

# Breastfeeding **Matters**

[www.laleche.org.uk](http://www.laleche.org.uk)

## **Ode to my Husband**

A story of love and support

## **Mindful Breastfeeding**

Enjoying a  
shared journey  
through gentle  
practice.

**Twelve Months  
of Mothering:  
Making It  
Up As We Go  
Along**

# 219 May/ June 2017



# La Leche League GB

mother-to-mother support for breastfeeding

**La Leche League GB**  
**—How To Get Help**

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0345 120 2918

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La Leche League International  
for breastfeeding information

**LLLGB because Breastfeeding Matters**

is our Facebook page where you can find articles and plenty of support from Leaders and mothers

**Twitter@LLLGB**

is the way to keep up with all that  
LLLGB is doing right now

**La Leche League GB**  
**—Breastfeeding Matters**

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# Editor's Letter



Welcome to yet another edition of *Breastfeeding Matters*! The days have finally gotten visibly longer and I often wonder whether there is a correlation between being exposed to extra sunlight and having a more optimistic take on life. It seems to me that in those dark winter afternoons the challenges of motherhood can look a lot more daunting than they appear on a warm, sunny spring day, when I have the energy to face almost anything.

Perhaps other mothers share the same feeling and I wonder whether it is a coincidence that most of the stories in this issue choose to celebrate the joys of mothering and breastfeeding over the difficulties that tend to accompany them. The challenges are still there, but having a positive attitude and the right support can make a radical difference in the way we view things.

I loved reading Jo's article on mindful breastfeeding and her account of how being attentive to what happens for her and her baby as they nurse has strengthened the bond between them. Catherine's positive story about expressing on the move for her baby daughter who never latched onto her breast was also very inspiring. And Lara's ode to her husband literally brought me to tears: how wonderful to know that she was able to find her one and only who has supported her unquestionably throughout the storms of motherhood and breastfeeding!

Alison delights us with a wonderful article on putting on the mask of motherhood and suffering from impostor syndrome and Dr. Amy Brown, Associate Professor at Swansea University, tells us all about her research on breastfeeding in a very detailed interview that I'm sure you will all enjoy.

Have a great time reading and don't forget to share your stories with us!

GG (Eva Gisella Natali Williams) is a Leader in North Oxfordshire and is mum to Caterina (6), Serena (5) and Ben (3).



# How To Get Support



[www.laleche.org.uk](http://www.laleche.org.uk)



0345 120 2918



LLLGB because breastfeeding matters



@LLLGB



**La Leche League GB**  
mother-to-mother support for breastfeeding

**Our LLLGB website is an excellent source of support and information.**



La Leche League GB

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## Get Support

There are a range of ways LLLGB can offer you support with breastfeeding



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Photo courtesy of Harri Taylor

# Mindful Breastfeeding

Jo Bardsley, LLL Waltham Forest

Like many mothers, I spent much of my daughter's early days fretting about breastfeeding. Was her head at the right angle? Did she have enough of my breast in her mouth? Was enough of her lip rolled out? I also struggled with the usual discomforts as my nipples adjusted to their new role, as well as the sheer amount of time my baby needed to feed. Having previously used mindfulness to help teenagers manage their emotions as part of my job, I began to use it as a mother to help me meet the challenges of breastfeeding.

One of the principles of mindfulness is bringing attention to what is going on in the moment, without judgement. When I am in pain, I am often angry; I cast about desperately for a solution or escape from the situation which is causing me pain. Releasing myself from this process by just accepting the sensations without judgement or emotional response greatly lessened the discomfort I felt in the early days of breastfeeding.

## BREATHING

Noticing the breath and listening to it is the start of many mindfulness practices. When I started to pay attention to how I was breathing, I found that I had been tensing up and holding my breath before bringing my baby to the breast, partly because I was anxious about getting the latch

right and partly in anticipation of pain.

I found that consciously breathing out my tension before bringing my baby to the breast helped me to move more

naturally and achieve a more comfortable latch. At really

challenging times, it was

useful to say a single word like 'calm', 'peace' or 'love' to help let go of anxiety and stress.

Slow, calm breathing can help lessen the experience of discomfort as it reduces the release of stress hormones and can promote the release of oxytocin, the 'feel good'

hormone. Focussing on

breathing deeply and evenly meant that I wasn't fixating on the less pleasant sensations of early breastfeeding. I kept reminding myself that this phase would pass, and so it did.

## USING THE SENSES

Using my senses to explore my contact with my baby as we feed is the tool I find most useful. In the beginning I started by focussing on each sense – sight, sound, touch, taste and smell – for three breaths. Now I find I can spend a lot longer on each one, really exploring the detail of what I experience.

I start with touch. I notice my

Gentleness is also a key concept in mindfulness. Being gentle with my baby is easy, but I have to work at being gentle with myself.



baby's soft weight as she rests against me, feeling her small movements and the texture of her skin against mine. Next I listen to the noises she makes as she feeds. If she is making eye contact with me, I try to meet her gaze calmly and with love. If her eyes are closed or she is looking elsewhere, I take the time to pay attention to the shapes, colours and textures of my baby. The sense of smell is sometimes the most challenging, especially when it comes to the scents of my own body; I have to remind myself that the aim is to notice, not to evaluate or judge. I remind myself that to my baby, I smell of comfort and security.

### A GENTLE PRACTICE

Mindfulness is a practice, it isn't something one gets right immediately. Practice implies experimentation, trying out different things, a willingness to get things wrong in order to find what works. It is relaxed and playful, because even if things aren't great this time round, you can have another go later on.

I found that thinking of breastfeeding as a practice as well was helpful because it gave me permission to be less than perfect. It helped me to stop stressing about my baby's latch and to be more receptive to what my daughter was able to do for herself. I realised that we were practicing together, that breastfeeding was a shared journey. It may sound obvious now, but at

the time it was a revelation.

Gentleness is also a key concept in mindfulness. Being gentle with my baby is easy, but I have to work at being gentle with myself. Very often my inner voice says harsh, critical things. When I bring gentle, forgiving attention to my actions, my inner voice has to soften and be more patient.

When I notice that my attention has wandered off, or I have absently picked up my phone and am getting angry over the news, I don't beat myself up over it, I just bring my attention back to what we are doing.

When I have managed to be mindful about feeding my daughter I feel like I have nurtured myself and our relationship, as well as providing physical nourishment. Being attentive to what is happening for me and my

baby as we breastfeed has strengthened the bond between us and has enriched my experience of mothering. I hardly ever manage, or even attempt, to be mindful throughout each feed, but I do try to include at least a little mindful awareness each time.



Photo courtesy of Melodie Roulaud



# Poem

## Baby Self Weans



Photos courtesy  
of Alison Moffatt



Breastfeeding ends a lot like it starts  
With a leaking left boob and an emotional heart  
Breasts so engorged, they're sore and they drip  
So big it feels like your top could just rip.

But now there's no need to store your milk  
Instead you watch, as it swirls like silk  
In the bath that you sit in alone while she sleeps  
Where you weep and you leak and you leak and you weep.

There once was a day that you dreamed of this time  
When you hated the pump, and you wanted the wine  
You imagined an hour she wouldn't need to eat  
On those endless nights; feed, sleep, repeat.

But you thought it'd be different; you thought you'd get to choose  
Now you feel, you had everything to loose  
She's getting older now and she no longer craves  
The liquid gold you produced for those years, months and days.

