, author of Dr. Jack Newman's Guide to Breastfeeding (called The Ultimate Breastfeeding Book of Answers in the USA)

Handout #18. *How to Know a Health Professional is not Supportive of Breastfeeding*. Revised January 2005. This handout may be copied and distributed without further permission.

Email: [drjacknewman@sympatico.ca](mailto:drjacknewman@sympatico.ca) website: [www.drjacknewman.com](http://www.drjacknewman.com)

Website for the full article:

[http://www.drjacknewman.com/index.php?option=com\\_content&task=view&id=50&Itemid=76](http://www.drjacknewman.com/index.php?option=com_content&task=view&id=50&Itemid=76)

<http://www.breastfeedingonline.com/18pdf.pdf>

It is also available on the website [www.mamancherie.ca](http://www.mamancherie.ca) in French.

## **16. Review: What's Wrong with Doctors by Richard Horton, USA (This is a review of a book "How Doctors Think" by Jerome Groopman)**

"Physicians like to think of themselves as members of a profession. But definitions of profession and professionalism change. A century ago a doctor (it was very much a masculine endeavour) was considered to be part of a social elite having a unique mastery of a special body of knowledge. However doctors are no longer masters of their own knowledge. For a start, in many Western countries women now outnumber men at medical schools. The public is also far more educated than it was a century ago. Patients have access to the same information as doctors. They may know more than most doctors about their own condition. Meanwhile, doctors increasingly work in teams. Their responsibilities are shared with many other professionals-nurses, therapists, and pharmacists, for instance. The clinical hierarchy might still favor the doctor. And it is true that the doctor still takes final responsibility for a patient's care. But the notions of absolute mastery and control no longer hold."

The author, Jerome Groopman says:

"For three decades practicing as a physician, I looked to traditional sources to assist me in my thinking about my patients: textbooks and medical journals; mentors and colleagues with deeper or more varied clinical experience; students and residents who posed challenging questions. But after writing this book, I realized that I can have another vital partner who helps improve my thinking, a partner who may, with a few pertinent and focused questions, protect me from the cascade of cognitive pitfalls that cause misguided care.... That partner is my patient or her family member or friend who seeks to know what is in my mind, how I am thinking."

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Extracted from a review based on "How Doctors Think" by Jerome Groopman, Houghton Mifflin, Publisher The New York Review of Books, Volume 54, Number 9. May 31, 2007

Available online at: <http://www.nybooks.com/articles/20214>

From: Equity, Health & Human Development Listserve

## **17. Youth-4-breastfeeding - Youth can act to make a difference: WABA Youth Working Group**

The main objectives of the WABA YOUth Initiative is to get youth interested in breastfeeding and to develop and sustain young advocates to promote and protect breastfeeding through the perspectives of human rights, reproductive health and gender equality.

Welcome to the first of many WABA YOUth-4-Breastfeeding Newsletters! You are a very important part of the initiative and if you have something you wish to share please email us at [YOUth4breastfeeding@yahoogroups.com](mailto:YOUth4breastfeeding@yahoogroups.com), and remember: YOUth can act to make a difference!

Subscribe to Youth-4-Breastfeeding, a newsletter that bonds all YOUth members into a family unit and keep them informed of all planned activities, functions and useful information.

<http://www.waba.org.my/youth/resources.htm>

## **CHILDREN AND BREASTFEEDING**

*Margo, California, USA, shares:*

I'm currently triandem nursing (three kids). In my 6 1/2 years of nursing, my fondest breastfeeding moment has to be one with my son during my pregnancy with my now 9 month old daughter. Some background to understand why this was such a heart-warming moment for me: my son has autism and because of that, he is not an affectionate child. He doesn't like to hug or snuggle which is really difficult for me as a mother to accept and deal with. He can't really nurse without snuggling a wee bit so I cherish the once a week or so that we nurse because it's the only time I can

have some loving physical contact with him that he'll allow. About a year ago when I was around 6 months pregnant, he nursed at bedtime and he was so sweet and nurturing. I have morning sickness my entire pregnancy and also get dizzy spells from low blood pressure so I spend a fair bit of my pregnancies off my feet. My son (five years old at the time) nursed and then he pulled my shirt down, tucked me into bed, patted me on the head and said good night to me! It brought tears to my eyes and still does thinking about it.

I think the funniest breastfeeding comment I've heard from any of my kids is from my daughter who is currently 3 1/2 years old. When she was around 2 1/2 she heard a baby crying in the same aisle we were in. The mother propped up a bottle and so Ceilidh of course asked what the mom was doing. I explained that some mums can't breastfeed their babies (best exclamation I could come up with on the spur of the moment) and so she turned to me and said "Mummy, YOU must breastfeed that baby for her!"

