



Mother-to-Mother Support for Breastfeeding - Promoting, Protecting and Providing Emotional and Technical Assistance - on a mother-to-mother basis

Scene 1: Two friends, one pregnant and one with a two month old baby, happen to meet at a market stall and begin talking.

Mother: Hi! How're you feeling?

Pregnant woman: Feeling a little tired, but everything's fine.

Mother: That's good. You know, I was wondering if you have given any thought to breastfeeding? My little one is nursing and I'm really enjoying the experience.

Pregnant woman: Yes, I had, but no one in my family seems to have any milk, so I don't think I will either.

Mother: That's great that you've thought about breastfeeding and I can see that you are worried. I have an idea! I belong to an organisation of mothers that has meetings to talk about these kinds of worries and to share their breastfeeding experiences. Would you like to go with me tonight? We can go together.

Pregnant woman: Well ... I guess that might be interesting - okay, I'll go. Thanks for inviting me.

Support in the context of women

From the beginning of time, women have been helping and supporting each other in all kinds of ways. Informal support systems for women have been in existence for centuries in family structures, in work places, in city neighbour-hoods, in rural villages, in religious facilities ... literally everywhere. Support systems are part of the lives of women all over the world.

In most support systems women provide each other with information, advice and support for any number of different topics. Usually, the women who make up a particular support network have interests or experiences in common and often, one or more women have more experience and information than the others.

Support for women in breastfeeding

In some societies, the informal, traditional support system that is in place includes positive reinforcement for breastfeeding, as well as information that gives mothers a basis to practise optimal breastfeeding and to have an enjoyable breastfeeding

experience. In these instances, the existing support system should be protected and preserved - no interventions are needed.

However, in many societies around the world, this is no longer the case. In these societies, women do not receive the needed information nor the day-to-day support that will enable them to have a rewarding experience in breastfeeding. The 'channels of information' available to many women do not provide accurate up-to-date information nor do these channels support optimal breastfeeding practices, such as giving an infant only breastmilk in the first months of a baby's life.

"The most important thing that I learned (at mother support meetings) was to take care of and pay attention to my children - have patience with them and give them more love."

- mother, San Pedro Sula

Scene 2: Two women with young babies are sitting side by side on a bench at the community health centre, waiting their turn to see the doctor.

Mother 1: What a cute baby! How old is he?

Mother 2: He'll be two months old next week. How old is yours? A little girl, right?

Mother 1: Yes, a girl - she was two months old yesterday. She's been so sick - this is the third time I've brought her here for diarrhoea.

Mother 2: That's too bad. Are you breastfeeding her?

Mother 1: She nurses about three times a day - the rest of the time I give her a bottle of formula.

Mother 2: I'm nursing my baby and I don't give him anything but breastmilk.

Mother 1: How can you just give breastmilk? Doesn't he need water?

Mother 2: My neighbour received training to be a breastfeeding counsellor and she told me that breastmilk has everything the baby needs - even water. It sure has worked for me!

Mother 1: I wonder if I tried nursing more often?

Mother 2: I bet that would work, because the more the baby nurses, the more milk a mother has. Well the nurse just called my name - if you need anything, just let me know and I can ask my neighbour to visit you. She really helped me.

In many societies, women have come together and formed mother-to-mother support for breastfeeding organisations to counter negative attitudes toward breastfeeding and to provide accurate information. They have found this to be necessary because:

1. Advertising and marketing of infant formulas have a negative influence on attitudes toward breastfeeding and practices related to breastfeeding. Bottle feeding cultures are in place.

2. In many societies, mothers have a 'choice' - they can feed an infant at the breast or with a bottle. There is a readily available artificial alternative to breastfeeding.

3. The availability of artificial infant feeding method and the widespread advertising and marketing of infant formulas have contributed to perceived lactation failure, triggered by 'psychological factors'. Mothers lose their confidence in their ability to produce sufficient milk for their babies.

4. Many mothers who enter the formal work force are not aware of the laws in their country that protect their right to continue breastfeeding, nor are they aware of the many ways in which they can combine breastfeeding and working.

5. In the health care system, staff may not possess sufficient knowledge about breastfeeding. They may have had little or no practice in providing support to mothers or in building up a mother's confidence.

6. With the migration of people from rural to urban areas or from one country to another because of war or hardship, changes in the nuclear family structure occur, often causing the loss of an existing support system.

Support for breastfeeding day to day

Mother-to-mother support for breastfeeding organisations work to fill the need many mothers have for 'day-to-day support' while breastfeeding. After the initial excitement and wonder of having a baby, the day-to-day reality sets in:

... The mother worries that her baby's crying means she doesn't have enough milk;

... Someone says that "all two month-old babies sleep all night long" and her baby wakes 2 or 3 times to breastfeed;

... Her husband complains that she spends too much time nursing the baby;

... She thinks her diet is not sufficient to produce 'good' milk;

... A health care worker tells her that women with inverted nipples can't breastfeed;

... Her mother-in-law tells her babies need water;

and ... She's going back to work and feels she'll have to quit nursing;

Mother-to-mother support groups provide IMMEDIATE and SUSTAINED SUPPORT outside the formal health structure in the communities where mothers live. They provide accurate, up-to-date information on a day-to-day basis throughout a mother's breastfeeding experience.

