

Mother Support Task Force (MS TF)

World Alliance for Breastfeeding Action

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Breast Milk: Always present, from pregnancy, to birth and beyond"

IN THIS ISSUE

MOTHER SUPPORT TASK FORCE COMMENTS AND INFORMATION

1. Memories from 40 Years Ago are Valid Today!: Rebecca Magalhães, Coordinator
2. MS TF Update: Rebecca Magalhães, Coordinator

MOTHER SUPPORT FROM DIFFERENT SOURCES

- 3.The Birth of Sonia's Baby: Maria (Pili) Peña, Paraguay

MOTHER SUPPORT - BREASTFEEDING MOTHERS RELATE THEIR EXPERIENCES

4. Paulina is Born—A Birth to be Remembered! :As narrated by Cintia and Alberto to Pili Peña, Paraguay

FATHER SUPPORT

5. GIFS Update from the Oct 2005 Meeting in Penang, Malaysia:
WABA-IBFAN Africa Gender Training: Satnam Kaur, Malaysia
6. A Man's World? – Reflections on Gender: Arturo Arteaga Villarroel, Mexico
7. Personal Reflections on Parenting and Childbirth in the USA: Bill Devin, USA
8. Campaign to Value Fatherhood in Brazil: Dr. Marcus Renato, Brazil

NEWS FROM THE BREASTFEEDING WORLD

9. Meeting Mary Paton - Australian Breastfeeding Guru: Lee King, Australia

10. Report of the AMMEHJELPEN National Meeting: Lise Overjordet, Norway
11. The Mother Kangaroo Program, an Alternative Intervention: Hilda Botero, Colombia
12. RELACAHUPAN Participates in the II International Congress on the Humanization of Birth and Labour, Río de Janeiro, Brazil, Nov. 30 – Dec. 3, 2005: Gilda Vera, Uruguay
13. Recent Activities - The Amigas do Peito, Brazil: Maria Lucia, Brazil
-Participation in the II International Congress on Humanization of Labor and Birth, Brazil, November 2005.
- Coordination of the Participation of Breastfeeding Groups in the Second World Social Forum, Venezuela, January 2006.
14. LatchOn - A Website that Draws Attention to Breastfeeding
15. Inspirational Stories for Mothers who Work and Breastfeed.
16. International Breastfeeding Workshop

NEWSLETTER INFORMATION

17. Check out these Websites
18. Announcements
19. Our Readers Share
20. Submission of Articles and Next Issue
21. How to Subscribe/ Unsubscribe

MOTHER SUPPORT TASK FORCE COMMENTS AND INFORMATION

1. Memories from 40 Years Ago are Valid Today!: Rebecca Magalhães, Coordinator

As I was helping the newsletter editors in reading and reviewing the articles submitted for this issue, I noticed that they were almost all about childbirth and that took me back to the births of my 5 children. Of course, that was a long time ago and this is a different world, but there are two things that I believe have stayed constant. One is the fact that each childbirth experience is unique, just as each child is unique. My childbirth experiences varied a great deal – from a breech birth that lasted many hours to a labor and birth that lasted only 2 hours! Varying childbirth experiences are still the norm today! The other similarity is the desire of women who have given birth to talk about it! I remember feeling the need to share my story with other women and having other women tell me about their labor and delivery. In fact, in the breastfeeding and working book that was just published by LLLI (*Hirkani's Daughters – Women Who Scale Modern Mountains to Combine Breastfeeding and Working*), in almost all the stories that were submitted, the women began their story by recounting the birth of their child or children, before going on to write about their breastfeeding and working experience. Just as in breastfeeding, sharing childbirth stories answers the need mothers have for mother support. Childbirth can be a defining moment in a woman's life and each woman's experience should be valued, respected.....and shared!

Rebecca Magalhães
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2. MS TF Update: Rebecca Magalhães, Coordinator

I was honored to attend the celebration for the 15th Anniversary of the Innocenti Declaration and am happy to report that mother support had a clear presence at this high level international event, "**1990-2005 CELEBRATING THE INNOCENTI DECLARATION On the Protection, Promotion and Support of Breastfeeding -- Past Achievements, Present Challenges, and the Way Forward for Infant and Young Child Feeding**" held in Florence Italy, at the Convitto della Calza, 21 – 22 November 2005. Mother Support was present through the representatives of

mother support organizations who attended and had tables of information for display during the two days. Mother support was also represented in presentations by speakers and comments from the audience that focused on mother support. Felicity Savage-King, Centre for International Child Health, England delivered an excellent presentation "*International Perspective on the promotion and implementation of the Innocenti Declaration*" in which she noted that peer support is equal in importance to health professional support and that the combination of the two is particularly strong. In a video that featured Ann Veneman, Executive Director, UNICEF, Ms. Veneman commented that breastfeeding is a child's first immunization and women should be educated and empowered. Most importantly, Elisabet Helsing/Norway, Founder of Ammehjelpen and very experienced in mother support, commented from the audience: *Mothers are able and willing to be involved in their own health and that of their babies/children – those know best where the shoe hurts who are wearing the shoes.*

Please access the Innocenti website < <http://innocenti15.net/>> for information on the event, photos, program, presentations, list of participants and updates on the Innocenti Declaration and Publication.