So enjoy all those feedings – in restaurants and bars  
Swimming pools, coffee shops – the back seat of cars  
You'll never know when it could be your last  
And how much you'll long for those days in the past.

By Alison Moffatt, LLL Northampton



# Spot the difference!

Parents from LLL West Sussex are chatting about pumping during a recent meeting.

Can you tell what has disappeared in the second picture?

There are 8 differences to find! Good luck!



# Twelve months of mothering: Making It Up As We Go Along

Alison Jones, LLL Oxfordshire



Photo courtesy of Melanie Smith

...we all play roles  
in life. We wear  
different masks,  
presenting a  
public self and a  
private version...

When I had a baby, I put on the mask of motherhood. Nobody had told me how to be a mother, so I had to pretend to know what I was doing. Putting on an air of confidence protected me from my own discomfort and vulnerability through this major life transition, for which my only preparation had been to redecorate and rearrange a bedroom, and accomplish the fulfilment of an unreasonably large shopping list. Later I was to discover that the room would not be in use for some years, and I didn't need most of my purchases.

My mask was uncomfortable and unfamiliar to begin with, and as I and other becoming mothers I knew began to armour ourselves for the world, I could feel my own frustration and disconnection. My motherhood was now a persona and protection mechanism against the judgemental face of society, custom made, but in some way interchangeable with the armour that other mothers were wearing. I had wanted to be a certain type of mother,

to mother in a certain way; perhaps it is human nature to categorise and oversimplify. I wanted to be beyond imperfections, enough for my children, these amazing beings I had brought into life; and I was terrified that somebody would find out that I didn't know what I was doing.

The markers of the territory I was in were all new. Before I had a baby, I knew who I was, I had applied labels to myself based on my qualifications and career, I thought what I did in the outside world defined me by name and by nature. I still felt like a bit of a fraud though, a seventeen year old mind inside the body of a thirty something woman, who wore formal business dress and sat on academic boards and think-tanks during the week, but reverted to Dr. Martens boots, leggings and band t-shirts at the weekends. I never thought I was any good, despite what other people said, and even though I only admitted this in private, I



was constantly waiting to be found out.

Impostor syndrome, as these kinds of feelings of self-doubt can be known, is extremely common in contemporary society. The constant stream of constructed perfection and the voyeuristic pleasures of social media can feed our insecurities as mothers, new travellers in a new landscape, without a map to tell us where we are going. We think everyone else is doing better than us, with what appear to be perfect homes and families. Women are under tremendous pressure to be all things to all people. We may be all to our children, support for a partner and have an ageing family that needs our support too. We must be everything and do everything. It can be crazy-making, especially if we feel we are surrounded by others who are completely winning at mothering.

For me, this is where La Leche League came in. I had felt like an impostor in the group of mothers I had met antenatally: all beautiful strong women, yet making quite different choices from me, and I felt alone in doing things the way I had chosen to do them. They had even affectionately given me a nickname, and somehow it didn't feel right. As I walked tentatively towards my first La Leche League meeting, I hoped to find the people with answers about how to be a mother, but I was terrified too because they all appeared to know what they were doing. I had no idea at the time that they were all making it up too.

To an extent, we all play roles in life. We wear different masks, presenting a public self and a private version that we share only with those who are closest to us, morphing between the two depending on circumstances. As we tend to live at a distance from those we are closest to, this can make the early and ongoing days of mothering even more challenging; we don't know which versions of experiences others share with us are authentic and which are constructed ideals. Maybe having a façade is part of the human condition and maybe, as mothers, this is why we always think we could be doing better, in almost any situation. Being a mother is hard work, maybe the hardest job of all, and because it is so important we place enormous pressure on ourselves to get it right.

Maybe though, all of us are the mothers we wanted to be, because we are the mothers of our children. It is not easy to be perfect, because perfection is not reality. La Leche League meetings can help us by reminding us that we are mothers, not machines, and we have the wonderful human qualities of warmth, affection and empathy. Talking things through, celebrating small successes and sharing tea go a long way in enabling self-esteem in a mothering situation when we may be at distance from family and like-minded others. La Leche League's philosophy states that every mother knows her own baby best and in this way comparisons, and 'Facebook syndrome' if you will, are redundant. We never really know what other families are like, as we are only presented with edited versions of circumstances. Mothering is full of challenges and every mother, every day, probably struggles with something and wishes she had done something differently. If we can broaden our perspective and connect with other mothers, we can realise that tunnel vision isn't helpful, whereas shifting our focus to foreground empathy and celebrating what went well can lead to a much happier existence. Our children may well benefit from seeing mothers who are open and connected: modelling is a powerful thing, even if we make it up as we go along.



Photo courtesy of Alison Jones

# Ode to my husband

Lara Jones, LLL Cambridge

I met my husband when I was twenty three. I was working as a temp in the marketing department of a mobile telephone technology company (that ages us; no one says mobile telephone anymore). The company had been founded by a professor at Cambridge University and he was bringing one of his hot-shot physics PhDs (read super-geek) to the company to write algorithms. Physics, PhD, algorithms – suffice to say I didn't think we'd have that much in common. Added to this was the hilarious fact that his name was Aled Jones. Not *the* Aled Jones we mocked, clearing our throats for yet another hilarious rendition of 'Walking in the Air' in silly high pitched voices. How we laughed; then he arrived.

On that first day I briefly met a shy, very handsome young man, who at once seemed impressively self-contained and yet somehow bursting with camaraderie and laughter. It would only be later that I'd discover his seriousness and insight, compassion and ambition. But for now all I knew was that I didn't want to sing 'Walking in the Air'

anymore because, as it turns out I *had* just met *the* Aled Jones, my Aled Jones, the man I was going to marry and the father of my children.

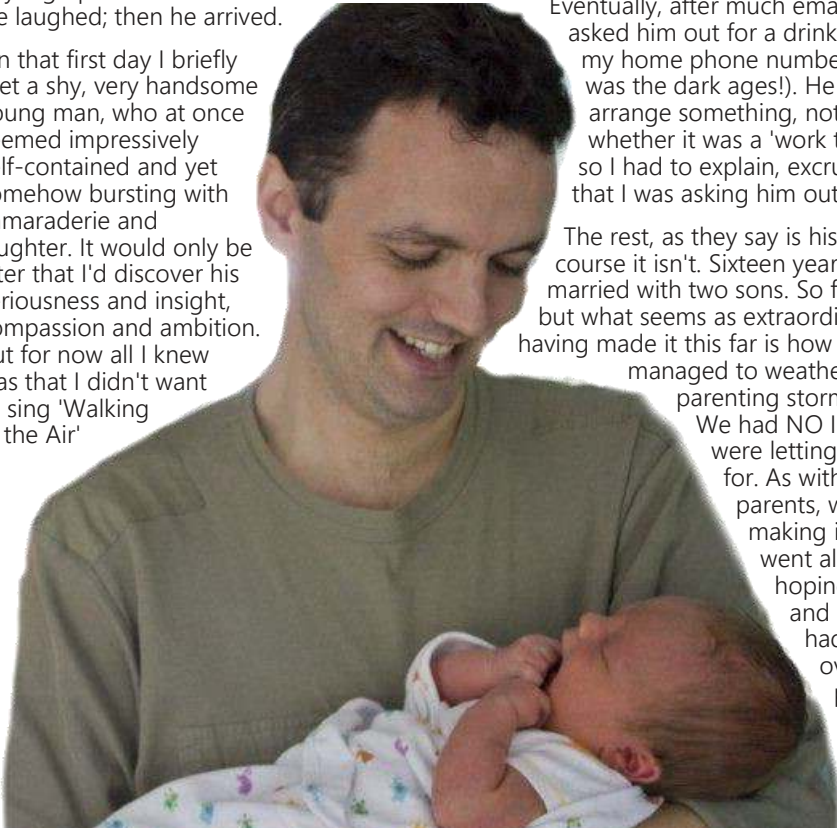
We both remember chatting over the photocopier (people still use photocopiers right?!): he was the only person in the office who seemed vaguely interested in my plans to start a History of Art MA. I suppose we were both graduates of a similar age, but something about the way he listened so intently and looked at me in such a singular way made me deeply uncomfortable and thrilled all at the same time.

