

Mother Support Task Force (MSTF)

World Alliance for Breastfeeding Action



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**“There are no language barriers
when you are smiling.”** -- Allen Klein

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MOTHER SUPPORT TASK FORCE COMMENTS AND INFORMATION

1. Elements Needed in Communicating and Supporting Mothers: Paulina Smith, Coordinator, WABA MSTF

This article is more about family and friends' support than mother support but what better opportunity than the wedding of my daughter, Natalia, to share my personal joy with you. Two families came together in Acapulco, Guerrero, Mexico on November 21st. The family of our now son-in-law, Jonathan, had never traveled to Mexico before, so there was much organizing and planning to do – all of which Natalia and Jonathan did with much love and caring.

As parents, my husband, Christopher and I supported them as they moved through the challenges that led up to the Big Day. I am proud to say that during the process, communication was open and dialogue was at its best. Everybody involved in the upcoming event kept an open listening heart; this always helps to get things done and done well.

The Day of the Wedding arrived and friends and family came in from the northern hemisphere, from three countries in Latin America, from two countries in Africa, from Europe and from Indonesia. Natalia and Jonathan have worked abroad and have given to many worldwide communities; consequently they are blessed with a diverse group of friends – friends who bring a variety of beliefs, backgrounds, cultures and thoughts. Their wedding was special in many ways and we were reminded at all times how important family and friends are!

This helps me remember that this is what mothers all around the globe need: understanding, caring, acceptance of their differences, and a listening heart. If we keep these elements in mind, we will be able to communicate and support women wherever they may be.

Paulina Smith, Coordinator
WABA Mother Support Task Force
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2. MSTF Update: Paulina Smith, Coordinator, WABA MSTF

What had been long in coming is now a reality. I am holding in my hands a copy of the booklet *Mother Support for Breastfeeding*. It is with joy and pride that the Mother Support Task Force recommends you get your own copy of this wonderful booklet from WABA; to do this please contact Julianna Lim at julianna.lim@waba.org.my. The booklet is exactly what is needed: an easy reference of selected statements and excerpts about Mother Support from key international documents. The booklet describes early calls for action for Mother Support and details the historical development in Global Initiatives and International Policies. It is through compilations like this one that we can continue to work together to get the word out to the public at large about how every pregnant and breastfeeding mother needs support. It is by calling communities to action that mothers and babies worldwide will hear the plea that goes out from our hearts to them.

As 2009 comes to an end, I would like to take this special moment to thank the Mother Support Task Force team for the great work done throughout and to commend the group for the accomplished tasks. I send each of you best wishes for 2010 and would also like to thank newsletter subscribers and readers for your constant support.

If you are interested in being a country contact for GIMS and the MSTF, please email Paulina smithpc@att.net.mx, Rebecca beckyann1939@yahoo.com, or Prashant psgangal@hotmail.com

MOTHER SUPPORT FROM DIFFERENT SOURCES

3. Mother-to-Mother Support; a Calling... and sometimes a Career: Pamela Morrison, United Kingdom



Most mother-to-mother support group counselors have loved breastfeeding their own babies so much that they want to help others enjoy a similar experience. And helping other mothers can become addictive; some of us take the calling even further, turning support of mothering and breastfeeding into a professional career.

Last year, a dear friend who has been involved in mother-support for many years, and knows how much I love my work as an International Board Certified Lactation Consultant (IBCLC), asked me about sitting the Exam. I answered that the International Board of Lactation Consultant Examiners (IBLCE) will accept in its eligibility requirements the critical experience, skills, knowledge and attitudes acquired by leaders and counselors of mother-to-mother support groups in their day-to-day support of breastfeeding mothers and babies.¹ Furthermore, I remembered reading that, due to their broad skills-base, gained through helping mothers in varied situations with nursing babies of all ages, experienced mother-supporters consistently achieved higher marks on the Exam than any other group.² The previous year, a former La Leche League Leader had jointly scored the highest marks in the world.³

While continuing her work with mothers and babies, my friend was accepted as a candidate for the 2009 Exam, offered in 40 countries across 5 continents.⁴ She acquired the reading materials, joined local and international study groups and listserves and studied hard. Last week I received her happy message, "I passed!" Through the mother-support pathway, she joins over 22,000 IBCLCs worldwide who surely have the best job in the world – improving the health and well-being of mothers and children through breastfeeding!

Pamela served as an accredited La Leche League Leader in Harare, Zimbabwe, from 1987 to 1997. In 1990 she became the first International Board Certified Lactation Consultant in Zimbabwe, where she worked in private practice until 2003, before moving to Australia and then to England. She served as Co-coordinator of the WABA Breastfeeding and HIV Task Force from 2005 until February 2009. Pamela continues to write and speak on HIV and breastfeeding and on the baby's right to be breastfed.

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 3. IBCLICK, January 2008 http://americas.iblce.org/documents/IBCLICKAMS_January2008.pdf (accessed 23 October 2009)
 4. IBLCE Announces Results of 2009 Certification Exam for Lactation Consultants, http://www.iblce.org/documentsNEW/2009_Exam_Press_Release.pdf (accessed 25 October 2009)

4. A Phenomenology Study Examining Partial Breastfeeding in the Kingdom of Saudi Arabia: Dr. Modia Abd Almajeed Batterjee, Saudi Arabia

The introduction of formula and infant feeding supplements gave mothers a choice in how to nourish their infants. The basis for women's decisions included biological factors such as the inability to produce enough milk, cultural factors such as whether other mothers within a demographic prefer to breastfeed or use formula, and whether or not a woman had the time to breastfeed. Several studies indicate increases in diseases such as diabetes, obesity, and autoimmune disorders are likely caused by the decrease in breastfeeding infants. Studies also reveal that these diseases extend beyond infancy and affect the overall health of the nation as children with diseases grow into adults. A sample of 20 women between the ages of 21 and 35 living in Jeddah, Saudi Arabia with infants between the ages of 0 and 4 months sat for qualitative interviews using an empirical phenomenological approach and key research questions that focused on capturing information regarding the influences that lead mothers to choose alternate methods to breastfeeding. The findings showed

that an explanation for a mother's choice not to breastfeed exclusively was that Saudi Arabian society accepts but does not provide adequate support for mothers to breastfeed. The conclusions presented might assist in national campaigns focused on promoting changes in cultural attitudes toward breastfeeding with the goal of reducing the rates of morbidity and mortality among Saudi Arabians. The findings also provide the basis for recommendations of further research.

http://gateway.proquest.com/openurl?url_ver=Z39.88-2004&res_dat=xri:pqdiss&rft_val_fmt=info:ofi/fmt:kev:mtx:dissertation&rft_dat=xri:pqdiss:3381820

Dr. Modia Abd Almajeed Batterjee, IBCLC, DHA (Doctorate in Health Administration), lives with her parents, husband and three children in Saudi Arabia. She and her family own and run the only breastfeeding resource center, Albidayah (The Beginning, in Arabic) in the Kingdom. Modia's focus in her doctorate degree was breastfeeding and its social position in Saudi Arabia.

