

INFANT FEEDING NETWORK

ISSUE 1: BREASTFEEDING

Welcome to the first Issue of the Infant Feeding Network!

This issue provides information on breastfeeding,

I hope you will find it useful.

Enjoy the reading!

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The World Health Organization recommends exclusive breastfeeding (breast milk only, with no water, other fluids, or complementary foods) for 6 months, with supplemental breastfeeding continuing for 2 years and beyond. Certainly, up to a point, breast milk is the best nutrition that an infant may receive as it contains antibodies, enzymes, and hormones, which have health benefits for the infant. Research has shown that breastfed infants show low incidence of illness, respiratory and urinary infections, and asthma. Breastfeeding has also positive influence on infant gross motor development and lower risk of obesity as well as higher intelligence quotients in adulthood. Breastfeeding leads to mother-infant bonding and helps attachment development via the provision of regular intimate interaction between mother and child.



References

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A study looking at baby friendly accredited maternity units in the UK

Introduction

Although breastfeeding is considered to be an important practice for infant and maternal health, high-income countries, including the UK, have the lowest prevalence of breastfeeding. A new initiative constructed by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) is the *Baby Friendly Hospital Initiative* which consists of promoting breastfeeding in maternity units.

The aim of this study was to investigate whether the Baby Friendly Initiative might help increasing breastfeeding rates in mothers who give birth in accredited maternity units.

The Study

17,359 UK mothers were interviewed when the infant was 9 months of age and were asked about their pregnancy, delivery and infant feeding practices following the child birth.

At the time of the study (between 2000 and 2002) the WHO recommendations regarding breastfeeding duration had recently changed (i.e. introducing solid foods from 4-6 months to 6 months). Thus, the authors decided to focus on the prevalence of breastfeeding 1 month after birth; indeed, only 16% of infants were fully breastfed up to 4 months of age and 1% until 6 months postpartum.



Findings

70% of the mothers initiated breastfeeding after child birth; at 1 month of infant age, 49% were still breastfeeding. Interestingly, England had the highest prevalence of breastfeeding whilst Northern Ireland had the lowest. In addition, others who delivered in a fully accredited maternity unit were 10% more likely to begin breastfeeding. However, place of delivery was not associated with breastfeeding 1 month later. External factors that were found to be related to breastfeeding at 1 month included place of residence, attendance at antenatal classes, and a vaginal delivery.

Conclusions

It can be said that the fully accredited maternity units have an influence on whether mothers start breastfeeding after birth but have no impact a month afterwards. It can be suggested that if mothers receive support in the first few weeks after child birth, breastfeeding rates may increase. Further research is needed in this area to support this suggestion.

Reference

Bartington, S., Griffiths, L. J., Tate, A. R., & Dezateux, C. (2006). Are breastfeeding rates higher among mothers delivering in Baby Friendly accredited maternity units in the UK? *International Journal of Epidemiology*, 35(5), 1178-1186

A study looking at breastfeeding duration in mothers returning to work after child birth

Introduction

Despite the widely acknowledged benefits of breastfeeding for both mother and infant, early weaning is common in many developed countries. Previous research has suggested that less than half of mothers exclusively breastfeed for at least 6 months. The early withdrawal from breastfeeding has been associated with maternal employment, formula milk introduction, and hospital practices.

The aim of this study was to investigate how likely employed mothers were to continue breastfeeding in comparison to mothers who were not employed.

The Study

1,738 mothers from Hong Kong, China, participated in this study. All mothers intended to breastfeed and planned to return to paid employment within six months after the child birth. Participants were interviewed by telephone at 1, 2, 3, 6, 9 and 12 months of infant age. Questions regarding returning to work and infant feeding practices were asked. More specifically, the following information was recorded for each participant: time of returning to work, employment status (e.g. full time or part time), weekly working hours, monthly household income, maternal education level and childcare.

Findings

Most of the mothers returned to full time employment within the first 10 weeks after child birth, and only one third of the participants were able to continue breastfeeding after returning to work (it is important to note that women in Hong Kong are granted 10 weeks of mandated maternity leave). It was also discovered that mothers who returned to work after 6 weeks postpartum were more likely to stop breastfeeding than mothers who returned to work later. Finally, mothers, who had childcare support by a family member or paid domestic helper, were more likely to cease breastfeeding than mothers who did not.

Conclusions

The findings of this study support previous research suggesting that mothers who return to paid employment postpartum are more likely to cease breastfeeding. Adverse working conditions, such as long employment hours and a lack of breaks, make it increasingly difficult for working mothers to breastfeed while employed. These findings suggest that the implementation of *Breastfeeding Friendly* workplace provisions, such as longer maternity leave, short-term reductions in working hours, mandated breaks in the workplace (i.e. mothers be able to express breast milk), as well as more effective postpartum breastfeeding support, may increase the likelihood of working mothers to continue breastfeeding.