If you are interested in being a country contact for GIMS and the MS TF, please email Rebecca RMagalhaes@lli.org, Prashant psgangal@hotmail.com or Nair cepren@amauta.rcp.net.pe

MOTHER SUPPORT FROM DIFFERENT SOURCES

3. The Birth of Sonia's Baby: Maria (Pili) Peña, Paraguay

On December 9th. in the morning as we have done every Friday since the year started, we, members of Parhupar went to Pelopincho to give classes for the project "School for mothers and future mothers of Pelopincho". Pelopincho is a marginal neighbourhood on the coastal fringe of Asunción, Paraguay. Pelopincho is known for its high crime rates and for the lack of policemen in case of danger. Nelly, a midwife, was also present at the classes, which was good because one of the pregnant women in the neighborhood, Sonia, arrived at the classes saying that her labor had started.

Nelly was asked if she could help with the birth and she agreed. So after going back home after the classes, Nelly and I returned to Pelopincho about 3:00 PM that same day. We stopped on the way to buy 2 sterile gloves and a clamp for the baby's cord. Nelly brought along a box of sterile instruments and gauze.

Upon arrival at the passage that goes around the consultation room, a small room that is used once a week by a volunteer paediatrician, we were met by Kelly, the neighbourhood committee coordinator, Sonia, and some of her friends. Sonia was feeling her contractions about every 5 minutes - sometimes strong, other times slow, not very effective yet. She was strolling around the community salon, talking to her friends.

Then around 5:00 PM, Sonia entered the consultation room, followed by Nelly and me and asked for a review of how far along she was in labor. She was about 6 cm dilated but the baby's head was still high with the bag intact so we did not have to hurry. The consultation room was about 4 metres by 3metres (10 feet by 13 feet) with a private bathroom, very simple with white tiles and a very small shower. The room also had a small desk, a cot for medical exams and something resembling another cot.

Time stops in moments like this. The hours passed and did not seem to matter nor exist. In reality, we thought we might have to stay the night there. Pelopincho is not a safe place and we had never been there after dark. But we relaxed and asked Sonia if she had eaten anything. We asked the friendly people around us to bring something to eat and drink for Sonia.

At around 7:00 PM, Sonia was getting tired and I believe Nelly and I were too. Soon, though, Sonia felt the bag break, wetting the sheets below her and things began happening. We switched

off the lights and left only the lights of the bathroom, so that we were all in semidarkness. I sat on one side on the floor and Nelly and Elisa, her friend did the same. Then later Sonia looked around her as if looking for something. We asked her what she was looking for and she said that she could not do this anymore. Then she asked "Doctor*, it will be born, right?" We told her, "You can do it Sonia, you can, a little bit more"

And that was how finally with the next contraction we saw, although still high, a little bit of hair. With the next 2 contractions, intense but short ones, the head was there, crowning, very dark and full of hair. The mother asked, "Is it OK?" And of course, it was just fine and we put the baby on her breast. And then Nelly asked her, "You saw? It is a boy, look at him" and showed him to Sonia.

We left Sonia at around 9:30 PM, an hour after the child was born, with Elisa, Kelly and the proud father staying there with Sonia. We left with instructions that the child breastfeed often and to advise us if anything else was needed and not to give anything else but the breast to the baby.

As we walked up to the car, all the people of the neighbourhood came out of their homes very happy and thanking us for sharing the hope of this beautiful birth.

Maria (Pili) Peña, mother to 5 breastfed children, ages 16, 14, 10, 5, 3; LLL Leader Paraguay, General Coordinator of Parhupar (Parto Humanizado del Paraguay).
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*Pili explains that: *in general Sonia and people like her from low income communities, often call a midwife, "doctor", making no distinction about status of importance. In the upper classes however, women only have their babies with doctors and midwives are seen as the doctor's helper.*

MOTHER SUPPORT - BREASTFEEDING MOTHERS RELATE THEIR EXPERIENCES

4. Paulina is Born – A Birth to be Remembered!: As narrated by Cintia and Alberto to Pili Peña, Paraguay

In May 2005, Cintia and Alberto discovered that they were expecting a new baby. Although very happy with the news, they were also worried. Cintia did not feel as young as before and was worried about the high blood pressure that she had experienced during her earlier pregnancies. She also remembered how quickly her last birth was, with Ana Laura arriving in the back seat of her father's car.

Thus during the months of pregnancy the major worry of Cintia and Alberto was to try to prevent anything negative that could happen and to try to think of options where both mother and baby would feel comfortable and secure. Cintia felt that a home delivery would be the safest and most loving to receive her child, for fear of not being able to arrive soon enough at a maternity facility. Alberto, on the other hand, thought only of a place which would have the resources to give medical attention should his child need them. Finally, and after checking out different hospitals, they decided to do their best to arrive at a hospital room as soon as labour started. And instead of a traditional delivery room, the birth would occur in the room itself.