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5. Accompanying Mothers in the Breastfeeding Experience: Fanny Mora, France

Being a mother here in France has its peculiarities which I am discovering as a Peruvian. Although I cannot detach myself from my roots and my culture, it is true that, slowly, I am absorbing this new culture and universe which nurtures me and allows me to understand life with insight. Perhaps I will never fully understand French women but it is true that what I try to do at every moment and above all is to respect them as they are because in the end, as all mothers of the world, they want to give the best to their children.

When my family and I decided to live in France for my husband's profession, one of the things I most desired was to be able to start a La Leche League (LLL) mother to mother support group and to continue working closely with mothers in their breastfeeding experiences, work that I had started in 2004 with LLL Peru. The work I did with LLL Peru gave me so much beauty and satisfaction and allowed me to be enriched, day by day, as a person, as a woman, as a mother and as a mother accompanying other mothers.

That was how, without waiting too much and thanks to the efficiency of LLL France, after only two months of my arrival in France, I started LLL Pays of Redon.

Little by little, I started to learn about the mothers who approached my group or me through a phone call or by mail. I began to know their difficulties and their successes, their needs and their hopes, their sorrows and their joys, their weaknesses and their strength, their fears and their challenges in breastfeeding. And meanwhile I began to cherish and appreciate them all as women who try to give the best to their children.

Quickly three aspects of breastfeeding strongly called my attention: the first was the difficulty in establishing breastfeeding after birth, the second, the difficulty in maintaining exclusive breastfeeding and third, the ease of early weaning of the babies.

These three aspects made me realise how little or even insufficient support these mothers receive in their desire to breastfeed their babies; on the contrary, they encounter misinformation, misunderstanding and criticism within their surroundings.

From this moment on, I searched for other possibilities to accompany them and to support these mothers of my group in their experience to be a breastfeeding mom and to make their path easier. Two of the mothers in my group went through a strong period of depression, one of them with medical treatment for years and the other searching for ways without medication. At the same time, 5 other mothers returned to work with all the difficulties, challenges and fears to be faced by each mother and their families.

That was why after 5 months of starting my group, I decided to initiate a second meeting space for mothers and babies. The idea was to meet to share beyond breastfeeding, to talk of ourselves, of our babies, to laugh and to cry together if it was necessary, to support each other and to not feel we are alone. Months later, to celebrate mother's day and with the help of one of the mothers, we did a beautiful Diploma of Honour with photos of breastfeeding of the mothers of the group in which the baby is saying: "I, ... , reward and thank my mother... because she gave me her breast during my first... of life" and gave it to all the participants of the group with their names.

A Travelling Photographic Exhibition on Breastfeeding

Also, during this time, the possibility of having a photo exhibition on breastfeeding of the mothers of my group during the World Breastfeeding Week 2009 was growing. This coincided with the 30 year anniversary of LLL France. My intention initially

was to bring out the theme of breastfeeding from the “drawer” of the doctors and that of “private” to give it new breath, make breastfeeding something public, beautiful and to be exhibited and admired. Above all, I wanted to sensitize the public and not only the young pregnant woman or those who desire to have a baby. My intention was to go beyond, to say with photos that breastfeeding belongs to everyone and is as much a topic as the news of the day.

At the same time, the exhibition allowed me to pursue my objective to accompany and sustain the mothers of my group in their breastfeeding experience, who were happy and proud to be breastfeeding their babies, narrating in few words and without shyness their story on breastfeeding. These mothers happen to be mothers from my LLL Pays de Redon group of French Brittany but could very well be mothers from any LLL France group of any part of France.

All the mothers of my group were requested to send photos of their breastfeeding with a small text relating their experience. It was not easy as almost no one had the interest to do it, not being used to sharing like this in public. But as the weeks went by, more and more photos were received, all beautiful and unique. One interesting detail was that in these photos not only were mothers breastfeeding featured but there were also photos of fathers kissing their newborn or feeding the child his first food or hugging his wife and his baby... of course these photos were also selected!

In total, I received more than 200 photographs! Of course, to select the 24 photos for the exhibition was not an easy task.

In my search for funding for the enlargement and framing of the photos, I was lucky that the director of Mutuelle des Pays de Vilaine, offered her full support and hosted it as she considered it part of the health and natural food proposal on which they have been working steadily.

For a month and a half and with coordination with various institutions of Redon, the exhibition “Breastfeed in Freedom” was exhibited in many institutions of the city, such as the Cinema salon of Manivel de Redon for the main exhibition, later at the Hospital, Centre for Social Action (CEDAS), Mutuelle of Pays de Vilaine, the Médiatca and the Social Center.

Meanwhile I continue to coordinate for a tour of this beautiful exhibition throughout France during 2009-2010.

« **Breastfeed in Freedom** »

The title of the exhibition was not selected by chance. On the contrary, I searched for a title that expressed the feeling of liberty that empowers the mothers and the group.

Finally each mother, father and baby present in each photo with each written testimony let us see women free in their decision to breastfeed, free from criticism, free and happy to enjoy this moment with their families, free and strong to continue trying and to try again.

As for me, I can say that my job as a (La Leche League) Leader was basically to collect the photos, select them and coordinate the work with the institutions for the exhibition. I believe that the bulk of the work was done by the mothers. It is for this reason that I thank the opportunity given by this exhibition to make public my sincere acknowledgment of the mothers of my group and the French mothers in general for their strength in taking on the demands of family life, the economic situation and work always in good spirits.

Fanny Mora, mother to 2 children, 13 and 7, LLL Leader of LLL Pays de Redon, France. She is an Educator for psycho-corporal and runs workshops on Conscious Movement and Latin Dances.
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6. One Day Workshop on Breastfeeding & The Well-being of Families: Amatul Wadood Nazli and Maha Neakakhtar, Pakistan

The Agency for Technical Cooperation and Development (ACTED), Mansehra, conducted a one day workshop on ‘Breastfeeding & The Well-being of Families’ for female community members of Kathi – UC SathBani, in Balakot Tehsil, Pakistan, on November 2, 2009. A total of 24 women participated in this workshop; most were young women. The Resource Centre for Development Alternatives (RCDA) based in Mansehra designed this workshop and offered two resource persons to facilitate/ conduct the whole training.



