

“I felt I had failed forever at breastfeeding”  
Why mothers’ voices need to be heard in legal and policy  
developments around infant feeding.

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# Gap studies and how I got here



<https://ukbreastfeeding.org/2017/07/06/every-mother-needs-a-bffriend/>

# The policy approach in the UK

Draft report Feeding in the First Year of Life



## Draft Feeding in the First Year of Life Report

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Scientific consultation: 19 July to 13 September 2017

# Feeding in the First Year of Life Report

*533. The evidence reviewed for this report strengthens current guidance to breastfeed exclusively for around the first six months of the infant's life and to continue breastfeeding throughout the first year. This makes an important contribution to infant and maternal health.*

*534. Greater focus should be given to reducing attrition rates and supporting women who make the informed choice to breastfeed for as long as possible, given the rapid decline in the proportion of women breastfeeding over the first few weeks of an infant's life. Increasing the proportion of women who continue to breastfeed or express breast milk beyond six months of age would yield additional health benefits.*

- ▶ Very shortsighted - “science tells us breastfeeding is good, therefore women ought to breastfeed”
- ▶ Misses the real and significant social context within which women feed their babies
- ▶ “attrition rates” - depersonalises, reduces women to numbers and rates of success
- ▶ Great to see “supporting women who make the informed choice to breastfeed”
- ▶ **Where are all the other women???** Are they not in need of support?

# The UK Infant Feeding Survey



## Infant Feeding Survey 2010: Summary

Authors: Fiona McAndrew, Jane Thompson, Lydia Fellows, Alice Large, Mark Speed and Mary J. Renfrew



A survey carried out on behalf of the Health and Social Care Information Centre by IFF Research in partnership with Professor Mary Renfrew, Professor of Mother and Infant Health, College of Medicine, Dentistry and Nursing, University of Dundee

- ▶ every 5 years since 1975
- ▶ “The main aim of the survey was to provide estimates on the incidence, prevalence, and duration of breastfeeding and other feeding practices adopted by mothers in the first eight to ten months after their baby was born.”<sup>a</sup>
- ▶ cancelled in 2012

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<sup>a</sup><https://digital.nhs.uk/catalogue/PUB08694>

## Breastfeeding rates in 2010 - what story do these numbers tell?

Breastfeeding	Birth	1 week	6 weeks	6 months
Breastfeeding	81%	69%	55%	34%
Exclusively breastfeeding	69%	46%	23%	1%

Table: Breastfeeding rates, 2010

# What is going on?

- ▶ 81% of mothers initiate breastfeeding
- ▶ What happens in the first week? -12%
- ▶ What happens in the first 6 weeks? -26%
- ▶ WHO recommendation is 6 months exclusive breastfeeding



- ▶ *Why* don't women initiate breastfeeding?
- ▶ *Why* do women stop breastfeeding?
- ▶ What happens?
- ▶ If we can understand what happens then we can design policy interventions to address the actual problems.

# My Infant Feeding Journey

**My Infant Feeding Journey**

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## US

# UNIVERSITY OF SUSSEX

## NEW RESEARCH PROJECT:

# My Infant Feeding Journey – Women’s experiences of infant feeding in the UK

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### About

**GENERAL**

Category	Community	<a href="#">Edit</a>
Name	My Infant Feeding Journey	<a href="#">Edit</a>
Username	@myinfantfeedingjourney	<a href="#">Edit</a>

### STORY

We are researching women's experiences of infant feeding in the UK. We want to find out about the impact that central government policy has on individual people's lives.

# Demographic information

- ▶ 51 stories
- ▶ age range 27 – 65
- ▶ median age 34
- ▶ 36 stories are from first time mothers
- ▶ 50 initiated breastfeeding with their first child
- ▶ 31 stories describe breastfeeding as the main method of feeding their first child
- ▶ 3 initiated breastfeeding, then transitioned to formula
- ▶ 1 initiated breastfeeding, then transitioned to mix feeding
- ▶ 9 expressed breastmilk - 3 transitioned to breastfeeding, 3 transitioned to formula
- ▶ 2 were mix feeding from birth - 1 transitioned to formula
- ▶ 5 were formula fed from birth