On December 31st. 2005, Cintia felt a little strange but as she had completed the nine months, she knew that the baby could come at any moment. That night, without experiencing too much of a discomfort, she and her family carried on a beautiful celebration of the holiday. Later after midnight and the traditional toasts, while Cintia washed the dishes and cleared the table, she realized that the contractions were coming close together although she did not feel any pain.

They called the midwife around 1.00 am (Jan. 1, 2006) and by intuition more than through conviction, they told her to meet them at the hospital. They also called the hospital to make sure that the room was ready. And like a newly wed couple escaping from the wedding feast, at about 1:10 in the morning, Cintia and Alberto left the end of year dinner quickly with a couple of bags and were on their way to the hospital. The other children were left behind with grandparents. On the way Cintia realized that the contractions were in fact every 2 to 3 minutes and were lasting for about a minute. She started to feel the head of the baby. But as each second counted and since they were already so close to the hospital, she decided to trust that Alberto would arrive at the hospital on time.

As they arrived at the parking lot and got to the elevator, Cintia knew that the birth was close. However, she felt sure that she could arrive and make herself comfortable enough to deliver the baby in the tranquillity of the room.

However, as the elevator moved she felt more contractions and so from the elevator they went directly to the room and directly into the bathroom. It was there in a semi squatting position supporting herself in Alberto's arms, that Cintia gave birth to Paulina at dawn, 1: 25am, only 20 minutes after they had left the house. Alberto, in a firm voice, took charge and told the nurses that his wife knew what she was doing. The nurses received the baby, Paulina, and placed her in Cintia's arms. Together they walked to the bed where Alberto helped them to be comfortable and placed Paulina at her mother's breast.

Minutes later, the midwife, the doctor and the doctors on duty at the hospital arrived and did not hide their surprise and discomfort at this quick birth.

Yesterday, on January 20th, I saw Paulina, who is a beautiful baby, enjoying her mother fulltime and her father, also, who is now on vacation. Her way of arriving into this world was a surprise to her parents but it could not have happened any other way. Perhaps the way our children arrive in this world teach us that despite all the plans that we can make for them, it is the children who finally are the owners of their own destiny.

Maria(Pili) Peña, mother to 5 breastfed children, ages 16, 14, 10, 5, 3; LLL Leader Paraguay, General Coordinator of Parhupar (Parto Humanizado del Paraguay).

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Note: *Cintia Leon de Martinez is a La Leche League leader, Paraguay, wife to Alberto and mother to Alvaro, 9(born cesarean birth), Ignacios, 6 (natural), Ana Laura, 3 and Paulina, the baby*

FATHER SUPPORT

5. GIFS Update from the Oct 2005 Meeting in Penang, Malaysia: WABA-IBFAN Africa Gender Training: Satnam Kaur, Malaysia

A Gender training workshop was organised in Penang for the IBFAN Africa group from 7 October to 9 October, 2005. There were about 24 participants. A GIFS presentation was done during this training by Ray Maseko, GIFS Co-coordinator to introduce the GIFS programme to the participants.

A separate GIFS meeting was held one evening for those interested in GIFS activities. All the men at the training participated. We had male participants from Kenya, Mozambique, Sudan, Tanzania, Zambia, Zimbabwe and Swaziland.

Among the needs noted in the meeting was the need to organize a regional GIFS meeting in Africa as there are a number of Father Support and Men's groups in this region who are working actively on various issues. Among the Men's groups are also some Youth groups which the GIFS members identified as a good target to advocate Infant and Young Child Feeding (IYCF) issues.

The participants also voiced the desire of getting connected to other Father Support groups worldwide and to share experiences. They were encouraged to send in their experiences to be included in the MSTF e-newsletter. In addition, there was interest expressed in documenting good/useful case stories of activities of existing men's groups following the format of the Gender Case Study book.

The participants were informed of the GIFS seedgrant programme and the application process.

The meeting ended on a very positive note as the members agreed to be in touch and send in articles for the newsletter.

Satnam Kaur, Administration Coordinator, WABA

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The Global Initiative for Father Support (GIFS) was launched at the Global Forum II, Arusha Tanzania, 2002. Fathers of breastfeeding children need to be supported too as our stories reveal. For more information about GIFS, the Father Support(FS) workshop, or to find out how you can be involved, please contact Ray Maseko rmaseko@realnet.co.sz; Arun Kumar Thakur arun_thakur@rediffmail.com or go to <http://www.waba.org.my/fathers/index.html>

6. A Man's World? – Reflections on Gender: Arturo Arteaga Villarroel, Mexico

Even nowadays, discussing whether this is a man's world or how human beings should have a proper gender perspective, many times these discussions have a less than pleasant result. Even worse, though, is when the issue is avoided altogether.

Thinking about why this happens, many and very diverse explanations arise, but it seems to me that it would be helpful to think about this with perspective and not think about men and women as if they were different kinds or categories of human beings. We could concentrate our focus in the fact that neither can exist without the other.