Eventually, after much email flirting, I asked him out for a drink giving him my home phone number (you see it was the dark ages!). He rang to arrange something, not sure whether it was a 'work thing' or not so I had to explain, excruciatingly, that I was asking him out ON A DATE.

The rest, as they say is history, but of course it isn't. Sixteen years later we are married with two sons. So far so normal, but what seems as extraordinary as our having made it this far is how we've managed to weather the parenting storm together.

We had NO IDEA what we were letting ourselves in for. As with all new parents, we were making it up as we went along and hoping the love and respect we had accrued over the preceding years would sustain us.

He held me up  
when I was  
flailing, gave me  
the courage of  
my convictions  
when I doubted  
myself...



Some days the account looked dangerously low, some days we went overdrawn. But something weird has happened in the 36 months since the youngest has been born, the months when we were too exhausted to even check the account. Curiously there's been exponential growth, suddenly we have something to fall back on, a buffer, as my husband likes to call it. We can look at each other lovingly again. We can relax.

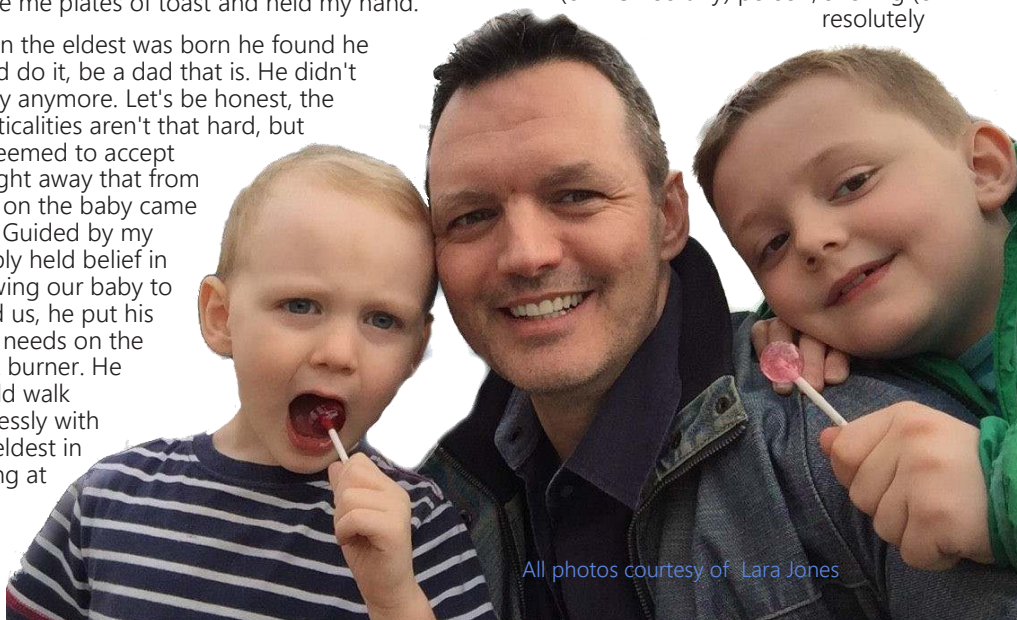
When I found out I was pregnant with our eldest my husband was terrified. Would he be able to do it? He didn't know how. However, once the pregnancy sickness really kicked in around week seven, all those insecurities took a back seat because I was too ill to function normally. He took over our day to day and all the baby planning. He did everything from buying baby grows to building furniture. He watched me sit ashen faced and nauseated every evening for seven months and never once suggested it should be any different; that I should still be my usual glamorous and sexy self (hah!). He never once resented the toll the pregnancy was taking on me, he accepted my low mood, my disappointment that I couldn't be a yummy mummy (still haven't nailed that) and my sharp and nasty comments when the fatigue hit critical mass. We stopped going out, we didn't make any of our scheduled visits to see his family in Wales. He just sat next to me on the sofa and watched box sets, made me plates of toast and held my hand.

When the eldest was born he found he could do it, be a dad that is. He didn't worry anymore. Let's be honest, the practicalities aren't that hard, but he seemed to accept straight away that from now on the baby came first. Guided by my deeply held belief in allowing our baby to need us, he put his own needs on the back burner. He would walk endlessly with the eldest in a sling at 3am

because I was exhausted but couldn't let him cry, and then go to work the next day, again with never a word of resentment or blame. He wanted to do it, he wanted to parent, to be a dad, and he seemed to understand instinctively that for that a certain selflessness was required, a selflessness which he graciously accepted.

We have an understanding, now that we live in the brutally unforgiving world of TWO children, that he will be, on balance, the one less 'child tired'. So although he maybe 'meeting, or airport or conference-keynote-speech-giving-tired' or 'chairing-a-working-group-at-the-Houses-of-Parliament-tired', he still comes through the front door and goes straight into bath time, often without eating, let alone insisting on a bit of time to unwind.

He held me up when I was flailing, gave me the courage of my convictions when I doubted myself, let me swear and rant and rave about the ridiculousness of breastfeeding/co-sleeping/full-time mothering without ever losing his temper, without telling me to "just stop then". He took the rants as his part of the deal and, on so many dark, dark nights as I watched his sad little face turn away from me (after having to endure yet another venomous midnight monologue from me on the theme of "I Hate My Life") and leave our spare bedroom in which I felt imprisoned by a tiny (or NOT so tiny) person, snoring (or resolutely



All photos courtesy of Lara Jones



NOT snoring next to me), I secretly said a little prayer of thanks because I knew I had a good man.



The transformation from couple to parents is now complete, we are Mummy and Daddy. It chills me to think it, but it also makes me inordinately happy. To watch a man become a Dad is a true honour. And on those days when I think I might have to run screaming for the hills I know it's going to be okay because Aled will be home soon. But it couldn't be just anybody, it'll be okay because it's him. I need him, the only other person in the world who gets it, the person who helped me grow from insecurity to self belief, from woman to mother.

So now when I get asked by the Amazon delivery man at the door, or the cold caller on the phone "Ooo not *the* Aled Jones?" I say yes, yes *the* Aled Jones, my one and only.

## Would YOU like to support other mothers to breastfeed?

Then the La Leche League International accreditation process may be the life changing experience you are looking for.



To find out more about becoming an LLL Leader, speak with your local Leader about the prerequisites and the role.

Making the transition from being a mother to being a mother who is also an LLL Leader could just be the fulfilling adventure you have been waiting for!

Contact:

[applicationenquiries@laleche.org.uk](mailto:applicationenquiries@laleche.org.uk)  
for more information.



La Leche League

# Expressing on the move

Catherine Hanby-Bowes

My little girl prefers not to latch on me, having had tongue tie and a bad experience in hospital where our midwife was not terribly gentle and supportive. I have however expressed my milk for her in many unusual situations.

