

MOTHER SUPPORT: GOING FOR THE GOLD



Everyone Wins!



Photo by Michele Lavery

Michele was 40 and planning to run a triathlon. She felt she would need to wean her son, Jack. The support group at The Birth Centre helped her keep nursing and she has done two triathlons. (USA)

WABA 2008

Mother Support: "Any support provided to mothers for the purpose of improving breastfeeding practices..."

– WABA Global Initiative for Mother Support (GIMS) 2007

As we celebrate the 2008 Olympics (August 8-24) and the 2008 World Breastfeeding Week (WBAW) August 1-7, the World Alliance for Breastfeeding Action (WABA) calls for increased support for mothers striving to achieve the gold standard of infant feeding: to breastfeed their babies exclusively for the first six months, and continue breastfeeding together with feeding other appropriate complementary foods, up to two years and beyond.

***Support a Mother to Provide
a Golden Start For Her Child !
With Breastfeeding, Everyone Wins !***

OBJECTIVES

- To expand awareness of the need for and the value of providing support to a breastfeeding mother
- To disseminate updated information about support for breastfeeding mothers
- To encourage the creation of optimal conditions for the provision of mother support in all **CIRCLES OF SUPPORT**

MOTHERS DESERVE AND NEED

- **EMPATHETIC LISTENING**
- **BASIC, ACCURATE, AND TIMELY INFORMATION**
- **SKILLED AND PRACTICAL HELP**
- **ENCOURAGEMENT**

Mother Support: The Need

An Olympic athlete needs support from family, friends, community, and sponsors in order to compete successfully. So, too, does a mother need support to breastfeed. Both an athlete and a breastfeeding mother face challenges. For a breastfeeding mother, these challenges include overcoming misinformation, maintaining breastfeeding while working outside the home, coping in emergency situations and, most importantly, overcoming doubts about her ability to breastfeed her baby. Belief in oneself is a key ingredient for success for both the athlete and the mother.

The support a mother receives can be as formal as a visit to a health care professional or as informal as a reassuring smile from another mother. Support comes from professional and lay sources – health professionals, hospital and maternity facility staff and policies, doulas and midwives, lactation consultants, trained peer counsellors, mother support groups, friends, and family.

Mother Support: Evidence That It Works

The recent Cochrane Review evaluated 34 trials from 14 countries for effects on the duration of any breastfeeding (both partial and exclusive) and exclusive breastfeeding alone. The review found that all forms of support, professional and lay, analysed together, significantly extended the duration of any breastfeeding, and had an even greater effect on the duration of exclusive breastfeeding.¹ WHO/UNICEF training for hospital staff significantly prolonged exclusive breastfeeding.

The WHO Community-Based Strategies for Breastfeeding Promotion and Support in Developing Countries² cites several reviews of the evidence for mother support. Sikorski et al. identified 20 trials of breastfeeding support in 10 countries³ which revealed a significant beneficial effect of breastfeeding support on any breastfeeding, with



the greatest effect on exclusive breastfeeding. Lay counsellors were found to be most effective in increasing the duration of exclusive breastfeeding, and professional counsellors were most effective in extending the duration of any breastfeeding.

The LINKAGES Project's report⁴ cites numerous studies relating to the impact of hospital practices on increasing exclusive breastfeeding rates:

- Counselling and discharge packs that support breastfeeding
- Training hospital staff in lactation management
- Home visits

If you did anything to support a woman planning to breastfeed or a mother already breastfeeding her child, you deserve a GOLD MEDAL.

Supporting a mother to breastfeed

Infants are meant to be breastfed. Breastfeeding provides the best possible start to life in all areas of development. Even in developed countries, lack of breastfeeding is associated with an increase risk to the survival and health of babies. Artificial feeding is associated with a higher rate of deaths in babies. Early initiation and exclusive breastfeeding can save more than one million babies.⁵ Compared with children who are exclusively breastfed, those who are artificially fed do not develop normally – they have poorer health, higher mortality rates and lower IQ scores.

Mothers and communities also benefit when babies are breastfed. Breast cancer is more common in mothers who either haven't breastfed or breastfed for a short time. Menstrual periods return earlier for mothers who don't breastfeed, and this can lead to closer pregnancies, and increased health problems in mothers and babies. Exclusive breastfeeding leads to decreased economic costs for families, communities, the health system, and the environment.