To talk about "women this" or "men that" takes personality away from those men or women, and gives room to a kind of thinking that treats women and men as two separate, different and unrelated subjects. I rather like to think about a human being as a mother, a father, a grandfather, a son, an aunt, a friend, etc., etc. Now we are not talking about women or men, but about my mom, your dad, our friend, my neighbors' granny, and so on and then it's easy to seek the benefit for everybody regardless of their genital equipment.

This wouldn't be the ultimate goal nor the ideal to reach, which would be that everybody would realize that we are all one and seek the benefit for everyone, but in the meantime, I think it would be a great advance in that direction to stop thinking about men and women as separate "things".

There is one last reflection that might give us the idea of how related men and women really are: As long as technology or evolution won't change things, women are not only one half of the human beings, but also the mother of both halves, and men are not only the other half of the human beings, but also the father of both halves.

Greetings
Arturo.

Arturo Arteaga Villarroel, married for 17 years, Father to 3 breastfed boys: Jesús (13) Alberto(11) and Ricardo(9), Runs a monthly parents support group meeting and is present at the monthly LLL Meeting where whole families are welcome at his home in Mexico City. Computer Science Engineer with a post degree in Neuro Linguistic Programming and a partial master in Planning and Systems.

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7. Personal Reflections on Parenting and Childbirth in the USA: Bill Devin, USA

Quite a number of parents in the USA only hold their babies when the baby is very distressed and crying, and then they go through a series of attempts to calm the baby so that they can put her down as soon as possible.

Though they may not realize it, many mothers and fathers have lost confidence in their natural parenting abilities. The challenge is to share with them that there are parenting methods that can be more enjoyable for the parent and more beneficial for the baby. Those of us who work with and support mothers, fathers and babies have experienced how a person's attitude can have a profound effect on his/her life. When an attitude change happens, there is complete transformation.

This change in attitude can be encouraged by befriending others and sharing with them from our own education, experience and hopefully, wisdom.

First time moms who are near their due date and apprehensive about the whole "scary, dangerous, painful", birthing process can be told about positive birthing experiences. We can help the soon-to-be-mommy by pointing out that there a "million" beautiful birthing experiences.

In a cultural anthropology class my wife, Dee-Dee, and I took, the Professor had spent some time living with the Bedouins in the near East. The Bedouin are small nomadic tribes who continually follow their herds from sparse pasture to sparse pasture. Even when a mom is near delivery the tribe has no choice but to continue to follow the herd. While mom is in labor and dilating, she continues to walk along, perhaps holding on to a strap hanging from a camel, pausing as needed. Once fully dilated she drops back alone, digs a hole in the sand, squats over it and delivers her baby. She puts it to breast, supports it with a sling or cloth, and jogs to catch up with the tribe. A twenty-minute process!

Of course, in western civilizations this would be considered drastic; but it does show us that the human species is capable of much more than we realize.

My wife and I remember fondly an anxious pregnant young woman who had come to our house where we had our home business. We shared the Bedouin story with her to calm her anxiety, and included the fact that Dee-Dee had birthed all four of our children naturally. Our first two births went smoothly, and both babies were birthed naturally, breastfed and carried in a sling continually. When they were sleeping, we would put them down and "take a break". Hana Lei, our third child, had a surprise for us. She was frank breech. We spent many hours on the slant board doing the exercises recommended to cause her to turn. No such luck. At week 36, our Obstetrician/ Gynecologist (OB/Gyn) attempted to turn her with external pressure, but her little bottom was already engaged in the pelvis.

As an OB/Gyn dedicated to doing what is best for baby and family regardless of convenience to himself, he gave us materials to read. We read that in the countries with the lowest infant mortality rate, breech babies were birthed naturally unless there was an obvious and significant problem. Our doctor was trained in breech deliveries, and we had medical statistics to support us. Yes, the labor was harder, but Hana Lei was born with all the advantages of a natural delivery. For Josiah, the youngest, our midwife delivered him headfirst in our home in an easy hour long labor.

In conclusion, my wife and I feel that we want to share with other mothers and fathers that the human being is capable of birthing babies with minimal intervention, breastfeeding for a good long time, and raising our babies in close physical contact. Encouraging more parents to become better attached to their babies will facilitate babies growing into adults who are positive contributors in our world.

Happy Nurturing. You must be what you want your children to become.

Bill and Dee-Dee Devin, parents of Elsa, Aubrey, Hana Lei and Josiah (breastfed 10 years total),
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8. Campaign to Value Fatherhood in Brazil: Dr. Marcus Renato, Brazil

The Campaign to Value Fatherhood has begun its 3rd. year and its objective is to publicize the importance of the father's role, his rights and responsibilities and to mobilize society to work on the National Congress to approve the law that regulates Shared Guardianship.

In 2003, the campaign's theme was: "**FATHER, GIVE YOUR BREAST TO YOUR CHILD**" , to emphasize the importance of daily activities and this was celebrated with a party in honor of the fathers in the beach of Leblon(in Rio de Janeiro) which is a place where mothers and fathers take their babies for a walk.

