

Barriers to Successful Breastfeeding: Stemming From Our Past

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Being able to breastfeed our infants, giving them the exact nourishment and immune enhancing substance they need, that is specialized for each stage of infancy (Wambach & Riordan, 2016), is a unique job placed on mothers for the survival of their young. Why is it then, that only 38% of infants across the entire globe are exclusively breastfed (Martin, Ling, & Blackburn, May 11, 2016)? There are myriads of reasons babies are either not breastfed from birth, or supplemented with formula. Some barriers to successful breastfeeding include, but are not limited to, formula advertising, lack of care providers educated in breastfeeding, short maternity leave and lack of breastfeeding support in the work place, the mother not being breastfed, not seeing other people breastfeed, or not being raised with breastfeeding as the cultural norm (Urban, 2012; Martin, Wambach & Riordan, 2016).

A new mother's choice to breastfeed and her success will be affected by her history and surroundings. What she knows about infants and breastfeeding will be influenced by how she was raised and the culture around her (Wambach & Riordan, 2016). Here in lies the barrier to successful breastfeeding that will be discussed in this paper.

Since the 1940s, breastfeeding culture has changed in the United States (U.S.) and globally (Wambach & Riordan, 2016). World War II started in 1939; from 1940 to 1945 there was a 50% increase in the female labor force as women filled the jobs previously occupied by men for the first time in history (Metropolitan State University n.d; Shah, April 23, 2015). This led to an extensive shift in home life, advertising, production of products geared towards women's new occupations, and social attitudes (Wambach & Riordan, 2016). This cultural shift was the genesis of the generational decline in breastfeeding. Women working outside the home faced many challenges not previously encountered in breastfeed efforts. Little did anyone understand that this would affect breastfeeding in the generations to come.

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Before the 19th century, wet nurses were the only alternative to a mother's breastfeeding. However, by the 20th century, the wet nurse was no longer a profession as the advancement of bottles, rubber nipples, preservatives, and the availability of animal milk, became more convenient and socially and scientifically accepted. By the 1940s, formula had been developed to a point that manufacturers advertised directly to physicians. Soon physicians and their patients considered formula as a modern, popular, and safe alternative to breastmilk (Stevens, Patrick, & Pickler, 2009; Wambach & Riordan, 2016).

The practice of breastfeeding continued to decline as hospital births increased. In 1940, 55% of America's births took place in the hospitals; by 1950 hospital births increased to 88%, by the 1960's (outside of some isolated rural areas) it was almost unheard of for American women to deliver their babies at home (Leavitt, 1986; Wambach & Riordan, 2016).

During hospital births mothers were heavily drugged in "twilight sleep," their babies came into the world in a dampened state, needing extra medical attention. Mothers were not in a position to care for their babies after an exceedingly medicated and instrument assisted birth. This led to babies being put in nurseries and fed formula until the mother could care for them. At this time women spent up to two weeks in the hospital postpartum. After the mother was released, she had free formula samples in hand, her milk supply had decreased, and her baby was accustomed to formula in bottles (Leavitt, 1986; Wambach & Riordan, 2016). The mother's confidence in her ability to nurse and belief in the importance of her milk, were extremely trodden upon! By 1946, 38% of mothers exclusively breastfed at hospital discharge, 20 years later only 18% were exclusively breastfeeding at the time of hospital release (Meyer, as cited in Wambach & Riordan, 2016).

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Currently in the U.S., an estimated 67% of three-month-old infants are receiving formula for some amount of their nutrition (Martin et al., May 11, 2016). Only 13% of infants in the U.S. are exclusively breastfed up to the six months recommended by the World Health Organization (American Academy of Pediatrics, 2012).

The U.S. now has several generations who have not been breastfed, or had limited exposure to breastfeeding. The decision to breastfeed is affected by whether the mother was breastfed herself, her partner's opinion about breastfeeding, and her support system (Wambach & Riordan, 2016). Since the decline in breastfeeding from the 1940s, we now have three or four generations making decisions about breastfeeding influenced by the people they associate with, by what society says is normal, and the community they live in (Wambach & Riordan, 2016).

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