

Breastfeeding Matters

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Breastfeeding my Baby with Trisomy 21

A mother's story of her
breastfeeding experience

A Natural Caesarean

A birth story with
breastfeeding in mind

Rosa's Comic



230 March/April 2019



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

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—*Breastfeeding Matters*

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Editor's Letter



Working on Breastfeeding Matters and reading the articles that you send to us really does give a warm glow during that gloomy post-holiday time of year when the evenings are still dark and cold. In this issue we have articles that cover topics from birth right through to breastfeeding a four-year-old. One of the ten concepts (you can read them all on the back cover) on which LLL philosophy is based is: "Alert and active participation by the mother in childbirth is a help in getting breastfeeding off to a good start." Sophie's account of her "Natural Caesarean" gives an example of what that can encompass. We can also read about Kristin's experiences of the challenges of breastfeeding Gwilym, her baby who has Down syndrome, and what it has meant to them both. Not many mothers picture themselves breastfeeding a four-year-old when they give birth to their first baby; Beth certainly didn't. She shares how she went from the shock of seeing a mother tandem nursing a toddler and a baby at her first LLL meeting to breastfeeding her own walking, talking little boy.

Sometimes mothers who breastfeed beyond babyhood are accused of doing it for themselves; Felix wrote her fabulous poem in response to that idea, one which is very odd to many of us who have been there and done that.

This issue sees the last of Rosa's wonderful cartoons. Many thanks to Rosa for sharing them with us over the past year or so. Breastfeeding Matters can't exist without your contributions, so please do share your experiences, thoughts and ideas, whether written or in the form of photos or pictures (by you or your little ones).

While working on this issue of Breastfeeding Matters, we received the very sad news of the death of Doris O'Connor, a retired Leader of LLL Luton and Bedford group. A mother of nine, Doris was a huge inspiration and a gold mine of support and information to so many of us, both within LLLGB and beyond. We share some very fond memories of Doris in this issue and our thoughts are with her family.

Ruth

Ruth Lewis is a Leader in Nottingham and is mum to Kate (15) and Miri (13).

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What's Inside...



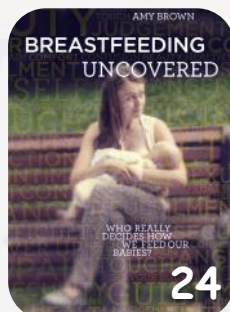
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A Natural Caesarean

Sophie Burrows, LLL Sussex



We arrived at the hospital for 8am having fasted since before midnight and completely nil by mouth from 6am, pre-loaded with antacid tablets to stop stomach acid. We "checked in" (I joked this felt like a weird kind of hotel) to the labour ward and were placed in the room where, coincidentally, I had recovered after having Luke, my older son. I was anxious, scared and finding it all a bit surreal, but I wanted to be strong. We

were introduced to our midwife who, thank goodness, had a sense of humour. Everyone read my birth plan. The midwife, Gill, was superb; she was kind of like my mum and said the right thing at the right time. I provided a sample for them to check and Mark and I waited for a bit, chatting away with me popping to the loo every hour, as our baby was very intent on using my bladder for entertainment!

I was checked over, compression stockings were stretched over my legs and I was given a gown to put on. Some scrubs and clogs were

found for Mark and we got changed. At that point I think we were on target for being the first in theatre – my prayers had been answered!

I breathed a sigh of relief as the anaesthetist, Dr Ashpole, popped her head around the curtain. This woman had it all under control and best of all she often saw a problem before it became one. She talked us through everything, reacquainting herself with our plans, and was a calming influence on me and Mark.

We waited a bit longer and another very welcome face appeared around the curtain: Miss Maguire, our consultant. The doctor who didn't look at me like an alien when I had said "natural caesarean" months ago, but instead said, "Yes, I've worked in London doing these types of procedures." She

was yet another calming influence on me and Mark. She talked through our plans and reassured us again. Then we had to wait a little longer than planned as unfortunately there was an

It was beautiful,
serene and slow; it
was calm but filled
with a buzz of
excitement.

emergency that obviously took precedence over us, which was fine. Mark and I were relaxed, although I did start thinking about doughnuts and chocolate eventually! Then things started happening. Dr Ashpole and her assistant came in and put the access for fluids into my wrist, very determined to position it where I had requested; it was quite a tense moment for me. It was something of a struggle but eventually successful, and I had antibiotics administered. Miss Maguire sat and talked through plans and expectations. I got very hot and my ears began to ring. I told her that I didn't feel very well at all. The midwife shot in to action and helped me lie down fully on the bed; effectively I had fainted at this point. I didn't quite pass out but obviously everything plus the antibiotics had just hit me all at once and my brain had decided to go to sleep and my blood pressure dropped significantly. It didn't take long for me to be back to normal once I was lying down fully. Poor Mark didn't enjoy that bit as it brought back memories of our previous experience of birth and the point from where, last time, things had got worse and worse!

Then we went to theatre. It was only the next room, so I walked in feeling much better by this point, although my wrist was very sore. Things sped up and started to feel more about their procedures than about me and I tried desperately to control my "fight or flight" response as well as deal with a whole host of other emotions.

Once on the bed, Dr Ashpole took the lead and explained again about the best positions for my back for the spinal anaesthetic. As she helped me into position, several people kept trying to talk at once; my hands were sweating and I felt so hot!

Fluids were pumped into the cannula in my wrist, which was very painful as the emphasis was to get them in to me as quickly as possible. I really struggled with the pain. Dr

Ashpole stopped prepping for the spinal block and came round to my front – something that meant she had to scrub up again. She inspected the access area and decided to give a local anaesthetic there and see how that worked out. Luckily, it relieved the pain, although I hated the dragging feeling of the tubes when my arm was moved. Once the spinal anaesthetic was in and sorted, several people started talking to me at the same time again. My midwife reminded everyone to talk to me one at a time, and it got much better because I then found it easier to focus in what was a stressful situation.

Having the spinal was a very scary time for me, as if it hadn't worked the alternatives would have been either a general anaesthetic or trying for a "non-sunroof exit"!

Neither of those options were ones that I felt mentally able to cope with. The midwife and Mark were excellent in reassuring me, and the midwife, who listened intently to my responses to Dr Ashpole's questions, continued to support me, reassure me of how well I was doing and keep me calm.

Once the spinal was in and had begun to work, the team quickly moved me to the lying-down position and tilted the bed to the left. Dr Ashpole kept a close eye on my blood pressure and how I was feeling. With ice spray and tissue she checked that the spinal block was working, and gently asked me to lift my legs. I had quickly lost the ability to do so, and even though I wanted to tense my ankles, couldn't, which I found annoying. I realised that I just needed to relax and accept the loss of mobility for a bit.