In 2004, the theme that was used was "**FOR THE RIGHTS OF FATHERHOOD**", and with the support of the media (MAIS VOCÊ/TV GLOBO, SEM CENSURA/TVE, Revista do J. O Globo and other resources), the media splash reached an enormous number of persons and transformed the Campaign into a significant event in the city of Rio de Janeiro. The actress and actor, Cissa Guimarães and Eduardo Lago, who, at that time, were a separated couple in the soap opera "Malhação" on TV Globo, were the godparents of the Campaign.

In 2005, the slogan adopted by the Campaign was "**FATHER: YOU CAN ENTER!**" We planned to reach an even greater number of people, carrying out a number of activities including talks, debates, interviews, photo exhibitions, toys and games involving fathers and children. Publicity included distribution of posters and pamphlets explaining the campaign. As in previous years, lawyers and health professionals participated by explaining the initiative Health Unit, THE FATHER'S PARTNER, SCHOOL, FATHER'S FRIEND, PROJECT ON SHARED GUARDIANSHIP and many other topics that are of interest to modern fathers who participate more actively in the lives of their children.

In order to grow in a healthy, emotional way, feeling protected and loved, all children need not only a mother but also a father. When the marriage fails, it is very important to the bio-psychosocial of the child that she does not lose a good relationship with both parental figures. Thankfully each day the number of fathers who are participating in taking care of their children with love, affection and education is increasing.

Reinforcing initiatives that broaden and strengthen this model is the responsibility of every human being and an obligation of a government and society that desires a better world, one with ethics and citizen participation.

For the year 2006 the chosen slogan is: **Fatherhood: Enjoy it!**

For further information on this campaign please contact: Dr. Marcus Renato de Carvalho, father of Clara and Sophie, Professor at UFRJ, editor of the website: www.aleitamento.com
E-mail: marcus@aleitamento.com and vapena@pla.net.py

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

9. Meeting Mary Paton - Australian Breastfeeding Guru: Lee King, Australia

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 one of these persons- Mary Paton , Australia.

In 1964, Mary Paton had a vision for mothers to receive mother to mother help with breastfeeding (similar to an extended family). This is because when her babies were born she received very little encouragement to breastfeed and found no written material on breastfeeding to help her.

With this vision in mind, Mary Paton and five of her friends founded the Nursing Mothers of Australia (now known as the Australian Breastfeeding Association). Since then, the organization has spread across the nation of Australia and has over 10, 000 members, 1400 volunteers and over 300 local groups.

Mary was the inaugural President for 5 years and continued on the executive board for another 10 years in many and various roles. In 1976, she became an honorary member and honorary adviser, roles that continue today. She planned and implemented the structure of NMAA (now ABA) - and instilled a strong code of ethics within that structure - the training system for association personnel, and devised many ways - including the sale of literature and mothering aids - to raise funds to support the work of the organization.

Mary received an Order of Australia Medal (OAM) in 1978, which has been upgraded, to an (AM), Australia Day 2006. In 2004, she was named one of Australia's Living National Treasures. In 1993, Family Circle Magazine announced her as their "Woman of the Year". In 1986, Mary was honoured by the association in having a perpetual award for excellence in breastfeeding research named after her. In 1981, Mary received an Advance Australia Award.

From Mary's vision the Australian Breastfeeding Association has grown and is acknowledged as Australia's leading authority on breastfeeding. Apart from providing skilled mother to mother support to women and their families, the association has a secretariat in Melbourne, publishes an informative magazine for its members, a refereed professional journal (*Breastfeeding Review*), provides ongoing in-service to its counsellors who work in a voluntary capacity, runs seminars and international conferences for health professionals, publishes a wide range of literature for both mothers and health professionals, maintains a Lactation Resource Centre that has a library of over 185,000 journal articles and reference books, videos and case histories and operates a seven day a week Breastfeeding Helpline.

Mary is married to her husband Tim of 45 years and has 3 children and 3 grandchildren. Mary trained as an occupational therapist before motherhood.

Mary was and is truly a woman of vision and a breastfeeding guru!

Submitted by: Mrs. Lee King, Helensburgh, NSW; Australia, NMAA/ABA counsellor for 21 years, founder of a local group, (past) NSW Branch President, Working Group member, Convenor for the Community Education Unit and Director. Current ABA Director for Publicity Relations. *Lee King enjoys the public relations area , but still gets the most satisfaction from being on the Helpline.*

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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.

10. Report of the AMMEHJELPEN* National Meeting: Lise Overjordet, Norway

*AMMEHJELPEN is a Norwegian Mother Support organization

My name is Lise, I am 32 years old and I am Norwegian. I live with my partner Stein-Rune and our 13 month old son, Kristian. Kristian started complementary food when he was around 6 months old. Until then he was breastfed without receiving anything else. He is still breastfeeding in the morning before I go to work. Breastfeeding to me is a joy. I know that I am giving him the best possible nutrition in his early months and this gives me a sense of peace.

I lived in Conception, Paraguay for 8 months in 2000 and traveled for 4 months to Bolivia, Argentina, Peru, Uruguay, Chile and Brazil. All these countries are beautiful with very kind and sincere people.