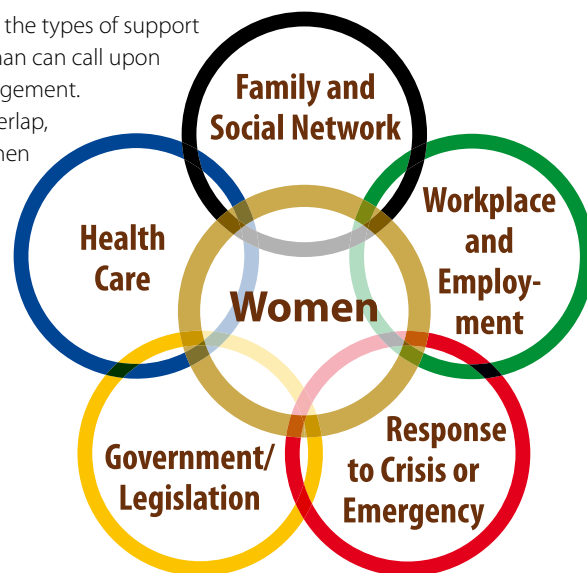
Supporting breastfeeding is important – With breastfeeding, everyone wins!

Breastfeeding has justifiably been called the Gold Standard for Infant Feeding. Gold is regarded as precious in many cultures and is valued and protected. How would you feel if someone gave you brass instead of gold? Yet this happens when manufactured products are substituted for mother's milk.

Five coloured rings symbolise the Olympics and the international network of athletes and countries, WBW 2008 uses 5 coloured

CIRCLES to represent the types of support a breastfeeding woman can call upon for help and encouragement.

Circles of support overlap, interact, and strengthen each other, with the centre circle as the focus.



CIRCLE: Women in the Centre

"A circle of women bring wisdom through their collective sharing and experience."

– Maryanne Stone-Jiménez, Canada

Women not only receive support from many sources; they actively secure support and provide it as well. Women are key players in all CIRCLES. Strong support in the outer circles creates a growing power in the centre that radiates out to the other circles of support. The strong network of mother-to-mother support organisations around the world, founded and maintained by women, are a vital demonstration of this concept.

Over the course of history, women learned the value of networking with other women: learning new skills, sharing good times, leaning on each other in challenging times. In traditional settings, the network consisted of extended family members – mothers, grandmothers, sisters, and aunts – who were close by and readily accessible.

The role of women has broadened considerably and encompasses much more than home and family. Expanded roles strengthen the need for networking. Sadly, many women today do not have a network of support to call upon. Extended family members are not always geographically close, so women rely on non-family members and,

Table 1. Lack of breastfeeding affects the child, the mother, the community, and the health care system.

Babies and children who do not breastfeed have increased risk of:	Mothers who do not breastfeed are more likely to experience:	Communities and health systems suffer the effects of a lack of breastfeeding:
<ul style="list-style-type: none"> ◆ Mortality ◆ Respiratory infection ◆ Diarrhoea and other infections ◆ Obesity ◆ Diabetes ◆ Asthma and wheeze ◆ Childhood cancers ◆ Lower IQ ◆ Abnormal development 	<ul style="list-style-type: none"> ◆ Breast and ovarian cancer ◆ Type II Diabetes ◆ Early return of menstrual periods and fertility ◆ Less time between pregnancies ◆ Difficulties in cleaning and preparing formula and bottles ◆ Financial burden of artificial baby milk and fuel 	<ul style="list-style-type: none"> ◆ Increased costs of treating infections, obesity, diabetes, and other chronic illnesses ◆ Increased costs of time off work by mothers of sick children ◆ Negative environmental impact of landfill for disposal of cans and packaging ◆ Multiple costs of breastmilk substitutes

when available, on technological innovations such as the telephone and Internet. When all the Circles are strong and providing seamless mother support for breastfeeding, the result is truly empowering for future generations.

The goal is that in whatever direction in the centre circle she turns, a mother receives positive and empathetic support for her breastfeeding experience.

“The best intervention for effective mother support is the creation of small mother support groups; this can enable a breastfeeding culture to be recaptured.” – Maria Inés Fernandez, Philippines

Angelina has six children and is currently nursing Renaldo. She looks forward to group meetings with other mothers to learn and share with each other. (Paraguay)



CIRCLE: Family and Social Network

All women connect and interact with family, friends, and neighbours and have other relationships within the community. This circle of family and social contacts differs with the individual woman, her culture, her living situation, her socioeconomic level, and her activities.

Family composes the mother's immediate and continuous support network, beginning with the father of the baby, whether he is her husband, her partner, boyfriend, or significant other.⁶ It also may include her mother, sisters, and other close relatives.

Support extends beyond the immediate family to include the mother's friends and neighbours, as well as those she meets in the community setting. Being able to breastfeed comfortably in these settings may be a challenge if her society does not see breastfeeding as a normal activity. Support for breastfeeding includes helping and encouraging the mother and baby to be together in as many settings as possible.

