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Your Breastfed Baby at Night: Facts and Fiction About Your Nocturnal Newborn

[08] The Womanly Art of Breastfeeding: How It Impacted the Mothering of Martha Quinn & Martha Sears

[10] Mothers' Stories
[10] To My Son


[14] Making It Work When to Stop Pumping at Work

[16] Eating Wisely Whole Foods for the Whole Year

[18] Formula Fed America


[22] World Breastfeeding Week Celebration “In the Pink” for WBWC More Good News from Rock County

[24] To Honor and Remember
The following products are available from La Leche League International. Shop with confidence that these items have been specially selected to help you on your parenting journey.

Breastfeeding Answers Made Simple: A Guide for Helping Mothers
by Nancy Mohrbacher
This comprehensive, research-based counseling guide provides the answers to virtually every breastfeeding question and is organized in an easy-to-use two-column format.

Mothering Multiples: Breastfeeding and Caring for Twins or More
by Karen Kerkhoff Gromada
Preparing for a multiple birth, valuable information on breastfeeding and caring for multiples.

Breastfeeding
Mother’s Guide to Making More Milk
by Diana West, IBCLC, and Lisa Marasco, IBCLC
Latest research on the causes of low milk supply and the way the body makes milk. How to determine causes for low milk supply and effective methods for increasing supply.
How many new mothers feel they are prepared for breastfeeding?

As a new parent, you may find your waking moments filled with thoughts of sleep. Is your baby sleeping enough? Too much? When will you be able to sleep more? Is it okay to nurse your baby so many times throughout the night? Would your baby sleep longer if you gave her a bottle before bed? Susan E. Burger addresses these questions and more as she explains how breastfeeding is the perfect complement to a good night’s sleep for both mother and baby. Oh, and that bottle before bed idea? Burger explains how that myth began and why it’s exactly that—a myth.

Our “Mothers’ Stories” include two touching tributes from mothers who have weaned for the first time. In “Toddler Tips” mothers share how they survive that “touched out” feeling that comes with frequent day and night nursing. When is it okay to stop pumping at work and still maintain your milk supply and nursing relationship? Mothers tell us what worked for them in “Making It Work”. Lesley Robinson makes mouths water in “Eating Wisely” as she walks us through a year of cooking with Whole Foods for the Whole Family.

Can’t get enough of the latest edition of The Womanly Art of Breastfeeding? Settle in to read how the mothering experiences of author Martha Sears and original Music Television Video Jockey (MTV VJ) Martha Quinn were affected by the previous edition of this LLL cornerstone. While we’re on the topic of classic LLL reads, two mothers pay tribute to author Tine Thevenin and her book, The Family Bed.

To round out this issue, we also read about how a tricky start to breastfeeding inspired one mother to create a documentary about the use of formula and what impact everything from free formula samples to misinformation may be having on breastfeeding mothers. We also learn how one LLL Group raises awareness of the health benefits of breastfeeding as they celebrate World Breastfeeding Week.

I’m thrilled to bring this issue to all of you and hope you enjoy reading it as much as I’ve enjoyed helping to create it. I’m always eager to hear your story and your voice, so please share with us at nbeditor@lllusa.org.

Amy Nelson

Amy Nelson is a La Leche League Leader in the small Missouri River town of Yankton, South Dakota, where she lives with her husband, Cory, and four children: Accalia (11), Cole (8), Ella (4) and Tylan (2).
We Get More Sleep Than We Think

First, let’s take a quick look at sleep perspective versus reality. Adults often forget how long they slept when they wake up in the morning. As reported in a New York Times article entitled “The Sleep-Industrial Complex,” insomniacs almost invariably overestimate how long it took them to fall asleep and underestimate how long they slept. Even some sleep researchers are prone to evaluating sleep within the framework of their own cultural norms. For these reasons, studies relying on self-reported sleep often reflect popular beliefs about sleep rather than actual sleep patterns.

The Sleep Gap

If adults without a newborn to care for at night feel as if they are receiving less sleep than they actually are, it’s no wonder that new parents feel even more sleep deprived. This may explain why many new parents are eager to take the advice of well-meaning friends and family when they suggest giving baby a bottle of formula to help them sleep longer at night. If you’ve thought there might be a grain of truth behind this advice, the results of one recent study may surprise you. The researchers objectively measured sleep by using wrist monitors. Parents of three-month-olds who breastfed at night slept 40–45 minutes longer than parents who fed formula to their three-month-olds at night. Or alternatively, parents who fed their three-month-old babies formula at night had a sleep gap of 40–45 minutes. Both mothers and fathers experienced this sleep gap.
If you’re skeptical, let me walk you through the whys and hows of the early days of breastfeeding, frequent wakings and feedings; how you can make the most of this time in terms of quality sleep, and then explain why the myth that formula helps babies sleep arose.

The Continual Feed Plan
While you are pregnant, you don’t need to do any extra work to feed your baby; just eat healthy foods yourself. The nutrients in your blood stream will continually flow through the umbilical cord to your baby. Once the umbilical cord is clipped, the real challenge begins.

Brain Versus Stomach
Human intelligence forces us into a physiologic compromise when it comes to our babies. Your baby must leave your womb before her head grows so large that it won’t fit through your birth canal. As a result, she must enter the world while her stomach is still very small and immature. After birth, her brain needs a continual source of fuel, especially during the first three months when it completes 25 percent of its growth. She will need to constantly refill her small stomach to fuel her big brain. Normal healthy newborns typically feed for 20 to 50 minutes at a time and eat about eight to 12 times in a 24-hour period.

Stomach Stretching
The amount of time a newborn spends feeding often feels as if it consumes the entire day and night. Bear in mind, though, that she will spend less time feeding as she grows and develops. At birth, her stomach will only hold five to seven milliliters (one to one-and-one-half teaspoons). If you tried to put 60 milliliters (about two ounces) of milk into her tiny stomach right after she was born, she might feel about the same as you would if you tried to drink nine liters of water. She should store enough fat during your last trimester of pregnancy to carry her through the first few days. As she emerges from the relative sterility of your womb into an environment filled with germs, the first thing she needs will be the antibodies in your milk. Take heart. As she learns to feed, her stomach will rapidly balloon to 11 times its original size. By day 10, her stomach will comfortably hold 60-81 ml (about two to two-and-two-thirds ounces). Your stomach will still be 13 times larger than hers. So don’t push your luck by trying to supersize her feeds so she will sleep longer. Indigestion may wake her up even more frequently. Furthermore, supersized feedings may override her ability to regulate her own appetite, setting the stage for weight problems later in life.