## Reactions to the “breast is best” rhetoric

*It seems to me that it is utterly absurd and frankly CRUEL to put women under SO much pressure to breastfeed (“Breast is best. Breast is best.”) and then to effectively withdraw all support from them when they try to. Midwives just aren’t expert enough in many cases. And if the mothers fail? Well, we’re repeatedly told by the media that you only have yourself to blame if your child develops allergies, obesity, low intelligence and even leukaemia. [Paula]*

*There seems to be a huge discrepancy between the emphasis on breastfeeding within both antenatal and postnatal provision, as an actually morally valuable 'decision', versus the lack of the actual level of personalised, free support within the NHS, that is in fact required to enable so many of those who want to breastfeed to do so. The gap between these two things seems to transform by default into blame, ultimately, on the mother – who has 'decided' to formula feed (morally reprehensible); who has 'failed' to work hard enough to get the breast established (lazy, selfish). [Megan]*

*I have never felt able to tell anyone that actually I didn't want to breast feed - society, the media, family, friends and professionals all support breast is best meaning my concerns made me ashamed. [Kirsty]*

*I read the 'Breast is Best' book which has been around for years. It all seemed like such a no-brainer in terms of benefits that I never did any reading about other forms of feeding. I really wish I had. [Carrie Anne]*

*in light of everything they told me, I consented to give him a bottle. But then of course, to avoid being seen as “promoting formula over breastfeeding” they couldn’t give me any advice on what milk to choose (a stupid, ridiculous system, I’m sure you’ll agree). I hadn’t really researched formula, I was so sure that we’d breastfeed. I lumped for Cow and Gate because I knew the name. [Becki]*



# Tentative thoughts

- ▶ The “breast is best” rhetoric does damage in its own right
- ▶ policy based on the premise that women don’t understand the benefits of breastmilk misses the point, and does damage
- ▶ women are not “unmotivated” to breastfeed
- ▶ I don’t have any stories from women who had chosen to formula feed in advance - where are these women? How do they make their choices?

# What is happening?

- ▶ narratives, some written in the middle of the experience, others written after the journey is complete
- ▶ every story mentions challenges - even the ones who went on to have positive experiences = infant feeding is not straightforward
- ▶ motivation and determination to breastfeed is there in spades
- ▶ pain, suffering, grief, exhaustion, **anger**, frustration, helplessness, desperation
- ▶ stories are a series of events that we can learn from
  - ▶ trigger (crisis? confluence?) points - events that are important but may not be possible to change?<sup>1</sup>
  - ▶ turning points - the experience changes, there is a distinct before and after
  - ▶ missed opportunities - the experience could have changed, but didn't

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<sup>1</sup>I'm really not sure what these are or what their significance is yet.

## Trigger points

*They put me in a room on my own, linked both breasts to a machine and left me alone. I didn't know what was supposed to happen and after 10 minutes, nothing had come out and I was in so much pain with after pains that I was crouched over on the chair in tears. This was such a low point for me, I was so sad, confused and in pain, I just wanted to go home and speak to someone who could advise me, rather than the staff in the hospital, I had heard that hospital staff were not allowed to talk about formula and I was worried that this is what my baby needed. I was worried and confused. I asked the midwife for formula, I didn't feel any sensation in my breasts and one baby was just blowing raspberries, so we gave him formula. I'd heard you had to ask for it, as it would not be offered and was so worried that one of my babies was not feeding. I also wanted to go home, so I just lied, I told the staff both babies have had 2 good feeds, and they let me go home. [Amanda W]*

*In the two days that followed, my nipples became so raw and painful that on the fourth night, I sat in bed at 4 am with a screaming, very hungry newborn, with every fibre in my body desperate to bring her onto my breast, and an uncontrollable reflex making me pull her straight off every time she attempted to latch on. I was in physical but also emotional agony, and - sleep deprived, and still in surgical stockings and having to inject a cocktail of post-op medications (including injecting myself in the thigh several times a day with anti blood clotting medication, at that point) I felt completely unable to make a clearheaded decision to try formula feeding my baby - the huge pressure that I felt on my shoulders from NCT and ante-natal care telling me how disastrous it would be to introduce a bottle this early if I wanted to have any hope of breastfeeding seemed overwhelming to me. [Megan]*