The workshop objectives were:

1. Understand our primary responsibility to maintain maternal and child health in our homes, and in the community;
2. Stimulate thoughts for behavioural change and actions;
3. Support and meet Goal 3 (promote gender equality and empower women), Goal 4 (reduce child mortality), and Goal 5 (improve maternal health) of the Millennium Development Goals.



Workshop contents were designed to respect the traditional wisdom and cultural values of community life. The contents included the current situation of children's health, benefits and advantages of breastfeeding, practices that negatively impact breastfeeding, how the breast makes milk, early initiation and exclusive breastfeeding - The First 6 Months, overcoming common concerns of lactating mothers (Sore nipples, Sore breasts, Plugged ducts & Mastitis, Breast lumps, Nursing strike, Engorgement), increase mother's supply of milk naturally and the way ahead: Mothers Helping Mothers - A Support Group.

The workshop was implemented in a participatory learning approach and teaching methods used were interactive presentations, case studies, big cotton cloth charts, illustrations, and sharing of experiences. Through different strategies, the holistic concepts of breastfeeding were explained to participants in a simple and comprehensive way. Time was available for review and questions and answers. Every participant was encouraged to further disseminate these holistic thoughts to other community members.

The overall impact was evident in the many warm comments received, summarised below:

- * By practising your information, we can become our own doctor and get empowered;
- * Doctors do not tell us such precious information;
- * We are very much impressed from the knowledge on how the breast makes milk;
- * God be with you that you have guided us in such a good way;
- * We will practise these thoughts for our own well-being;
- * People like you are few;
- * The idea of hygienic protection material (sample breast-pads made of natural cotton) is very useful and we will try to make it ourselves;
- * Please let us know when you can come again to our village.

A number of women discussed their personal health problems such as insufficient mother's milk, infant health matters and asked for advice.

Not all the participants were literate, but they were all intelligent and eager to learn. On average, all the women participants were interested in the subject, showed attentiveness, and were friendly towards our presence.

We are grateful to the leadership of ACTED Mansehra, especially Dr. Maheen Oazalbash for their support and for sponsoring the workshop!!

Amatul Wadood Nazli, mother to three breastfed children, Organic Health Trainer and Consultant, Cofounder and Chairperson of Resource Centre for Development Alternatives, Mansehra, Pakistan.

Maha Neakakhtar, assistant trainer who has participated in various workshops like Organic Nutrition and Family Health; Breastfeeding and Wellbeing of Families; Hepatitis C; Health & Hygiene: an Organic Approach on Personal, Household & Community Level' etc. Mansehra, Pakistan.

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MOTHER SUPPORT – BREASTFEEDING MOTHERS RELATE THEIR EXPERIENCES

7. Phoebe – My Precious Child, a Gift I Treasure: Joanna Paradas, USA

Breastfeeding a daughter with Down syndrome has its challenges, but is well worth it. Phoebe is my 4th child. I had breastfed her older 3 siblings effortlessly. I was always proud that I had nursed them until they weaned, as they became strong and emotionally stable individuals. But Phoebe was a difficult child to nurse initially, as she had Down syndrome. She was sleepy and floppy, and couldn't maintain a good suck, as is characteristic of infants with Down syndrome.

I did not know that Phoebe had Down syndrome at the time of her birth. It was better that way for me, as I did not have any stereotypes in my head. Instead, I saw Phoebe for who she was, a precious child with weak muscles. She continually fell asleep at the breast, so I would have to wake her, which I did night and day. My milk took awhile to come in, but it was always sufficient for Phoebe. We just kept nursing as much as possible.

I am really grateful that I had the support of my family and my friends from La Leche League, as they helped me believe in myself and my body's ability to completely nurse my baby, regardless of her needs. If I had listened to everyone else, I may have given up and just fed Phoebe formula.



Phoebe with her sister

Today, Phoebe is a healthy 2 year old, overcoming everyone's stereotypes, and still nursing strong! She has fewer colds and earaches than her non-nursing friends, and her immune system is strong. I love cuddling with her and looking into her eyes when she is nursing. I treasure the relationship I have with Phoebe, and hope she continues to nurse for some time to come! She is a gift to me, and to all of us!

Joanna Paradas, mother to 4 breastfed children. She and her family live in Quincy, Massachusetts, USA. Phoebe's birth and her breastfeeding experiences started in Paraguay. Joanna's other 3 children were born in USA and mainly breastfed in the USA.

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8. My Childbirth Experience – Close to What I had Hoped: Zoubidah Touimer, Algeria

My little Chafia was born on May 4, 2008 at 21h 55 (9:55 PM) and here is her story:

I dreamed of a home birth but Hamid, my husband, was too scared and did not want this, so I was resigned to the idea of going to the hospital, but planned to stay at home as long as possible and hoped to arrive at the hospital for the delivery.

The baby did a somersault on 2nd May and later I had a lot of contractions. On Saturday I started to lose the mucus plug and on Sunday at about 16.00 hs (4:00 PM) the contractions started to have a rhythm of about 7 minutes apart, but what was striking was my mood. I had a strong desire to be isolated, to see no one and to hear no one.

Hamid returned from work at about 17.00 hs (5:00 PM). Hamid is a medical anaesthesiologist resuscitator at a hospital in a small town 120 km (74.4 miles) from Algiers. The contractions were closer and more intense, but I did not want to cause alarm, as I did not want to be at the hospital too soon.

Due to my mood, Hamid decided to leave me alone to take a short walk and the contractions returned at an average of every 4 minutes. I was sure it was labour but I still procrastinated. Before leaving for the hospital, I decided to ask him to ask the hospital gynaecologist to examine me at home to see where I was.

I stayed home alone, and I enjoyed fully my condition as a mammal, yet nevertheless as a human capable of marvelling at the grandeur of nature.

After a while Hamid called me to say: "the gynecologist is in the unit carrying out a caesarean which will end soon." I said 'waiting for your return as the contractions are intense and coming every 3 minutes.' In fact, it was every 2 minutes to 1 minute.

They finally arrived home, my husband, with the gynaecologist and a midwife with all the instruments needed ;-)) The midwife examined me: 7 cm, she said. "We still have time to get to the hospital." I begged to remain knowing what she wanted to do ... She said, "no, no, for your safety Madame." I felt it was more for her safety as they are trained to deal with situations that are pathological and physiological. I was confident that I would not have reached 7 cm as easily if there had been a problem.

I relented. Once in the car, the contractions were less frequent and weaker, which confirmed that any interference in childbirth can be interpreted by the body as a danger and the work must "slow down" to meet the danger. On arrival at the hospital, I was still at 7 cm!