The midwife and Dr Ashpole made sure that I could see my tummy when my head was lifted for when our baby came out. My music was turned on and I started to relax. It was nice to have some sound to focus on. When I'd gone through the CD days before to check I was happy with it, my brother had turned up at



our house and it was a nice memory to have a link back to.

Miss Maguire entered the room with an assistant and they introduced themselves. The room was light with windows along one side and I could see the

sky with clouds dotted around as the screen was put in place to shield the view of the surgery. Mark came closer to me and stroked my head and my emotions went wild as the surreal nature of where I was hit me. Dr Ashpole, seeing my

emotion, found a tissue for Mark and me to dry our tears.

I felt the sensation of a washing machine being turned on, or perhaps a tumble dryer, for what felt like a lifetime. It was not painful but I had to huff through some bits and I was aware of my baby sharply kicking a few times around my rib area, which was probably his response to being shoved about a bit. While everyone else knew how far into the procedure we were, I was okay with being unaware as I knew we would get there at some point.

Our choice of music was well received by everyone in the room and they all tried to work out which advert each song came from. It worked quite well to break the ice and take some focus away from what I was feeling. At some point I started to feel unwell and said so. Dr Ashpole

reassured me, dealt with it immediately and I felt better again.

Then everyone agreed to be quiet; the moment had arrived. The curtain was dropped and my baby's head was born. My head was lifted up so I could see; it was so surreal but equally the

most beautiful thing I've ever seen.

I was overcome with emotion as Miss Maguire slowly encouraged part of the body out and then simply held her hands as if to just stop my baby falling off the table! He let out a calm cry

and I said, "It's ok baby, hello my baby," and he curled round on himself onto my upper tummy and let out a cry as I was encouraged to push a little and aid him out. It was beautiful, serene and slow; it was calm but filled with a buzz of excitement. I think I looked at Mark and told him I loved him as I heard him clicking



away with the camera.

Everyone waited as my baby made his own way out into the world. The consultant pushed the cord blood towards the baby (known as milking the cord) as waiting until the cord has stopped pulsing isn't always an option with a caesarean in case of complications. After he had done one wee on the consultant, the midwife passed him over onto my chest, where he did another big wee that ran into my hair!

My baby gave one cry and was then peaceful and calm on my chest, he was covered in vernix which made me happy

as I had wanted a baby covered in anything really. It also made him slippery though and he kept ending up round my neck! I had already had my arms taken out of my gown, which meant my breasts were accessible from the word go for my baby to start feeding. He

took an interest, and

although he didn't actually feed, he got well acquainted with his new life source.

Mark and I enjoyed what felt like an eternity just looking and feeling and talking to our new baby on my chest while I was put back together. No one other than Mark and me touched Henry





breastfeeding support to put my mind at ease and our son, Luke. I was in minimal pain if any for at least 24 hours as the pain relief given was effective for a good while, although it took some sorting out after this. We spent two nights and three days in hospital and then went home. Over tea, still in hospital, Mark and I realised we had had the most beautiful experience ever.

Whether you are due to have a planned caesarean birth or want to prepare yourself in case your birth ends in an unplanned one, the LLLGB website (www.laleche.org.uk/caesarean-birth-and-breastfeeding/) will provide you with some useful things to consider. "Alert and active participation by the mother in childbirth is a help in getting breastfeeding off to a good start," is part of La Leche League's philosophy, and anything you can do to take an active part in the process is likely to help you feel more in control. Once you are in recovery, keeping your baby with you skin-to-skin as much as is possible will also help get breastfeeding off to a good start. A vaginal birth triggers hormones which prepare you for breastfeeding, and so your body will benefit from the close contact of your baby, along with the frequent feeding needed to encourage your body to catch up after a caesarean.

apart from on my request to have him moved down again, as he kept slipping to my neck. My tummy still felt like a churning washing machine but it was slightly easier to deal with when I had a new focus.

Once the doctors had finished, Henry was placed with Mark for skin-to-skin while I was transferred to the bed for recovery. Watching your legs being moved about when you can't feel them is not fun and I covered my eyes as what looked like a dummy leg was lifted in front of me!

We were taken back into the room we had started our day in and just enjoyed our baby. He stayed on my chest for hours and hours. We had some visitors including my



Feeding Gwilym

Kristin Birkett, LLL Vale of Glamorgan



He was pretty floppy, so a good supportive feeding cushion made all the difference for us.

BACKGROUND

As with my first pregnancy, we had a private scan at 30 weeks with the second, as we wanted to ensure all was going well for our baby inside. The sonographer did all the measurements but kept remeasuring the baby's femur. It turned out that it was shorter than it should have been for the stage we were at. That was when I started to do some research about what that could mean. Well, it was a soft marker for Trisomy 21, better

known as Down syndrome! The short version of the story is that we were referred to the Foetal Medicine Unit at the University Hospital of Wales, where we decided to have an amniocentesis for clarity. Shortly afterwards we had the confirmation that our baby had Down syndrome. Our consultant was very helpful and supportive, and available at any time or day. He gave us websites and group information and also put us in touch with a paediatrician to discuss health implications. All

very positive! (Although he did euphemistically mention "options".) It was a difficult time for us coming to terms with the diagnosis, however on the flip side we were able to prepare ourselves and ensured everything was in place for his birth.

BIRTH

Gwilym was born at 37+5 weeks. It was a speedy, natural delivery. I was strep B positive at the time, but I was not listened to and as a result was administered antibiotics too late. However, Gwilym took care of this and was born in his sac, so was protected anyway. He entered the world very alert with a lovely baby cry. A paediatrician checked him over and he was all good. We started our breastfeeding journey right there. As we stayed for five days in hospital, with several blood tests and ECGs for Gwilym, we had a private room, which definitely helped to set the right atmosphere.

PRECONCEPTIONS

Trisomy 21 comes along with low muscle tone. Also, very often with significant heart problems. None of which is very helpful with feeding, as babies with Down syndrome tire quickly and have lower energy. Another issue

is a lower immunity to infection and smaller airways. Also as a result of lower muscle tone, there can often be a problem with swallowing and aspirating fluids. This is why a lot of children with Trisomy 21 have an nasogastric tube, which delivers their milk directly into the stomach – my biggest fear. Because of this many people think it's not possible to breastfeed, although it is more important than ever to get the best immunity possible!

