



*Breastfeeding in  
the UK today: do  
we need to create  
a virtual village?*

# *An honest look at breastfeeding today*

Breastfeeding is a crucial chapter in the lives of many families, and one you may be about to start yourself. It's a truly special time, when a mother and baby are together laying the foundations of their relationship.

But it isn't always plain sailing! Today's new mums are caught between a shiny, social media perspective on breastfeeding on one hand, and overblown tabloid taboo on the other.

At Weleda we felt it was time to shine some sunlight on such an important and divided subject. We wanted to cut through all this noise and take an honest look at breastfeeding in the UK today.

We wanted to listen to the experts. And by doing this provide useful advice and information on what new mums need, and how they can find support during this important time.

Weleda is the Ancient Celtic name for the revered 'wise woman of the village', a counsellor and healer, and so it felt entirely appropriate for us to bring together an expert panel of accomplished women to share their wisdom.

Ranging from a professor of neonatal medicine to midwives, doulas and journalists, they each bring their own unique perspective.

If you're a new mother, we hope you find something in here that helps you find your own path, whichever way feels right for you.

*Jayn Sterland,  
Managing director Weleda UK & Ireland*



Jayn Sterland is managing director of natural phyto-medicine and natural babycare pioneer Weleda (UK & Ireland).

A passionate advocate of all things green and natural, Jayn speaks regularly about the important link between health, wellbeing and lifestyle choices.

Jayn has topped the Who's Who in Natural Beauty list for the past two years.



# Meet our experts



**Neena Modi** is Professor of Neonatal Medicine at Imperial College London, a consultant at Chelsea & Westminster Hospital, and former president of the UK Royal College of Paediatrics and Child Health. She is dedicated to identifying novel approaches to improving breastfeeding rates in the UK. Neena's team developed the widely-used National Neonatal Research Database and she leads a multidisciplinary neonatal research programme on nutritional and other perinatal determinants of life-long health.



**Amy Brown** is a professor at Swansea University, where she leads the MSc programme in Child Public Health. She is an advocate of responsive feeding and hopes to change the way we view breastfeeding, mothering and caring for our babies in the UK. A psychologist by background, Amy has published more than 60 papers and two books exploring the psychosocial, cultural and political factors affecting decisions around feeding.



**Dee Bell** is an International Board Certified Lactation Consultant (IBCLC), tongue tie practitioner and a midwife of 15 years. Dee is experienced in resolving a wide range of breastfeeding challenges, and has delivered breastfeeding training to hospital staff for many years. She has also helped establish several community breastfeeding drop-in services.



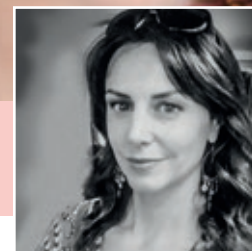
**Jil Wild Manning** is a reflexologist and birth doula with a special interest in

breastfeeding education and support. Five years ago, she trained as a La Leche League International breastfeeding peer supporter. She volunteers in her community and hospital drop-in clinics and on the postnatal ward for her local trust. She is the mother of "five lovely people" and grandmother to two little ones.



**Mia Scotland** is a clinical psychologist, birth doula, hypnobirthing instructor and author of *Why Perinatal Depression Matters*.

She has a special interest in understanding postnatal distress from a sociological perspective, with a view to helping mothers, babies and fathers adapt to life as a family. She runs a private clinic helping people with birth trauma, birth fear and postnatal depression, as well as workshops for midwives and birth workers.



**Beverley Turner** is a journalist, TV presenter and host of a radio phone-in current affairs show. She is a mother of three, and founded *The Happy Birth Club* which offers fun and informative antenatal classes. Beverley sits on the Royal College of Midwives' Better Births Initiative team and chairs events for Independent Midwifery UK, Birthrights and Doula UK. She is also a trained psycho-therapist and hypnotherapist.