Nocturnal Feeders
In addition to frequent feedings day and night, parents also have to adjust to the fact that babies are nocturnal at birth. While you are pregnant, you may feel your baby move more frequently at night than during the day when you are active. One theory is that she is being rocked to sleep during the day and becomes more active when you are still at night. My personal theory emerged when my son’s pet mouse, Hannah, delivered a litter within seven days of her purchase. The pet store did not warn us that she might already be pregnant. She was nocturnal, foraging for food at night while she left her pups behind. Her pups fed more often during the day when she slept. Perhaps our babies are designed for a time before we developed agriculture; a time when we probably spent much of our day foraging for food and our babies had to feed when our breasts were more available at night.

Don’t despair. The melatonin that rises in your milk at night helps to regulate your baby’s natural body clock and may help her transition to sleeping more at night. She will not remain nocturnal forever.

Restorative Sleep
If you believe that adults must have eight hours of continual sleep, you may feel anxious when your hungry newborn wakes you at night. Yet historians claim that up until a couple of centuries ago, the sleeping pattern in Western society was not eight uninterrupted hours of sleep; it was two shifts of sleep with an hour or so of activity in the middle of the night. The use of artificial light may have driven us into an abnormal pattern of

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condensing our sleep into one period of eight hours to cope with extended wakefulness during the day. This leads many of us to assume falsely that it is our babies who have abnormal patterns of sleep.

Don’t focus on one long block of sleep. Instead, establish routines that help you feel more restored. After you give birth, your body is primed to garner restorative sleep from shorter intervals. Breastfeeding is an important mechanism, which is designed to help your body recuperate after giving birth and maintain its stamina while you adjust to mothering your baby. The following tips (recommended by the American Academy of Pediatrics) will help you establish breastfeeding and get more restorative sleep:

**Proximity**

You and your baby will find it easier to synchronize your biological rhythms when you are in close proximity. Just as adults usually adjust their sleep rhythms to each other when they share a room, so will you and your baby. When she is nearby, you will become accustomed to her many noises and intuitively begin to rouse from light sleep when she needs you. This is much less disturbing than being jarred by an alarm out of deep sleep. All aspects of your baby’s care, including feeding, are more convenient if she is nearby. At night your response time will be faster if she is nearby. This will also make it easier for you to get back to sleep again. She will develop trust as her needs are consistently met, and she will be less likely to wake you with strident crying.

You can derive comfort from the fact that she will be at a lower risk of Sudden Infant Death Syndrome (SIDS) when she sleeps in the same room with you. One study found that 36% of SIDS cases were attributable to babies sleeping in a separate room, while only 16% were attributable to bedsharing.

**Skin Contact**

As your baby emerges from your warm, all-encompassing womb, she must cope with a rapid change in temperature, exposure to light and sound, and tactile sensations. When her skin first comes directly into contact with your skin, that contact will stabilize her body temperature, heart rate, and respiration. She will be calmer if she is physiologically stable. As your skin first comes into contact with her skin, you will experience a surge in the hormone oxytocin. Think of oxytocin as your “love drug.” It facilitates bonding and will also help you feel calmer and more relaxed. Her initial contact with your skin will also stimulate her feeding reflexes. She will be able to wiggle and crawl to your breast on her own. Continued contact with your skin will reinforce these feeding reflexes, enabling her to adjust to the loss of the free flow of nutrients from the umbilical cord.

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**Frequent Feeding**

You may find that your breasts start to tingle at the touch, sound, sight, or scent of your baby. This may intensify when she suckles from your breast. You may begin to feel relaxed and drowsy as oxytocin is released. You are not being drained of energy. Quite the contrary, the relaxed drowsy sensation will help you rest so you can recuperate from giving birth and maintain your stamina as you adjust to your new baby. Think of oxytocin as doing double duty as your safe sleep drug.

Each time she feeds, you will experience a spike in the hormone prolactin. The more often she drinks milk from you, the faster your prolactin levels will increase. Think of prolactin as your “performance-enhancing drug” for milk production. Just as you are more likely to build muscle with regular exercise than with infrequent exercise, you are more likely to build your milk supply faster with regular breastfeeding than if you skip feedings.
Origin of a Myth
If a frequently waking and feeding newborn is biologically normal, why are so many parents convinced that formula will improve this biological norm and help their babies sleep longer? This myth has its roots in the era when women were actively discouraged from breastfeeding and from trusting their own observations and responding to their babies’ needs. Policies and practices that separated mothers and babies were institutionalized. Hospitals implemented rigid feeding schedules to minimize how often their staff had to feed babies or bring babies to their mothers for feeding. Infrequent breastfeedings deprived many babies of sufficient calories and many mothers of the relaxing effect of oxytocin.

If a baby wasn’t allowed sufficient time to drain his mother’s breasts, his mother might become painfully engorged. Her engorged breasts might be so taut with milk that his lips might slip and slide. In frustration he might chomp down with his gums. She might experience such severe pain that she would take him off her breast while he was still hungry. Her overly full breasts would tell her body to slow down milk production. If she resorted to giving him a bottle of formula, he might fall asleep merely because he finally received the calories he needed. She would believe that the formula made him sleep better. Yet he would have slept just as well if those calories came from her milk. Neither had the opportunity to get into sync with each other.

Contingency Plans
We are gradually starting the transition back to more normal feeding and sleeping routines for babies. While we are in transition, many women still don’t receive as much support as they need to get breastfeeding off to a good start. Sometimes medical conditions complicate the process as well. With a pragmatic attitude and a few tips, you can often mitigate the impact of such complications.

Separation
If you and your baby are separated from each other, keep a picture of her with you, look at the picture frequently, and remember that bonding is a process, not an event. If you can’t have contact with her, encourage your spouse, partner, or trusted family member to provide skin-to-skin contact until you are able to do so yourself. If you cannot feed her from your breast, express milk at least as many times as she is supplemented. If you are separated from her at night, drink lots of water before you go to sleep. Express milk when you wake up to use the bathroom. You tend to wake up in light sleep when you need to urinate, which is less disruptive than an alarm. When you are reunited, give her lots of extra time snuggled next to your skin.

Supplementation
If your baby cannot feed from your breasts or is having trouble drinking enough to meet her caloric needs, establish and maintain your milk supply, express milk at least as many times as she is supplemented. Human milk has just as many calories as any artificial substitute plus antibodies that no substitute can provide. So supplement her with as much human milk as you can provide. Cherish every drop of milk you release rather than stressing about any gaps between your production and her needs. Most importantly, if things go awry, find someone who is appropriately supportive and qualified to assist you towards getting back in sync with your baby and with breastfeeding.

The Womanly Art of Breastfeeding: How It Impacted the Mothering of Martha Sears & Martha Quinn

Beliefs led me to becoming a La Leche League Leader in 1999. By the way, I now tell any pregnant mother I meet to attend a La Leche League meeting before she gives birth. Seeing breastfeeding in action is extremely helpful, and you can meet other mothers that you can reach out to in those early weeks.