OUR EXPERIENCE

Gwilym has no heart issues so we are very fortunate. He was very sleepy, and he had jaundice for seven weeks. I insisted on breastfeeding throughout. In hospital I made sure to have lots of skin-to-skin, latch him on often and to practise a good latch. I also hand expressed and syringe-fed Gwilym some milk. He had to have light therapy for the jaundice while we were in hospital. The nurse on the maternity ward came in to remind me to feed him at night as he would sleep quite happily. I made sure to push him for a five-minute feed every two to three hours. It was very hard going but I kept tapping his back, tickling him or blowing in his face or I took some of his clothes off. I knew my letdown was fast so five



minutes was plenty. Another issue we faced was his low resistance to illness, so he seemed to catch every cold possible. This meant he had a stuffy nose all the time. I used saline spray and suction to clear it out twice every day. He also suffered from a blocked tear duct on a regular basis. He was pretty floppy, so a good supportive feeding cushion made all the difference for us. Overall, our challenges were nothing major in comparison to what many mothers of babies with Down syndrome face, and we made it to well over two years of breastfeeding and he stopped just before our twins were born. I can't say enough about how important it was for me to put every effort into breastfeeding. It has helped greatly with his coordination of mouth and tongue, for example, and to strengthen muscles for speech later on.

You can follow Gwilym and see more beautiful photos of him at www.facebook.com/gwilymbirett/.



WHAT HELPED

Before he was born I did quite a bit of research on the internet. I came across an Australian Breastfeeding Association booklet about feeding babies with Down syndrome, which helped me. My suggestions would be:

- Use a good supportive feeding cushion;
- Trust your mothering instinct;
- Take one step at a time;
- If you are on Facebook, find support groups on there - I found them very reassuring;
- Find a warm, accepting, encouraging, supportive community, such as your local LLL group;
- Ensuring a good intake of milk is obviously absolutely vital - it definitely helped to keep my baby out of hospital. (Note that there are also specific growth charts for babies and children with Trisomy 21.)

In Loving Memory of Doris O'Connor



From Tracey Lilley, retired LLL Leader.

I recall the first time I met Doris, she was the only mum who came to our LLL meeting that month, and she was so desperate to get breastfeeding "right". And she did, with all of her subsequent children. I remember even then thinking that she would make a good Leader; her passion for breastfeeding and mothering shone through. She applied for leadership as soon as she could and sailed through her application. She toyed with the idea of becoming part of the Leader Accreditation Department (which helps mothers become LLL Leaders), such was her desire for writing and a wish to see LLL grow. We had many a discussion about the concepts – she was always keen to learn and explore. In the end she decided to join the Helpform team as she felt it fitted in better with her family – what an asset she was, helping many mothers not only by Helpform but through online forums. I know that many found LLL through her and some went on to become Leaders. The ripples keep on growing.

What I will remember above all though was her love for her husband, Tony, and for her children. She was a natural – a true believer in family first. She was so looking forward to becoming a grandmother, but sadly it was not to be.

From Helen Butler, LLL Luton & Bedford.

I first met Doris the day before her 6th baby was born, when she came to our meeting, with her dear husband Tony, just in case things started happening. She had seen an old poster one day and rang up to see if we were still going and became a regular at meetings; she was so happy to be breastfeeding as she had longed to do for so long. Time passed, she became a Leader and ran meetings down in Luton where she helped so many mothers in person. She was an inspiration to all. We had a lot of fun; lots of the group kept in touch and we used to have wonderful family picnics where we'd meet all her children. We sometimes travelled to workshops and conferences together on the train, and the journeys pass so quickly. She kept up with her online work and was very much involved with Helpforms. Doris was so delighted when she heard that she was going to be an Oma, but sadly did not get to meet her first grandchild. I am so glad that I knew her, and my thoughts are with her family.

From Ruth Lewis, LLL Nottingham

I first "met" Doris in the breastfeeding group of an internet forum, when I was a struggling new mum to my first baby, before I'd even heard of La Leche League. She was at the time mother to six children and for me, and so many other new first-time mums who felt as though we were floundering, having been thrown in the deep-end of the swimming pool of motherhood, she was a voice of sense, support and solid information. She was the one saying the things that we needed to hear in order to have the confidence to listen to our instincts and become the mothers we wanted to be. The online community that Doris was such a keystone of is still going strong and has produced at least half a dozen active LLL Leaders (and more who have since retired) who followed in her footsteps. The ripples that she started with her love and support are still spreading and will continue to do so.

Doris passed away at home surrounded by her beloved family, after a short battle with cancer that she faced with her customary determination and humour. Our thoughts are with them. She is greatly missed in La Leche League, the wider breastfeeding community and beyond.

How it feels to breastfeed a four-year-old.

Bess Purser, LLL Derbyshire

In one hour and eleven minutes my son will turn four. He's lying in bed next to me, snoring, having fed to sleep a few hours ago. He's fed to sleep every night we've been together for four years. I never thought I'd be breastfeeding a four-year-old. I didn't even know four-year-olds could be breastfed, I'd certainly never seen it happen before I was pregnant, before my first La Leche League meeting.

I was seven months pregnant when I went to my first LLL meeting, on the recommendation of my doula. I was nervous, the meeting was in a local woman's house and I was the first to arrive, which made me even more anxious. But by the end of the meeting I knew that I had found a valuable source of support and that I would be back.

There was a woman there who was feeding an older child of around three and a younger one of about a year. This totally blew my mind. Feeding a three-year-old? And a one-year-old? At the same time?! Wow! Who knew that

could happen? Who knew it had a name – tandem feeding – and who knew there are books written about such things? I wanted to be that woman, to grow and nurture multiple children at the breast, to connect with them, to comfort them and to watch their relationship with each other (and me) develop whilst feeding.

My own breastfeeding journey got off to a rocky start. Tongue tie was discovered before I left the labour ward and the first week of feeding was painful, messy and distressing.

Thankfully my mother-in-law found a tongue

tie practitioner who had an appointment free the next day. Feeding after the very quick procedure was immediately easier and I'm forever grateful for the practitioner's time, support and encouragement.

Following that, we soon got into the swing of things and when we hit three months I realised that my body had grown a child, not only inside of me, but outside of me too; grown his hair, grown his fingernails, grown

through his first clothes and supplied the raw materials for him to manufacture the reams of snot that streamed from his nose when he got a cold. That was an achievement.

At six months, when his teeth started to come in, mastitis struck several times. (It's awful – I wouldn't wish it on my worst enemy.) The teeth coming in changed the shape of his mouth and tightened his lip tie (which sometimes accompanies a tongue tie, and wasn't apparent when he was toothless) and he

wasn't feeding properly. I

didn't realise that was the cause until he fixed it himself by falling over whilst cruising round the sofa when he was ten months old. He banged his mouth and it bled, but within a few minutes he was fine again, laughing and getting back on his feet. I never had mastitis again.