**Angie Barrett** has been working in breastfeeding support for more than 20 years, formerly as a postnatal nurse and more recently as a midwife. Her ward experience spans antenatal, labour, postnatal and community care. Angie has also worked with mothers in rural, poorly-resourced countries such as Cambodia, where she provided antenatal, intrapartum and postnatal care. She has also worked as a lecturer in public health and co-wrote a degree programme on the subject.



**Sally J Hall** is a journalist and editor with two decades of experience working on leading parenting titles including *Mother & Baby*, *Emma's Diary and Pregnancy & Birth*. She is managing editor of B magazine and website, which brings pregnant women and new parents the latest news and research on pregnancy, birth, and baby health. Sally is also author of *Eco Baby, A Guide to Green Parenting* and contributing editor to Dorling Kindersley's *Watch My Baby Grow*.




**Emma Pickett** is a breastfeeding counsellor, International Board-Certified lactation consultant (IBCLC) and chair of a national breastfeeding charity that offers mother to mother support. She has a special interest in breastfeeding support and writes a popular blog about the issue. Emma combines private practice with volunteering her time to provide telephone support to people in Haringey, North London and is author of *You've Got it in You: a Positive Guide to Breastfeeding*. She also spoke about responsive feeding at the 2017 Unicef Baby Friendly conference.



**Jo Gould** is a Registered Midwife, Lecturer in Midwifery and a module leader on the BSc (Hons) Midwifery Programme at the University of Brighton. Jo qualified as a midwife in 1999 and worked in clinical practice in hospital and community settings for several years before moving into an educational role in the NHS, followed by her move into higher education in 2014. Jo is founder of *The HypnoBirthing Clinic*, a specialist parent education service focused on the use of self-hypnosis techniques for use in labour and birth. Jo is a passionate advocate of supporting and facilitating women's choice in relation to pregnancy, birth and the postnatal period.





‘The truth of the matter is that for some women it’s great, and for others it’s not’

## *What information and when?*

Few mothers will tell you breastfeeding is as effortless as it appears in perfect social media moments. But nor is it something that should be hidden away, as some sections of the media would have us believe. Here, we explore the deluge of conflicting messages new mums receive, and how to navigate your way through them.

In a world in which everyone has an online soap box, and we’re bombarded with thousands of messages a day, it’s easy to see why a new mum might feel overwhelmed ... as if she doesn’t already have enough going on!

At one extreme, she may have been exposed to an overly optimistic view of breastfeeding that’s tough to live up to, and at the other, the kind of finger-wagging that can leave women feeling stigmatised if feeding doesn’t work out.

Journalist and broadcaster Beverley Turner’s response was to set up The Happy Birth Club antenatal classes to provide informative antenatal courses to couples.

“I felt really strongly that women were getting mixed messages and being terrified,” she explains.

Perhaps part of the problem is in not being able to talk frankly and honestly about the sometimes difficult reality of breastfeeding. Professor of Neonatal Medicine Neena Modi believes perspectives on breastfeeding are often very limited.

“The truth of the matter is that for some women it’s great, and for others it’s not. Let people have information about the entire range of possibilities,” she says.

It’s a theme picked up by midwife Angie Barrett.

There are many factors that can make it easier to give up rather than to continue, and many of these are because of lack of support and guidance in the early stages.”

But these messages don’t make great headlines. Beverley Turner believes the media’s natural tendency to seek out bad news has distorted our view of birth and early motherhood.

“I’m one of the very few voices in the media who tries to speak positively about pregnancy, birth, and breastfeeding, so it doesn’t always sound like something to be dreaded,” she says.

“I get told it’s a very niche area, and I think that’s one of the problems that breastfeeding has ... [the media] loves to write a negative breastfeeding story,” she explains.

Despite this, many women in the UK still want to breastfeed. Initiation rates of around 75 per cent suggest the intention is there, but drop-off rates point to some challenges in continuing beyond three months.