## Turning points

*I went home from that LC that night feeling committed to the hard work, I explained it to my husband (who helped with night feeds, as I was really struggling emotionally at this point)... and then, sometime during the night... I decided to give up and give in. It all seemed crazy. My daughter wasn't happy. She just wanted me. I pumped as much as I could but my milk had slowed so much. I barely got 30 ml in 30 minutes of pumping. I had no difficulty in slowing and then stopping pumping over a few days. No pain or leaking, which sort of supported that there wasn't much milk there. My daughter was instantly happier when I gave up. No more battles over feeding or battles for my attention. She had me 100% and ate happily. That obviously dropped my stress straight down and my fears of developing PND floated away within days. I found myself smiling, enjoying motherhood and the time with her. [Laura]*

*[at] the day 5 weigh-in. My milk still didn't seem to have come through properly. My daughter had lost over 15% of her birth weight and the breastfeeding support worked that day looked very worried and urged us to feed her a bottle immediately and take her to children's A&E as she said she was likely dehydrated. My daughter turned out to be fine, but my husband and I were terrified, and it didn't feel safe to wait and see. She immediately took to the bottle, and after that would no longer even try to latch on to the nipple and would get very distressed whenever I tried. [Ellie]*

*After about 2 weeks however, I was really quite sore and developed a crack on my right nipple. It was truly excruciating and I started to dread every feed, having to take paracetamol beforehand just to get through it. I was feeling really low. I was very teary, crying at the slightest thing and was absolutely ready to throw in the towel at this point and use formula/a bottle. My mum was staying at the time and recognised there was a problem. She was really encouraging but felt her own knowledge was woefully out of date so called the leader of the breastfeeding support group I'd attended for me, and she came out at short notice, voluntarily to see me. It was so wonderful to have someone who I knew might have some suggestions for me. [Elena]*

## Missed opportunities

*I asked for some help to try feeding. A young midwife assistant who was beyond useless was sent. After trying with me for a few minutes and becoming frustrated (her not me), we gave a formula cup feed. Then the belittling comments from her started. She told me off for using unwarmed formula (daft as it sounds I had no idea how to warm up the little bottles). After I'd warmed a bottle of formula she said "You're not leaving this ward until there's a teat on that bottle." I asked what teat I should use and was brought a leaflet on how to make up formula feeds (the NHS change for life one). She looked at me like I was a complete idiot every time I asked for some help. [Aileen]*



*I would ask a midwife for help; the midwife would latch him on (making it look very easy, without actually showing me how to do it); then Noah would suckle for just a minute or two, after which point he would pop back off and I would be unable to relatch him by myself.  
[Anna]*

*I was asked to demonstrate a feed. I found feeding on one side more painful and difficult than the other, so I offered the 'better' breast, even though it was quite empty as we'd only just fed from that side. I wasn't sitting in a good chair for feeding and was feeling stressed and under pressure. The midwife saw that the breast was empty and assumed my supply was low. She suggested pumping and top-ups and said a midwife would visit in a few days to weigh her again. I felt like I was failing before I'd even really started. [Elinor]*

*Upon discharging us the midwife advised us about formula feeding and said if we were going to go down that road we must make the bottles fresh each time (ie boil the water each time) and that babies were dying from salmonella poisoning because of parents boiling several bottles worth of water and leaving them in the fridge to reheat. This was pretty terrifying. At home I didn't try to breast feed again, I expressed for 10 days or so using a mix of breast and formula milk then just formula. We bought the premixed version for ease and through fear of salmonella. [Kirsty]*

# Tentative conclusions

- ▶ series of pressure [trigger?] points - some of them are missed opportunities, some are turning points
- ▶ what makes a pressure point into a turning point?
  - ▶ the right help, from the right person, at the right time - according to the writer's perspective, what helped them
  - ▶ writer feeling empowered - "what do *you* want?"
  - ▶ support - partner, mum
- ▶ why are opportunities missed?
  - ▶ a lot of poor practice by professionals
  - ▶ lack of training? underresourcing?
  - ▶ women don't know what to ask for?
  - ▶ conflicting advice from multiple professionals
- ▶ none of this is about women not knowing that "breast is best", or not being motivated to breastfeed - policies focusing on promoting breastfeeding don't address the problems that women experience