Women are also influenced—positively or negatively—by what they read, see, and hear through the media available to them in their culture or society. A strong social network circle can help offset the negative influences by providing support where needed.

We need to speak the same language until breastfeeding babies and the needs of babies and mothers get registered at every level; from the very poor to the very rich from North, South, East, and West ... and in every language.”
– Pushpa Panadam, Paraguay



Reena did not have the direct support of her mother, who had died six years before. With knowledge and support offered by her mother's friends, Reena has enjoyed breastfeeding Sarit, now eight months old. (Israel)

CIRCLE: Health Care

Health care systems and health care workers have indirect and direct impacts on breastfeeding. Health workers are respected members of society, so what they say and do at work and in social situations can influence health behaviours. The promotion of optimal infant feeding during each phase of childbearing is essential to enabling women to succeed with breastfeeding.

WHO and UNICEF recognize

these needs, and support these interventions primarily through the Baby-Friendly Hospital Initiative (BFHI), which has been revised, updated, and finalized to help countries and facilities re-energize efforts. Information on the new 2008 materials is available at <http://www.who.int/nutrition/topics/bfhi/en/index.html>.

In addition to BFHI, there is a need for skilled and practical help from any health care worker who is in contact with the mothers or babies. WABA is working towards helping to initiate health workers training on breastfeeding counselling and clinical management in many countries.

“When a mother calls with a breastfeeding problem, she wants help right then, at that very moment. She needs help when she needs help!”

– Rebecca Magalhães, USA



Photo by James Achanyiri Fontem

“I dream of a world in which every health worker learns about breastfeeding and every mother receives support to do it.” – Felicity Savage, United Kingdom

CIRCLE: Government and Legislation

Government policy and legislation are essential in supporting women in many aspects of their lives. Governments have the authority to make laws, to adjudicate disputes, and to issue administrative decisions. Laws and public policies are needed to support a breastfeeding mother. When governments implement the International Code of Marketing of Breast-Milk Substitutes and subsequent WHA resolutions, mothers are protected from commercial influences that undermine breastfeeding success.



WHO and UNICEF have proposed four areas of successful breastfeeding support:

- ◆ *Health systems* can support women through woman-centred care, humanistic treatment of each mother-child dyad, and attention to policies that impact the dyad.
- ◆ *Health worker education* can support women directly through skilled and informed practices and humane, culturally sensitive practices.
- ◆ *The International Code of Marketing of Breast-Milk Substitutes and subsequent WHA resolutions* supports women by disallowing false and misleading marketing.
- ◆ *Community mobilisation*, especially mother-to-mother and other peer support, both empowers and informs women.

Updated reports on the Code of Marketing can be found at: <http://www.babymilkaction.org/shop/publications01.html#btr07>

“Traditional forms of support for breastfeeding have been undermined and are threatened by forces of globalisation, modernisation and industrialisation.” – GIMS Statement 2007



When Crystal faced many obstacles to breastfeeding from physicians, her co-workers, and society, she realized that her country's collective consciousness needed to be reformed. She wrote articles promoting breastfeeding; she led a

breastfeeding support group in her town; she joined a government-based research project analyzing breastfeeding rates. (Taiwan)

CIRCLE: Workplace and Employment

“Every mother is a working mother.” This slogan describes the reality of a mother's life. Being a mother means being responsible for the care and welfare of children. This work takes time, energy, and attention – exclusively breastfed babies under six months average 11 feeds every 24 hours, night and day.⁷ But breastfeeding is also efficient. Milk production goes on 24 hours a day, while the mother works, relaxes, and even while she sleeps.

It is easiest for mothers to give milk in a low-stress environment. Mothers benefit from a temporary reduction of their workload at home and on the job to make time and energy available for breastfeeding.

The three components of support for breastfeeding women at work are:

- Time for breastfeeding or milk expression during the workday;
- A clean, stress-free, accessible place for this to happen; and;
- A universal attitude that prioritises breastfeeding.

Maternity protection policies that provide job protection, paid leave after birth, paid nursing breaks, on-site or near-site child care facilities, protection from discrimination, and flexible scheduling with part-time options for parents provide the framework of support. Within this framework, the working mother's “team” – everyone from the baby who breastfeeds to the boss who facilitates the time and space in the workplace – are supporting the mother. Their positive attitude cheers her on to reach the gold standard of infant feeding-breastfeeding.