An original Music Television Video Jockey (MTV VJ), Martha Quinn appeared on NBC’s “The Weakest Link” to raise money for La Leche League. She and her husband, Jordan Tarlow, live in Malibu, California. They have two children, three dogs, two hermit crabs and one leopard gecko. When Martha’s not being a disc jockey (dj) on satellite radio, she can be found cooking vegetarian dog food, driving her kids around, mountain biking with her husband, or collapsing on the couch.

*Editor’s Note: Page references are taken from the Seventh Revised Edition of The Womanly Art of Breastfeeding.

When Annabelle was born, philosophy gave way to many, many questions. I needed The Womanly Art of Breastfeeding more than ever now that I had an actual baby to feed! What do I do with these engorged breasts? Page 54. How do I know if she’s eating enough? Page 74. How do I know if my baby is ready for solid foods? Page 231.*

In The Womanly Art of Breastfeeding, I read about La Leche League meetings. It took me about eight months to attend one in my area, Hollywood, California. What took me so long? La Leche League meetings gave me a chance to see ideas discussed in The Womanly Art of Breastfeeding put into practice. It was amazing to connect with like-minded mothers in this environment of support.

The Womanly Art of Breastfeeding became much more than a how-to guide for delivering nutrition to my child; its philosophies became my passions and unshakeable beliefs. Those passions and beliefs led me to becoming a La Leche League Leader in 1999. By the way, I now tell any pregnant mother I meet to attend a La Leche League meeting before she gives birth. Seeing breastfeeding in action is extremely helpful, and you can meet other mothers that you can reach out to in those early weeks.

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With each page, I couldn’t believe my eyes. I read that “breastfeeding works best when the baby is fed in response to hunger cues, not on a schedule.” I learned that responding to baby’s cues not only helps him to feel secure, but that more time at the breast aids in establishing and maintaining your milk supply. This was revolutionary to me. Most of my pregnancy I’d been warned by well-meaning friends and family that babies “manipulate” their parents. That never felt right to me and within the pages of The Womanly Art Of Breastfeeding I’d found a philosophical home on which to hang my parenting hat.

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To My Son

My son recently weaned. In the back of my mind, I looked forward to this time as a time of growth and new beginnings. I never thought I would get so emotional about the end of breastfeeding. While I knew breastfeeding was the best I could give my son, there were many struggles the two of us faced. My milk supply was always low, he nursed on demand except during the three months when I worked, and until two months ago, he co-slept and nursed through the night. I sat down and wrote a letter to my son to help me sort through the emotions I am feeling now that he is no longer breastfeeding. I would like to share it as a positive testament that even though breastfeeding is not always easy, it is a treasured experience.

Dear N,

Tonight is the third night in a row that you have gone to bed without nursing to sleep. It has also been more than 48 hours since you last nursed.

On the one hand, I have been looking forward to this day. When you were first born, you would nurse from 7 p.m. to 10 p.m. In those early days, I would need a break so bad and your dad would try to soothe you in his arms, but soon you would be back in my arms, happily snuggled up to me. Nursing stressed me out so much as a new mother. Is he eating enough? Does he really need to nurse this long? Should I let him fall asleep nursing? (On the last one, I really had no choice because up until now, you rarely fell asleep in a bed without nursing). He just ate 20 minutes ago; does he really need to nurse again?

When I first decided to breastfeed you, I knew that “breast is best” plus I knew it would save us money, so I was happy to try it out. I honestly believed I would breastfeed you for three months or so and that would be sufficient. Then I had you and found out that recommendations were for at least six months and up to a year of breastfeeding, with anything over a year being great! What was I in for? Once I realized this wasn’t as temporary as I thought, I bought every nursing gadget and product out there, from the pump to the “breast bottle” to the nursing cover.

We’ve gone through so many hurdles in the past 20 months. I showed up to my first La Leche League meeting 30 minutes early and filled with questions. I read as many books as I could and talked to as many people who would listen. I wanted to do the best for you, but there were so many small mountains to climb. I felt awkward leaving the house with you. What was I going to do if you needed to eat and we were out in public? I remember the first time I nursed you in public. It was in a restaurant in Jacksonville, North Carolina. I had your dad there and I’m certain no one could see anything, but I was so self-conscious about the whole thing. Then I dared to go to a local book store, and a mother passing by commented, “I never got my child to lay (sic) still under a cover.” Little did she know if you moved that cover a millimeter, our nursing session would be in jeopardy. I think you knew better than to try. My proudest moment was at the space shuttle launch in Florida. The weather was hot and I felt bad for having you under the cover so I let it flutter in the breeze. Afterwards, a woman came up to me and commended me for the wonderful start I was giving you.

You also bit me while nursing. A lot. And I took the advice I was given. “Say no sternly but lovingly” so they still enjoy nursing.” “End the nursing session if he doesn’t stop.” “It is probably teething.” On and on and on. When I went back to work, the bottle and pumping saga began. I never felt like I could pump enough for you, but you took to the bottle so easily. I think you were just comforted by what was in it and not concerned with the method. It was something that kept us connected even when we were apart.

A few days after you were born, your dad and I realized that each family does what works for their family. We did what we had to do for our family, for you. I breastfed you for 20 months because it’s what worked for us. I have no regrets for giving you 20 wonderful months. I can only hope that I can do the same or better for any siblings you have.

Thank you for letting me give you the best start that I could. Love always,

Your Mommy

Beth Favor, Swansboro, North Carolina, USA
took a long time weaning her gently, being careful of Nadiya’s feelings and establishing other enjoyable naptime and bedtime routines for her.

I miss nursing my firstborn, Nadiya. A month ago, when she was 17-months-old, she weaned with gentle coaxing from me, because I’m currently more than six months pregnant with our son. I didn’t think I would miss it. I thought I’d enjoy a break from nursing, some “me time” before our son would be born later in the summer. I am enjoying it to a certain extent since I’m no longer in pain. The reason I slowly, gently urged Nadiya to wean was because nursing became completely unbearable after I became pregnant. My nipples and sometimes whole breasts would hurt so badly I would grit my teeth—toes curled, my whole body tense—during the entire nursing. I would dread our nursing sessions because of the pain and annoyance. I went to local La Leche League Series Meetings almost in tears, feeling terrible about the emotions I was having, since I used to enjoy nursing so much. The Leaders were very compassionate and understanding, telling me that pain, discomfort and negative feelings sometimes come hand in hand with nursing while pregnant. I realized that I had two choices: one, keep nursing her through the pain and negative feelings; or two, wean her at least until the new baby comes and nursing would feel normal again. After a lot of thought, I decided to wean her because my feelings about nursing weren’t fair to her (or me), and the pain I experienced regularly was intolerable. Nadiya also was nursing only for naptime and bedtime, and sometimes not at all. I took a long time weaning her gently, being careful of Nadiya’s feelings and establishing other enjoyable naptime and bedtime routines for her. Despite the discomfort, I took a longer time weaning her because I realized part of me still didn’t want to wean her at all. She’s been wonderful and has handled it very well, and has developed a love for our rocking chair, snuggle, and reading times. Happily, my husband, Syed, has been a source of love and support as I explored different options and worked through my feelings about nursing and weaning.

