

## MODULE 4: Discussion Points about Impact on Lifestyle

Having a new baby impacts the daily lives of families and mothers in particular. They may have concerns about adopting recommendations because doing so will have a negative impact on their day-to-day lives.

### ***I won't be able to eat my favorite foods any more if I breastfeed.***

Mothers have heard that if they are breastfeeding they cannot eat spicy foods, or have to eat certain foods, or drink a lot of milk. Thus, they feel they will be more restricted in their lives if they breastfeed.

Discussion Points:

- Women all over the world with very different kinds of diets—spicy, lots of cabbage, etc.—breastfeed successfully, so there are no hard and fast rules.
- Sometimes a particular food a mother eats bothers the baby, but mothers do not usually have to drastically change their diets.
- It is important for mothers to eat a healthy diet for their overall health, but that approach is not required to breastfeed.

### ***I won't be able to drink alcohol if I breastfeed.***

Mothers who drink alcohol in moderation and on occasion may worry that they cannot have any alcohol if they are breastfeeding. Mothers may have heard that they cannot drink any alcohol while they are nursing.

Mothers who abuse or drink large amounts of alcohol present a number of challenges and risks in caring for their babies no matter how they choose to feed them. In terms of breastfeeding, alcohol abuse by the mother can result in slow weight gain or failure to thrive in her baby. Babies in adult beds are at particular risk if the adults are intoxicated or taking drugs. Mothers who regularly drink large amounts of alcohol should not breastfeed, and they put their infants at greater risk if they bed-share. If this situation is the case with a mother you are supporting, then a referral to address substance abuse is an important part of the plan for taking the baby home.

Discussion Points:

- Occasional, moderate intake of alcohol can be worked around. The mother should not breastfeed until the mother's body has cleared most of the alcohol from her system, eating while having a drink, etc.
- Having an occasional glass of wine or another alcoholic drink doesn't mean a mother cannot breastfeed.
- Alcohol does pass into breast milk and can affect the baby by making the baby drowsy, not able to nurse well, and take in less milk. Mothers need to be informed so they can plan for it. Families should seek input from a lactation support provider about this issue. If you do not have this expertise, but would like to know more, check in the Resources section of Going Deeper. However, only health care professionals and others with training in lactation support should give specific guidance to mothers.
- Bed-sharing should never occur when mother or other adult in the bed has been drinking alcohol. Families should have a separate sleep space for the baby right near their bed.

***I will have to stop smoking or else I cannot breastfeed.***

Discussion Points:

- Smoking is not good for your health, and smoking around the baby leads to increased risk of SIDS and SUID, infections, asthma, and other health problems in infancy and later life. It is important not to smoke near the baby, and best if there is no smoking in the house.
- Being exposed to smoke, even on the clothes of the smoker is a problem for infants and children (as well as adults).
- The risks of bed-sharing increase when a mother smokes.
- That said, mothers who smoke less than 20 cigarettes a day can typically breastfeed without problems for the baby. And, breastfeeding can be beneficial in providing more protection against infections than formula feeding for infants whose parents smoke.
- Mothers who smoke may note, however, that their milk production is decreased.
- Babies of parents who smoke have been reported to be fussier as well.
- There are important considerations in when and how you smoke if you are breastfeeding. A lactation support provider can help mothers plan for how this will affect them.
- An important part of the mother's plan could include support to quit smoking if she chooses.

***If I am breastfeeding, I won't be able to go anywhere because I can't leave the baby with anyone—how will the baby eat?***

Mothers are worried that breastfeeding will make the impact of having a new baby on their day-to-day lives even more complicated and difficult. They feel that if they are to sustain breastfeeding, and particularly exclusive breastfeeding, in the first six months that they will be with the baby all the time.

Discussion Points:

- It is possible to breastfeed and still have time away from the baby to socialize, exercise, or even just grocery shop. The time when babies need frequent feedings is relatively short (although it may not seem that way). In the early weeks, it is important for the mother and baby to be together. But mothers can plan outings around feedings. Also, very young babies are portable and can go with their mothers on outings.
- If it is necessary to be away for a more extended time, mothers can leave pumped milk in a bottle for another caregiver to feed the baby. It may be useful to wait until breastfeeding is established and going well. When the baby is young, he/she may take a while to get used to taking a bottle, but being patient will pay off. Mothers can talk with their breastfeeding support persons about how this can work.

***I don't want to spoil the baby and then have a child who is spoiled and difficult to manage.***

Mothers may worry that being “on duty” to breastfeed their babies may lead to the baby being spoiled and clingy. They may worry that the baby is “in charge” and this will set a bad precedent for future child rearing. In addition, having the baby sleep in the same room with the parents and right next to the adult bed raises similar issues. In our broader culture we highly value independence, and keeping the baby so close can be seen as undermining that kind of behavior.

Discussion Points:

- Very young babies don't get spoiled. Being spoiled means understanding what other people are thinking and doing and planning to manipulate their behavior. Babies don't have understanding of any of that. They only are reacting based on their needs.
- Young babies need to be close to those who love them. They are still developing and need to be near a primary caregiver in these early months. The closeness and responsiveness to their needs are necessary for their brains and bodies to develop and to help them manage themselves and the world.
- Over time as they develop the capacity to soothe themselves and are more secure about being in the world, they will be able to become more self-sufficient. In fact, the security that babies get from being close is what allows them to become more independent. Babies who are carried and responded to quickly cry less and are more secure as kindergartners.
- Babies need to feed when they are hungry and not on a schedule. This is not spoiling them. Responding to the baby's needs is what makes breastfeeding work in the best way—responding to the baby's hunger assures that there will be enough milk. Mothers are not “giving in” to the baby in following his or her hunger cues, but working together with the baby to make breastfeeding successful.

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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>.

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