## IN THE CAR

Expressing can be a tricky thing to manage, but I have continued to pump on our adventures, wherever possible. My partner bought me a pump as a Valentine's present and if our little family goes out for the day, I make sure to bring my kit (including the power adapter) along. As a passenger in the car, I have pumped on most of the roads and motorways in the West Midlands. I try to put my jumper or a cloth over my front so as not to flash anyone, although one day I was sitting there with the pump trying to get our lunch out and a lorry driver gave me a double look. I waved at him, he glared and kept his eyes firmly on the road.

## ON A FERRY

It was about four hours before our ferry would arrive at its destination, but my breasts were really uncomfortable and my little girl was drinking a lot of expressed milk. So, while Daddy was holding her I put my coat over my upper body and zipped up. I grabbed my kit and dragged it under the coat: I looked like a green squid with pipes and wires trailing from underneath! No one could see anything, but my pump makes a distinctive noise and people could hear what sounded like a frisky hedgehog under my coat. I was glared at by an elderly lady and I said "don't worry, I am just making my daughter's lunch". She huffed and moved away; she didn't appear to be impressed. I, on the other hand, was more than impressed as I managed to get about 60z out in one go.

## AT OUR WEDDING

When I ordered my wedding dress I factored in the fact that my bust would expand a lot and that I would need to hide a nursing bra, but I hadn't quite thought about how to express milk while wearing it. I knew that I would have to pump at various points during the day, so I

asked a friend (we nicknamed her "lady of the milk") to bring me my pump and bottles regularly during the reception. It wasn't until I set off from my Dad's house that day that I had the idea of using clothes pegs to help me with the dress while I was pumping. I quickly grabbed a nice set of strong ones and popped them in my pumping bag. During the reception I went off to the venue's changing rooms and pegged up my dress to expose my breasts, making sure none of it fell on the pump. Pumping done. I carried on as normal until late evening when I swapped dresses and got on the dance floor. After more dancing I went to pump again. At that point it was late evening and my cousin in law (a breastfeeding counsellor) and I were the only ones in the room. As I started pumping, two small children who appeared to be doing circuits of the building stopped to watch what I was doing. I explained that it was normal and that I was just making sure my little girl had enough milk for bed time. They said "oh ok then" and carried on with their running around.

I hope that other pumping mums will be inspired to give it a whirl too. Even when our little people don't want to or can't latch onto our breast, they can still have our milk!

You can read more about expressing your milk on our website: <https://www.laleche.org.uk/expressing-your-milk/>



Photo courtesy of Harriet Taylor





# Broccoli Pasta

When I agreed to write out a recipe for this page, I didn't realise how difficult it would be, nor how similar it would be to giving information about breastfeeding. When we are supporting new mothers to breastfeed, we always talk about how each family is the expert on their own baby, rather than giving prescriptive rules. Similarly, this recipe is very adaptable, so please feel free to make it your own to suit your family.

I first started making broccoli pasta several years ago, after watching my husband's Italian aunt create this most amazing dish out of a head of broccoli and a bag of pasta. The recipe is dairy free and could easily be made vegetarian or vegan, by leaving out the anchovies. If you use gluten free pasta, it could be a gluten free dish too. You could also experiment with other vegetables – cauliflower or other greens would probably go well. I vary the levels of spiciness depending on who is eating it. Often, I make the sauce a day ahead of time or even in the morning, when I don't have hungry children desperate to eat at that very moment. Then I can just make pasta at the last minute, heat the sauce and have dinner ready quickly.

## INGREDIENTS:

2 large heads of broccoli (about 1kg worth)	Salt and pepper
1 small tin of anchovies packed in oil (30g)	500g dried pasta
4 garlic cloves, finely sliced	1 tsp of arrabbiata herb and spice mixture (a combination of chilli flakes, dried parsley, dried basil and dried garlic) - you could just add the herbs if you don't want it to be spicy
6-8 tablespoons of olive oil	

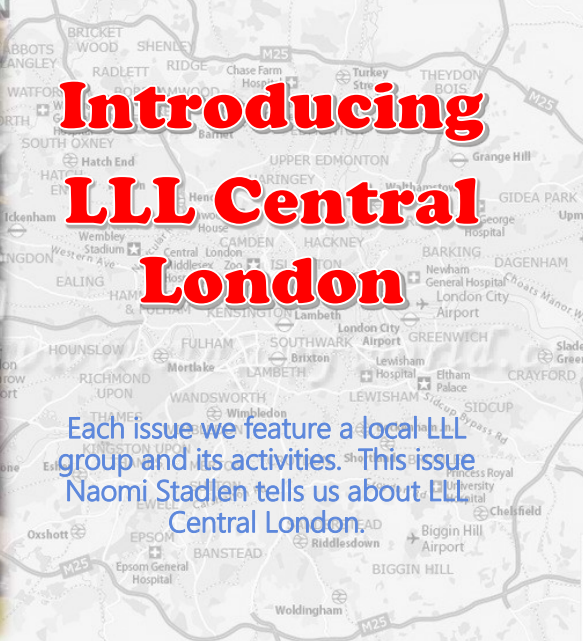
## METHOD:

1. Cover bottom of wide, heavy saucepan in olive oil. Add anchovies, anchovy oil and finely sliced garlic and cook over a low heat, until the anchovies melt and break up and the garlic starts to soften. Avoid burning the garlic, as it may make it bitter.
2. Trim and slice the broccoli stems and florets into small pieces and add to the pan. Add the arrabbiata spice mix, if using, or enough dried chilli flakes, basil and parsley to taste (approximately 1 teaspoon in total). Gently fry the broccoli, until it is soft and slightly caramelised – it may take a while, but it only needs occasional stirring, to avoid it sticking or burning. Taste and adjust seasoning; you may not need to add any salt if you have used salted anchovies; also consider the fact that you will be adding some salted cooking water later.
3. When the broccoli seems nearly done, or when you are almost ready to eat, put a large pot of well salted water on to boil. Cook pasta according to instructions or to taste (I prefer it al dente, but this is often up for debate in my family).
4. When you drain the pasta, be sure to save a mugful of the salted pasta cooking water. Add the drained pasta to the broccoli sauce. Slowly add some of the pasta cooking water to the pot, stirring well. You want to add just enough water to bring it all together into a sauce that coats the pasta, but is not watery.



# Introducing LLL Central London

Each issue we feature a local LLL group and its activities. This issue Naomi Stadien tells us about LLL Central London.



## HOW LONG HAS YOUR GROUP BEEN ACTIVE FOR IN YOUR AREA?

Records are missing, but earlier than 1986. I joined in 1989 when the group was already active. It was then the Camden and Islington Group, and I later changed it to Central London because that was where mothers were coming from.

## WHAT TYPE OF MEETINGS DO YOU HOLD AND HOW OFTEN?

We hold monthly series meetings in the homes of volunteer mothers. London homes differ. We've crowded into a tower-block flat, or spaced out in a large, elegant home. Yet the meetings are similar. Mothers listen to, and encourage each other, and are understanding and loving to their children.

## WHAT OTHER WAYS DO YOU HAVE OF OFFERING SUPPORT TO YOUR LOCAL MUMS?

Mothers contact me by email or telephone for individual help.