Things have changed in the four years since I became a mother. Although I had seen the marvellous woman tandem feed, I originally planned to stop feeding when my little one turned one. But at the stroke of midnight on

I never thought I'd be breastfeeding a four-year-old. I didn't even know four-year-olds could be breastfed,



that momentous day, I couldn't find the off switch. Nothing magically changed overnight, he didn't stop feeding just because he had completed his first orbit of the sun, and my supply didn't run dry overnight either. I am grateful that by that time I had started on the path to becoming an LLL Leader and was happy to carry on for as long as he was. I would have been horrified if we had stopped abruptly.

His father and I split when he was two and a half and my son isn't with me every night of the week now. He's fine when he's away from me, goes to sleep with no problems. He'll accept a back massage in the absence of milkies, but when milkies are available, no substitute will do. He chooses a book to read, puts my arm around him, snuggles in and feeds whilst I read in a vain attempt to calm him at the end of a busy, active day. Then it's lights out and he feeds until he falls asleep, sprawled across me or nestled into my shoulder. I stealthily slip away and creep to my own bed.

He feeds to sleep and he feeds to wake up. He feeds if he's hurt and he feeds if he needs a (now rare) nap in the afternoon. He loves a quick feed during La Leche League meetings, just to show the younger ones how it's done. Maybe now I'm the one who is expanding the horizon of a pregnant or new mother.

My dreams of feeding multiple children are



over, and so I treasure the memories my son and I have made; the feeds we have remaining; the many gallons of milk I've produced that have protected him, me and the planet; the oxytocin rush as my milk flows; the love that pours out simultaneously; my pride in my ability to nourish and nurture life.

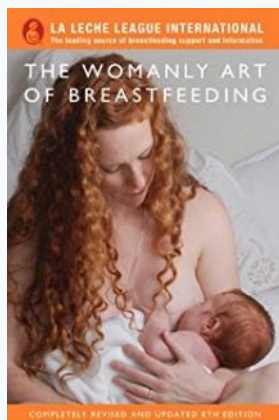
I hope that the end arrives slowly, without fanfare. Just like I didn't notice the transition from carrying him on my front, smelling his head and kissing his soft hair, to feeling his warm sticky hand in mine as we walk to the park together. I hope I don't notice the transition from the last feed we have to whatever comes next in our mother-son adventure.



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The Womanly Art of Breastfeeding



The Womanly Art of Breastfeeding is a great book for every breastfeeding mum. This definitive guide from La Leche League International has a wonderfully warm, friendly and highly accessible approach. It's no secret that breastfeeding is the normal, healthy way to nourish and nurture your baby.

This book offers a wide range of breastfeeding information and stories, from preparing for breastfeeding during pregnancy to feeding cues, from nursing positions to expressing and storing breastmilk. It offers real-mum wisdom on breastfeeding comfortably from avoiding sore nipples to simply enjoying the amazing bonding experience.

Mothers on... The Womanly Art of Breastfeeding

We asked mothers across the country to share their favourite quotes, section, ideas and tips that they've found most helpful from LLL's book, The Womanly Art of Breastfeeding (or WAB as it's often known)



KRISTY

Best thing I did was take a week in bed with my baby, people visited and just came to my room. It took me back to being a teenager at my mam's house hanging out in my room with my mates. It just felt so nice to sit on the bed cuddling my baby, sun coming in through the windows, no TV, no radio, no distractions or stress. Just me and her learning who each other was. (See *The First Few Days: Hello Baby...* p85 onwards)

LORRAINE

"The newborn baby has only three demands. They are warmth in the arms of [his] mother, food from her breasts and security in the knowledge of her presence. Breastfeeding satisfies all three." (p4, quoting *Grantly Dick-Read's* *Childbirth Without Fear*)



SUSAN

The quote that always sticks with me is the one about it take a village of women to raise a baby. I see my LLL family and bosom buddy family as that village. (See p 33)

KATE

The LLL family made me realise that even though I exclusively expressed for my little boy to be tube fed for the first 4 weeks, I was still breastfeeding him! I'm so grateful to those that made me feel proud of my journey as opposed to a failure. No breastfeeding journey is the same, they're all just as amazing.



CHERYL

"Babies aren't manipulative, perceptive, sneaky or subversive. They just...are." (p130)

AILSA

You can't spoil a baby by loving them. Hug them as much as you can as one day they won't want those snuggles. Babies need their mummies and that's OK. It's not manipulation in any way. Come on, they're just babies. (See *Is It Possible to Spoil a Baby?* P130)





JODIE

I found the "typical diet of a breastfed toddler" very reassuring when my son wasn't eating all that much (basically boob, a crumb from the carpet, boob, something he wasn't meant to eat, boob, more boob). (*See Sample Diet of a Typical Well-Nourished Toddler, p261*)

VICKY

The section about birth and how the body prepares itself, I found to be a source of confidence and reassurance when worrying about a VBAC. (*See What Do I Need to Do to Prepare My Body? p20 onwards*)



TESSA

"Becoming a mother is kind of like learning to swim. At some point, you take a little deeper breath, let go of the edge, start to paddle...and realize you're doing it. Some of it is what you've learned, some of it is making the effort, and some of it is having faith in yourself.

These first few days, whatever they hold for you and your baby, are a time to enjoy each other. You two are both starting to let go of the edge of the pool. And you know what? Someday soon you'll realize that you love swimming...and you're *good* at it!" (*p103*)

JODIE

There's a bit that makes me cry every time I read it. It is a mother's story of being ground down by criticism and the pressure to wean. When she did, "I remember, 'Wow, I finally stopped nursing! No one thought I could do it but I did. Now my body belongs to me again. But where's the fanfare? Where are the congratulations from the families? Where are those feelings of satisfaction?' There was just me and Jeffrey giving up and giving in and feeling hollow inside. I let pressure prematurely end one of the most meaningful experiences I have had with my son". (*p325-326*)



FI

"...partners have the key role of teaching the baby that love sometimes comes without food." (*p32*)

Wish I'd read this in pregnancy the first time around. I think it would have helped us balance our roles more easily. We got there eventually though.

LEAH

I absolutely love the WAB! The Ages and Stages sections (*see p85 onwards*) are my favourite so I can learn about normal nursing behaviour as my babies reach each stage. It never stops being helpful! I buy copies for all my pregnant friends.



Meet a Leader

Each issue we talk to a Leader, asking them about their involvement with LLL. This issue we talk to Eden Anderson, LLL Edinburgh, who is also currently our elected chair of the Council of Directors.