The Gynaecologistst wanted to place a drip of Cyntocinon (artificial oxytocin) to “help me” but I refused, reminding her that I hoped for a natural childbirth. She said, “Okay, I’ll leave you alone for a moment. I will not use a drip or an episiotomy.”

When she came back I was at 9 cm, and she suggested again using the drip saying that the contractions were not effective enough. It was finally imposed on me as my husband supported her saying I was “indoctrinated.” It took so long to place the drip that the baby ended up being born without it!! My desire not to cut the cord quickly was respected and she was placed on me after birth and I was her first contact. She was breathing well, she had color and she was not vacuumed. I had two very small surface scratches that the gynaecologist wanted to put a stitch on either side.

Once I was dressed, the gynaecologist went to bring my little Rabea to me. Seeing that all was well, and due to my aversion to unnecessary medication, the gynaecologist gave me the choice between staying in the hospital or going home after 2 hours of monitoring. My choice was clear, so 3 hours after delivery, I was at home.

Voila, I did not have my home birth, but after two induced childbirths and overmedication, I am very happy to have lived this wonderful experience, very close to what I had hoped.

Zoubida Touimer Ait-Ali, Algiers, Algeria, mother to 3 girls, stay at home physician specialist in anesthesia and reanimation
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Editors’ Note: *If you have breastfed your baby or are breastfeeding your baby or know of someone who is breastfeeding their baby, please share with us your/their experience.*

FATHER SUPPORT

9. Dads make a difference: an exploratory study of paternal support for breastfeeding in Perth, Western Australia: Tohotoa J, Maycock B, Hauck YL, Howat P, Burns S, Binns CW

Background

The ability to breastfeed and continue the practice requires dedication, commitment, persistence and support. Mothers often need to overcome many obstacles to successfully breastfeed their babies and maintain their balance of home, family and work commitments. Evidence suggests that fathers want to be involved and be part of the parenthood process, including infant feeding. The role transition from couple to family poses challenges to both parents. Sharing the experience of childbirth and supporting each other in the subsequent infant feeding practices is one of those challenges.

Methods

A qualitative exploratory design was chosen to identify parents’ perceptions of what constitutes support for breastfeeding, particularly focusing upon paternal support. Focus groups were conducted with mothers and a focus group, interviews and an online survey were developed for fathers. Thematic analysis was used to identify the main themes.

Results

From a total of 76 participants, the major theme emerging from mothers’ data identified that “Dads do make a difference.” Three sub-themes included: Anticipating needs and getting the job done; Encouragement to do your best; and Paternal determination and commitment, associated with effective partner support. “Wanting to be involved” was identified from fathers’ data as the major theme around their needs. Three sub-themes included: Wanting more information; Learning the role; and Being an advocate.

Conclusion

Sharing the experience of childbirth and supporting each other in the subsequent infant feeding practices was perceived as the best outcome for the majority of new mothers and fathers. Paternal emotional, practical and physical supports were identified as important factors to promote successful breastfeeding and to enrich the experience for the mother and subsequently the father.

<http://www.internationalbreastfeedingjournal.com/content/4/1/15/abstract>

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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, the WABA Men's Initiative was born. To learn more about how you can be involved, please contact the Coordinators of the Men's Working Group (MWG) James Achanyi- Fontem<camlink2001@yahoo.com> or the Regional Focal Persons:

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You can also visit the website: <http://www.waba.org.my/whatwedo/mensinitiative/index.htm>

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 Prashant Gangal, a Breastfeeding Supporter with a Winning Touch: Raj Anand, India and Rebecca Magalhães, 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 MSTF would like to highlight breastfeeding advocate Prashant Gangal, India.

Dr. Prashant Gangal, Co-coordinator of the WABA Mother Support Group Task Force, has a knack of winning – not only breastfeeding mothers on his side but how to work effectively with NGOs, UN agencies, the government and even the local traditional massage women to achieve his mission of protecting, promoting and supporting optimum infant and young child feeding.



Prashant, my young colleague, was inspired by his teacher, Dr. N.B. Kumta. The latter was working in lactation management workshops, organised by ACASH (Association for Consumers Action on Safety and Health) with the help of UNICEF, Dr. Felicity Savage and Mrs. Helen Armstrong. About two decades ago, BPNI (Breastfeeding Promotion Network of India) was founded and Prashant became an active core group member of BPNI Maharashtra. It seemed there was nothing to stop Prashant in his mission.

The other moving spirit that inspired and supported Prashant was Ms. Rajalakshmi Nair, Health and Nutrition Specialist, UNICEF, Mumbai. As Prashant became the Project Coordinator of the Mother Support Group Project in the State of Maharashtra in India, we in BPNI ensured that they both participated in the GIMS (Global Initiative for Mother Support) conference in Malaysia. Soon after that Prashant was appointed Co-coordinator of the Mother Support Group Task Force. As co-chairperson of the Steering Committee of WABA, I have been noticing over the years that this particular task force has consistently remained one of the best task forces that we have in WABA.

Prashant observed that the 'Traditional Massage Women', who give oil massage to babies and their mothers in India, were often giving wrong advice to breastfeeding mothers. He had an innovative idea to train these women who then became excellent grass roots breastfeeding counselors.

With the support of the local UNICEF office, Prashant started participating in state government level discussions to scale up Infant and Young Child Feeding programs. The BPNI team, led by him, became a key partner with the government to move the agenda forward. He also involved Dr. Sanjay Prabhu, a busy pediatrician and the current secretary of BPNI Maharashtra. Together, they trained about 3,000 Health Care Providers with a 3 day Training of Trainers and over 36,000 with one day sensitization programs, taking time from their own clinical practices. This effort was acknowledged by policy makers and bureaucrats.

From the large number of counselors trained by Prashant and his team, he encouraged 21 faculty members of BPNI Maharashtra to take the IBCLC examination and I was delighted to learn that 13 of them passed the examination, including Prashant himself. He played a key role in placing some of his mother support counselors in the Medical College Hospitals of Mumbai and Pune.

'Breast Crawl', a well recognised concept for early initiation of breastfeeding, caught the attention of Prashant and he worked with Mr. Nand Wadhvani and UNICEF to bring it to the grass root level and to the policy makers. The CD they made has reached a worldwide audience and is now part of the curriculum of many international universities. Currently, it is being used in the local language in Maharashtra. Prashant also contributed to the book 'Hirkani's Daughter' published by La Leche League International and he has set up Hirkani's Room in the Raigad district of Maharashtra.