## WHY DO YOU LOVE YOUR GROUP?

That's difficult for me to answer because I've led the group since 1990. So I asked some mothers who come regularly. 'I come away, feeling uplifted,' said one mother. 'And it's friendly to be in another mother's home.' Another mother said: 'It gives me a little boost. I come feeling I'm done with breastfeeding. I want to stop. The meeting just feels like a chat. But after, I feel I can carry on. I realise the up-and-down feelings about breastfeeding are normal.' It's wonderful to know that our series meetings are so supportive to the mothers who come.

## IN WHAT WAY DO YOUR MEMBERS HELP LLL CENTRAL LONDON TO KEEP GOING?

Some remain members even when they can no longer come to meetings. And mothers breastfeeding older children value our meetings very much. It's easy to feel lonely and self-conscious breastfeeding an older child, even in cosmopolitan London. At La Leche League meetings, mothers can relax and breastfeed calmly. Their children play together, and I've noticed how contented and gentle they are. They have received good mothering.

**Breastfeeding Matters** is a source of  
**support and enjoyment** for many parents.

Without stories from parents like you it wouldn't be the  
**wonderful** publication it is today.

**Do YOU** have a story to tell?

**Do you** want to help **reASSure** other parents that what  
they are experiencing is **normal**?

Share your story with us by emailing it to  
**editor@laleche.org.uk**



Photo courtesy of Wei Cope



# Mothers on... Nursing Strikes

We asked mothers across the country to share their experiences of babies suddenly refusing the breast for a few days.

**Gemma:** My nursing strike lasted a day and a half and I found it really upsetting. I felt reassured when our health visitor told me it was about baby and not me. Some of the things that helped end the strike were offering the breast while baby was sleepy, giving him something to suck on to trigger his sucking reflex right before offering the breast, and having a hot shower or applying warm compresses on the breast before feeding.

**Emily:** Teething was the reason behind our first nursing strike. I offered the breast often, but remained calm when my baby refused it. I hand expressed to relieve my breasts and used that milk to make breastmilk ice cubes which I wrapped in a muslin cloth for him to gnaw on. We tried different nursing positions, lots of skin to skin and baths together, but we were mostly successful when he was sleepy. We have had three nursing strikes so far and our longest one was three days long: it was stressful, but he came back every time!

**Tessa:** Our most recent nursing strike had us parents convinced our two year old was going to night wean. He had a head cold so we gave him a sippy cup with water at night when he was getting frustrated. When the cold went a week later, so did the new nighttime routine...

**Melissa:** Strikes for us tended to happen during very hot periods, as I think my baby boy found nursing too sweaty. I expressed as often as possible to maintain supply, and he would take my milk from a bottle. We had lots of "no pressure" skin to skin cuddles and eventually he went back to the breast again.

**Jana:** My boy prefers one breast over the other and has names for them, 'baby' and 'big baby'. He often goes on 'big baby' strike as he prefers 'baby'. I have to wait till he is sleepy and sneakily swap them.

**Rebecca:** One thing that worked for us during a nursing strike at eleven months was feeding in different places and positions. For example, I fed standing up in my daughter's bedroom and also squished on the floor of the bathroom while waiting for the bath to run! The element of surprise and something a bit different got her feeding again.

**Ilana:** Soon after starting at nursery we went for a weekend away in a cottage in rural Wales. My daughter, who was around a year old, seemed unsettled and put out by the changes and refused to nurse. I was pretty rattled as I didn't have access to a pump and found it difficult to hand express. However I made no fuss and just kept offering gently. Finally with lights off and in her sleeping bag she latched on to get to sleep and we were back to normal.

**Katherine:** We're currently living through a nursing strike with my 10 month old! It absolutely feels like there is no chance of him ever being bothered again! I think it's OK to allow yourself to feel sad, guilty, frustrated and fed up for a few minutes, because it is emotional – breastfeeding has been a central part of your relationship since birth and this wasn't in your plans... It then helps to put on your sensible, pragmatic head and stay calm, not showing your frustration and looking after yourself.

**Laura:** My little girl had a nursing strike when she was 3 months old and I was so close to giving up breastfeeding. She used to scream every time I tried to feed her and she would refuse to latch. I found that what worked best for us was to get her to be almost asleep by rocking her and then latch her on and basically dream feed her. Thank goodness after a couple of days of that she was back to normal.

**Nilgun:** Luckily my nursing strike only lasted one day. Keep calm and don't feel guilty or upset; offer the breast often and give lots of cuddles.

**Nic:** We kept trying for three days and our daughter was more cooperative when she was drowsy. I would give her a dummy to get her interested and then switch.

**Zena:** My son went on a nursing strike around nine months after a period of illness. One night he breastfed as normal, but didn't seem to want to feed in the morning. I thought it was weird, but went about our usual morning routine. At 11am he had still not asked to nurse and at this point I was noticeably full and uncomfortable since he hadn't fed for five hours. When I offered the breast he refused it, so my husband stayed with him to let me express milk to reduce my discomfort. I pumped again at 4pm in between offering the breast, taking a warm bath and spending time skin to skin. He finally asked to nurse at 7pm!! It was only 13 hours, but it felt like a lifetime!

**Lauren:** Our first nursing strike went hand in hand with cutting two teeth. All I could do was persevere, offer, pump and cuddle and after a few days everything was back to normal. Having never experienced something like that I think I found it more upsetting and distressing than he did!

**Audrey:** Keep calm! Keep offering, but pretend you don't mind if baby refuses. Spending time skin to skin and trying to nurse when baby was sleepy worked for us.

**Miriam:** My daughter was so upset by my forceful let down that at twelve weeks she went on a complete nursing strike. I found it extremely hard to deal with emotionally! We gave her expressed milk for a couple of days plus lots of reassuring cuddles and I tried feeding her lying down; this seemed to make it much easier for her to cope and eventually we came through it. At ten months now she's still breastfeeding and loves it more than ever!

**Jill:** It was the worst experience ever! I was out and about in my home town and my daughter decided she didn't want me! She cried all the way back to my mother's house where I finally managed to give her a little milk. She was so exhausted by it all she went straight to sleep.

# Interview with Dr. Amy Brown

Associate Professor in Psychology, Department of Public Health, Swansea University



*Dr. Amy Brown specialises in infant nutrition and breastfeeding. Her research focuses on trying to understand how interpretations of being a 'good mother' can affect our decisions about how we feed our babies. She is an editor for the International Breastfeeding Journal and the Open Access journal PLOS ONE. She recently published the book "Breastfeeding Uncovered" which is currently under consideration for inclusion in the LLLGB list of books suitable for book libraries. Our Contributing Editor Sophie Burrows contacted her to ask her a few questions.*

## HOW DID YOU BECOME INTERESTED IN BREASTFEEDING AS A RESEARCH TOPIC?

I'd love to say this was a well-planned career choice, but I came to it almost by accident! I have a degree in psychology and was always interested in health and nutrition for older children and adults. When I first started my PhD I was planning to look at interventions to support healthy eating in school age children, but about two weeks in I realised I was pregnant with my first baby! At that point I

knew very little about breastfeeding: I will fully admit to thinking breast and formula feeding were just two equal choices, you picked one and got on with it. I soon realised that wasn't true.

I met lots of women who'd had challenging breastfeeding experiences and they often told pregnant me that breastfeeding was hard and many women can't do it. I became very intrigued by this as it seemed strange to me that a biological norm was seemingly failing so often. I started reading the literature around breastfeeding and became well and truly hooked! I ended up changing my PhD topic to explore the societal barriers women face in breastfeeding and have carried on ever since. I also managed to have two more babies during that PhD and have a lot of fond memories of reading and typing whilst literally breastfeeding!