Being far from relatives, in Hawaii, and again later when we moved to California, it was wonderful to have a friendship group in LLL.



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

In 2008 my husband and I and our three sons relocated from Canada to the UK and I became co-Leader of LLL Edinburgh. Before then I'd lived and worked in Tanzania, California and Hawaii as well as Canada.

WHAT WAS YOUR FIRST INVOLVEMENT WITH LLL?

It was with an LLL group I'd somehow heard about in Toronto at meetings of 25 or more, rather alternative, mid-1980s mothers. At my first meeting I saw a tall two-year-old at the Leader's breast (a concept new to me), but I returned the next month because of the kindness of one Leader who said as I left, "you have a very beautiful baby". As time went on, my husband urged me, each series, to be sure to attend the one on weaning. I found no formula for that (pun unintended) but always felt better after each meeting about my avid nursing's need to keep at it. My second group was in Honolulu, Hawaii; sometimes we met with the Pearl Harbour group from the US military base and my eyes were opened to the broad nature of the LLL Leader tent.

WHAT MADE YOU DECIDE TO BECOME A LEADER?

The Leaders invited me when my baby was a toddler. I was so thrilled and honoured and promptly spent my evenings after work writing to the Leader Accreditation Department (known as LAD) and studying like a fiend. I could think of nothing I'd rather do. It was the valuing of motherhood which meant so much to me then, 30 years ago, together with breastfeeding itself and the intensity engendered between mother and child – for me an unexpected benefit of breastfeeding. At the time, women in my age group and circle were dashing back to their jobs when maternity leave (which at the time, where we were lasted, four months) was over. I was out of step with peers, staying at home with my firstborn, managing to spin my leave out to 18 months and then return part-time. Becoming a Leader during this period was a supportive, affirming, transformative experience.

WHAT'S A TYPICAL MEETING OF YOUR GROUP LIKE?

They are big series meetings, (much bigger since we closed our large Facebook group a year ago) everyone sitting on the floor, babies and toddlers, a mix of ages. We recently changed the hot drinks and (homemade) treats to be at the beginning rather than at the end, following an evaluation meeting where this was suggested; we are delighted that it works better (and now puzzle over why we didn't do this years ago). The conversation flows well with mums helping one another and making connections. We have one-to-one time with mums after the meeting.

WHAT DO YOU ENJOY MOST ABOUT BEING A LEADER?

My family has had to make international moves a few times. Being far from relatives, in Hawaii, and again later when we moved to California, it was wonderful to have a friendship group in LLL. I have valued the flexibility of stages in the life of a Leader, with children involved for years in music with practice sessions, lessons and recitals, and, of course, I was busy on chauffeur service. At that time, I was able to carry out only the basics of leadership. Later, with more time and energy, it has been a privilege to take on an administrative role in LLLGB. Over the years, as my own children have grown up, I've found the connection with mothers and babies to be a great joy – breastfed babies and toddlers are typically gorgeous to look at and be with! Helping with breastfeeding, face to face, by telephone or online, and keeping our charity afloat nowadays is important, satisfying work. Recently a few of my eldest son's friends have consulted me about breastfeeding and that is special.

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

Oh, the whole range, from promoting the health of infants and mothers through to “we're making the world a better place, one baby and mother at a time”. As Leaders we work throughout this country with sister organisations, health professionals, the NHS, mothers and families to *normalise* breastfeeding.

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

I would take a selection of LLLGB leaflets, together with a meal for the new family.

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

The satisfaction of financially supporting a national charity with a fantastic mission, a beautiful member newsletter and informative website; memberships provide funds to help mothers become LLL Leader volunteer breastfeeding counsellors, dedicated to LLLGB, an Affiliate of La Leche League International, the world's largest women's volunteer health organisation.



Eden and co-Leader Karla Napier with breastfeeding author Maureen Minchin (centre) in Edinburgh, in 2016.

LLL Poem

By Felix Vandersluis

Natural Term Weaning

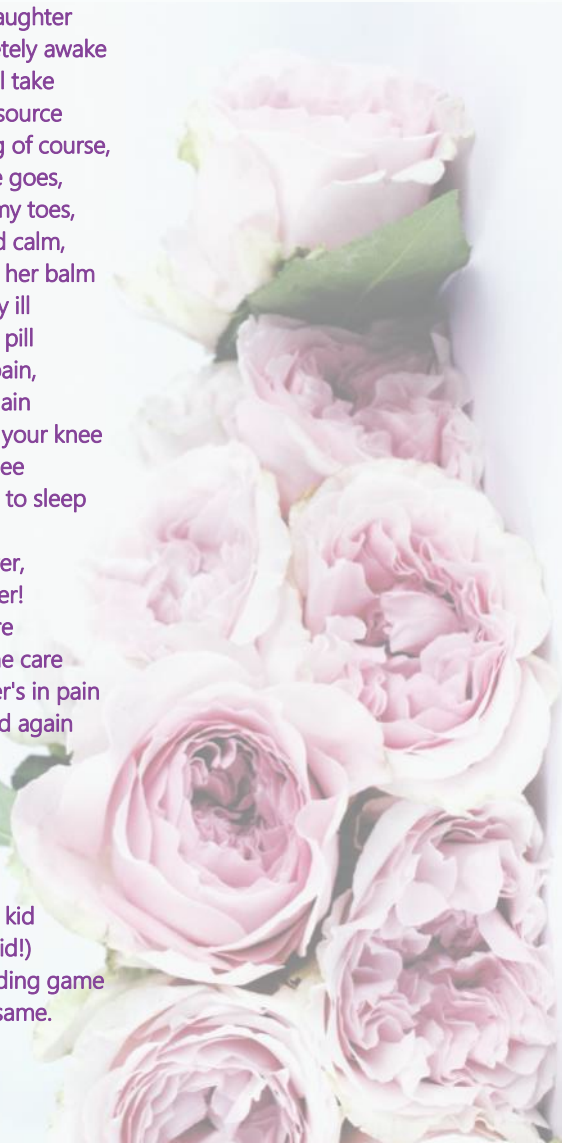
Or

After *insert arbitrary age* The Mother is Only Doing it For Herself

I'm only doing it for myself, this,
The hours of desperately needing a piss
My bladder's so stretched, it feels like it might burst
And I've also had hours of horrible thirst
But if I move just a fraction to reach that water
I'll be surely disturbing my slumbering daughter
Then she'll be wanting boob and completely awake
And at least one more hour of feeding I'll take
Of her clambering over me, seeking the source
Of nutrition and comfort, whilst twiddling of course,
Scratching and pinching and twisting she goes,
Whilst I'm gritting my teeth and curling my toes,
But I want her to sleep and be happy and calm,
So I'll take the discomfort whilst she gets her balm
And I know it's the magic that heals every ill
If adults could buy it, they'd all want that pill
It increases survival, soothes anger and pain,
Decreases ill health, makes you better again
When you've tumbled down and grazed your knee
Bumped your head or been stung by a bee
Soothes rage and confusion, it helps you to sleep
The benefits of this stuff run deep!
It increases IQ, yup, even makes you clever,
Given the choice I'd take that stuff for ever!
Even in sleep she still knows that I'm there
Pressed up against me, but what does she care
If I'm trapped on the edge, if my shoulder's in pain
She's asleep but still shoves me again and again
Whilst I lie awake, sorely needing a piss
Only doing it for myself, this.