No wonder two timely awards have been bestowed upon Prashant – Dr. N.B. Kumta Award for an innovative social project in breastfeeding in 2004 and the Lifetime Achievement Award by the Mumbai Breastfeeding Promotion Committee in 2008.

Dr. R.K. Anand is co-chair of the WABA Steering Committee.

At present, Dr. Anand heads the Department of Pediatrics & Neonatology at the Jaslok Hospital & Research Centre, Mumbai.

Rebecca Magalhães, USA:

I can't remember exactly when I met Prashant for the first time, but it seems as though we have known each other for many years. One thing I do know, though – Dr. Prashant Gangal is a person of optimism, intelligence and energy! I have been with him in international conferences, workshops and meetings and benefited from his presence as a presenter or an active participant or both! I also benefited from his vast knowledge of Mumbai, India, when he took time out of his very busy life to show my sister, Pat, and I the beauty and history of this bustling city. As a strong and active supporter of the need for and value of mother support, Dr. Gangal has implemented training programs that enable breastfeeding women to better help other women in his native country of India. Finally, it was Prashant who presented the story of Hirkani, that became the theme of the LLLI book "Hirkani's Daughters: Women Who Scale Modern Mountains to Combine Breastfeeding and Working." Prashant even traveled to Hirkani's village to take photos that are the cover of the book. I am honored to count Prashant as a friend and colleague and I wish him all the best, as he continues to promote breastfeeding and to support breastfeeding women.

Editors' Note: *If you know of an individual who works diligently and enthusiastically in promoting, protecting and supporting breastfeeding from your country, your region, your city, or your neighbourhood please take the time to write about this person and submit your article to the MSTF E-Newsletter.*

We would like to also recognize all those who indirectly support breastfeeding, through their support OF a breastfeeding advocate! Thank you!

11. Summary on the 2009 Breastfeeding Week Celebration in Alor Gajah, Malacca: Jess Wong, Malaysia

This year we celebrated World Breastfeeding Week (WBW) in October due to the outbreak of Influenza H1N1 in August. Due to the severity of the outbreak and as a precaution, we decided to postpone the August celebration to the following:

Date : 27 October 2009 (Tuesday)
Time : 8.00 a.m until 12.30 p.m
Venue : Melekek Rural Clinic, Alor Gajah, Malacca

A total number of 157 people turned up for the WBW celebration despite the rainy morning. Parents from nine clinics in Alor Gajah District and the aboriginal families who live near Bukit Payong Aborigine Village in Simpang Empat Area were invited to this celebration.

In conjunction with this year's celebration, we organized four competitions, namely:

1. Colouring competition among the kindergarten children;
2. Competition on diaper folding among fathers;
3. A look alike photo competition among mother and child or father and child. (Children have to be breastfed exclusively in order to participate in this competition);



Coloring contest for children.

4. Recognition of mothers who have breastfed their children exclusively (working mother category and non-working mother category). Mothers were nominated by clinic health care staff.

In addition to these competitions, exhibitions, food displays, quizzes and health screenings were set up. In short, we had a memorable celebration this year despite the Influenza H1N1 outbreak and breastfeeding is always encouraged in emergencies.



Contest on changing diapers.



Nurse showing how to express breastmilk.

In Malaysia, we are very fortunate that we are safe from earthquakes, hurricanes and volcano eruptions. Yet, we should always be ready during floods, influenza outbreaks, etc. Let us work together to promote, protect and support breastfeeding for a better future of our next generation.

Jess Wong, Nutritionist, Malaysia
Email: jess10022001@yahoo.com

12. Cancellation of WABA Global Forum 3, Canada 2010: WABA Secretariat

The 3rd Global Forum in Quebec City, Canada, scheduled originally for June, 2010, is cancelled due to funding constraints.

13. World Breastfeeding Week 2010: WABA Secretariat

Breastfeeding – Just 10 Steps! The Baby-Friendly Way

Dear WBW celebrants,

Greetings from the WABA Secretariat. We would like to thank all WBW celebrants from over 170 countries who have celebrated WBW so successfully this year. More than 500 global events took place involving more than 800,000 celebrants. Congratulations to everyone.

WABA is now pleased to announce the theme/slogan for WBW 2010 which was decided by the WABA Steering Committee.

The Carolina Global Breastfeeding Institute, led by Miriam Labbok, has been appointed Key Writer for the WBW 2010 Calendar Announcement and Action Folder, working with the WABA Health Care Practices Task Force, Mother Support Task Force and BFHI Working Group.

The Calendar Announcement in English, Spanish and Arabic are now available for download. Please visit: www.worldbreastfeedingweek.org.

14. Co-Founder of La Leche League International passes away: MSTF Coordinators and Editors

Viola Lennon, Co-Founder of La Leche League International and co-author of the Womanly Art of Breastfeeding, passed away peacefully on Friday, 22nd January, 2010. She was one of the 7 founding mothers of La Leche League International, who all saw the need for mother to mother support for women to successfully breastfeed their babies in the early 1950s when bottle feeding was the norm.

Mother to 10 breastfed children, Viola Lennon credited her mother for her strong influence on her breastfeeding and mothering philosophy. Viola says "Breastfeeding... led me to self discovery and to a greater appreciation of the full humanity of the babies who were entrusted to me."

For further information, please visit: www.llli.org/viola



BREASTFEEDING RESOURCES

15. World Breastfeeding Trends Initiative (WBTi) Assessment in Cameroon: James Achanyi-Fontem, Cameroon

When Cameroon Link decided to involve the government in a WBTi assessment, it became clear from the beginning that it would be challenging to release data, as it could be used to rate authorities who are in charge of decision making at various levels for not delivering their tasks completely.

In doing the WBTi training, participants discovered that the tool puts the country, government and its people face-to-face with hidden realities. As the indicators were rated, it became apparent that nothing was happening in some areas and the gaps became clear. The rating helps the decision makers to review the child rights nutrition agenda and to invest in the areas to fill the gaps when another evaluation is done one or two years later.

The WBTi tool is based on secondary data. Although the tool is available on the internet, it can only be accessed with permission. The person applying to access the information must be a person in authority in the national health system. Key players in the public and private sectors, including Infant and Young Child Feeding (IYCF) NGOs, were invited for the training.

Cameroon Link began the process by writing to the Ministry of Health on why the WBTi assessment was necessary. With the support of the Ministry of Health, WHO and UNICEF became involved with the process. But the challenge was in identifying a representative from the Ministry in the evaluation. With the Ministry's support and authorization, data from the Demographic and Health Surveys (DHS) on line archive was possible.