I would like to describe how we organized the National Meeting for the AMMEHJELPEN support groups of mothers. At the National Meeting, we had a General Board and an Administrative Council. The National Meeting makes it possible for all the local groups to meet, to get updated professionally and to inspire each other. But above all, it helps the local groups to establish contacts and make new friends. Following the National Meeting, everyone returns freshly inspired to continue with their local work.

In October 2005 we had the National Meeting in Ålesund, a city on the east coast of Norway. The local AMMEHJELPEN group organized the meeting. They made a formidable effort to keep us happy. We stayed at a hostel due to economic reasons, all in a very simple manner, but very good.

The professional program was very interesting with good conference speakers and a dedicated public in attendance. On Friday, the first day, we had an open seminar for all the participants, with special invitations to the nurses who are in contact with pregnant women and breastfeeding mothers.

One of the conference speakers was Tine Greve, a breastfeeding specialist and a professional midwife. She was responsible for establishing the first breastfeeding section*which is a clinic dedicated to helping mothers overcome breastfeeding problems, in Aker Sykehus Hospital. Now she is working with the National Center for Breastfeeding.

The contents of the lessons were extensive which cannot be covered in this article. On Saturday we worked in groups discussing real situations. In the afternoon we had the General Board elections. At night we were served a fantastic banquet, featuring Bacalao which is a local specialty of Ålesund.

This is how we organized the national meeting in Norway. I would be interested in knowing how a national meeting like the one I just described is done in South America.

Lise Overjordet, Ammehjelpen, Biri, Noruega
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Editors note: We learnt from Lise and Elin Sebjørnsen of AMMEHJELPEN, Norway that there are such clinics in Oslo, Bergen and in Trondheim, the third largest city in Norway. Mothers who face difficulties with breastfeeding can be assured of doctors and health personnel who are dedicated exclusively to breastfeeding problems and who can help mothers overcome these troubles.

11. The Mother Kangaroo Program, an Alternative Intervention: Hilda Botero, Colombia

Limited equipment and space in Colombia, a developing country, gave rise to an initiative by Dr. Edgar Rey Sanabria in 1978. Dr. Sanabria, inspired by the marsupials, started to utilize mothers as living incubators just like mother kangaroos. The mother in the hospital places her baby skin to skin between her breasts for most of the time and the baby is breastfed whenever possible. Thus the kangaroo method became a method for the care of premature babies. Currently, the Kangaroo Ambulatory Program is being carried out in the Kangaroo house of the Children's Clinic

in Bogotá, and in various clinics in Colombia. This method has been expanded to the rest of the world and many countries use this method successfully.

The objectives of the method are to use the mother instead of an incubator and avoid prolonged separation between mother and baby. The premature baby in the Ambulatory Kangaroo Mother Care Program should be kept on the chest of the mother or of any adult exactly in the way of the kangaroo, until it completes its gestational age. To be carried in the Kangaroo method, a premature baby needs to have been born with less than 2000 grams and/or be born at less than 37 weeks of the pregnancy.

When the mother is willing and has the basic abilities to be successful in the program, mother and baby enter into the Ambulatory Kangaroo Program after an orientation period during which the mother receives the necessary instructions for the experience.

Breastfeeding is an indispensable part of this experience and the one that makes the mothers the most anxious. It is a specific necessity because of the needs of the premature baby. The baby should be awakened to nurse every hour or every hour and a half and even more frequently, the smaller the baby.

The Kangaroo Mother Care Program through the closeness of the mother's body and through breastfeeding, proposes to offer a support environment to replace the holding capacity of the mother and at the same time, allow the mother to complete the work of gestation.

In the kangaroo house, there has been experiences of working with groups of mothers with premature babies, beginning with them starting the kangaroo method. It is an opportunity to understand better and to be closer to these basic and primitive experiences and that each day surprises us with its complexity.

The good relationship of the couple during pregnancy, and in this case in particular, their experience with a premature baby in kangaroo care, provides women with security and a strong support structure. The father is like the kangaroo uterus that the mother needs to be able to be the "container" for the baby.

For a complete copy of this article which was presented at the V International Dialogue of the Observation of Babies in Río de Janeiro, please write to:

Hilda Botero E-mail: hildabotero@hotmail.com

Hilda Botero, is a psychologist psychoanalyst. She is an Assessor in emotional care for kangaroo mothers and babies; she works with health teams; is an Assessor for emotional matters in the Neonatal Intensive Care Units. Postgraduate Professor at the University of Javeriana, Bogotá, Colombia. Director of the Psychotherapy Services Foundation. Educated in the Observation of Babies.

12. RELACAHUPAN Participates in the II International Congress On the Humanization of Birth and Labour, Río de Janeiro, Brazil, Nov. 30 – Dec. 3, 2005: Gilda Vera, Uruguay

We would like to present the progress that RELACAHUPAN has had in the past 5 years. RELACAHUPAN, The Latin American and the Caribbean Network for the Humanization of Birth and Labour (La Red Latinoamericana y del Caribe para la Humanización del Parto y el Nacimiento) is comprised of national networks, groups and individuals who proposed to improve the conditions of labour and birth following the Congress on "Humanization of Labour and Birth" in Ceará, Brazil, in November 2000.