Optional epilogue:

So hard on the woman, but great for the kid
(She's oh-so-contented, I'm flipping my lid!)
And all round the world in this breastfeeding game
I know millions of mamas are doing the same.



Delicious recipes from the LLL community

Flapjack

Recipe by Jo Rhys-Davis, LLL Vale of Glamorgan

INGREDIENTS:

9oz (250g) butter
4oz (110g) muscovado or soft dark brown sugar
2 tspb honey (local if you can get it) (or 2–3 tspb golden syrup)
12oz (335g) rolled, easy cook oats
Handful of sultanas
Cinnamon – to taste



METHOD:

Preheat the oven to about 175°C (or 165/170°C for a fan oven) or Gas mark 4.

Get a baking tray or dish and line with baking paper.

Measure out the oats, add a generous handful of sultanas to the oats and a generous amount of cinnamon. I do about 10–15 strong pats of the bottom of my cinnamon shaker. It's probably a couple of desert spoons of cinnamon.

Mix oats, sultanas and cinnamon together well in a bowl.

Melt the butter, sugar and the honey or golden syrup in a large non-stick pan on a medium heat on the hob. Keep stirring until it all melts together and doesn't stick to the pan.

Bring it to a gentle boil so it all starts bubbling and you get these gorgeous, caramelly brown bubbles everywhere. Turn off the heat then and tip the oats/sultanas/cinnamon into the pan and stir everything together until the oats are well coated.

Pour mixture into the lined baking dish or tray and put in the pre-heated oven for roughly 12 minutes.

In a hotter oven they will be done in ten mins. In a cooler one it could be 14–20 mins. Stay close and keep your nose alert – when you start to smell a lovely flapjack smell, they are done.

Other signs of them being ready are the whole pan being a golden colour and slightly more golden brown around the edges and the sultanas having swollen and shrunk back as a glossy brown colour.

Very dark caramel colour is a little too overdone...

Take them out of the oven and leave to cool on a wire rack for 1–2 hours. After that time, you can lift out the baking paper and continue to let them cool on the rack (but still in the paper) or place the rack with flapjacks still in the paper on it, into the fridge for a few hours.

I also use the freezer and even my freezing cold garden table to rapid cool mine sometimes but like breastfeeding this is a bit of a random art and something to experience and experiment with yourself, I can't give precise settings for doing that!

When fairly cool, slice them up and store in a cake tin or plastic box but still with a layer of baking paper around them to absorb the stickiness.

Try not to eat them all at once!

Meet a Mother

Each issue we talk to an LLLGB member, asking them about the support they received from the organisation and their decision to take up membership. This issue we talk to Anna Horn, LLL South East London.



Without the
mother-to-mother
support, I think I would
have given up very early
on.

TELL US ABOUT YOU, YOUR FAMILY AND WHICH LLL GROUP YOU BELONG TO.

I'm Anna Horn and my husband is Caleb; as of 13th April 2017, we are the proud parents of our daughter, Iris. I call our family "The 3 Horns" in reference to my husband and daughter's love for dinosaurs and our surname. We're based in Beckenham and take part in the LLL South East London group.

HOW DID YOU COME ACROSS LLL?

I first heard of LLL whilst writing my MSc dissertation on breastfeeding, but I didn't interact with the group until I spoke with my midwife about antenatal courses.

HOW HAS LLL SUPPORTED THE BREASTFEEDING RELATIONSHIP WITH YOUR BABY?

LLL played an essential role in my breastfeeding relationship with my daughter. Without the mother-to-mother support, I think I would have given up very early on.

I made an announcement to my husband one evening, a few days after Iris was born, that I was going to do it – reach out to LLL via Facebook. I was flooded, in the very best way, with

information, love and encouragement. My local LLL Leader, Maria, took my call immediately – even though it was 10 pm! She was very warm, very knowledgeable and assured me that I had everything I needed to feed and nurture my baby girl.

WHAT MADE YOU DECIDE TO BECOME AN LLLGB MEMBER?

The help that mothers receive in the community is absolutely vital and LLL has been a key player in supporting and advocating for breastfeeding since the organisation was founded. I want to contribute to that cause. Through LLL, mothers, babies and families are able to get high quality breastfeeding support absolutely free. I think it's quite radical!

WHAT DO YOU ENJOY MOST ABOUT BEING A MEMBER OF LLLGB?

The stories, the families and the camaraderie. It takes a village to raise a child; LLL is a part of my village.

HOW DO YOU THINK YOUR MEMBERSHIP HELPS LLLGB?

My membership fees go directly to helping the organisation to provide high quality, evidence-based breastfeeding support that mothers, babies and families can access for absolutely no cost!

WHAT WOULD YOU TELL A FRIEND ABOUT YOUR LLLGB MEMBERSHIP?

It's fantastic that mothers receive breastfeeding support where they give birth, but what happens when you leave, and the midwife is not there by your side? We mother and raise our children at home and in the community. LLL provides that support in the community – it's free, accessible and open to anyone who wants support in breastfeeding. I think it's a cause worth supporting.



BECOME A MEMBER OF LLLGB

The information and support that LLL Leaders offer are free of charge but getting the information to mothers costs money!