Utkarsh is an actress, working long hours. She found that hand expression worked very well to collect milk for her daughter; Ghana. Her hairdresser helped her remove her heavy costume behind some bushes so that she could express her milk at a remote location. (India)

CIRCLE: Response to Crisis or Emergency

When a mother finds herself under stress due to events outside her control, her responsibility to her children elevates from one of nurturing to one of survival. She may need to find safe housing, food, and clothing while also struggling to communicate with other family members, support agencies, legal networks, and health care workers.

During natural disasters or in areas affected by war or conflict, families are uprooted from their homes and communities and find themselves in unfamiliar places. Social agencies that care for children and family can support the breastfeeding mother by providing items that every mother needs: sufficient food, water, and clothing. A mother's milk may be the only safe food available for her baby under these circumstances.

Operational guidance for those working to support breastfeeding women and children in emergency relief is available online for downloading (www.enonline.net).

A mother involved in a family crisis (such as a divorce or custody case) is also in need of support systems. Written materials and resource people are available to provide information and testimony in support of a baby's need for his mother and the risks of putting a young baby on a breast-milk substitute.

A family dealing with a health crisis has special needs. Hospital lactation centres provide information on policies concerning parents staying with babies or young children, visitation rights for infants and young children whose mother is hospitalized, and help for expressing milk when a mother is unable to breastfeed for a time. Supporting a mother for breastfeeding in an HIV/AIDS situation is challenging, both for the mother and for those who are helping her. Global health standards recommend exclusive breastfeeding for HIV-infected women for the first six months of life unless replacement feeding is acceptable, feasible, affordable, sustainable and safe for them and their infants before that time.⁸

When a mother is struggling with a crisis or emergency, organisations, governments, and individuals can support the mother and earn a GOLD medal for their efforts.

Although all mothers face challenges and need support, a mother who is in an economically deprived situation faces a different set of

challenges. Lack of education, resources, infrastructure, and basic amenities coupled with non-accessibility or non-availability of health care, food scarcity, lack of mother support groups, and inhibitions to talk about breasts and breastfeeding are all adverse situations. These conditions may exist whether she lives in a developing or developed country. Women who traditionally breastfeed need to be protected from forces that undermine breastfeeding, such as commercial advertising.

"Breastfeeding a baby is a community concern; a celebrative occasion – everyone has a role to make it successful. A breastfeeding friendly environment needs supportive people in every corner." – Negeya Sadig, Sudan



When hurricanes hit the Gulf States Region of the United States, a breastfeeding counsellor worked to develop a public service announcement to give essential information and contact numbers for displaced mothers needing breastfeeding help and information. (USA)

As countries send their best athletes to compete at the Olympic Games, it is important to remember that a healthy athlete emerges from a healthy start in life. There is no question that optimal infant and young child feeding is essential for optimal growth and development.

Everyone wins when babies are breastfed!

Photo by
Josephine Nalugo

Actions For Support

CIRCLE – WOMEN IN THE CENTRE

- ◆ Learn about breastfeeding.
- ◆ Ask for support and offer support to others.
- ◆ Take care of health and nutritional needs during pregnancy and lactation.
- ◆ Talk to women who have had positive breastfeeding experiences.
- ◆ Attend a mother-to-mother support group or other similar support entity.

CIRCLE – FAMILY AND SOCIAL NETWORK

- ◆ Provide practical support to the breastfeeding mother: prepare a meal, help care for older children, or help with chores.
- ◆ Learn about breastfeeding to help a mother prevent or recognise and address difficulties early.
- ◆ Believe in mother's ability to breastfeed her baby.
- ◆ Provide transportation for her to attend a support group meeting or visit a lactation consultant.
- ◆ Write letters to the media to advocate for breastfeeding and to correct misinformation.

CIRCLE – HEALTH CARE

- ◆ Learn how to start a maternity facility-based mother support group.
- ◆ Take a peer counsellor or other breastfeeding training course.
- ◆ Actively solicit medical and political leadership to support BFHI in every facility.
- ◆ Identify the lactation experts in your community and how best to contact them.
- ◆ Include breastfeeding counselling and support skills in all health worker trainings.

CIRCLE – GOVERNMENT AND LEGISLATION

- ◆ Speak or write to policy makers about the importance of supporting breastfeeding.
- ◆ Advocate for legislation that enacts the provisions of the WHO/UNICEF Code of Marketing of Breast-Milk Substitutes and subsequent WHA resolutions.

- ◆ Join the local breastfeeding coalition and actively support its activities.
- ◆ Send information about BFHI to hospital and maternity facility administrators.
- ◆ Circulate a petition to provide local tax incentives to worksites that support mothers to breastfeed.