All DHS data is treated confidentially, and no household or individual respondent interviewed in a survey should be identified. The data sets must not be passed on to other researchers without the written consent of DHS. Users are requested to submit an electronic or hard copy of any reports/publications resulting from using the DHS data files. These reports should be sent to the attention of the DHS Data Archive, so that it may be forwarded to the countries whose data have been used.

In the beginning, it may look complicated, but when the instructions are followed closely, it becomes simple, fascinating and interesting, as the percentage score and colours tell the entire story. Cameroon benefited from the training pack from IBFAN Africa, which was useful, especially as all the web site links are included in the training pack.

Every country should be able to do the assessment. If the government is reluctant to do the assessment, then an IYCF advocacy organisation in the country (such as Cameroon Link in Cameroon) can undertake to do the training. The important thing is the government is happy when they are informed of the gaps and suggestions for recommendations are made. The truth may be bitter, but it is important to know it.

James Achanyi-Fontem occupies triple functions, as Coordinator of the WABA Men's Initiative, National Coordinator of Cameroon Link and Focal Point of IBFAN Cameroon Groups. Cameroon Link leads the Federation of Cameroon Breastfeeding Promotion Associations, and James is chairperson.

For more information on the WBTi in Cameroon, please email: camlink2001@yahoo.com

<http://cameroonlink.blogspot.com/2009/11/Cameroon-gets-wbti-orientation-training.html>

16. Breastfeeding in Iran: prevalence, duration and current recommendations: Beheshteh Olang et al*, Sweden and Iran

Background

The need to promote breastfeeding is unquestionable for the health and development of infants. The aim of this study was to investigate prevalence, duration and promotion of breastfeeding status in Iran with respect to the Baby Friendly Hospital, government actions and activities by the Breastfeeding Promotion Society including comparison with European countries.

Methods

This retrospective study is based on data from 63,071 infants less than 24 months of age in all the 30 urban and rural provinces of Iran. The data of breastfeeding rates were collected in 2005-2006 by trained health workers in the Integrated Monitoring Evaluation System in the Family Health Office of the Ministry of Health to evaluate its subordinate offices. A translated version of a questionnaire, used to assess the current breastfeeding situation in Europe, was used.

Results

At a national level, 90% and 57% of infants were breastfed at one and two-years of age, respectively. Exclusive breastfeeding rates at 4 and 6 months of age at national level averaged 56.8% and 27.7%. Exclusive breastfeeding rates at 4 and 6 months

of age in rural areas were 58% and 29%, and in urban areas 56% and 27%, respectively. The policy questionnaire showed that out of the 566 hospitals across the country 466 hospitals were accredited as Baby Friendly Hospitals, covering more than 80% of the births in 2006. A national board set standards and certified pre-service education at the Ministry of Health. Iran officially adopted the WHO International Code of Marketing of Breast Milk Substitutes in 1991. The legislation for working mothers met the International Labour Organization standards that cover women with formal employment. The Ministry of Health and Breastfeeding Promotion Society were responsible for producing booklets, pamphlets, breastfeeding journal, CD, workshops and websites. Monitoring of breastfeeding rates was performed every four years and funded by the Ministry of Health within the budgets assigned to the health care system.

Conclusion

In comparison to many European Union countries, Iran showed a favorable situation in terms of breastfeeding rates and promotion of breastfeeding. Iran still needs to increase the rate of exclusive breastfeeding during the first six months.

For the full article see: <http://www.internationalbreastfeedingjournal.com/content/4/1/8>

Beheshteh Olang 1, 2, Khalil Farivar 3, Abtin Heidarzadeh 4, Birgitta Strandvik 1, 5 and Agneta Yngve 1, 6

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5. Department of Pediatrics, Institute of Clinical Sciences, Gutenberg University, Gutenberg, Sweden
6. Akershus University College, Lillestrom, Norway

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17. Life changes, breastfeeding activities change, but commitment stays the same: Rebecca Magalhães, USA

Traveling has been a big part of my life, often resulting in conversations with fellow passengers. Many times the question "what do you do?" would come up. I would respond in relation to whatever I was currently doing with breastfeeding. Most of the time, the reaction would be "Oh, my children are older!" or "Breastfeeding doesn't apply to me!" I am reminded of the varied ways I have worked or volunteered with the support and promotion of breastfeeding throughout these past years, from being an LLL group member to working as LLLI staff to supporting my daughter and daughters-in-law as they breastfed my grandchildren. I have seen that, as one's life changes, the activities we engage in for breastfeeding and mother support may change, but the commitment remains. I am reminded of these words in the Global Initiative for Mother Support (GIMS for Breastfeeding) + 5 Statement "The support needed varies from woman to woman..." and I would add that the support given varies from person to person and from time to time! How neat it would be to see ALL the things our readers are doing to support breastfeeding mothers! **If you think this would be interesting, please send a list of what you are doing to support breastfeeding mothers (3-5 items, briefly written) to the newsletter co-editors.** The list will be printed in the first issue in 2010 and posted on the WABA MSTF section. The next time someone asks "what do you do?" I will answer and then hand over the list and say "This is what is being done all over the world to promote breastfeeding and support breastfeeding women. Please take a look and pick something you can do!"

18. Reviews on Breastfeeding Older Children: Ann Sinnott, United Kingdom

Breastfeeding Older Children reveals a hidden phenomenon: thousands of children in the industrialized world are being breastfed for five, six, seven and eight years and, in some cases, longer. Are these children coerced, or are they in the driving seat? Are they damaged, or does long-term breastfeeding support the development of psychological wellbeing, as well as physical health, in both childhood and in subsequent adulthood?

Ann Sinnott, who breastfed her own child until the age of six and a half, draws on child development theory, neuroscience research and statements from hundreds of parents, to explore the reality of this taboo practice. She reveals the lack of evidence behind negative beliefs, exposes myths and prejudices, and challenges the attitudes of psychologists and medical health professionals.

Below are reviews of this book:

'An exciting, highly original and carefully researched study of prolonged breastfeeding, discussed in an international context.'
SHEILA KITZINGER, author of numerous books and renowned expert on birth and breastfeeding.

'At last, a writer who taps into the authentic voice of women who must fight to do what most mothers, since the dawn of time, took for granted. Ann Sinnott addresses the fact that children, as well as babies, need to breastfeed. She challenges the discrimination and even abuse that their mothers often endure. A stimulating, fact-filled book which will intrigue, enthrall and appall the reader'. GABRIELLE PALMER, author of 'The Politics of Breastfeeding – When Breasts Are Bad For Business'

'I welcome 'Breastfeeding Older Children. I often talk to mothers who continue to breastfeed their older children but feel under pressure from other people to stop. Ann Sinnott provides valuable support by stating the benefits of sustained breastfeeding, and quoting mothers who have written to her from different parts of the world. She also shows how people who object to sustained breastfeeding have not given her rational justifications for their opposition. This is a unique book.' NAOMI STADLEN, La Leche League Leader and author of 'What Mothers Do – Especially when it looks like nothing.'