"I was ready to give up breastfeeding when I called Patty. Her compassionate guidance has given me a treasured gift - a nursing relationship with my daughter." - Robin Ford, mother, USA

Scene 3: Two mothers sit on a park bench while their toddlers play nearby.

Mother 1: They're really playing well together aren't they? No fights!

Mother 2: Yes, usually at this age - a little over a year, children aren't interested in sharing. Say, you're nursing your little girl, aren't you?

Mother 1: Yes, I am. We really enjoy the closeness and nursing comforts her when she's upset or especially tired.

Mother 2: I'm wondering just how long I should nurse my son. People have told me breastmilk is not nutritious past a year. Is that true?

Mother 1: That does worry some mothers. Sometimes society doesn't look kindly on babies nursing past a year. Studies show, though, that children over a year old still benefit from breastfeeding both nutritionally and emotionally.

Mother 2: I've been trying to wean her, but she seems to want to nurse even more! Maybe I could be more relaxed and just hold off for a while. I don't really want to wean her.

Mother 1: That's a good idea. Many mothers have found that a more gradual weaning is easier on both the mother and child.

Mother 2: Thanks. I feel much better. And, they're still playing so well together!

HOW TO PROMOTE MOTHER-TO-MOTHER SUPPORT FOR BREASTFEEDING

If you are part of a mother-to-mother support organisation:

- Continue doing everything you are already doing - counselling mothers on a one-to-one basis, leading mother support group meetings, distributing breastfeeding information materials in the community, giving talks when invited to do so, participating in television and radio programmes, working with health professionals, planning and conducting workshops and seminars, and producing newsletters.
- Monitor the advertising and marketing practices of infant formula companies and respond with letters and statements to those that undermine a mother's confidence in her ability to breastfeed or that violate your country's Code of Marketing of Breastmilk Substitutes.
- Actively support the Baby Friendly Hospital Initiative by encouraging your local hospital to become a Baby Friendly Hospital and by distributing BFHI questionnaires and flyers to mothers who contact you.



"I breastfed, but with training and more information I felt more capable and better able to transmit this information and to help other mothers." - Ana Ruth, mother and breastfeeding counsellor, Honduras

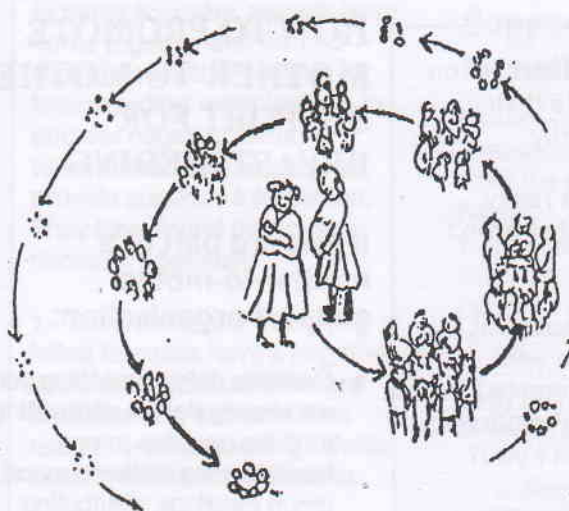
"I like being a breastfeeding counsellor because it enables me to pass on a message to other mothers. I learned a lot about things I did not know before - about colostrum, how to avoid infections and contamination, and how to save money by breastfeeding. I want to teach others about this so they will continue breastfeeding." - Counsellor, Guatemala City

- Network with organisations, institutions, and clubs in your community - especially those that are not presently involved in breastfeeding promotion and support.
- For a one-week period, keep a list of the primary breastfeeding concerns of all the mothers who contact you for information and support and forward this information to your organisation.
- For a one-week period, document the number of mothers to whom you offer information and support. Include mothers in group meetings, in talks, during hospital visits - in whatever way you come in contact with mothers during that week. This will demonstrate the impact and outreach of mother-to-mother support.

If you are an individual advocating for mother-to-mother support:

- Find out if there is a mother-to-mother support organisation in your community.

- Refer friends, co-workers, relatives and neighbours who are pregnant and/or have new babies, to that organisation.
- If you are pregnant or breastfeeding, consider joining a formal support group - preferably when you are pregnant in order to be fully prepared for breastfeeding.
- Contribute to mother-to-mother support financially or by volunteering your help.
- Support your friend, wife, relative, neighbour, co-worker in her informed decision to breastfeed. Let her know you believe she made a very good decision.
- When you see a woman breastfeeding, compliment her on her breastfed baby if this is appropriate in your culture.
- Do whatever you can where you are to SUPPORT a breastfeeding woman - in the home, in the workplace, in the hospital, in the community.
- Monitor the advertising and marketing practices of infant formula companies and respond with letters and statements to those that undermine a mother's confidence in her ability to breastfeed or that violate your country's Code of Marketing of Breastmilk Substitutes.



Together we
have the
ability to
create a
breastfeeding
world!

Resources

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This activity sheet is part of a series from WABA to assist groups with their activities to protect, promote and support breastfeeding and in particular, to provide action ideas that could be focused on World Breastfeeding Week, August 1st to 7th.

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