It’s been nearly a month since Nadiya has nursed. I find myself looking back on our nursing relationship wistfully, taking out her newborn photos and baby blankets as I prepare for my son’s birth. I look at how much she’s grown, watch her run around more independently, and find myself missing those nursing days with her. A planned gradual weaning is preferable because it allows a mother to slowly avoid abrupt weaning may be emotionally traumatic and the baby’s comfort and closeness as well as food, an abrupt weaning is the most difficult for both mother and baby. Because breastfeeding is a source of comfort and closeness as well as food, an abrupt weaning is the most difficult for both mother and baby. Breastfeeding was so important to her for so long, and a big part of our relationship. She’s a very loving, demonstratively affectionate child, and I attribute part of that to nursing her the way I did, as long as I did. We still enjoy a very physically affectionate relationship, lots of hugs and kisses, and co-sleep together with Syed at night. Due to pregnancy fatigue, I’ll often snuggle with her during naptime to catch some extra shut-eye myself. She is a joy.

I’ve decided that when my son arrives (and I will, of course, breastfeed him!), if Nadiya wants to try nursing again I will do my best to accommodate her needs, as she’s accommodated my need to be free of nursing right now. Of course, that will depend on the situation when it arises, Nadiya’s needs, and my feelings about whether I can actually handle it. I’ll do what’s best for my family and me.

Laura Abdi, Washington, D.C., USA
Mother’s Situation:

My 19-month-old wants to nurse all day and night. I have really enjoyed our nursing relationship but I am beginning to feel overwhelmed by my son’s constant need for my breast. I originally intended for him to self-wean but am now wondering if I might encourage him to nurse less often. How have other mothers coped with feeling “touched out” and what tips can you suggest to work toward a gentle weaning?

Response

I can relate both to the desire to wean, as well as the urge to sometimes say no to a 19-month-old.

When my first baby was this age, I was halfway into my second pregnancy and nursing started to feel “icky” to me. Pulled in both directions, I compromised by saying yes most times he asked, but timing him. Initially I allowed him about three minutes per side, and then told him it was time to go play or have something else to eat or drink. Soon, it got down to one minute per side, and he stopped asking quite as much. I will always remember the last time I offered him my milk, as it was also our last nursing. It was a comfort nursing, and he appreciated it. He just didn’t happen to ask again after that.

Delainey Casey, Lake Worth, Florida, USA

Response

I am convinced that between 16 and 18 months is a developmental milestone. I don’t know what it is but I think it starts around 16
months and by 18 months many mothers throw in the nursing towel.

I did several things. I instituted the countdown. You can count forward, backwards, or use the alphabet. When I got tired (or didn’t want to sit on a bench in the mall any longer) of a nursing session, I would say so and begin counting backwards from 10. At 10, un latch your child. You can use this discipline technique for so many other issues: letting them know it’s time to put shoes on or leave a friend’s house. Try to keep it a fun game. Once my son got used to it, I would switch languages on him.

The other thing I have found was to take time to sit down as if I was trying to figure out a puzzle. Try to find the core problem in a situation and what you can do about it. When my son was 18-months-old, I realized my biggest challenge was his nursing every two hours at night, every night. I could no longer sleep through the nursing session. Translation: Mommy needs sleep. My husband and I created a plan for night weaning. For a week or two, I would sleep by myself and not expect me to nurse him. That part took a little time.

I also noticed that he nursed a little less during the day. I think he picked up on my feelings and nursed less to be sure he could maintain that closeness. When I was more relaxed and not stressed about how much I had to nurse him, he relaxed and nursed less during the day.

That’s what worked for us. Many toddlers really have a hard time with that kind of night weaning, and you may find that you want to do it more gradually. I hope that you can find a solution that works for you.

Margo Trueman, Southern California, USA

New Mother’s Situation
My toddler is into EVERYTHING! We’re still nursing, so I can meet her needs for reassurance and help her fall to sleep with nursing, but the rest of the day she’s running me ragged just keeping up with her! She’s very curious and very busy. I’m a more calm and quiet person. I’m having difficulty with the mismatch in our energy levels. Any suggestions? Help!

Margo Trueman, Southern California, USA

“Toddler Tips” is edited by LLL Leader Karen Smith in St. Charles, Illinois, USA. She and her husband, John, have two children, Liam and Anastasia. Karen speaks and writes on parenting topics as well as writing fiction.

Please send responses and new situations to toddler.tips@lllusa.org.
Mother’s Situation:

I have been pumping a couple of times a day at work for almost a year. I am fortunate that my employer supports my decision to breastfeed and provides a suitable room for me to pump while I’m at work. However, I am tired of pumping. I miss having lunch with friends or just getting out of the office environment for a walk. If I do stop pumping at work, will my baby wean? Do other working mothers stop pumping and still continue to nurse their toddlers?

Response

First of all, great work breastfeeding your baby and pumping for your baby for a whole year! That’s wonderful! Once your baby is about a year old, you can absolutely stop pumping while continuing to breastfeed at home during evenings, nights, and on weekends, indefinitely. After a year of breastfeeding, your supply should be very well established and also flexible. You can lunch with your friends and nurse when you are with your little one—the best of both worlds!

I pumped two to three times a day for eight months after I returned to work from maternity leave, and it was worth every second! But when my baby, Joe, was about 11 months old, I went from two pumping sessions during the average work day to only one session. Then, gradually, over several weeks, I pumped for shorter and shorter periods of time. Eventually, I weaned off that one pumping session and found I could go without nursing all day without any engorgement or discomfort.

The best part is that Joe continues to breastfeed on demand on weekends, and even though I don’t pump during the week, he’s perfectly happy with my supply on weekends. Breasts are magical! The milk is always there when he wants it.

Inder Khalsa, Oakland, California, USA

Response

I went back to work when my younger daughter was six weeks old, and she was able to be with me at work until she was four months old. Then I pumped three times per day, every day, and nursed at home.

When she was 16-months-old, I was down to one to two times pumping per day, and she really wasn’t taking the expressed breast milk anymore. So, I stopped pumping and only nursed at home.

For over a year, she nursed in the mornings, when I got home and before bed (three times per day and one more daily on weekends at nap time). When she was about two-years-old, she dropped the after work nursing session and went down to nursing twice daily and three times per day on weekends. Around two-and-a-half-years-old, she dropped the morning nursing session and was down to once daily during the work week and twice daily on weekends. That lasted about a year.

