

# **SUMMARY OF BREASTFEEDING: UNDERSTANDING THE MOTIVATIONS AND SUPPORTS FOR WOMEN IN SASKATOON AND WINNIPEG**

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Prairie Women's Health Centre of Excellence (PWHCE) spoke with 27 mothers and service providers in interviews and focus groups in Winnipeg and Saskatoon. All mothers who participated were breastfeeding at the time of the study. While the sample size was small, their insights build upon years of previous research to improve our understanding of the motivations, challenges and support for breastfeeding as it relates to healthy living.

## **Background**

Obesity rates are increasing for both adults and children, a concern for health care professionals and the public. Breastfeeding benefits both babies and mothers in a number of ways including:

- reducing childhood obesity
- reducing hypoglycemia for infants of mothers with gestational diabetes
- reducing respiratory illness
- protecting women against breast cancer, ovarian cancer and osteoporosis, and
- supporting the cultural value of breastfeeding.

Saskatchewan created a Breastfeeding Initiative Committee in 2002 but has no publicly available data on breastfeeding initiation and duration. Manitoba's Baby-Friendly Strategy offers regional programs to increase the knowledge and skills to support breastfeeding, but not all mothers receive the support they require.

## **Motivations for Breastfeeding**

Some women were encouraged to breastfeed by their healthcare providers, but no participants received information on how breastfeeding helps to prevent childhood obesity. Having said that, the most common motivation for mothers to breastfeed was to improve infant health.

Mothers and grandmothers were important information providers and supported women's choice to breastfeed as a more economical choice that can improve health of babies, develop their immune systems, improve oral health, and offer better nutrition. While less important to them, mothers were also motivated to breastfeed by maternal health benefits.

Nurses, public health nurses and physicians brought attention to the health benefits of breastfeeding. Interestingly, only one participant used the Internet and media to seek information about breastfeeding.

Women felt satisfaction, relaxation, and success because they were nursing. Breastfeeding improved mental health. Women felt that breastfeeding saved them time and was more convenient than formula and bottle feeding. For example, it freed mothers from the need to

prepare, wash, sterilize and carry bottles for feeding. Breastfeeding pacified and soothed infants, lessening disruptions overnight.

## Challenges

While all participants were breastfeeding, many challenges made breastfeeding difficult. Many women were not comfortable breastfeeding in public. Participants faced multiple burdens, including a sharp learning curve to being a new mother and learning how to breastfeed. Many feared changed breast appearance, breast soreness and difficulties latching. Newcomers to Canada experienced frustration, lack of cultural community support, and difficulty getting the supports they needed. Unsupportive family, health care resources and lack of support and information was other disincentives to breastfeeding for some women.

## Supports

The most helpful supports women reported included family members, partners, friends, health professionals, cultural practices and mother care. All participants were attending community support programs and many women made use of multiple types of supports.

## Recommendations

To improving breastfeeding supports, PWHCE recommends:

- Integrate breastfeeding education for health care providers more consistently
- Create consistent messaging about the benefits of breastfeeding
- Use all means of communications, including print, web-based and social media to disseminate information and resources on breastfeeding
- Support women's choices in breastfeeding or bottle feeding
- Support the normalization of breast feeding in public spaces
- Continue to provide women with designated spaces for breastfeeding
- Break down the continued barriers to women's access to health professionals, services, programs and supports for breastfeeding
- Keep the dialogue going for the development of standardized milk banks
- Seek out ways to ensure the continuity of care for mothers pre and postnatally
- Recognize the multiple burdens faced by mothers and work to support mothers in their responsibilities
- Provide around the clock in-person lactation assistance to mothers
- Develop prenatal courses specific to fathers/partners and grandparents
- Offset the lopsided messaging of formula companies with positive messaging for breastmilk and
- Encourage cultural competency and care amongst health care providers.