Perhaps mixed messages around the length of time babies should be feeding for are part of the problem. While The World Health Organization (WHO) recommends two years as a benchmark, the Department of Health recommends exclusive breastfeeding for the first six months, followed by a period of continued breastfeeding alongside the introduction of solid food for as long as mother and baby wish.

For lactation consultant Dee Bell, the focus should be on helping those who initiate breastfeeding continue to do so.

“I think whoever wants to breastfeed should have the support they need. If initiation is 75 per cent that should mean that by four months, 75 per cent are still breastfeeding. So let’s have that as a rough goal,” she says.

Fathers and partners play a vital role in providing this support, and they too are looking for a more realistic picture of breastfeeding.

## What information and when?

In the absence of a clear national message, it's the job of a multitude of bloggers, journalists and healthcare professionals to provide information. But what kind of information do new mums want and need to get started and to continue?

"Our readers want every bit of information they can get their hands on," explains Sally Hall.

"There's a general rule that online features are no more than 500 words, but we ignore that in the baby world because people want to know stuff!"



Neena Modi, professor of neonatal medicine at Imperial College London, says new parents are asking for information early, but acknowledges that new mums and their partners are often a little shell-shocked in those early days. Beverley Turner agrees.

"We will do a breastfeeding session as part of our antenatal classes with women who 100 per cent want to breastfeed, but then they go into hospital where they might get told: 'You don't have enough milk, here's a bottle,'" she explains.

"And then we'll remind them that their milk doesn't come in until day two or three and they say 'Oh, I'd kind of forgotten that."

Midwife Jo Gould feels it's a delicate balance for her profession.

"I feel that the situation we have at the moment is that there is too much information and not enough support. One hundred per cent of women are using the internet for their information because they don't know where else to turn."

Emma Pickett feels there's a very meaningful message getting lost amongst all this information.

"If there's one important message that needs to get through, it's that breastfeeding is so much more than a milk delivery system. It's a way to meet a baby's needs, and you may not know what those needs are.

"It might be that they're tired, or hungry, or that they're cold and uncomfortable. Mums don't have to ask themselves if their baby is hungry to know if they're allowed to put them on the breast. It's multi-purpose!"

'too much information  
and not enough support'

Neena believes perceptions around the mechanics of breastfeeding can shape our perspectives very early, highlighting some research conducted by her team.

"Some young people said to us that breastfeeding is terribly 'yucky,'" she explains.

"That was the word they used. And we thought that if young men and women believe breastfeeding is yucky, then clearly we, as a society, have got our messaging wrong.

"Children need opportunities to actually see their mums and their parents' friends breastfeeding, so they can take it in their stride and think nothing of it."

Amy Brown says other research suggests young women have made the decision about whether or not they will breastfeed at just 14 years old, underlining how important those early influences are in shaping our views.

"The peer example isn't there," she says.

"And so a lot of our education is obtained through the media, where anything to do with early motherhood and birth isn't at all true to life."

Many of our panellists shared stories of their own children,

highlighting how a child playing at breastfeeding is somehow considered taboo – and why is it that toy babies always have bottles?

The hysteria that surrounds breastfeeding in public hardly helps; recent positive news like the scheme in Newport – in which breastfeeding mums are encouraged in cafes and restaurants with a 'breastfeeding welcome' sign – is still outweighed by more negative stories.

The solution for some has been the adoption of a 'hooter hider' or nursing cover, a kind of shawl/curtain hybrid that makes feeding more discreet by hiding both breast and baby. But they don't always have the desired effect. Beverley Turner shares a fantastic 'out of the mouths of babes' anecdote.

"My son was six or seven and saw a lady using one in the park," she says.

"And he was asking the lady what she was doing. When she replied she was feeding the baby, he said: 'Why have you got that thing on – is your baby really ugly?'. To this day I don't know if he was being deliberately hilarious or whether it was said in total innocence!"