*Joy, Wyoming, USA, writes:*

I remember when my son was about 20-22 months old and we're sitting in the rocking chair, all is silent, he's fidgeting with my shirt, he curls it up in his little chubby hand while "tuhing" (he pronounced it TUH-ING, his word of choice). He suddenly stops "tuhing" and looks up at me with his HUGE blue green eyes and his beautiful round little face, squeezes me around the waist as hard as he can and says "I LOVE YOU MOMMA" and went right back to it. Oh my GOSH, right then and there I thought, all of the crying and frustration (on both parties) when he was brand new instantaneously disappeared, like magic. I nearly started crying. That is a memory like no other. I'll never experience anything like that again. I'm so proud that I persevered, and listened to none of the "naysayers" in our extended families about weaning. This goes without saying (but I will anyway)...If I could hug and thank each and every one of the founders of LLLI, I would!!!!!!

*Jennifer, New York, USA, comments:*

Following is a quick comment made by my now 2 1/2 year old daughter, Nilla....At Easter dinner she was asked the question "Where does milk come from?" My family, fully expecting her to say from a cow, were in for a treat when she said "From Mommy's boobies." What a laugh and a nice reminder that breastfeeding stays with them.



## NEWSLETTER INFORMATION

### 18. Check out these Websites

<http://www.lalecheleague.org/cbi/journal.html> Journal Abstract of the Month for March 2007

"Interruptions to Breastfeeding Dyads on Postpartum Day 1 in a University Hospital"

by B Morrison, S Ludington-Hoe, GC Anderson

The subject is a study which counted the number of interruptions experienced by mother-baby dyads during the first 12-hour period postpartum

<http://www.geddesproduction.com/breast-feeding-delivery-selfattachment.html>

Delivery Self Attachment by Lennart Righard, MD. This video depicts a newborn's ability at birth to crawl up to a breast and attach himself/herself unassisted

<http://pds.harvard.edu:8080/pdx/servlet/pds?id=6232160>

Gives ten reasons to nurse a baby. [New York: Board of Health, 1914].

<http://keepabreastphils.blogspot.com/>

Keep Abreast Journal of breastfeeding advocates in the Philippines

[http://www.llli.org/docs/World\\_Health\\_Day07LLLI\\_WABA\\_1.pdf](http://www.llli.org/docs/World_Health_Day07LLLI_WABA_1.pdf)

*Invest in Breastfeeding- Build a safer Future a document produced by LLLI and WABA*

<http://www.internationalbreastfeedingjournal.com/content/2/1/6>

The complete version of the article: *A new paradigm for depression in new mothers: the central role of inflammation and how breastfeeding and anti-inflammatory treatments protect maternal mental health* by Kathleen A. Kendall-Tackett is available online.

<http://www.bestbeginnings.info>

Alison Baum's initiatives to promote breastfeeding in the UK

<http://www.breastfeedingmanifesto.org.uk>

website for people in the UK to add their names in support of the manifesto

[http://www.salon.com/mwt/feature/2007/05/04/ricki\\_lake/index.html](http://www.salon.com/mwt/feature/2007/05/04/ricki_lake/index.html)

Ricki Lake's "awesome" vagina By Rebecca Traister The actress and former talk show host, Ricki Lake, takes us on a magical mystery tour through natural childbirth in her new documentary.

<http://www.guardian.co.uk/medicine/story/0,,2079757,00.html>

In 1977 campaigners first called for a boycott of Nestlé because of its aggressive marketing of formula milk in the developing world. Thirty years later, Joanna Moorhead travels to Bangladesh to find out if Nestlé and the other baby-milk firms have cleaned up their act.

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## 19. Announcements

### Events during June-October 2007

For information on conferences/workshops/seminars in the USA , please access:  
[ibreastfeeding.com](http://www.ibreastfeeding.com)

**18-19 July, 2007:** State of the Art of Mother Support Summit: The Breastfeeding Mother – Yesterday, Today and Tomorrow. Hilton Chicago, Chicago , Illinois , USA  
<http://www.waba.org.my/>

**20-23 July, 2007:** LLLI 50th Anniversary Conference, Hilton Chicago, Chicago Illinois, USA. Celebrating the LLLI Founders and 50 years of helping mothers to breastfeed  
<http://www.lalecheleague.org/07conf/07conf.html>

**1 August 2007:** The International Food Policy Research Institute (IFPRI) invites youth between the ages of 14 to 18 to participate in a writing contest. The deadline is August 1st. For further information please see:  
<http://www.ifpri.org/2020chinaconference/chconfcontest.asp>