'Thought provoking and intriguing...'. PROFESSOR MARIA MASUCCI, Director Archaeology Minor, Dept of Anthropology, Drew University, USA

The book is available at Free Association Books www.fabooks.com

More information from Ann:

I will be speaking at the online GOLD10 conference in May 2010 on sustained breastfeeding and a feature on this topic is scheduled to appear in The Guardian (United Kingdom national newspaper) on Jan. 16, 2010 and posted online. Also, the book will be translated to French.

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.

In this issue- How siblings from Paraguay promote breastfeeding:

19. Breastfeeding and the Environment: Jiva José Velázquez Panadam, Paraguay

I was selected to participate in the United Nations Environmental Programme (UNEP) TUNZA conference, a conference for children from 10-14 years of age on environment. It took place in Daejon, Korea, August 17-20, 2009. My project was *Breastfeeding Helps our Environment* and I got a scholarship to participate, with my father as my chaperon.

I gave talks on breastfeeding and the environment in my school to students of my age and older, using a powerpoint I had prepared. In my college we also organised a day of cleaning up where all the students cleaned the school and planted plants.

When we arrived in Daejon, Korea my father and I stayed at the University and the next day the activities started. We gathered every morning at the Daejon City Center where there were talks on environment. Different children presented their projects and the way their projects help the environment. I did a poster for the poster exhibition. Many were surprised that breastfeeding is linked to the environment.

In the conference all the participants made a pledge to continue working on helping our Mother Earth through different campaigns like 350.org, planting trees and creating awareness on the Copenhagen Summit.



Jiva with his grandmother, father and sister wearing T-shirts he had designed for the conference.

Jiva José Velázquez Panadam, 14 years old, Paraguay
Email: jivajose@hotmail.com

20. Breastfeeding – a Science Project at School: Lisa Gayatri Velázquez Panadam, Paraguay

At my science fair, two classmates and I presented a Project, *Breastfeeding – A Renewable Resource* which is a continuation of my project from last year. However, this time we were better prepared. We had worked during our holidays, interviewed mothers and nurses at the hospital and put up posters that we had prepared.

We knew more and had more information to give to the people. Since my aunt is a breastfeeding mother she donated some of her milk for our exhibition.

When the judges came they liked our project as they saw we were well prepared. There was however a problem with one of the judges who said that when the mother has HIV she can't breastfeed. We were at a loss with that comment but told him that the milk produces antibodies. However, he was against us and did not want to listen to our explanation. He belonged to an organization called PRONASIDA (Programa Nacional de Control de SIDA-ITS or the National Programme for the Control of AIDS – Sexually Transmitted Diseases). We were told that they don't permit HIV positive mothers to breastfeed. The other judges said we had worked very well.



*Gayatri and Juana
at their exhibition booth.*

A dentist from the school came to see our project. She told us that babies cannot be breastfed exclusively for 6 months as the babies' teeth are coming out and can bite the mother. She also said that it is not good for the babies' mouth formation. We told her that the World Health Organization recommends that babies be breastfed for 2 years and more but she told us that was wrong information. She wanted us to stop telling people to breastfeed babies for 6 months exclusively and that the milk does not contain all the nutrients that the baby needs. She said that it's only good for the young babies but then as the baby grows up, it is not good anymore. She told us that she had attended many conferences where it was said that babies must not breastfed for that long because it is not good for them.

Apart from the two negative experiences we had, many other teachers who saw our project liked it a lot. We promoted a lot of breastfeeding at our school.

We were surprised when we won 1st place at the science fair but were so happy that all our hard work paid off. Our biology teacher liked our project and is willing to help us continue with our project for our final year at school.

Lisa Gayatri Velázquez Panadam, 16 years old, Paraguay
Email: lisa08gayatri@hotmail.com

GRANDMOTHERS and GRANDFATHERS SUPPORT BREASTFEEDING

We introduce a new section that allows Grandmothers, Grandfathers or any older person to tell their stories on how they provide support for mothers and babies.

21. Mother to Mother Support from a Grandmother's Perspective: Pamela Oselka, USA

Mother to Mother support... how important that was for me when our 4 daughters were born! Most of my support came from La Leche League meetings, LLLI Conferences, and my good friends through LLL (several of whom are still friends today.) As our daughters have birthed and breastfed our 10 grandchildren, I have seen once again the importance of mother to mother support. That support has often come from one another, talking about birth, the early days of breastfeeding, and even extended breastfeeding. Many of their friends who have not had this support either did not breastfeed at all, or quit in the early weeks, and very few have made any contact with La Leche League.

Fortunately, I have been able to attend the births of 7 of our grandchildren, and have been available in the early weeks for breastfeeding support. Recently, I spent five weeks in London, where one of our daughters is now living, for the birth of their second child. Wesley Frank was born on October 22nd in London, a VBAC, delivered by midwives. (Our daughter, Karla, had checked into the possibility of having a VBAC – vaginal birth after cesarean – in Chicago, where they lived previously, and could not find a physician who would do this.) I found that birth is handled very differently in the United Kingdom, with most babies delivered by midwives. Karla chose the private system, since they have health insurance, and her 2 private midwives were wonderful. Emma and Glynnis came to her home for weekly visits during the last few weeks of her pregnancy, supporting her during her entire thirty-six hour labor and delivery, handling the initial baby check, and coming to her home daily after the birth. Karla, Eric (her husband), and Wesley came home six hours after the birth to sleep in their own bed, with 2 1/2 year old Ella awaking in the morning to meet her new baby brother. The physician even came to their home to do the first complete baby exam.

I was very grateful to be able to support Karla both in the latter weeks of pregnancy, and after the birth. (I was also able to spend a little time with her during her labor.) With bedrooms on the second floor of their apartment, advice from the midwives not to handle steps for at least the first week, and her husband's return to work, my support was essential. I was able to fix meals, keep Ella busy, walk to the neighborhood grocery and pharmacy, do laundry, and walk Ella to Nursery

School and home again. My support and help for those first few weeks were a necessity. Karla and Wesley, a very content baby (perhaps due to the fact Karla was relaxed and cared for) were together, breastfeeding went well, Ella and "Grammie" were happy to play with one another, and Karla was able to rest. And, of course, I also had some time to bond with Wesley and when they all came back to their home here (USA) 10 days after I left London, I do believe he remembered me. It will be difficult to tell them "good-bye" again in January, as they return to London, but I am very happy that I could provide much-needed mother-to-mother support in the very best way for our daughter. I was busy, exhausted by day's end, but I would not trade those days for anything – what a special opportunity this was!