An annual membership costs only

£30 for 12 months

(£18 for an unwaged family)

Or £2.50 a month

(with pdf of *Breastfeeding Matters*)

Join online at www.laleche.org.uk/content/join-us

or ask your local LLL Leader for a membership form

As a member you will receive printed copies of ***Breastfeeding Matters***

Help us prepare new Leaders

Every membership goes towards operating our National Helpline

Your membership helps us to start new groups

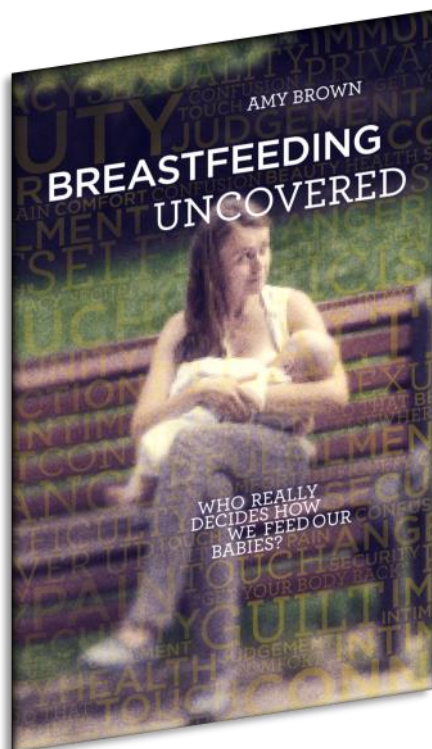
Support us to produce leaflets and information sheets



Breastfeeding Uncovered

by Professor Amy Brown

Review by Sophie Burrows, LLL Sussex



This is an interesting and in-depth book, which feels like a culmination of a huge number of studies about breastfeeding and its challenges all brought together in one place. One of the first parts of the book introduces the key feature of it: the 18 Steps that would, in the author's eyes, help improve breastfeeding rates in the UK. These steps are then echoed throughout the book with relevant information and research explained alongside.

There are so many things the book talks about that it almost feels overwhelming to think about it all, but that's just the point: there's a lot to be done to help support those who want to breastfeed. Among other things the book addresses:

- The need to change public perception of breastfeeding by changing government

policy, in order to help influence the attitudes of both men and women;

- How baby-care books (often written by people without children of their own) have influenced many new parents perceiving their baby as having an issue when there may be none;
- How infant weight loss after birth can have many different reasons, but that our maternity care isn't helping to support mothers through that, from lack of continuity of care from midwives to the lack of training in lactation for doctors;
- How postnatal depression can be linked to not breastfeeding, to not reaching your breastfeeding goals or to breastfeeding and struggling;
- How we have all the information about the benefits of breastfeeding, not just for the baby but for the mother as well, but how this just gets lumped into "breast is best".

This last point means then that breastfeeding mothers can be seen as "better than" formula-feeding mothers, when in truth we are all just trying our best with the information and support that we have. We should really be highlighting the risks of not breastfeeding *alongside* adequately supporting mothers to breastfeed, by training health professionals in lactation and how to support mothers with problems. There is also the issue of many women being put off breastfeeding due to the sexualisation of breasts generally in society. What I felt this book is trying to explain, is how a multi-angled approach is needed to really change the language around infant feeding in regard to breastfeeding and how it's perceived.

One bit that really stood out for me was about fathers. While they can be helpful and should be "educated and supported to be the best breastfeeding supporters they can be", they can sometimes hinder a breastfeeding relationship. Many fathers, including my partner, would like to see more visual

representation and acknowledgement of the father's part of the process of breastfeeding support. It is something I will aim to be mindful of in the future in my role as an LLL Leader.

While I was about half way through reading the book, a friend asked if I was feeling annoyed or frustrated yet; as I got towards the end of the book I realised why she had asked. The latter part of the book is focused on the industry that makes money from mothers not breastfeeding. The industry's products and advertising tactics aim to make a new mother feel inadequate, so that she spends her money to help alleviate the worries that shouldn't be there in the first place. (There is even a company that will test your milk for toxins for a mighty fee.) Mothers of young babies are so "fresh" into their breastfeeding journey that these types of companies have easy pickings of mothers worried about getting everything right.

This leads nicely on to a good recommendation by Amy Brown – education about lactation before birth to at least the same extent as birth education itself. La Leche League GB is already offering these types of courses in some areas, which now makes even more sense! We spend so much time reading about birth and what we want from birth and how we want things to happen that we almost forget that breastfeeding is one of the most enduring parts of the process. As a result, we don't do much learning about it. In addition, good pre-birth information of the true ins and

outs of breastfeeding is not particularly easy to find. La Leche League's offering "Friendly breastfeeding support from pregnancy onwards" fits with this too. Coming along to a meeting before their baby arrives really does seem to help some mothers and it is often one of the first times they have seen a mother and baby breastfeeding.

This book is a worthwhile read whether you already know a lot about the issues surrounding breastfeeding support and rates or you want to learn about them from scratch. It brings everyone up to speed and is a good place from which to make positive steps for the future.

It's comforting to know as a Leader that La Leche League has already been offering for 60 years many of the things to help breastfeeding that are discussed in this book in some way and hopefully others will begin to follow suit.

I truly feel all politicians should read this book to understand the issue and realise there isn't just a simple solution, but that a multi-angled approach that will take time, planning and money is needed to improve breastfeeding rates. You get a taste of the author's witty personality and her love of the word *cake* so it doesn't seem like too imposing a book to read, even if I did have to re-read some bits about the statistics to truly wrap my head around them. I hope it's a book that many people reference in the future and that it has an impact on breastfeeding rates and the future health of our country.



La Leche League GB
SHOP breastfeeding, books & more

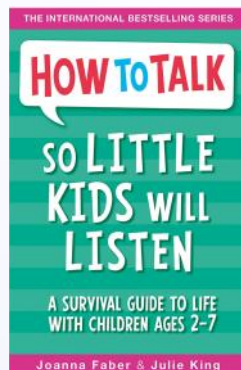


How To Talk So Little Kids Will Listen: A Survival Guide to Life with Children Ages 2-7

How do you respond to the toddler who won't brush his teeth? The preschooler who pinches the baby? The child who throws everything she can reach?

It's hard to be a small child. It's hard to be an adult responsible for that little child. And it's really hard to think about effective communication when the toast is burning, the baby is crying and you're exhausted.

This book will help readers do just that. This book is a survival manual of communication tools, including a chapter that addresses the special needs of children with sensory processing or autism spectrum disorders.



THE LEARNING CURVE



One day you'll put her on without even thinking.

Yeah.... mmm...
..... mmm...
I'm not sure



OK, right, we'll get it this time.
...oh, I can't do this... no, right,
bring the baby's head...
oh no, isn't the head
meant to be tilted more?
Is my hand in the right
place? Is her body meant
to be there?

...my
stitches hurt....
....right... nose to
nipple or something.
..just put it
in your
mouth
right...

I'm too
tired...
mmm
mmm
mmm

1 WEEK

THE DEEP END

And one day,
she'll be able
to help herself
when you
need to do
other things
as well.