## TELL US ABOUT YOUR BOOK 'BREASTFEEDING UNCOVERED' AND HOW IT CAME ABOUT.

I had spent around ten years researching influences on breastfeeding duration, particularly focussing on the different psychological and social factors that could affect a woman's experience. I had been quite involved with the media and talking about my work generally online and found that there was a big interest – or at least a big debate – in what I was doing. As I kept hearing stories about mothers who couldn't breastfeed, women who thought breastfeeding was too difficult or that it shouldn't be done in public, I felt that I needed to get my research findings into an accessible form that pregnant women and new mothers could read. I thought the book would also benefit those with a wider interest in supporting mothers and my dream is for it to be read more widely amongst people with no interest in babies or breastfeeding, as they are the ones whose attitudes can often make such a difference, even though they're not aware of it!

As I was finishing my book, The Lancet Breastfeeding Series was published and the UNICEF Baby Friendly Initiative launched a Call to Action for Breastfeeding in the UK. Research, policy and practice have come to



recognise the large role that everyone can play to create a supportive environment for breastfeeding women. Enabling breastfeeding can be seen as a societal responsibility, not just an individual one, and my book explores ways to overcome societal obstacles to make the UK and other countries more breastfeeding friendly.

**IF YOU COULD PICK ONE PERSON, WHO WOULD YOU LIKE TO READ YOUR BOOK THE MOST?**

Only one? I could pick thousands! However, if I had to choose, I would go back in time to about 1860 and give a copy to Justin von Liebig who created and patented formula in 1864. Perhaps I would be able to convince him to ensure that his product was only used when necessary and not considered as a way to make money! I picked 1860 as I figure it might take a while to persuade him!

*You cannot spoil a baby. By responding to your baby's needs the only thing that you are teaching them is that they are secure in the world.*

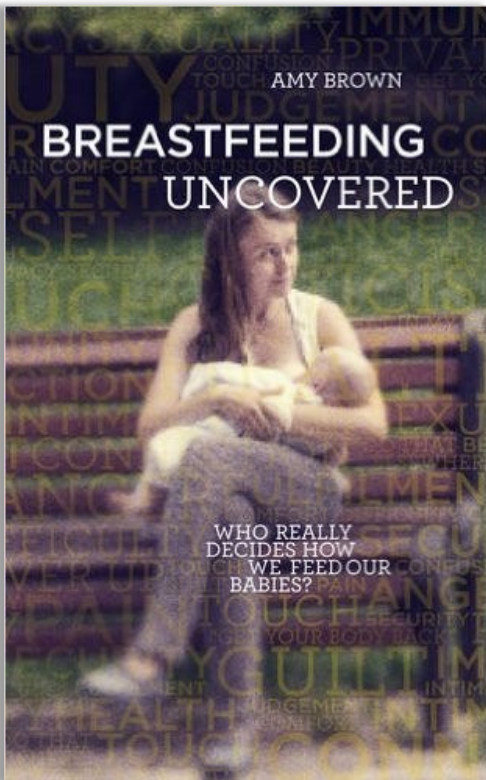
**WHAT IS THE MOST SURPRISING FINDING OF YOUR RESEARCH?**

I think what surprises me so much about my research is that as a society we have somehow, in a relatively short space of time, forgotten what breastfeeding is really like. We think normal breastfed baby behaviour e.g. feeding lots, wanting to be held, not sleeping through the night, means that there is something wrong with the baby which needs fixing. We've become intolerant to breastfeeding too – seeing it as something sexual or indecent – which couldn't be further from the truth. It shocks me that these things are so widely believed and passed on. We really must reverse this before it becomes too late to change.

**WHAT IS THE MOST IMPORTANT MESSAGE YOUR RESEARCH IS GIVING?**

I think overall a key message is to trust your instinct when it comes to caring for and feeding your baby. If they want feeding, feed them. If they cry, pick them up. If you want to cuddle them, cuddle them. You cannot spoil a baby. By responding to your baby's needs the only thing that you are teaching them is that they are secure in the world. Someone loves them, meets their needs and cares for them. Babies are really vulnerable: being born must be pretty unsettling! One minute you're warm, held and have constant food and the next minute you are overwhelmed by bright lights and you miss your mum. It's normal and protective for babies to want to be kept close and responding to them helps them feel settled. Feeding is of course a big part of this, and not only does feeding responsively (e.g. whenever they want) help to maintain milk supply, but it also helps babies feel that someone cares enough to meet their needs.

Unfortunately society doesn't seem to agree with this approach: it likes babies to be settled and needing little interaction. It promotes not responding to babies, particularly at night, and trying to get them to have 'needs' less often. My main aim is therefore to use my research and expertise to convince society that we just need to love and respond to our babies more, and that of course includes breastfeeding.



## **WHAT IS THE MOST DIFFICULT THING ABOUT UNDERTAKING YOUR RESEARCH?**

I have to say it's the near constant criticism. The internet is a wonderful place and lets messages be spread quickly and easily, but also opens you up to keyboard warriors and trolls. I quite regularly get emails telling me I am wrong and to please stop doing what I am doing. The most common request is that I please stop talking about societal issues on breastfeeding as they do not exist – barriers are only physiological and I'm talking nonsense (or spreading hatred of women). It's a strange one, because on the one hand they can be quite nasty emails, but I'm often left feeling sorry for them. Who let them down? How did they get to this stage where they are emailing a stranger? Why do my words touch such a nerve? It's symptomatic of the problem we are trying so desperately to fix really.

## **WHAT IS THE MOST ENJOYABLE THING ABOUT YOUR WORK?**

I love it when I know I have actually helped someone through what I do. I might not be there helping them to latch the baby on, but when I get messages telling me they feel like they understand breastfeeding better (or have made their mother in law understand!) and feel more confident, it makes it all worth it. I can spend the day battling the critics and then a message like that makes it all better again.

## **WHAT COULD WE LEARN FROM OTHER COUNTRIES TO IMPROVE OUR BREASTFEEDING RATES?**

I think we could learn from Scandinavian countries which have turned their breastfeeding rates around. They used to have rates lower than ours, but have now near universal initiation and high rates at six months. One of the key things that they changed was not specific to breastfeeding, but investing more heavily in families, health and wellbeing. Taxes are quite high, but services and support are excellent. For example, mothers get well paid, extended maternity leave and fathers get paid chunks of time as well.

We could also learn from countries in the Middle East and Asia where families and communities come together to care for mothers after birth, so that they can concentrate on recovering and feeding the baby. In our country, new mothers are often left alone in the initial days after birth. They may well live a long way away from their family, and not having a big supportive family network around you can

really have an impact. Caring for a baby is tough and breastfeeding responsively can be demanding. If you're doing it all yourself with no one who properly cares for you, it's no wonder mums often think formula might be the solution ('If he had bottles... he'd sleep; be more settled; someone else could do it for me'). In reality, this often doesn't work and mums end up feeling even worse. Also, there seems to be a lot of societal pressure for mothers to 'get their lives back' and do it all alone. Instead of being given the opportunity to heal, get to know their babies and rest whenever they can, mothers get praised for getting back in their jeans, being out and about with their babies on day two and launching back into doing everything around the house as soon as possible.

## **WHAT TOPIC ARE YOU PLANNING TO FOCUS YOUR RESEARCH ON IN THE FUTURE?**

I have so many ideas... I want to make the UK and other Western cultures breastfeeding friendly again and I really want to understand what could help bring this change about.