Pamela Oselka, LLL Leader, mother to 4 daughters, all breastfed, and grandmother to 9 grandchildren (also all breastfed), Michigan, USA
Email: poselka1945@att.net

Breastfeeding, HIV and AIDS

22. New WHO Recommendations on Infant Feeding in the Context of HIV

The World Health Organisation (WHO) released new recommendations on treatment, prevention and infant feeding in the context of HIV, based on the latest scientific evidence.

The new recommendations call for earlier initiation of antiretroviral therapy (ART) for adults and adolescents, the delivery of more patient-friendly antiretroviral drugs (ARVs), and prolonged use of ARVs to reduce the risk of mother-to-child transmission of HIV. And, for the first time, WHO recommends that HIV-positive mothers or their infants take ARVs while breastfeeding to prevent transmission.

WHO 2009, Rapid advice: revised WHO principles and recommendations on infant feeding in the context of HIV
http://www.who.int/child_adolescent_health/documents/hiv_if_principles_recommendations_112009.pdf

WHO 2009, Rapid advice: use of antiretroviral drugs for treating pregnant women and preventing HIV Infection in infants,
http://www.who.int/hiv/pub/mtct/rapid_advice_mtct.pdf

NEWSLETTER INFORMATION

23. Check out these Websites

Mothers who breastfeed, improve their cardiac health (Spanish)
<http://espanol.news.yahoo.com/s/03122009/93/madres-dan-pecho-mejoran-salud-cardiaca.html>

New Beginnings; La Leche League International
<http://viewer.zmags.com/publication/724fa0ad#/724fa0ad/1>

The effect of maternal breast variations on neonatal weight gain in the first seven days of life: Reza Vazirinejad, Shokoofeh Darakhshan, Abbas Esmaeili and Shiva Hadadian
International Breastfeeding Journal 2009, 4:13doi:10.1186/1746-4358-4-13
<http://www.internationalbreastfeedingjournal.com/content/4/1/13>

MMPS (Mother to Mother Peer Support) Penang, Malaysia celebrated One-Minute Simultaneous Breastfeeding event on August 1, 2009.
<http://www.slide.com/r/FXjU36bz7D-d5jTMvcN0K9HKPUNqXB3m?emt=1067381811229489416>

http://www.who.int/mediacentre/news/releases/2009/world_aids_20091130/en/index.html

One Woman's Mission to save Babies by Bonnie Rochman, in Oprah Magazine is the story of a mother who lost her triplets and who donated 7,260oz of her breastmilk to a milk bank, expressed during 6 and half months.
http://www.oprah.com/article/omagazine/200903_omag_milk_bank

24. Announcements: Past and Future Events

February 1st, 2009: Deadline to submit a 250-word abstract for a poster presentation at the 5th Breastfeeding and Feminism Symposium! Please email slcoley@uncg.edu

February 2nd, 2010: A Civil Society Forum on Social Integration: Copenhagen+15: Achieving a Society for All, 10.00am - 6.00pm at the United Nations Headquarters, New York, USA, by The NGO Committee for Social Development, UN DSPD and Friedrich Ebert Foundation.
For information: csocdcivilsocietyforum2010@gmail.com

February 14th, 2010: WABA 19th anniversary

February 25th, 2010: International MotherBaby Childbirth Organization International Day, The Radisson Hotel & Suites Austin – Town Lake | Austin, Texas www.motherfriendly.org/registration.php

March 20th, 2010: *Breastfeeding and Feminism 2010, Informing Public Health Approaches*, University of North Carolina (UNC) Gillings School of Global Public Health. Seeks to identify and analyze how public health approaches to promoting breastfeeding might be advised by feminist insights to develop comprehensive, politically knowledgeable, and culturally sensitive interventions. University of North Carolina at Greensboro, Greensboro North Carolina, USA
Registration form is also available at www.uncg.edu/hhp/cwhw
http://www.sph.unc.edu/images/stories/centers_institutes/CIYFCFC/Documents/Breastfeeding_and_Feminism_2010_announcement.pdf

March 20th-21st, 2010: The Academy of Breastfeeding Medicine - ABM's 3rd European Conference for Physicians, Copernicus University of Torun, Poland. For registration and further information: www.bfmed.org; www.mlekomamy.pl/abmconference
Email: abmconference@mlekomamy.pl

April 12nd-13th, 2010: *100 Years of Milk Banking: Looking Back and Reaching Forward*, Cambridge, Massachusetts, USA, Human Milk Banking Association of North America (HMBANA) – www.hmbana.org

September 30th - October 3rd, 2010: *Uniting for the Future of Birth*, Milwaukee, Wisconsin, USA. Celebrate the 50 year anniversary of Lamaze International and ICEA in 2010. For more information, go to www.futureofbirthconference.org

25. Readers Share

When Pamela was thanked for writing an article for the E-newsletter, we received this:

Rebecca

No, the pleasure is entirely mine – and thank YOU for all the work you lovely ladies both do to help keep us mother-to-mother supporters around the world informed about each others' activities and successes! Often it feels as if each of us is only working alone. Consequently it's inspirational and very encouraging to read what others are doing and to feel part of a whole network :-)

Pamela Morrison, UK

Hello, my name is María Eugenia Pugnaroni. I am a motivation teacher (maestra estimuladora) and I live in La Plata, a province of Buenos Aires, Argentina. When reading the book "La Alegría de Amamantar" (The Joy of Breastfeeding) by María Eugenia Carvajal, I found your web page, entered it and found its contents very interesting. The Mother Support Task Force newsletter will be a great help in my daily work.

26. 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 or link for readers to access the full report or article or send the full report/article and the MSTF will send it to WABA to place on the WABA website.

The deadline for submitting articles for consideration for the **January – April 2010** issue is **February 28, 2010**.

If you submitted an article and it didn't appear in this issue, it is being reserved for a future issue. **Volume 8, Number 1**, will be sent on **March 30 2010**.

27. 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 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 and Pili Peña vapena@pla.net.py

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 6th full year. The first 8 issues of the newsletter were published in 3 languages: English, Spanish and French. The Portuguese version of the newsletter first 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.

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, 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
2. Information & queries: info@waba.org.my
3. World Breastfeeding Week: wbw@waba.org.my

Website: www.waba.org.my

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

“ There are no language barriers when you are smiling ”

– Allen Klein