Reference

Bai, D. L., Fong, D. Y. T., & Tarrant, M. (2015). Factors associated with breastfeeding duration and exclusivity in mothers returning to paid employment postpartum. *Maternal and child health journal*, 19(5), 990-999.

A study looking at maternal attitudes to breastfeeding in public and the association with breastfeeding duration in four European countries

Introduction

This research aims to find out why there is such a large difference in breastfeeding rates across Europe. The researchers explored maternal attitudes towards breastfeeding in relation to infant feeding practices. For instances, previous research has shown that society's opinion of breastfeeding in public may influence a mother's choice regarding breastfeeding duration. This study aimed to look at mothers' attitudes towards breastfeeding and their practice of breastfeeding in public. The research was carried out in Scotland, Italy, Spain, and Sweden.

The Study

389 mothers from 4 European countries took part in the study and completed 5 questionnaires at 5 different points in time during 12 months after giving birth to their child. The questionnaires asked questions about mother's feelings and attitudes towards breastfeeding as well as feeding behaviours. The key question of the study was: "*Women should not breastfeed in public places such as restaurants*"; mothers who took part in the study rated how strongly they agreed or disagreed with this statement.

Findings

The survey found that 90% of the mothers had breastfed at least once in 12 months after child birth; however, only 59% of them had breastfed in public. Specifically, 78% of Swedish mothers had breastfed in public whereas 36% of Italian mothers had breastfed in public.

In response to the key question, both Scottish and Swedish mothers disagreed strongly that women should not breastfeed in public (90% of mothers) whereas 43% of Italian mothers disagreed with the statement. The findings also showed that women who did not breastfeed in public, were more likely to stop breastfeeding their child within the first 12 months postpartum.

Conclusions

It has been concluded that embarrassment was one of the main reasons for women not wanting to breastfeed in public and for them to stop breastfeeding before their child reached 12 months of age. It has been suggested that society's disapproval influences a mother's decision regarding the feeding of her child and may even outweigh her own attitudes and knowledge of breastfeeding.

The differences between the European countries can be explained by how socially acceptable it is to breastfeed in public. Further investigation is required to discover what norms and attitudes each country holds with regard to breastfeeding.

Reference

Scott, J. A., Kwok, Y. Y., Synnott, K., Bogue, J., Amarri, S., Norin, E., ... & INFABIO Project Team. (2015). A comparison of maternal attitudes to breastfeeding in public and the association with breastfeeding duration in four European countries: results of a cohort study. *Birth*, 42(1), 78-85.

A study looking at breastfeeding duration and parenting behaviours

Introduction

Breastfeeding has often been defined as baby-led (i.e. breastfeeding on demand, duration of breastfed sessions), which may be in contrast with parent-led routines. Little is known regarding early infant feeding practices in relation to parenting behaviours and choices. Yet, it is still unclear how these elements might apply to parenting a child, and their impact upon the infant. As such, this study examined the association between early parenting behaviours and breastfeeding duration.



The study

508 mothers completed a self-report questionnaire exploring details regarding breastfeeding initiation, duration, and exclusivity. Participants also indicated whether they breastfed or formula fed soon after birth, breastfeeding duration or cessation, formula milk and solid food introduction. Mothers also responded to questions concerning their approach to parenting their infant; these questions examined maternal involvement, responsiveness, sensitivity, and discipline.

Findings

The study found that mothers who scored higher in parent-led routine were less likely to breastfeed their infant. On the contrary, breastfeeding initiation and continuation was associated with maternal nurturing behaviours (e.g. keeping the infant as close as possible). Finally, greater maternal anxiety scores were associated with the use of formula milk from birth.

Conclusions

In order to support and help pregnant women and new mothers, health professionals need to take into account maternal anxiety as well as choices regarding parent-led routines and infant independence, as these may have a negative impact on breastfeeding initiation and duration. In addition, more awareness needs to be raised on the influences that parenting styles may have on breastfeeding.

Reference

Brown, A., & Arnott, B. (2014). Breastfeeding duration and early parenting behaviour: the importance of an infant-led, responsive style. *PloS one*, 9(2), e83893.

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IFN research studies

For further information regarding our projects and events please visit our website: <https://www.brookes.ac.uk/phpd/psychology/research/groups/developmental-psychology/infant-feeding-network/projects-and-events/>

Please help us to find out more about infant feeding practices by taking part in our research.
Thank you 😊