

It takes a village to breastfeed a child

Around 1940, a poster promoting breastfeeding was issued by the United States Health Bureau. On the poster is an illustration of a Caucasian woman nursing her newborn child. In bold letters, the poster reads “Nurse the Baby” followed by “Your protection against trouble.” During this time in U.S. breastfeeding history, parents were increasingly feeding their newborns homemade concoctions, and commercially made formula was becoming more available. With the threat of decreasing breastfeeding rates, the U.S. Health Bureau embarked on a campaign to promote breastfeeding.

Now, fast-forward to an ad campaign coordinated by the La Leche League in 2014. This campaign includes a poster series showing young mothers nursing their newborn children in public bathroom stalls. The headings on the posters say “Bon Appetit,” “Table for Two” and “Private Dining.” This campaign reflects the current social challenges that nursing mothers face when feeding their children outside of their home.



These two posters, separated by 70 years, show us how far we have come to promote breastfeeding as well as how much farther we need to go to support breastfeeding mothers and their children.

According to the American Academy of Pediatrics, breastfeeding provides the nutrients a newborn needs for healthy development. Since breast milk also contains robust disease fighting antibodies, breastfeeding also reduces the risk of many infectious diseases.

Recent studies suggest that breastfed babies are at lower risk for obesity later in life. For the mother, breastfeeding decreases risks for postpartum complications and increases the ability to return to pre-pregnancy weight. Other benefits of breastfeeding include less expense than formula feeding and less waste in the environment from bottle supplies. The AAP recommends that babies are fed only breast milk for the first 6 months of life.

While the benefits of breastfeeding for mothers and children are well known, the struggle to create supportive communities still exists. In a 2011 report, the U.S. Surgeon General describes many obstacles that breastfeeding mothers experience. Social norms in the U.S. view bottle feeding as the “normal way to feed infants.” Family members and friends who have negative views of breastfeeding can deter mothers from nursing. With only 43 percent (less than half) of Americans believing that women should be able to breastfeed in public, women feel embarrassed about nursing their babies outside of the home. Worksites, schools, daycares and other institutions that do not proactively promote breastfeeding also create barriers.

What can a community do to promote and support breastfeeding?

- Daycares and child care centers could provide families with breastfeeding information and refer families to lactation consultants in their area. They can create breastfeeding spaces in their facilities for mothers to nurse and designated space in their refrigerators to store expressed milk.

- Worksites could develop and enforce policies that create an environment conducive to

breastfeeding. At a minimum, the policy should include giving mothers time to breastfeed and express milk as well as a clean and private place for doing so.

- Businesses such as eateries could welcome nursing mothers with signs that state they are welcome to breastfeed in their establishment. See UNICEF for an example: unicef.org.uk/BabyFriendly/Resources/Resources-for-parents/Welcome-to-breastfeed-here-posters.

- Health care providers can talk with their patients about any physical, emotional and social challenges they are facing. In addition, health care providers could counsel family members who are not supportive of breastfeeding, and provide important information and engage in discussion to change attitudes.

- State and local health departments could create breastfeeding friendly criteria for institutions, workplaces, businesses and communities, and recognize their commitment to breastfeeding. See Minnesota as an example: health.state.mn.us/divs/oshii/bf/BFFworkplace.html.

- Municipalities could designate municipal buildings, recreation sites, parks, playgrounds and town- or city-sponsored events as breastfeeding friendly.

- Individuals could become more aware of their own attitudes, perspectives and opinions about breastfeeding. Those feelings that are negative towards breastfeeding could be discussed with their health care provider. People could identify one way they could be supportive of breastfeeding. It could be as simple as not glaring at a mom breastfeeding in public or more significant like advocating for a breastfeeding policy at

their worksite.

I became a mother over 18 years ago with the birth of my oldest daughter. It was an unexpected pregnancy at a young age. I was just learning how to eat a healthy diet for myself – never mind being responsible for the health of a newborn. It took more than a few pamphlets and books about the benefits of breastfeeding to encourage me to actually breastfeed my new child. It took a partner and extended social support of family and friends to also believe in the benefits of breastfeeding and to help me with household chores like laundry to allow me the time to breastfeed in those first few weeks.

It took a daycare provider who knew how to handle expressed milk. It took a library that had a private nook where moms could go to breastfeed in private. I needed all that support particularly for the times when I was shamed for breastfeeding. Once, I was not served at a restaurant while I was nursing. At my previous employment, I had to resort to the room with computer servers to use my breast pump. Two years later, I nursed my second newborn because of the support I had received with my first child and because of all the positive changes that were occurring around me. I no longer pumped with computer servers and had a designated space.

Breastfeeding is not the sole responsibility of the mother. As a community, we have the collective responsibility to foster a healthy life for our mothers and children.

— Jennifer Gunderman, M.P.H., is assistant lecturer School of Community and Population Health, University of New England.

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