At three years, three months, she weaned on her own. We started reading books instead of nursing at nap time and nighttime. It was so easy and smooth and now we are done.

So, no, you do not have to continue pumping to continue your nursing relationship. I nursed for two years after I quit pumping at work!

Amy Pederson, Austin, Texas, USA

Response

I have had to work full time while nursing both of my children. I currently have a three-and-a-half-year-old son and a nine-month-old daughter.

With my son, I weaned him from the pump starting at 14 months and took two months to do so. I started stretching the three pumping sessions out into two sessions and then dropped to just one.
He never missed a beat with nursing. He continued to nurse through my pregnancy and self-weaned at just over three years. With my daughter I am not as stressed out with pumping as I was the first time around and am planning on the same approach with weaning from the pump, only I don’t know if I will wait as long. It was such a smooth transition the first time, and we continued a wonderful nursing relationship for so long after! I couldn’t have been happier.

Try not to stress too much over it! I did and I wish I hadn’t. I should have just let things go with my baby’s flow. He adjusted so well; it was me that was stressed! Enjoy your nursing time together, and as long as you are nursing upon demand when together, there will probably no weaning until she is ready!

Kelly Markou, Kingston, New York, USA

Response
You might not have to totally quit pumping at work. You could skip the lunchtime session just one or two days a week so that you can still go for your walk or have lunch with friends.

Nancy Dudek, Blacksburg, Virginia, USA

Response
I went through this just a few months ago!

When my son turned one, I cut back to pumping once a day and my husband gave him a bottle around 4 p.m. after picking him up from daycare. He no longer wanted a bottle during the day. When he was about 14 months old, I stopped pumping altogether and nursed him immediately after I got home at 5:30 p.m. It was a nice way to reconnect after being separated during the day. And it was so nice to be free of the pump! My son is now 20 months old and he continues to nurse in the evenings and occasionally at night even though I don’t pump during the day. He often nurses a bit more frequently on the weekends than during the week, but my supply seems to be enough for him. Good luck!

Korine Kolivras, Blacksburg, Virginia, USA

Response
Here’s what we did: I went back to teaching a year after my first child was born. Daddy stayed home with my daughter and he would sometimes bring her to me for a quick snack, but it wasn’t often easy with my schedule. I pumped for a couple of months trying to make that work, but she was too hungry, I was too uncommitted to pumping, and while she was eating solid foods aplenty, we did not want to give up the benefits of long-term breastfeeding.

So we changed the way we thought about our schedule. Here’s where keeping baby close at night (ex. family bed) can really benefit nursing mothers. Her day was a toddler’s day: up to play, eat solid food, play, nap, snack, play. Then I’d come home, nurse, go on with evening routines, then bedtime. During the night, we all slept together and she would nurse on demand. I’d feed her before I got up for work, and then we all started our day.

We did this successfully for two more years and she tapered off naturally, until she had her last breastfeeding at the end of her third year. There were nights that I could have used more sleep, but there were many other nights when nursing was not disruptive at all. Looking back, I think we made the most of the situation by being flexible with our schedule.

Chris Hoswell, Roanoke, Virginia, USA
Whole Foods for the Whole Year

Lesley Robinson
Ottawa, Canada

My well-thumbed and rather dog-eared copy of Whole Foods for the Whole Family has always been my favorite cook book. The yellowed pages of my 1981 edition have provided the recipes for countless wholesome meals for my family over the years.

The book is based on the wisdom and experience of thousands of busy mothers and provides ideas for vegetarians and for meat-eaters, suggestions for adventurous as well as for more fastidious tastes, and recipes that appeal to both debutantes and to old hands in the kitchen. Everything is designed around the principle that good nutrition consists of eating a well-balanced and varied diet of foods in as close to their natural state as possible and recognizes that busy mothers value the time they spend with their families and appreciate time-saving recipes.

In keeping with the principle of eating whole foods with as little processing as possible, ingredients are whole grain and natural, without artificial additives. Fresh fruits and vegetables are preferred to processed ones. Frozen (unsweetened) fruits and vegetables are a good second choice when things are out of season. Flours, grains and pastas are presumed to be whole grain. Hydrogenated fats are avoided and butter is preferred to margarines which may contain artificial additives. A healthy oil can be whipped into butter, to reduce cholesterol content.

One terrific feature of this book is its versatility. Many recipes suggest possible alternative ingredients. This helps the novice cook learn the essentials of cooking and encourages creativity as well as a transition to more healthy ingredients. It also allows for the book to be adapted to what is available according to the season, so it is possible to take advantage of bountiful harvests, both in your own garden and at the market, and to make substitutions when the season requires it. Alternative ingredient suggestions are also useful for vegetarians or families with food allergies or sensitivities. This allows cooks to focus on what their families can eat rather than what they can’t eat.

Another delightful feature of the book is its extensive section on breakfasts. Although a healthy breakfast is known to provide an important start to the day, delivering nutrition and energy for work and play, most cookbooks pay no attention whatsoever to this essential part of daily nutrition. It is easy to get into a breakfast rut, but Whole Foods for the Whole Family offers inspiration and variety which is sure to please. The suggestions of alternatives to run-of-the-mill breakfasts are a reminder that breakfast can be so much more than eggs and cereal. Thanks to the variety of breakfast recipes in this section, families can even consider having “breakfast” as a time-saving and low-cost dinner!

The lunch section contains suggestions for sandwich fillings, soups, salads, quiches and pies, and egg and cheese dishes. This section in particular contains lots of great ideas for vegetarians. The soup section begins with a suggestion for making your own stock.

Collect vegetable scraps and peelings (and optionally, bones) in plastic containers in the freezer until you have at least two quarts. Cover the scraps with water in a large pot and add seasonings such as herbs and garlic, salt and pepper. (Lemon juice or vinegar should be added if bones are used.) Bring to a boil and simmer for several hours. This is a great additional recycling step before putting scraps into a compost pile.

Cooking can be a great educational and healthy family activity. The Kids’ Cookbook Section, which is organized by season, helps to keep up their interest year round. Utensils and ingredients are clearly listed, as well as the skills that young cooks will need.

The baking section of the book contains a wealth of information on the nutritional benefits of whole grains and offers suggestions on gradually making the transition to whole foods for a reluctant family, so that they actually come to prefer whole wheat to white flour! There are tips on substituting flours in tried and true recipes and on buying and storing whole grain flours. The quick bread pages of my copy of Whole Foods for the Whole Family are the most dog-eared of all. So many variations are suggested that no one in the family ever tires of breads and muffins. The introduction to yeast breads provides plenty of motivation with seven good reasons to bake your own bread: thrift, nutrition, purity of ingredients, quality, variety, satiety and, last but not least, pleasure.