Through the network, groups and individuals exchange information and interact as part of a continental campaign for the humanization of birth. Twenty-two countries actively participate in

the network which has a data base on the various actions undertaken by member countries of the network.

From the beginning of RELACAHUPAN it was agreed that there was an urgent need to strengthen initiatives with respect to the Humanization of Birth and Delivery and to improve services and health programs that address the whole maternity cycle.

We want to continue going forward with the commitment of organizing ourselves and acting in favor of maternal services that are simple and are carried out according to the necessities of mothers and their families: physically, mentally, spiritually, culturally and socially.

From the beginning, we also agreed not to question obstetrical methods, but instead the criteria in which they are being applied. We do not want to eliminate technology but to return it to its proper place and appropriateness, so that it applies only to what is essential. We do not want to return to the past but to approach the world of birth and maternity with respect.

Our proposition is to promote normality and physiology and to not resort to manipulation nor to unnecessary interventions. We want the pregnant woman and her partner/husband to reclaim the maternity process and above all regain the power of knowledge of the health team.

For more information on the work carried out by RELACAHUPAN , please contact the regional coordinators: South America: Gilda Vera, Coordinator, E-mail: givera@internet.com.uy
Mesoamerica: Gabriela Cob. mesoamerica@relacahupan.org ,
The Carribbeans: Debbie Diaz , delsur@relacahupan.org.
or visit the website: <http://www.relacahupan.org/>

13. RECENT ACTIVITIES - THE AMIGAS DO PEITO, BRAZIL: Maria Lúcia Futuro, Brazil

- Participation in the II INTERNATIONAL CONGRESS ON HUMANIZATION OF LABOUR AND BIRTH, Brazil, November 2005.

The Amigas do Peito took part in organizing and also participated in the II International Congress on Labour and Birth in Rio de Janeiro, from 30 November to 3 December, 2005. Coordinators of the Amigas do Peito worked hard as part of the organizing team for the Congress. During the Congress, we participated actively in various activities like: Round Table, Workshops, Bibi Vogel Award presentation, writing the Motion to be handed to the Ministry of Health on Breastfeeding Policies based on the Global Strategy for Infant and Young Child Feeding in Primary Infancy and the Innocenti Declaration.

Other members of the Amigas do Peito were also involved in sales and publicity for the Group during the Congress.

- Coordination of the Participation of Breastfeeding Groups in the Second World Social Forum, Venezuela, January 2006.

Maria Lucia Futuro of the Amigas do Peito, coordinated and organized the implementation of breastfeeding activities at the World Social Forum, that was held in Caracas, Venezuela, January 23-28, 2006. She attended the Forum and was joined by representatives from LLLI, IBFAN, and Amamanta. Partial funding was provided by WABA/Malaysia.

For further information on the representatives of the different organizations working on breastfeeding and birth, please contact: Maria Lúcia Futuro, Amigas do Peito, Brazil
E-mail: amigasopeito@amigasopeito.org.br

14. LatchOn - A Website that Draws Attention to Breastfeeding

All over the world there are volunteer organizations and individuals that have great ideas about how to help mothers and babies in breastfeeding. Sometimes these organizations and individuals have a great idea, but lack the funds to pursue this idea. By posting their projects on LatchOn.org, their projects will be showcased to millions of internet users, which will increase the possibility to receive the funding needed. LatchOn.org has a group of authenticators and mentors who assist project managers to refine their project and to make it attractive to potential donors. To find out how this website works and to post a project for breastfeeding or to see what projects are already posted, visit the website at www.latchon.org.

15. Inspirational Stories for Mothers who Work and Breastfeed.

Available from La Leche League International is a new book that utilizes stories from mothers to help other mothers. The title of the book is: **Hirkani's Daughters: Women Who Scale Modern Mountains to Combine Breastfeeding and Working.** **Hirkani's Daughters** is a compilation of inspirational stories written by mothers from around the world who have overcome various obstacles to continue breastfeeding and working. They are all stories of women evaluating their options and in the end bravely taking the path that works best for their families. Please go to the LLLI website for more information on this book www.lalechleague.org

16. International Workshop on Breastfeeding

International Workshop on Breastfeeding: The Sustainability of Baby-Friendly Programs, Managua, Nicaragua. Workshop date to be finalized. For Updated information on this workshop, please write to Ivette Sandino, isandino@unicef.org of Unicef Nicaragua.