## So what are our experts' takeaways for new mums?

- Think like a reporter. Choose your information sources carefully, and be wary of accepting things at face value. Collect and check the facts, and speak to as many real-life mums and dads as possible.
- Don't be put off by overblown media stories, and don't feel like you're doing something wrong if you're not living up to the glossy, idealised image you may find on social media platforms. It's up to each of us to find our own way through and make our own decisions.
- You are not a milk delivery system. Breastfeeding is about so much more; it's an opportunity to provide warmth, comfort and bonding time for your baby.



# *The confidence to continue*

Lots of women believe in the benefits of breastfeeding, and lots of them start. But then many of them stop. Are women getting the support they need to continue? And where can new mums find it?

If the experience of all new mothers across the UK was averaged out into the story of just one woman, it might look a bit like this.

She's heard about the benefits of breastfeeding and is keen to breastfeed her own baby. She starts feeding when baby arrives, with every intention to keep it up for a year. But after a few months, she decides she can't do it any more...

"Initiation is high – it's about 75 per cent," explains professor of neonatal medicine Neena Modi.

"But then women go home and by three months, the number of mothers breastfeeding has fallen drastically and by six months only about a third of babies are having any breastfeeds at all."

Why do we have this challenge with persistence in the UK? For some people, it just doesn't work out, and our expert panel was unanimous in saying these women need as much support as those for whom it all goes to plan.

But maybe there are bigger matters at play, too. Those big, infrastructural issues around the kind of immediate postnatal support women receive from professionals, like midwives and health visitors.

"Lots of midwives are very woman-centred, and very motivated," says Jo Gould, a midwife herself.

"But they're thin on the ground."

These are hugely influential figures in a child's first few hours in the world. So influential that Jo left behind her career as an architect to retrain.



"Having had a terrible birth, I had an incredibly supportive midwife who transformed the experience and transformed me as a person," she explains.

"I just felt 'I've got to do that' – it's the most important thing in the world to work with women and help them start their family lives."

The sheer enormity of this work – spread over so few people – can mean midwives are stretched; and there was concern amongst the panel that new mums don't always get the best start to breastfeeding.

"I think sometimes the reality of the postnatal ward is that – with the best will in the world, you cannot spend time giving breastfeeding support," Jo says.



‘women go home and by three months, the number of mothers breastfeeding has fallen drastically’





## *The confidence to continue*

Jeremy Hunt has announced plans to recruit an additional 3,000 extra maternity staff over four years, and provide women with continuity in support. But perhaps it isn't just about the numbers.

"I think there are a lot of mixed messages coming from midwives too," explains Dee Bell.

"They might be told they mustn't use nipple shields or they mustn't pump yet, things like that. I think training staff can make a real difference to women on the wards."

British women spend less time in hospital after giving birth than any other European country<sup>1</sup>. Doula and peer supporter Jil Wild Manning volunteers at her hospital drop-in centre and says there is a real thirst for additional postnatal support.

"Some are desperate to get home, but others choose to stay some extra nights in our care just to get breastfeeding established," she explains.

And there are patches of the country where this kind of support is continued in the community.


"If you look at somewhere like Lewisham, which has very high breastfeeding rates, they have a drop-in every day of the week, two a day quite often," explains breastfeeding counsellor and author Emma Pickett.

"You might have peer supporters who visit you at your home and you might be able to access support through your mobile too. But that model is increasingly rare."

The answer for many mums is to look elsewhere. TV presenter and campaigner Beverley Turner had been running an antenatal course for three years in Chiswick when she decided on a change of focus.

"We were hearing from a lot of women who'd got home and were saying 'I haven't got enough milk, it's not working,'" she explains.

"So we dropped a session off our antenatal course and swapped it for a postnatal home visit from the midwife, and we now have 100 per cent breastfeeding rates across the board. It's been transformative for people because they have that continuity of seeing one person."



Midwife Jo Gould agrees wholeheartedly that continuity is essential for a new family. She sees a more community-based model of care as the future.

"The Albany Midwifery Group is working in a part of London where you have really fragmented care, but they pick women up and look after them – this is the model we need to be working on," Jo believes.

