MODULE 4: Discussion Points on Cultural Beliefs and Family/Societal Perspectives

Cultural and family traditions
Families often feel that bed-sharing is part of their cultural or family tradition. They may note that everyone in their circles bed-shares and no babies have died. In any case, they may feel that this recommendation does not respect their beliefs, values and practices. It is important to ask about their traditions and beliefs before sharing information. While families may not know of an infant who died while bed-sharing, it is a very common contributor to infant deaths. In some communities, sleep-related infant deaths may not be discussed, so it seems there have been none among the community. Discussing the risks of bed-sharing and providing families with information about what makes it less risky is responsible partnering with the family. At the same time, if families do not feel that their cultural beliefs are being honored, they will not engage with you in further conversation. Just telling them “don’t do it” closes off further dialogue.
Discussion Points:
Once you have shared again why this recommendation has been made, it is important that families have information about reducing the risk of bed-sharing for some period of time (even if it is only for few hours) by removing items that create a danger to the baby beforehand. You can discuss with them the aspects of bed-sharing that create a risk to the infants so they can address those issues. Reiterate that sleeping with a baby or feeding a baby when the adult might fall asleep is much more dangerous on a sofa or chair. And, remind them that an adult who smokes or who is impaired by drugs, medications or alcohol should arrange for the baby to sleep on a separate surface. A number of things about adult beds create risks to infants in bed-sharing situations including:

- Bedding, pillows, etc. can cover the infant’s face and blocking breathing.
- Adult beds placed near a wall or other furniture can create the risk of the infant getting trapped and not able to breathe.
- Adult beds that are soft—water beds, pillow tops or memory foam—increase the risk that the infant’s face gets stuck in the soft surface and the infant is not able to breathe or move to get the oxygen needed.
- Blankets can cause the infant to get overheated (a risk factor for SIDS).
- Infants younger than 4 months and premature babies are especially vulnerable.
- People other than the parents, including other children, not attuned to the baby can roll over on the infant. Having more people in the bed may increase the risk of crowding leading to accidently laying on the infant or the infant’s face getting blocked.
Breastfeeding is embarrassing, other important people in my life don’t want me to do it; society doesn’t approve or make it easy.

Because breastfeeding has not been common in our society in recent years, it can be seen as strange, or immodest. The sexualization of women’s breasts has become so pervasive that these views impact choices to breastfeed. Mothers worry about being embarrassed if they have to feed the baby in public. Male partners may express feelings about “those breasts are mine” or not wanting others to see the mother’s breasts if she is feeding the baby in public. Because of the societal associations with breasts, there is currently a lot of push-back about mothers feeding in public places. Women hear about this issue in the news all the time. Because breastfeeding has not been common in the last few generations, women’s mothers also may not support them—women have encountered comments like, “you will look like a cow” or “it seems so hard, why bother?” So mothers need a lot of support to make the decision to breastfeed.

Discussion Points:

- In most states, laws allow a mother to breastfeed anywhere mother and baby have a legal right to be. Federal law is also on the side of breastfeeding in public. This does not mean that others won’t make it uncomfortable for mothers.
- There are many websites that give tips for breastfeeding in public and help mothers make a plan so this works for them (Google this and find your favorites to share). Breastfeeding in public does not mean having to show one’s breasts, but that is the mother’s choice. This may be an ongoing concern, and it will be important to help mothers connect with a lactation support provider and/or a peer breastfeeding support group as part of the plan to deal with this challenge.
- Suggest that the mother share with her partner how important breastfeeding is for the baby’s health and her health. Sometimes we leave the partner out and they don’t understand how important this is. Many partners are very proud that their babies are getting the best nutrition, and they are with a woman who will make this commitment.
- Other family members also may not understand how important breastfeeding is and what is involved. Getting them more information can help them be more supportive.
- One of the key jobs of a mother is to be able to stand up for what is best for her baby. Making the decision to breastfeed and helping others to support that decision is one step in that lifelong journey as a mother.

This handout has been developed as a component of the Building on Campaigns with Conversations: An Individualized Approach to Helping Families Embrace Safe Sleep & Breastfeeding online curriculum. To view the entire curriculum, please visit: https://www.ncemch.org/learning/building.