NEWSLETTER INFORMATION

17. Check out these Websites

<http://www.ibfan.org/english/activities/monitoring/monitoringform.html> Code Monitoring: Register code violations

<http://www.breastfeeding.asn.au/aboutaba/history.html> Australian Breastfeeding Association

<http://www.waba.org.my>: WBW 2006 Slogan: Code Watch: 25 Years of Protecting Breastfeeding

<http://www.suenoinfantil.com/> Spanish

<http://www.dormirsinllorar.com/> Spanish, Ways babies can sleep without crying

<http://www.motherfriendly.org>

18. Announcements

Events during February, March, April and May 2006

For information on conferences/workshops/seminars in the USA, please access:
ibreastfeeding.com

February 10-12, 2006: The Center for Asia Pacific Women in Politics (CAPWIP) is organizing the Sixth Asia Pacific Congress of Women in Politics, at the Asian Institute of Management (AIM) Conference Center, Makati City, Philippines. The Congress will contribute to the forthcoming 50th Session of the Commission on the Status of Women (CSW) on "Equal Participation of Women and Men in Decision-Making Processes at All Levels". Please contact Sylvia Ordonez,

CAPWIP's Executive Director, for your confirmation and for more information, Email: asiapacificcongress@gmail.com, trainings@capwip.org, Website: www.capwip.org; www.onlinewomeninpolitics.org .

February 12 – 16, 2006: International Conference on Impact of Global Issues on Women and Children, Dhaka, Bangladesh <http://www.ic2006.info>

February 14th. 2006: WABA 15th. Anniversary. HAPPY ANNIVERSARY!

February 23-25, 2006: CIMS (Coalition for the Improvement of Maternity Services) International Committee Meeting and 4th Annual Mother-Friendly Childbirth Forum and Meeting, Boston, Massachusetts, USA
“Mother-Friendly Childbirth: Closing the Gap between Research & Practice”
<http://www.motherfriendly.org/events/>

February 28-March 10, 2006: 50th Session of the CSW (Commission on the Status of Women) Annual meeting at the United Nations, New York City, USA. Themes: *Enhanced participation of women in development: an enabling environment for achieving gender equality and the advancement of women, taking into account, inter alia, the fields of education, health and work;* **“Equal participation of women and men in decision-making processes at all levels”**

February 27th. 2006: Wellstart International - 21st. Birthday. HAPPY BIRTHDAY!

March 13-17th. 2006: 33rd. Session of the Standing Committee on Nutrition, “Nutrition and the Double Burden of Disease: A Global Challenge”, Hosted by the World Health Organization, Geneva, Switzerland

March 14-18, 2006: Global Summit on HIV/AIDS, Traditional Medicine and Indigenous Knowledge, Accra, Ghana, <http://www.africa-first.com/gsaidstmik2006/default.aspx>

March, 2006: 6th World Social Forum, Karachi, Pakistan (Asia)

7th. April 2006: World Health Day 2006 – “Working together for health”
<http://www.who.int/world-health-day/2006/en/>
http://www.paho.org/English/DD/PIN/whd05_calendar.htm website: www.coregroup.org.

May 7-9, 2006: Gender, Child Survival & HIV/AIDS: From Evidence to Policy (York University and WABA) (<http://www.waba.org.my/hiv/conference2006.htm>) *Go to the website for dates on submitting an abstract and for early registration.*

May 22-27, 2006: 59th World Health Assembly, World Health Organization, Geneva, Switzerland
<http://www.who.int/mediacentre/events/2006/wha59/wha59/en/>

19. Our Readers Share:

Dear Friends, Thank you for undertaking this newsletter. It is very worthy to learn what others are doing in relation to mother support. I am inspired to call for a couples meeting as I had done in other years. Thank you for injecting us with enthusiasm.

Hugs J

Mariana Petersen, LLLGuatemala

Thank you Rebeca, I received this newsletter as always and it is with pleasure to tell you that it fills me with new experiences. With much affection, *Silvia Viale from Argentina*

Dear Pushpa!

Here at Reencontro - The Mozambican Association for Support and Development of Orphaned and Vulnerable Children (specially those whose parents have died from HIV/AIDS). I would like to thank you for the Newsletter you sent to me. Warm regards, *Diogo Mboa*

20. 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 April/May/June 2006 issue is **March 10, 2005.**

If you submitted an article and it didn't appear in this issue, it is being reserved for a future issue.

Volume 4, Number 2, will be sent on **April 6th. 2006**

21. How to Subscribe/ Unsubscribe to the Newsletter

If you would like to receive this newsletter:

Please send an email to the following email address: MSTFNewsletter-request@braesgate.com.

In the section that says Subject, please write the word "subscribe". Then send.

To end your subscription to the Newsletter:

Please send an email to the following email address: MSTFNewsletter-request@braesgate.com.

In the section that says Subject, please write the word "unsubscribe". Then send.

If you are having difficulty subscribing to the newsletter, please email Pushpa ppanadam@telesurf.com.py or Pili vapena@pla.net.py and we will help you.

Please share this newsletter with your friends and colleagues. For more information about this newsletter write to the Editors: Pushpa Panadam, ppanadam@telesurf.com.py, Pili Peña, vapena@pla.net.py

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).

WABA, PO Box 1200, 10850 Penang, Malaysia
Tel: 604-658 4816
Fax: 604-657 2655
E-mail: waba@streamyx.com, Website: www.waba.org.my

The MS TF is one of eight task forces that support the work of the World Alliance for Breastfeeding Action. The slogans being used by the newsletter were created by participants at the GIMS Workshops, Global Forum II, Arusha Tanzania, 2002.

Breast Milk: Always present, from pregnancy, to birth and beyond"