These services cost money, of course. But the members of the panel make a convincing pitch for investment.

"Someone like me can visit once and pass on the right information and save five visits from someone else," explains Dee Bell, midwife and lactation consultant. She adds that establishing good breastfeeding practice in those early days will prevent babies being admitted for dehydration or weight loss and protect their overall health for decades to come.

Professor of neonatal medicine Neena Modi says she doesn't know why this very logical argument for more breastfeeding support isn't cutting through.

"The evidence is all there," she says.

## *So what are our experts' takeaways for new mums?*

- Don't be afraid to ask for support from your midwife or the people around you if you're struggling. A visit, or advice from friends and family, could make all the difference.
- Check out your local support situation. You may be lucky enough to be in an area with drop-in classes or calls from a friendly midwife.
- Start your own virtual village! The advice of people in the same boat can be invaluable for new mothers – if only so you know you're not on your own.

"And the economic argument is there, so you'd expect every government in the world to be falling over themselves to increase breastfeeding rates. But tackling this on a very evidence-based, logical way is not enough, it seems."

## *'many women are forming their own communities of likeminded supporters'*

In the absence of organised state care, many women are forming their own communities of likeminded supporters. These might be close friends and immediate family, including dads and partners (who may need their own support).

"There's some new research that has looked at what's effective in terms of peer support," says Dee Bell.

"We're able to create our own little village of people who breastfeed if we don't have our own!"

<sup>1</sup><https://www.telegraph.co.uk/women/mother-tongue/11319166/British-woman-I-was-told-to-leave-hospital-6-hours-post-birth.html>





## *A breastfeeding culture?*

Women across the UK know about the benefits, yet we still have some of the poorest breastfeeding rates in Europe<sup>2</sup>. Here, we explore the cultural factors shaping our choices, and how women can find like minds who share their values.

‘Is she a good baby?’ It’s a question new mothers are asked every day – but what does it actually mean?

“I just hate that phrase,” comments author and researcher Dr Amy Brown.

“It seems to mean a baby who doesn’t bother you too much, and the connotation is that only good mothers have good babies.”

Her frustration is probably shared by thousands of parents who resent the idea that a ‘good’ baby is a compliant, sleep-all-night non-complainer. Not least because the implication is that other, perfectly normal babies are ‘bad’.

“I think it’s about that pressure to get your life back to how it was before you decided to have this brand new human being,” continues Dr Brown.

“So you have to get your baby to be good, which means sleeping all night, without needing to be picked up or interacted with.”

Our panel agreed that this pressure to get ‘back to normal’ could mean many women are cutting short that crucial period of postnatal ‘R and R’.

“I think we’re almost programmed to feel guilty for not being busy,” says TV presenter and founder of The Happy Birth Club, Beverley Turner.

“I always encourage women to see that they are actively doing something that’s very valuable. You’re probably not going to sit down for the next 18 years, so make the most of the opportunity!”

‘we’re almost  
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<sup>2</sup> World Breastfeeding Trends Initiative report 2006



# A breastfeeding culture?

But where does this kind of pressure to snap back to a pre-children existence come from? Author and lactation consultant Emma Pickett thinks it's a big, societal influence.

"What's interesting about other cultures is that the rest period is actually enforced," she says.

"The mother doesn't think 'maybe I'll sit in bed for six weeks,' she's told to stay there, while family members and friends will look after the house."

This kind of support is far from a given in our modern, atomised family units, where the extended family is often an oh-so-precious resource. When grandparents do get stuck in, they don't always offer the most helpful advice.

"I've visited women who have been taught about positioning the baby for feeding, and things like skin-to-skin contact," says Jo Gould.

"But then their mother-in-law comes along and says 'you don't want to make a rod for your own back.'"

It's a message that's entirely at odds with a responsive feeding approach – adopted by Unicef Baby Friendly and taught across the world since 2014 – that advocates responding to a baby's feeding cues.