I think a key barrier at the moment is guilt. So many mums who have been let down by the system and ended up not being able to breastfeed feel terrible about it. Seeing others talk about breastfeeding triggers pain and anger and we end up either not talking about breastfeeding to protect them, or having big fights about it, which helps nobody. So at the moment I am researching the best ways to promote breastfeeding without causing harm to those who have been traumatised by their experience.

I also see a lot of confusion around primary breastmilk insufficiency (e.g. never being able to make sufficient milk) and secondary insufficiency (e.g. circumstances leading to you not making enough milk). I believe the majority of women with insufficiency are in the secondary category. This confusion leads to a perceived large scale problem, so I am trying to draw together evidence around this topic with the hope that we can use this to insist on changes to support the next generation.

## **TELL US ABOUT YOU AS A MOTHER**

I am completely outnumbered with three children! They are now 10, 8 and 6 and I think like many new mothers I was shocked by the way my instincts kicked in once they were born. Statistically I should not have been a successful breastfeeder. I was quite young having my first

at 23, my family had not breastfed, most of my new 'mum friends' were bottle feeding – but somehow I ended up being in that 1% of exclusive breastfeeders and breastfed him into the second year. I completely 'made a rod for my own back' as a mother according to the strangers I would meet at the shops. This meant I was very responsive – feeding them seemingly hundreds of times a day, wrapping them, co-sleeping. I really enjoyed them as tiny babies despite the sleep deprivation and I miss it now – although I may have rose tinted glasses on now that I get a full night's sleep!!

#### WHAT ARE YOUR FAVOURITE PARENTING BOOKS?

Given my career I get to read lots of parenting books and call it work, so it's really hard to choose. I prefer books that explore wider concepts of parenting rather than 'how to parent' approaches. One of the first parenting books I ever read was "The Continuum Concept" by Jean Liedloff. It made so much sense. I also adore "What Mothers Do especially when it looks like nothing" by

Naomi Stadlen and "A Life's Work" by Rachel Cusk. My favourite breastfeeding book will always be "The Politics of Breastfeeding" by Gabrielle Palmer. I remember reading it and everything clicking into place. It definitely inspired my book.



All photos courtesy of Dr. Amy Brown

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# Book Review

Calm Parents, Happy Kids: The Secrets of stress-free parenting, by Laura Markham

As a Leader of a group that includes plenty of lively toddlers, and a mother of two small ones myself, I'm always on the lookout for books that help illustrate the "loving guidance" concept in as practical a way as possible. For me, this book does that brilliantly.

The core principle of the book is that you

cannot respond well to your children until you have control over yourself, so there's a massive focus on what she calls

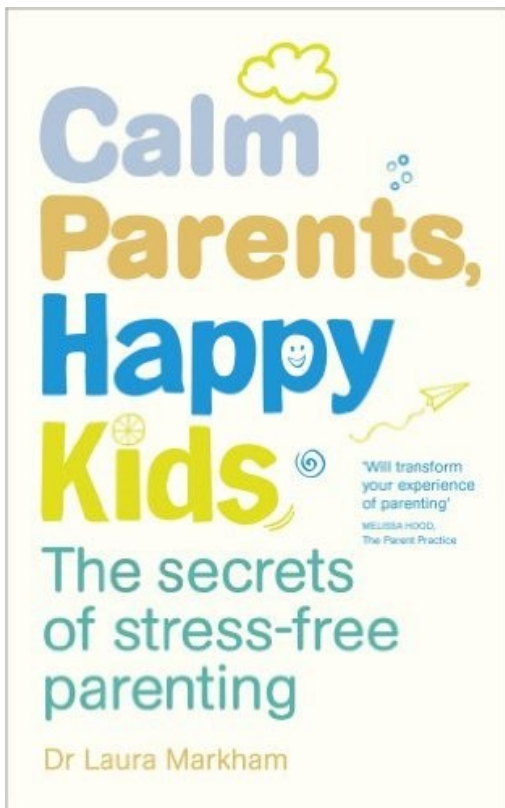
"regulating yourself", saying "most of what we call parenting doesn't take place between a parent and child but within the parent". I have this underlined so many times in my copy, because it feels so important. The other underlying principles, "Fostering

Connection" and "Coaching, not controlling" work for me to flesh out the loving guidance idea: when we are helping our children through difficult times, our goal isn't to get them to do what we want on that particular occasion, but to bring

out their skills and judgement so that they make good choices and can carry them through. In fact, there is even a chapter called "loving guidance" – the author does not make explicit reference to LLL, but I at least would find it hard to draw any distinctions between my understanding of this LLL concept and her expression of it.

The book has a good deal in common with the more famous "How to Talk" series, but the style is a little different, slightly less

"cutesy" and a little firmer. I could imagine Dr Laura sitting me down and explaining exactly how I could have handled a situation better, in a loving way of course! It's still packed with anecdotes (in a good way) and line by line illustrations of how to apply the principles, rather than airy assertions or vague advice.



I can't recommend this highly enough for anyone who suffers with occasional or frequent parenting rage and struggles to control their own immediate and longer term responses to their children. I've learned so much from it about how not to respond as if everything is an emergency, and how to empathically support my children while still having clear limits and living by my values. With its follow-up, "Calm Parents, Happy Siblings", I really can say it's changed my life and parenting for the better. Even picking it up and reading snippets, as I have to write this review, makes me feel renewed resolve to

improve how I communicate with my children. I'd say it's one for every bookshelf.

*Review by Helen Lloyd, LLL Bath*

This book is currently under consideration for inclusion in the LLLGB list of books suitable for group libraries.

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# Meet a Leader

Each issue we talk to a Leader, asking them about their involvement with LLL.  
This issue we talk to Tessa Clark, LLL Chilterns.

**TELL US ABOUT YOU, YOUR FAMILY, AND WHICH LLL GROUP YOU'RE INVOLVED WITH.**

My enthusiasm  
would lead me  
to do LLL  
work full  
time...

I'm Tessa, mum to an energetic two year old, a wriggly bump, a fluffy dog and wife to a supportive and understanding husband. I flew from the LLL Oxfordshire nest when I became a leader last summer and revived the dormant LLL Chilterns in South Buckinghamshire. I currently co-lead this group with a very experienced, international Leader, Nicole Applehans. Our group is small but growing; it takes time to get the word out given our jobs and our family commitments.

**WHAT WAS YOUR  
FIRST INVOLVEMENT  
WITH LLL?**

Someone whispered to me across the room of a peer support meeting that I might like "*The Womanly Art of Breastfeeding*" and offered me her phone number. For a moment I thought I had been invited into some kind of cult. I have written about my first meeting in *Breastfeeding Matters* before: it was really interesting and it took me a while to get my head around what LLL was really all about. Once my most urgent breastfeeding issues were under control, I realised I had a support network, a place to look forward to coming to. Most of all, I felt like I had found my village.

**WHAT MADE YOU DECIDE TO BECOME A LEADER?**

Already during my first meeting I felt so grateful to have found the help, acceptance and inspiration I craved to reach my secret goals. I wanted to pay it back and more. I had a thirst for knowledge and the desire to know how to offer better support to the breastfeeding families that I met in my work life. I know only too well the difference that a listening ear and the right resources can make to new families in their feeding journeys. I wanted to take LLL into as many corners of healthcare as I could. I am still working on this, my family needs me most these days, but there is time.