There is so much satisfaction to be gained from hearing appreciative gasps of, “You baked this yourself?” It is also satisfying when grown children come home and say how lovely it is to enjoy a slice of “real” bread! Whole Foods for the Whole Family contains recipes for more than 40 different kinds of yeast bread plus many possible variations. There is also information on how to get started with sourdough, which opens up a whole new range of recipes.

With the hundreds of recipes and variations in the dinner section of the book, there is enough to provide constant variety, even for the pickiest of families. Many recipes work well when made ahead or freeze well, so that multiple batches can be made in one go to save time and energy. Skillet dinners are quick and easy to prepare and are perfect for those days when you just don’t know what you’re going to feed your family-the optional variations help you to work with what you have on hand and what your family particularly enjoys.

Desserts are not forgotten, and the book contains many recipes for whole food cookies, cakes, and pies, sweetened with fruits, honey, or brown sugar. Whole Foods for the Whole Family is an excellent resource and reference book for busy mothers who want to improve their families’ nutrition. Bon appétit!
A Few of Lesley’s Favorite Recipes

WHOLE WHEAT BANANA NUT BREAD

(most dog-eared page of all)

1 C. mashed bananas (3 medium)
1/3 C. oil or melted butter
½ C. honey or brown sugar
2 eggs, beaten
1 ¾ C. whole wheat flour
½ t. salt
1 t. baking soda
¼ C. hot water
½ C. chopped nuts

Beat oil and honey together. Add eggs, mix well. Stir in bananas. Add sifted dry ingredients alternately with hot water; mix until smooth.

Bake in greased 9 x 5 x 3” loaf pan at 325° for 55 to 60 minutes. Cool on wire rack for ½ hour before slicing. Freezes well.

Frozen Bananas: Peel and freeze unused ripe bananas for later use.

LIVE LONGER CASSEROLE

3 small zucchini, sliced
1 C. sliced mushrooms
2 T. butter
3 large tomatoes, chopped
3 C. torn spinach leaves
½ t. salt (or less)
8 oz. whole wheat pasta, cooked and drained
6 oz. Swiss cheese, sliced
6 oz. Cheddar cheese, sliced

Sauté zucchini and mushrooms in butter in a large skillet until softened. Add tomatoes, spinach and salt. Simmer for 15 minutes. Mix in pasta. Place in a 9 x 13” casserole and arrange cheese slices on top. Heat under broiler for 5 minutes, or until cheese is bubbly.

ZUCCHINI POTATO SOUP

2 or 3 medium zucchini
2 or 3 medium potatoes
2 small onions (1 large)
4 C. broth (chicken or vegetable)
1 clove garlic, minced
½ t. salt (or less)
Dash of pepper
¾ C. plain yogurt, to garnish
Dill weed or curry powder to taste

Slice vegetables, simmer in broth with garlic, salt and pepper until tender. Puree in blender in batches. Serve hot or cold, garnished with a large dab of yogurt, and dill or curry. Freezes well. For a change, use ½ bunch broccoli or ½ lb. spinach in place of zucchini.

This is a favorite summer-picnic soup, served cold, with a salad and fresh bread, though it’s just as delicious eaten in front of the fire in winter.

“Eating Wisely” is edited by LLL Leader Lesley Robinson. She lives in Ottawa, Canada with husband, Mark. Her three grown children have flown the nest.

Please send stories and photos to eating.wisely@lllusha.org.
Leslie’s Story

When my husband, James, and I first found out I was pregnant, we were ecstatic. We went out and did everything that your typical mainstream first-time parents would do in preparation for our child’s arrival into the world. We had a baby registry, bought a crib and read all the books. When it came to the topic of infant feeding, I just assumed I would breastfeed and it would all work out perfectly.

Then came the day of our daughter Ella’s birth. Nothing went as I had planned, and I was pressured into an epidural anesthetic I did not want. My labor stalled, and as soon as the doctor saw meconium in the amniotic fluid, the Neonatal Intensive Care Unit (NICU) team was called in case a transfer was needed for our baby. I felt numb throughout the entire ordeal and knew this was not the way birth was supposed to be. Ella was handed to me tightly swaddled in a blanket, with a hat on her head and eyes treated with antibiotic ointment, making it difficult for her to open her eyes and look at me. I was still trying to grasp what had happened and nervously asked the nurse if I could try breastfeeding. She said, “Sure, let me get you to your room first.”

Some time had passed before I was finally able to try and get her to latch on. When I did, it was difficult and painful. I was unsure that I even had milk. A nurse came in for a quick visit, assured me that I had milk and that the latch looked fine. I kept attempting to breastfeed throughout the night, completely unprepared for how often Ella would wake. I felt even more pressure having to note every feed on a sheet of paper another nurse had given me with the time, length of feed and which breast I was using. Having been awake the past 48 hours, this was not an enjoyable task as I was still trying to figure out how to even breastfeed.

The next morning, things did not get better. My pediatrician came in and basically told me in a nutshell that my baby was hungry, I had no milk, her jaundice was worsening, and if I did not give her a two-ounce bottle of infant formula, Ella would need to be admitted to the nursery and I would be sent home. Not only that, but she also informed me that if I nursed longer than 15 minutes on either breast, breastfeeding would not work. I was so overwhelmed I cried and just gave my baby the bottle of infant formula the pediatrician had handed me. How could it be that at 21 years of age, with no previous complications, my body was failing at being able to feed my own baby?

I went home feeling depressed and at a loss. This was supposed to be a happy and joyous time, but those feelings were just not there. Once home I continued to feed Ella formula with the tremendous amount of free samples I received from the hospital. My mother offered to pay for a breast pump, but I declined and said that I didn’t want her to waste her money if the doctor was right and I couldn’t produce any milk. I attempted to get Ella to latch on before giving her each bottle: I cringed and...
dreaded it every time. My nipples cracked and bled. I couldn’t even wear a bra or a blouse. I was just looking at my mother to tell me it was okay to quit, and that I had tried, but she didn’t!

On our daughter’s fifth day of life, I woke up with engorged breasts! Lo and behold, I had milk! My mother went out that day and bought me a breast pump, so I pumped for the first three months of Ella’s life. Unfortunately, I couldn’t get much milk out with the pump, so I was literally pumping around the clock to be sure I had enough milk for her next feeding. Mastitis hit me as well. I was at my breaking point yet again. On most days, James would take the car to work, and I was basically stranded at home with a baby I was struggling to feed alone.

I had never heard of La Leche League or knew of any breastfeeding support hotlines, so I turned to the Internet. It was there that a new door opened to me and I enveloped myself in all sites about breastfeeding, chatting on forums and reading articles. I called my mother, and she advised me to just try to get Ella to latch on. I thought to myself, “It’s now or never.” I feel very lucky that Ella finally latched correctly at that point, and we went on to breastfeed for 22 months and into the first four months of my second pregnancy.