**24-25 September, 2007:** The Third Annual Breastfeeding and Feminism Symposium: BREASTFEEDING, FEMINISM, AND REPRODUCTIVE RIGHTS, The William and Ida Friday Center for Continuing Education in Chapel Hill, North Carolina. For further information, contact Emily Taylor:  
[tvemily@email.unc.edu](mailto:tvemily@email.unc.edu)

**17 October 2007:** International Day for the Eradication of Poverty  
The United Nations Department of Economic and Social Affairs (DESA) will mark this event with an art competition for Children to design a stamp on the theme: We can end poverty. The aim is to raise awareness about poverty and inequality in the world in particular among children.  
The rules of the competition are available in English, French, Spanish, Russian, Chinese and Arabic, see <http://www.un.org/esa/socdev/poverty/>, and in <http://www.un.org/cyberschoolbus>  
For further information please contact: Renata Kaczmarek: [kaczmarek@un.org](mailto:kaczmarek@un.org)

**18-20 October, 2007:** The Women Deliver conference will be held in London, United Kingdom. It is a major global event bringing together the development and health community on the one goal that is common to them all: **improved women's health, safe pregnancy and childbirth**. For additional information, visit the conference web site [www.womendeliver.org](http://www.womendeliver.org) or email [info@womendeliver.org](mailto:info@womendeliver.org)

**29 October - 2 November 2007:** Forum 11 will be hosted by The Global Forum for Health Research, in Beijing, People's Republic of China. The theme for Forum 11 is Equitable access: research challenges for health in developing countries. Please check the website [www.globalforumhealth.org](http://www.globalforumhealth.org) or email The Forum 11 Team, Global Forum for Health Research at [forum11@globalforumhealth.org](mailto:forum11@globalforumhealth.org) for further information.

### To Remember:

WABA mourns the passing of Patrice Jelliffe who died on March 14, 2007. The death of Patrice Jelliffe marks the loss of a very special and wonderful lady who was instrumental in the founding of WABA. In memory of Patrice, WABA has set up a special site at [http://www.waba.org.my/pat\\_jelliffe.htm](http://www.waba.org.my/pat_jelliffe.htm). If you would like to pay tribute or share any interesting pictures of Patrice or her husband, Dick Jelliffe, please email WABA at [waba@streamyx.com](mailto:waba@streamyx.com).

## 20. Readers Share:

*Michael Latham, USA:*

Dear Rebecca,

I have just arrived home from a few days on the road and away from e-mails. So I have only now, with great surprise, seen the MS TF Newsletter. How terribly flattering, but also much appreciated.

*Jean-Pierre Allain, Bangkok, Thailand*

I want to commend you on the excellent work you are doing in getting the WABA Mother Support Newsletter out in Spanish and Portuguese and widening the circle of readers. As you can see, this leads to all kinds of contacts and requests. Some people are not aware of the existence of ICDC and all the work on legislation which has been done over the years.

*Judy Canahuati, MPhil, IBCLC, [jcanahuati@theansible.net](mailto:jcanahuati@theansible.net)*

I always enjoy looking at the newsletter and I think it's one of the signs that mother support is alive, well and growing. Keep up the wonderful work.

*Julie Lauzière, Quebec, Canada*

Thank you for your email and your wonderful work. It is well appreciated!



## 21. Submission of Articles and Next Issue

We would like to receive articles of interest for this newsletter. The themes of interest should refer to 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. In particular, please send articles that support GIMS for Breastfeeding and also articles that address father support.

The guidelines for contributing an article are as follows:

- Up to, but not exceeding 250 words.
- Name, Title, Address, Telephone, fax 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.

To be received by the date specified in each issue.

If there is a lot of information, please write a summary of 250 words or less, provide a website url for readers to access the full report or article or send the full report/article and the MS TF will send it to WABA to place on the WABA website.

The date for submitting articles for consideration for the **September/October/November/December 2007** issue is **September 1<sup>st</sup>. 2007**.

If you submitted an article and it didn't appear in this issue, it is being reserved for a future issue. **Volume 5, Number 3**, will be sent on **October 1<sup>st</sup>. 2007**.



## 22. 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 [ppanadam@telesurf.com.py](mailto:ppanadam@telesurf.com.py) and Pili Peña [vapena@pla.net.py](mailto:vapena@pla.net.py)

## Support Breastfeeding –Support the MS TF 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 beginning its 4<sup>th</sup> full year.

The first 8 issues of the newsletter were published in 3 languages: English, Spanish and French. The Portuguese version of the newsletter appeared in Vol. 3 No 4 in 2005. 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.

We thank you for promoting the newsletter and supporting breastfeeding.

*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 organizations 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, Academy of Breastfeeding Medicine (ABM) and LINKAGES.

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).

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

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

***Making the breastfeeding world “go ‘round” and doubling knowledge and support by learning from each other and sharing experiences***