From the LLLGB Conference

Q&A with Meg Nagle, The Milk Meg

If you are active on social media within the breastfeeding community you will almost certainly have come across Meg Nagle, better known as The Milk Meg. What you may not be aware of is that her background in breastfeeding support is as an LLL Leader, having been introduced to La Leche League when she was pregnant with her first baby, by her mother. Following a move to Australia she became an International Board Certified Lactation Consultant (IBCLC) and now works in private practice. We were delighted that she made time to talk to Breastfeeding Matters when she flew around the world to speak at the LLLGB Conference last autumn.



WHAT FIRST MADE YOU REALISE THAT BREASTFEEDING IS ABOUT MUCH MORE THAN JUST FEEDING BABIES HUMAN MILK?

I remember when I first was involved with LLL and I heard the term “mothering through breastfeeding”; I didn’t really understand what that meant until I breastfed myself and particularly beyond babyhood. That’s when it becomes such a wonderful parenting and mothering tool and I used it – breastfeeding my baby when he cried. So that was my journey into discovering how much breastfeeding becomes part of mothering as a whole, and not just a way for them to get the milk. When they get older, they can communicate how much it means to them, and that’s really special. My youngest remembers breastfeeding, but all he talks about is the taste, that it tasted like chocolate ice-cream.

IN AN IDEAL WORLD HOW WOULD SOCIETY PERCEIVE BREASTFEEDING?

In an ideal world it wouldn’t even be a topic of discussion. That would be

my ultimate scenario, where it’s just a normal part of what’s happening in your culture and the only discussion around it would be general. There would just be mums helping mums and not a whole big cultural issue with breastfeeding in public or how long you’re going to be breastfeeding for. So I think not having it be a thing would be amazing, as it is in many cultures around the world.

HAVE YOU NOTICED ANY CHANGES IN SOCIETAL ATTITUDES TOWARDS BREASTFEEDING SINCE YOU FIRST BECAME A MOTHER?

You know, I would like to say yes, but really I think not. I continually see the same themes popping up again and again of what people are questioning or criticising. The messages I get over and over from mums now are the same things I’ve been hearing for years. I think maybe the difference is that, because of the amazing reach we have with social media and blogging,

women can more easily get information, which is great, but unfortunately those underlying issues, which I think are the cultural influences, are very much still there. I feel like my answer is a little bit depressing, despite there being statistics that show improvements fortunately, but many of the general myths and attitudes are still very much around.

WHAT ARE THE MOST SURPRISING OR BEST THINGS YOU HAVE LEARNED ABOUT BREASTFEEDING?

For me the most surprising thing was how important it was for me and my children. How mothering through breastfeeding was such a big deal for me and how breastfeeding was such a big part of how I mothered. I didn't realise before having children how important it was going to be for me and also just how long I was going to breastfeed for. I never would have thought I would breastfeed for as long as I did, but it was just something that felt right so I continued to breastfeed beyond babyhood for all my children. The term "mothering through breastfeeding", that is such a big part of LLL, is something that I definitely felt that I *lived* with my breastfeeding experiences.

WHAT'S ONE THING YOU WISH THAT ALL WOMEN ABOUT TO BECOME MOTHERS KNEW?

I wish that mothers knew that they really, truly do know their baby best and that they have instincts as a mother. That they will know what's working for them and for their baby if they can just try to trust their own instincts as a mother and trust their baby, because their baby is going to tell them if something is working for them or not. Having the confidence to trust those instincts is something that can be really hard at the start, but I think the more you're told as a mother "you're doing a great job", "you know your baby best", "your instincts are all there, just go with what feels right for you" the easier it gets. That is something that can be really, really powerful for women to hear.

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
for more information.



LLLGB News

LLL SUNDERLAND

A new group has launched recently and will be holding regular monthly meetings in Sunderland.

LLL WEST SUSSEX BECOMES LLL SUSSEX

LLL West Sussex and LLL East Sussex are delighted to announce that they have merged. They have changed their name to LLL Sussex to reflect this. They are looking forward to being able to provide a better and broader breastfeeding support across the whole of the county.



LLL NEWCASTLE AND NORTH TYNESIDE

LLL Newcastle and North Tyneside have been awarded some Big Lottery funding to help meet their running costs. They are very grateful as this money means they are now in a position to run meetings in Newcastle in addition to their well-established Whitley Bay meetings.

LLL HULL & EAST RIDING

It's not too late to treat yourself (and your friends!) to a lovely LLL Hull and East Riding 2019 Calendar! Group mums have put this wonderful calendar together to raise money to support local breastfeeding mums and the work of LLLGB. Calendars are just £6 each (plus p&p). Please email clairewells@live.fr to order yours!

LLL CHILTERN'S FINALISTS IN NATIONAL AWARD.

LLL Chilterns, in South Buckinghamshire, is honoured to have had their Leaders nominated for a national MAMA award and even more proud to have been selected to be in the finalists under the category of breastfeeding champions (group). We are told that several mothers nominated the 4 Leaders, Joanne, Lauren, Nicole and Tessa for this award.



SPRING WORKSHOPS

As well as our annual national workshop or conference, LLLGB traditionally has more local events around the country, organised by one or more local groups. These are for Leaders, Leader Applicants and mothers who are interested in leadership. If that is you, you can find out if there's anything happening within reach of you on our website or on social media, but here is one example of what you might find.

"Helping Breastfeeding Happen: one dyad at a time".

The LLLGB North Spring Workshop will be held on Saturday the 13th April, 9.30am - 4.30pm, at Trinity House, Manchester.

Speakers include Mars Lord of Abeula Doulas on 'Breastfeeding in the Black Diaspora', and long term Leader Rachel O' Leary on 'How LLL Changes the World'. For more information and tickets email rebecca.j.coyle@gmail.com or visit: <https://bit.ly/2RXsP3Q>.

There are also events taking place in Perth, Kent, Hertfordshire and Devon (and maybe more!) – so ask your local Leader for details.

NEW LEADERS

LLLGB is proud to announce and welcome our most recent Leaders:

Maria Renshaw, LLL Colchester

30 Katie Rowles, LLL Sheffield

Shopping
with
LLLGB Books
makes a
difference



La Leche League GB
SHOP breastfeeding, books & more

Choosing to buy your breastfeeding and parenting books from our LLLGB Shop directly helps other mothers and babies.

All our profits go to support LLLGB's charitable work. It's money well spent!

For our full range of information leaflets and books on breastfeeding and parenting, visit:

lllgbbooks.co.uk

LLL Books Ltd, P O Box 29, West Bridgford, Nottingham, NG2 7NP

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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.

*This concept can be read as being about a father, partner, grandma, sister, friend or any other person who supports the breastfeeding relationship between mother and baby.