CIRCLE – WORKPLACE AND EMPLOYMENT

- ◆ As an employer, maintain a suitable location for breastfeeding women to express their milk and/or breastfeed their baby.
- ◆ Work with local community organisations to support breastfeeding in the informal work sector.
- ◆ As the caregiver of a breastfed baby, learn what is needed to maintain a breastfeeding experience.
- ◆ As a family member, ease the household tasks of the breastfeeding and working mother.
- ◆ Write to legislators to support the enactment of paid maternity leave, extension of maternity leave, and laws supporting mother friendly workplaces.

Five Gold Rules to Support Breastfeeding

- Address each mother and baby situation as individual and unique; be sensitive to the needs of a breastfeeding mother.
- Listen empathetically to learn a mother's concern; refrain from talking except to ask questions for clarity; provide just enough information for her to make her own choices.
- Ensure that fathers and families are well informed so that they can support each woman in breastfeeding.
- Hold governments, workplaces, and society responsible to create an environment in which every woman is fully enabled to have the choice to breastfeed and to act on her decision.
- Believe that a mother can successfully breastfeed and tell her that; on the other hand, recognise when a mother needs more help than you can offer.

The Innocenti Declaration 2005 calls for All Parties to “Empower women in their own right, and as mothers and providers of breastfeeding support and information to other women.”



Photo by Pushpa Valli Panadam

“Anything done by anyone on behalf of making the world a place where breastfeeding works better for mothers and babies is doing a great service. It may seem small, but it all really does add up.” – Ted Greiner, USA

Photo credits:

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The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations concerned with the protection, promotion and support of breastfeeding worldwide based on the Innocenti Declarations, 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 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).

WBW Coordinating & Distributing Centres

OVERALL COORDINATION

WABA Secretariat
P O Box 1200
10850 Penang, Malaysia
Fax: 60-4-657 2655
waba@streamyx.com
www.waba.org.my
www.worldbreastfeedingweek.org

✉ AFRICA

IBFAN Africa
P O Box 781, Mbabane
Swaziland
Fax: 268-40 40546
ibfanswd@realnet.co.sz

IBFAN Afrique

Cite Ouaga 2000, 01 BP 1776,
Ouagadougou 01, Burkina Faso
Fax: 226-50-374163
ibfanfan@fasonet.bf

✉ ASIA

WABA Secretariat
(See address above)

South Asia

Breastfeeding Promotion Network of India (BPNI)
BP-33, Pitampura
Delhi 110 034, India
Fax: 91-11-2734 3606
bpni.india@gmail.com

✉ EUROPE

Baby Milk Action
34 Trumpington Street
Cambridge
CB2 1QY, UK
Fax: 44-1223-464 417
info@babymilkaction.org

CoFAM / SMAM

163 rue de Bagnolet
75020 Paris, France
Fax: 01-4356 5246
secretariat@coordination-allaitement.org

GIFA

Avenue de la Paix 11
1202 Geneva, Switzerland
Fax: 41-22-798 4443
info@gifa.org

Aktionsgruppe

Babynahrung Ev (AGB)
Untere Maschstrasse 21
D-37073 Göttingen, Germany
Fax: 49-551-531 035
info@babynahrung.org

✉ LATIN AMERICA

CEFEMINA
Apartado 5355, 1000 San Jose
Costa Rica
Fax: 506-224 3986
cefemina@racsa.co.cr

CEPREN

Av. Pardo, 1335 Of.301-302
Lima-18 Peru
Fax: 51-1 241 6205
cepren@amauta.rcp.net.pe

Origem Group

Rua da Uniao, 253, Boa Vista
Recife, Pernambuco CEP 50050-010
Brazil
Fax: 55-81-32314325
juliana@origem.org
www.aleitamenta.org.br

✉ NORTH AMERICA

LLL International
957 N. Plum Grove Road
Schaumburg, IL 60173-4808, USA
Fax: 847-969 0460
lllhq@lilli.org • www.lilli.org

INFAC Canada

6, Trinity Square, Toronto
ON M5G 1B1, Canada
Fax: 1-416-591 9355
info@infactcanada.ca
www.infactcanada.ca

✉ PACIFIC

Australian Breastfeeding Association (ABA)
P O Box 4000, Glen Iris
VIC 3146, Australia
Fax: 61-3-9885 0866
info@breastfeeding.asn.au
www.breastfeeding.asn.au

Development Officer PINDA

c/o Christine Qusted
Nutrition Centre Health Department
Private Mail Bag
Apia, Western Samoa
Fax: 685-218 70
brenda@lesamoa.net

Your local contact:

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