**WHAT'S A TYPICAL MEETING OF YOUR GROUP LIKE?**

At 'boobie work', as my two year old calls it, there are usually biscuits or cake and a teary mum or two with newborns. We meet in a Children's Centre, so there is plenty to occupy the toddlers who attend, and we have a growing group of regular mums returning to LLL meetings with their newest additions to their families. There is usually a planned meeting topic, but this is often put aside to offer support to the mothers who have specific concerns on that day. Most mothers leave with a group library book or leaflet in their bags and, as Leaders, we leave meetings with a smile in our hearts for the rest of the day.

**WHAT DO YOU ENJOY MOST ABOUT BEING A LEADER?**



Photo courtesy of Tessa Clark



I love to know that I have helped a family. We often don't know what happens after our initial contact with mothers, but every now and again one of them will get back in touch or turn up at a meeting and tell us that we made a difference to her when she needed it. This makes me feel very privileged. I also love making deeper connections in my local community, both with families and within the local healthcare provision.

**WHAT'S THE MOST CHALLENGING PART OF YOUR ROLE AS A LEADER?**

It can be hard to keep my Leader responsibilities contained. My enthusiasm would lead me to do LLL work full time, but this is clearly at odds with the actual time available to me; I am still trying to find the right balance.

**IS THERE ANYTHING LLL DOES – OR COULD DO – BEYOND YOUR GROUP THAT YOU'D LIKE TO TELL THE WORLD ABOUT?**

LLL runs antenatal Beginning Breastfeeding Courses in some areas of the country which I would have loved to attend when I was pregnant. One day, when more group mothers have become Leaders and we have more time to devote to this, I would love to start the Course in our area.

**IF YOU HAD A FRIEND WITH A NEW BABY, WHAT WOULD YOU TAKE AS A GIFT ON YOUR FIRST VISIT?**

A meal for the family and a copy of *Breastfeeding Matters*.

**WHAT WOULD YOU SAY IS THE BIGGEST BENEFIT OF LLL MEMBERSHIP?**

The same amount of money that pays for a new pair of jeans can support your local group to support you and help you meet your breastfeeding goals. It can also help other families that will come after you. I feel like LLL was pivotal in my breastfeeding journey and I want it to be still around to support my children's children in years to come. If you feel the same, being a member can help to secure this.

Spot the difference solution from page 9



# LLLGB News

## LLLGB WEBSITE ANNIVERSARY

LLLGB first had a website in 2000. On the 8th March we celebrated the first anniversary of the latest incarnation. Our website has extensive breastfeeding information, mothers' stories, news, LLL events, articles on the latest research and lots of ways to find support. Take a look at some of our latest posts here: <https://www.laleche.org.uk/category/news-research/>

## ANTENATAL BEGINNING BREASTFEEDING COURSES

Are you expecting a baby? Do you know someone who is? Our Beginning Breastfeeding antenatal classes are now available in many groups across the country. Finding out about breastfeeding before your baby is born can be a huge help in getting breastfeeding off to a good start. The workshops are aimed at mums and dads/partners/other persons supporting mum. Contact us to find out about the course costs ([edd@laleche.org.uk](mailto:edd@laleche.org.uk)) and read more here: <https://www.laleche.org.uk/antenatal-courses/>

## NEW LEADERS

LLLGB is proud to announce and welcome our most recent Leaders: Stephanie Hudson, LLL Plymouth and Karin Chandler, LLL Monmouthshire.

## WELSH LLL RESOURCES

We are excited to announce the launch of LLLGB breastfeeding webposts and three information sheets in Welsh. Resources in the Welsh language are the culmination of the Welsh New Groups Project, which began in 2012. With one-fifth of people in Wales speaking Welsh, it is high time we provided resources in the mother tongue of many mothers in Wales. For this we have to thank the Oak Foundation, who offered us funding to train mothers to provide LLL mother-to-mother breastfeeding support in Wales. We also have to thank Elin Davies, who translated the information sheets, and Enid Gruffudd, our newly accredited Leader in Aberystwyth who has helped with editing and proofreading the material.

Three information sheets have been used as the basis for the Welsh webposts, they will also be available from the LLLGB SHOP in the near future:

- Breastfeeding/ Bwydo ar y Fron <http://www.laleche.org.uk/bwydo-ar-y-fron/>
- Breastfeeding Basics/ Hanfodion Bywdo ar y Fron <http://www.laleche.org.uk/hanfodion-bwydo-ar-y-fron/>
- Is My Baby Getting Enough Milk?/ A Yw Fy Mabi'n Cael Digon o Laeth <http://www.laleche.org.uk/yw-fy-mabin-cael-digon-o-laeth/>

## AMENDMENT TO NURSING THROUGH COW'S MILK PROTEIN INTOLERANCE

Further to *Nursing through Cow's Milk Protein Intolerance* by Emma Sandercock, published in issue 218, page 6 please note the following:

In *Nursing through Cow's Milk Protein Intolerance* Emma mentions: "I started giving my daughter oat milk overnight, ... specialised formula whilst at nursery and breastmilk every morning, afternoon and bedtime." We would like to clarify that Emma's baby was almost 12 months old at that point and, given her other daytime feeds, her dietitian agreed it would be safe to offer oat milk overnight.

In its 2016 guidelines Good food choices and portion sizes for 1-4 year olds, First Steps Nutrition Trust states: "For children who avoid dairy products, unsweetened calcium-fortified soy milk alternative can be given as the main milk drink from 1 year of age. Other unsweetened fortified milk drinks such as almond, oat or coconut milk can be used, but all milk alternatives (including soy milk alternative) are much lower in energy than full-fat animal milk so care needs to be taken that the rest of the diet provides adequate energy."

The guidelines also state: "Do not serve rice milk to children under 5 years" and "Oat milk, coconut milk and almond milk alternatives are all low in protein." Nutritional information comparing alternative milks can be found on page 30 (see [http://www.firststepsnutrition.org/pdfs/Good\\_food\\_choices\\_and\\_portion\\_sizes%201-4\\_for\\_web.pdf](http://www.firststepsnutrition.org/pdfs/Good_food_choices_and_portion_sizes%201-4_for_web.pdf)).

LLLGB does not advocate giving any alternative milks or homemade formulas. We would encourage you to consult a qualified healthcare professional, such as a dietitian, paediatrician or allergist for specific advice for your child. See the following links for additional information about cow's milk allergy:

<https://www.bda.uk.com/foodfacts/CowsMilkAllergyChildren.pdf>  
<http://breastfeeding.support/milk-allergy-in-babies/>



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Photo courtesy of Lois Rowlands

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# La Leche League Philosophy

.....

Mothering through breastfeeding is the most natural and effective way of understanding and satisfying the needs of the baby.

Mother and baby need to be together early and often to establish a satisfying relationship and an adequate milk supply.

In the early years the baby has an intense need to be with his mother which is as basic as his need for food.

Human milk is the natural food for babies, uniquely meeting their changing needs.

For the healthy, full-term baby, breastmilk is the only food necessary until the baby shows signs of needing solids, about the middle of the first year after birth.

Ideally the breastfeeding relationship will continue until the baby outgrows the need.

Alert and active participation by the mother in childbirth is a help in getting breastfeeding off to a good start.

Breastfeeding is enhanced and the nursing couple sustained by the loving support, help, and companionship of the baby's father. A father's unique relationship with his baby is an important element in the child's development from early infancy.

Good nutrition means eating a well-balanced and varied diet of foods in as close to their natural state as possible.

From infancy on, children need loving guidance which reflects acceptance of their capabilities and sensitivity to their feelings.

