



14 June 2006

Breastfeeding: Who should be feeling guilty?

A New York Times article by Roni Rabin, 13 June 2006, "Breastfeeding or Else", stimulated reports on NBC morning and nightly news 14 June, covering the US Campaign for Breastfeeding, and for highlighting the risks of not breastfeeding. The coverage notes that lack of breastfeeding in the US is associated with excess disease and mortality. However, all of these reports have highlighted that guilt should not be imposed on those who choose not to breastfeed, and that infant feeding is a personal choice.

The Center for Infant and Young Child Feeding and Care at the UNC School of Public Health fully supports informed choice in feeding based on accurate information, free of commercial bias, and works towards the development of an enabling environment for this to occur. The Center addresses the issue of guilt by highlighting that, in the case of breastfeeding, guilt is both misused and misplaced.

"Making a woman feel guilty if she is not able to breastfeed, or tries and does not succeed, is blaming the victim, and then denying her solace", noted Center Director, Professor Miriam Labbok. "In the case of breastfeeding, it is not mother who should be experiencing the guilt, but rather the guilt should be experienced by those responsible for making her choice so difficult. The guilt is on the mix of the policies of health care systems, third party payers, workplace and society that makes it nearly impossible for a mother to succeed in breastfeeding in our country." She continued, "As to fear of making women feel guilty by telling them that breastfeeding is normal and protects them and their babies against disease – what is the alternative? to deny new mothers correct health information and guidance?"

Guilt occurs when you do something you know you should not, or when you do not do something that you know you should. Guilt is a major motivator to do the right thing. Therefore, the question remains: Why should we not feel guilty if we do not do what we know to be right? Health care workers freely impose guilt and fear in terms of telling the obese patient to diet, telling all of us to exercise, "or else". However, the idea that supporting breastfeeding is bad because it makes women feel guilty is improper targeting and imposition of guilt.

Breastfeeding should be a personal choice. But it should not be considered 'just a lifestyle choice'. Driving safely, maintaining exercise and a good diet, taking medication when ill, or, for older women, maintaining bone health, are all personal choices. But they are also health and longevity choices. Women deserve to receive complete and unbiased information on what is best. Complete and accurate information and support concerning optimal infant feeding is every mother's right, and every family's responsibility. In our country and society we still have much work to do to ensure that each mother receives unbiased and complete information concerning the risks of not breastfeeding, so that she may reach her personal decision free of guilt and free of commercial bias, and enabled by her workplace and society. In countries, such as Norway, where governments and societies face up to this responsibility, the choice is truly a free choice, and the predominant choice, early, exclusive and continued breastfeeding, is supported, accepted, and achieved.

Contact: Miriam H. Labbok, MD, MPH, FACPM, FABM, IBCLC

Professor of the Practice of Public Health, and, Director, Center for Infant and Young Child Feeding and Care
Department of Maternal and Child Health, School of Public Health CB#7445

University of North Carolina/Chapel Hill, Chapel Hill, NC 27599-7445

Tel. 919-966-0928 Fax. 919-966-0458 CIYCFC@unc.edu cell: 917-446-5283

The Center for Infant and Young Child Feeding and Care in the School of Public Health at UNC-Chapel Hill was established in 2006 and exists to further statewide, national and global understanding and support for the mother/child dyad as key to the achievement of optimal infant and young child feeding and related reproductive health.

www.sph.unc.edu/mhch/ciycfc