My ordeal led me to direct a documentary to combat the mass of misinformation from doctors, families and friends that new mothers may receive when it comes to infant feeding. I am in the process of making “Formula Fed America.” Even from the title, the film raises the question, what implications might there be to such widespread use of formula? Hopefully “Formula Fed America” will bring the topic of breastfeeding and its importance to a larger audience. I also hope to spark conversation for a decent paid maternity leave established in the United States to allow mothers the time that is necessary to establish breastfeeding. I would like to see legislation enforced to prevent formula companies from using deceptive and unethical marketing practices. I believe a little advocacy can go a long way!

Leslie Ott is a stay-at-home mother to Ella (2). She is a lactation educator/counselor and director of the documentary film “Formula Fed America.” She and her husband James are expecting a second daughter any day now, and are planning a homebirth. They live in Buckeye, Arizona, USA. For more information and to see a clip from her upcoming film, visit www.formulafedamerica.com.

James’ Story

When my wife, Leslie, said she wanted to breastfeed, I said, “Okay, go for it.” When she wanted to breastfeed in public, I looked at her like she was crazy. I told her that was indecent exposure and actually asked her, “Do you want to get arrested?” I worried so much about our appearance to others that I would say some hurtful things to my wife. When she wanted to become a lactation educator, I told her to go for it. When I saw her expose her breasts—sometimes in public—I told her that could be taken as sexual harassment and that breasts were sexual objects.

Now I look back at what I said and did, and I am embarrassed. Just doing a little bit of Internet surfing and reading a couple of paragraphs in my wife’s books, has shown me the true purpose of breasts. I no longer view breasts as sexual objects. I correct my friends and coworkers when they make a statement regarding female breasts.

I was only breastfed for five months. My mother told me breastmilk is great, but it is inappropriate to breastfeed past six months. I felt that this was the “norm.” NO! This is only the “norm” here in America. Many men have asked the question, “What is the role of a father in breastfeeding?” It’s simple. We are here to support the baby’s mother and to help her feel comfortable in her decision. I barely notice breastfeeding in public anymore because I’m not looking for it. My wife has chosen to nurse our daughters until they can wean on their own. I feel this is the most responsible decision to make with our children. I now fully support my wife in her film-making journey to educate families about formula and breastfeeding with her documentary “Formula Fed America.” I can’t wait for the day when this country remembers why women have breasts, not as sexual objects, but to feed our children, to make a better future for all of humanity.

James R. Ott is a disease investigator for the Maricopa County Department of Public Health and a combat medic for the Arizona Army National Guard. He and his wife, Leslie, enjoy attachment parenting their daughter Ella (2) and expect the birth of another daughter any day now.

Gina Krum, IBCLC, RN, BSN edits “Focus on Fathers” and is interested in hearing from fathers about their experiences with their breastfeeding children. Gina and her husband, Joe, live in Sierra Vista, Arizona, USA, with children Sophia (13), Ambrose (7), and Maria (4). They are expecting their fourth child later this year.

Mother’s Milk: A Breastfeeding Guide

The goal of this video is to help women have a satisfying and comfortable breastfeeding experience. Topics addressed include preventing common challenges, engagement, latch-on techniques, and employment and breastfeeding: 30-minute DVD.
The Family Bed by Tine Thevenin:

Anne Casey

In an issue featuring the topic of nighttime sleep and breastfeeding, New Beginnings also revisits the classic The Family Bed by Tine Thevenin.

Originally published in 1976, at a time when even breastfeeding was just starting to return to the mainstream, The Family Bed sought to validate the feelings of parents who wanted to share their beds with their children and to encourage others to do the same. Thevenin noted that in her research she encountered many parents who co-slept in secret, ignoring the advice of their doctors and prominent parenting experts such as Dr. Benjamin Spock. Thevenin was often commended for the bravery and courage that she demonstrated by writing and publishing the first book promoting co-sleeping.

Marian Tompson, La Leche League co-Founder and then president of La Leche League International, wrote a preface to the book which asked readers to “keep an open mind” about the subject, acknowledging its sensitive nature. Despite any controversy, the book has sold tens of thousands of copies in three languages and has been a part of La Leche League Group Libraries since its publication.

The Family Bed tells the reader that the family bed is an extension of a parent’s unconditional love for a child, and that children are happier, healthier, and more independent as a result. Thevenin wrote that “a child who has his needs fulfilled will become an independent, secure person. But independence cannot be forced upon someone” (page 63). This argument was a direct response to parenting experts and psychiatrists who believed that co-sleeping would cause children to develop the bad habit of dependence on their parents, or that it might even lead some to develop psychological disorders. A parent who wishes to co-sleep may gain inspiration from the book. Much of Thevenin’s data comes from a set of questionnaires that she asked co-sleeping families to fill out. As a result, the book includes many true-life stories (not unlike the mothers’ stories found in New Beginnings) in which mothers detailed the ups-and-downs of co-sleeping in the 1970s. While Thevenin’s evidence was deliberately chosen to favor the family bed, even those who choose not to sleep with their children may appreciate her focus on trusting the instincts of motherhood, the importance of responding to the needs of the baby, and her belief that all children “need our love, fully and unconditionally.” (page 84)

Thevenin’s insistence on co-sleeping might surprise some La Leche League members because LLL has no official position on co-sleeping. La Leche League encourages mothers to find a sleep solution that is comfortable and safe for everyone in the family, whether that means sharing a bed, sharing a room, or sleeping in different rooms. A reader should apply the often-repeated phrase from La Leche League meetings: “Take what works for you, and leave the rest behind.”

When Thevenin passed away in June, her obituary indicated that she considered her most important accomplishment to be her role as a mother, despite her many, many achievements in other areas. It is wonderful that she shared the insights she gained through her experience of motherhood with a wider audience. Thousands of families have been influenced by reading The Family Bed since it was published. Many more will still be, even unknowingly, by reading the books of authors who followed in her footsteps and advocated co-sleeping.

Even more influential was her part in conducting the bed sharing study and encouraging parents to respond to their children intuitively and with love, rather than strictly adhering to the “rules” of any parenting authority. Tine Thevenin’s role in helping this parenting style gain wider acceptance and support will be her lasting legacy.

Anne Casey is a LLL Leader with the Eden Prairie, Minnesota, USA, Group.

Samantha Disch

As a busy mother of two breastfed children, life can be hectic, chaotic and rewarding all at the same time! Like many mothers of small children, time is often very limited, so when choosing books to read one needs to choose very carefully. One great book that is quite easy to read and invaluable in my opinion is The Family Bed by Tine Thevenin.