But it's worth remembering that the advice of well-meaning grandparents (however dated) may be a hangover from a time when a healthy childhood was far from guaranteed.

Clinical psychologist Mia Scotland believes previous generations treated babies more like 'things,' simply because of the heartache of becoming too attached.

"That's becoming reversed now in society, which is brilliant," she says.

"But it's taken a few decades to actually view the baby as a sentient, emotive being."

The point is picked up by Jo Gould, who adds that "we need to stop thinking of them as babies, but as people".



‘don’t get too hung up on the advice of the grandparents (or anyone else)’



Whatever their origins, our parents' views can shape our own behaviour, even in adulthood. Our panel spoke about a 'family culture' of breastfeeding, and the influence this has on a new mother.

"I've had clients whose mothers breastfed and so they expect to breastfeed," explains lactation consultant Dee Bell.

"I had a lady yesterday who was really struggling with milk supply, and pushing herself beyond where most people give up. I turned to her mum and asked if she breastfed. And she said, 'Oh yes, all four.'"

It doesn't always work this way, of course. Teenage habits die hard, and for some of us, a parent's instruction is an invitation to do the exact opposite.

"There's also an interesting phenomenon out there that women don't take their mother's advice," says midwife Angie Barrett.

"So over the last 20 to 30 years, they will increasingly listen to friends, peer groups, people on television and online."

It's a theme picked up by Dee Bell, who says women today create their own community of likeminded people if they're unable to find them amongst their immediate friends and family.

Peer support and social media are invaluable for a generation of new mothers who may be at odds with their parents. But what about the next generation?

"If I could change one thing to support greater take-up of breastfeeding, it would be about normalising it for children," explains Mia Scotland.

"When I learnt to drive, I'd seen other people doing it for years before I tried myself. If I'd never seen anyone drive a car before I wouldn't know where to start. It's exactly the same for breastfeeding – we need to normalise it for the next generation of parents."

## So what are our experts' takeaways for new mums?

- Try to relax into your postnatal bonding time with baby. This time is precious, short-lived and vital for both mother and child.
- Don't get too hung up on the advice of the grandparents (or anyone else). Nobody can understand your baby's needs like you do ... even if it doesn't always feel that way!
- Peer support programmes and social media offer countless opportunities to find people who can support your breastfeeding journey.



## *In conclusion...*

You probably won't be surprised to hear that 'support for mums' was one of the phrases our panel used the most. We know the intention to breastfeed and the awareness of its benefits is there, but many new mums don't find the help they need to stick with it.

At the time of writing, Government plans to recruit and train 3,000 extra maternity staff have been announced, along with a recognition – raised directly by our panel – that continuity of care is essential for new families.

This is a welcome step in the right direction, as long as they are offered effective training. Many women are still likely to form their own 'village of peer support', made up of friends, online peers and family members who share their views.

In closing, we'd like to highlight how important partners are to this village. Dads and partners play a vital role in a mum's support network.

They're becoming increasingly active in the social dialogue around breastfeeding and, just like mums, they're looking for a more truthful narrative about the reality of breastfeeding.

This is so important because – as one of our panellists put it – the partners are 'the ones who are there in the middle of the night' when things are proving difficult. After all, it takes two to make a baby.

Whoever and wherever your support comes from, it's essential you ask for it. We hope you've found some ideas here to help you get just what you need. Trust your instincts, find your own path, and share your journey.



## *Other sources of information and support*

Association of Breastfeeding Mothers

[www.abm.me.uk/support-group](http://www.abm.me.uk/support-group)

Breastfeeding Network

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

Tel 0300 100 0212 (9.30am to 9.30pm)

NCT new parent support

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

NHS Choices pregnancy and baby guide

[www.nhs.uk/conditions/pregnancy-and-baby/benefits-breastfeeding/](http://www.nhs.uk/conditions/pregnancy-and-baby/benefits-breastfeeding/)



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