When my children were small, wakeful during the night, and nursing around the clock, I found the information very useful in establishing the best place for our children to sleep based on the needs of my family members. This book covers a lot of different topics related to sleep situations as well a brief history of the origins and evolution of bed sharing. Other topics include the importance of sleeping together,
siblings, need vs. habit, and marital relations, all of which have become dog-eared pages of reference for me while I continue to meet the needs of my family.

I think about how it all started four years ago when I was pregnant with my first child and attended my first La Leche League meeting. I tried to gather all the breastfeeding information I could. I never thought about where our baby would sleep. When browsing through the Group’s lending library, I came across The Family Bed and quickly brought it home, thinking it might be helpful. Boy, was it a help! After reading the book, my husband and I completely established a new way of thinking about sleeping with infants. Now that our children are older, we still find it a valuable resource on the bookshelf.

This book was written, in part, because Thevenin needed a resource for herself and others to look back on when support was needed. She wrote about how “society tells us that family co-sleeping is taboo, but doesn’t give us any satisfactory answers to bedtime problems with children either.” Thus her research began, and giving birth to this book was the answer for many mothers.

With many “confessions” in the book made by mothers who admit sleeping with their babies or young children, The Family Bed is refreshing and personal as well as just plain helpful, especially for breastfeeding mothers who may dread getting out of bed at night to nurse their children.

Upon finishing the book when my first child was a little baby, I was surprised to read it was published nearly 25 years ago! It still has so much value for today’s mothers. It is a refreshing read and relevant in the current times when mothering can get very complicated.

For us, keeping our family in harmony meant bringing the breastfed babies to bed with us and nursing while we peacefully slept. Reading books like The Family Bed really reinforced our sleeping decisions. Co-sleeping may not work for everyone, but the book acknowledges this and really focuses on each mother making the very best choice for her family.

When everyone is content and peaceful in a family using bedsharing, mothers who read this book may find they made the right selection in their family’s sleeping situations. The Family Bed is a guide through these types of choices and circumstances. It’s the perfect book to read while you’re nursing your baby on the couch.

Samantha Disch is a LLL Leader with a Minneapolis, Minnesota, USA Group
For the past two years, La Leche League of Rock County has been walking in the Janesville, Wisconsin Labor Day parade. The purpose was to raise awareness of La Leche League (LLL) in the community and serve as an annual World Breastfeeding Week Celebration (WBWC). Pink T-shirts and tank tops were made with the pink breast cancer awareness ribbons and imprinted with the words “Breastfeeding prevents breast cancer.” We carried banners and signs with pro-breastfeeding messages and passed out LLL business cards and tossed candy to the crowd. The husband of one of our Group members received claps and hoots from the crowd by wearing a T-shirt (“I like boobs”) he designed. It matched the T-shirt his son was wearing. Many of our children had T-shirts with the LLL logo or the international breastfeeding logo printed on them.

The first year we had 20 families (over 60 people) participating. Mothers, fathers, teenagers, children on bicycles, toddlers and babies in slings and strollers enjoyed this time together. The second year we again had a great turnout for this event. A local printing company donated a banner with our name and logo. A Leader’s husband and oldest son were the banner carriers. Group mothers had a good time at a sign-making party to hand-letter pink breast cancer awareness ribbons which were stapled to the business cards. The front of the business card had the Group’s name, LLL logo and contact information. The reverse side had facts about how breastfeeding decreases the incidence of breast and hormonal cancer.

We participated in the Labor Day parade again this year and passed out more literature about LLL. Each year we received follow up phone and email contacts from mothers in the community who weren’t previously familiar with LLL. In addition to the Labor Day parade, we display WBW messages in the local library display case and donate copies of New Beginnings magazine to the community in August.

More Good News from Rock County
Linda Parry, WBWC Team

Rock County also applied for and was awarded a WBWC grant in 2010. Money was allocated to help start two meetings per month in a community with the third highest infant mortality rate in the state.

LLL of Rock County contacted the local hospital and received approval to include a color tri-fold in new mother packets. Some of the funds will be used for printing the brochures and business cards with the new state breastfeeding law on the back.

While not funded by a WBWC grant, Mom’s Night Out is a popular outreach to the public, supporting mothers of all ages by providing pampering, socializing and relaxation for mothers with their babies. Seventy-five mothers attended in the first two years. This year they also accepted pre-orders of the new The Womanly Art of Breastfeeding.

Another popular activity is movies on childbirth and birth discussions. Husbands found this particularly helpful.

LLL of Rock County has worked to strengthen its relationship with obstetricians, gynecologists, and physicians as well as with Women, Infants and Children (WIC). WIC’s goal is to increase breastfeeding initiation and duration rates and reach minority mothers.
To Honor

Tammy Brock
Faithful supporter and leader of breastfeeding.
We love you, Jim & Connie Brock, Lexington, SC

Mairin Barbiere
A wonderful mother, wife, and daughter-in-law. From Alice Barbiere

LLL USA Interim Council
To Honor my hardworking sister Leaders on the LLL USA interim council. From Judith Gibel

APLs of USW
To Honor the hard working APLs of USW in celebration of mothers day. From Rebecca Hugh

AFCs of USW
To Honor the hard working AFC of USW in celebration of mothers day. From Rebecca Hugh

Leaders in Miami-Dade County
To honor our wonderful co-Leaders in Miami-Dade County. From LLL South Central Miami

To Remember

Emil L. Hopf
In memory of Emil L. Hopf, June 24, 2010
Husband to Teresa, a retired LLL Leader, and father to Edward and Eric. He will be missed by many. From La Leche League Dubois and surrounding area, Indiana

Amy Donovan Perkins
In memory of Amy Donovan Perkins and all mothers who have struggled with addiction. From Diane Dunham Jeffer

NEW TRIBUTE SUBMISSION GUIDELINES!
For significant events in the life of someone you care about, have you considered a tribute gift?

You can make a donation to La Leche League USA (LLL USA) in the name of a family member or friend to Honor or Remember them. Your tax-deductible donation will show that you care about them while also helping LLL USA further its mission to help mothers breastfeed.

For a minimum gift of $50, New Beginnings will publish your special message of congratulations, encouragement, appreciation, or condolences; limit tributes to 20 words. Please keep in mind that La Leche League is a diverse community whose main focus is helping mothers to breastfeed. While we can respect personal beliefs reflected here because of the nature of the tributes, this column is not intended for social commentaries outside the focus of La Leche League International.

To submit a tribute gift, please send a check and the tribute wording to LLL USA, 957 N. Plum Grove Rd., Schaumburg, IL 60173

You can help ensure that mothers get the support they need with your donation today. Between now and December 31, 2010, long-time LLLI donors and LLLI Board have agreed to match your donation dollar-for-dollar, up to $50,000.

Your gift will enable LLLI to continue helping mothers to breastfeed through mother-to-mother support, encouragement, information, and education at no cost to families around the world.

Double your gift today and help mothers and babies get the best start together!
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