

# It's Not Just About The Destination, but The Journey: Impact of birth experience on breastfeeding initiation and duration

First Food Equity Series | Breastfeed Durham  
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Please sign in | <https://forms.gle/W8fHuxcrtuPxcyPY6>

Please feel free  
to ask  
questions!

Breastfeeding  
Welcome Here  
Aquí  
Apoyamos  
La Lactancia



BreastfeedDurham.org





**Breastfeed Durham is a community-wide program to impact Health Equity, supporting the World Health Organization guidelines to work with our community to improve breast/chestfeeding support services.**





## Centering Race Equity

Breastfeed Durham recognizes the importance of centering race equity in our work to improve breastfeeding rates and support for families.

- Requires intentional effort
- Collaboration with others committed to racial justice





Photo by Heather Gallagher

## Centering Race Equity

Our work is rooted in addressing the structural failures and systemic barriers that disproportionately impact communities of color and prevent families from accessing the resources they need to provide human milk as first food.

Breast/chestfeeding is a...

- primary food justice concern
- a racial equity issue

*We are committed to working with providers to build a more equitable and inclusive healthcare system that supports all families in their breastfeeding journeys.*





## Centering Race Equity

Breastfeed Durham is seeking to partner with providers to deepen our understanding of the ways that **privilege and racism contribute to health disparities** and inequities in breastfeeding rates.

We believe that this partnership will:

- enable us to build bridges across racial divisions
- work together to create more inclusive and equitable lactation support systems.



*According to the CDC, “breastfeeding promotion and support by physicians starts prenatally and continues through the intrapartum and postpartum periods. As trusted health advisors, physician support and management of breastfeeding is important to help families meet their breastfeeding goals. **But research shows that physicians generally lack adequate breastfeeding education and training.** Better training in this area can help them gain the appropriate knowledge, skills, and confidence to support families and advocate for breastfeeding-friendly practices where they work.”*





## How Medical Professionals Can Help Bridge The Gap In Breastfeeding

- Pediatricians with privileges in newborn care must complete a minimum of 3 hours of education on breastfeeding management.
- Residency training in breastfeeding is not universal.
- Doctors are trusted by parents and can dissuade a nursing parent from breastfeeding.
- When doctors and hospitals are breastfeeding friendly they greatly improve the likelihood that a parent will initiate breastfeeding.

According to an article published by the American Academy of Pediatrics.



*Together, we can build a community of care that prioritizes the health and well-being of families and communities.*





# IT'S NOT JUST ABOUT THE DESTINATION, BUT THE JOURNEY:

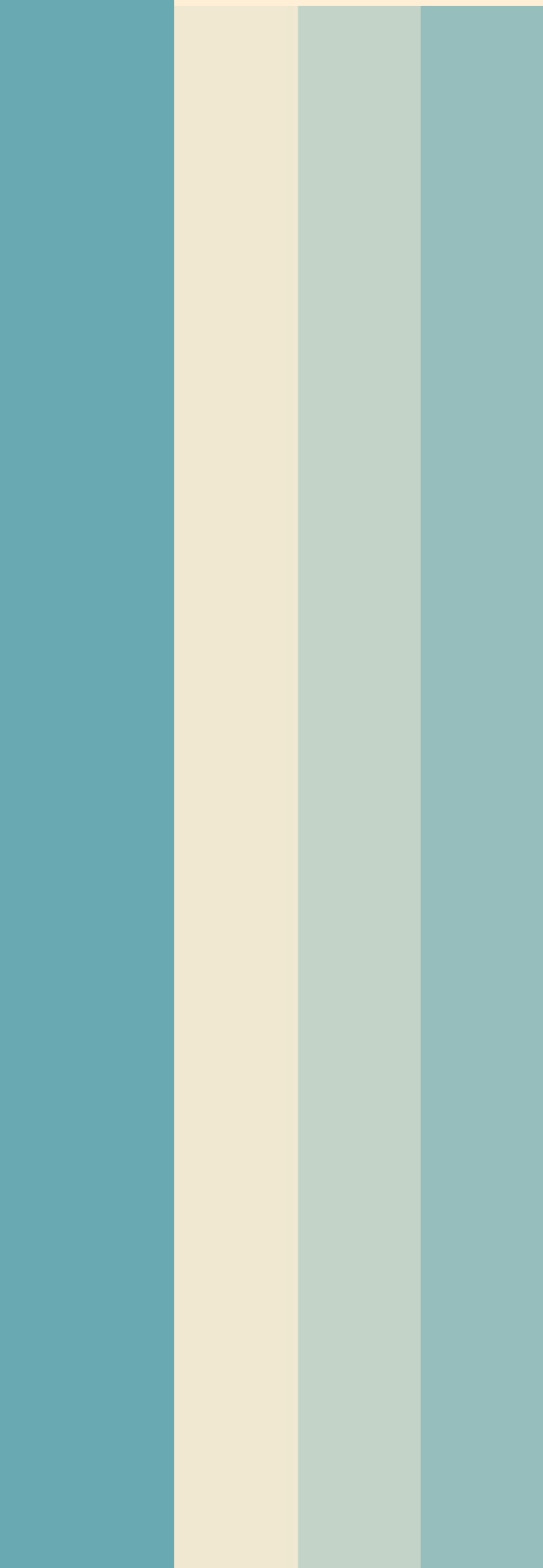
IMPACT OF BIRTH EXPERIENCE ON BREASTFEEDING INITIATION AND DURATION

A FIRST FOOD EQUITY DISCUSSION



Tonya Daniel has always been interested in how societal practices impact people living “their best life”. She is a graduate of the University of North Carolina at Chapel Hill and where she earned a Bachelor's degree in Sociology, with a concentration in the health of women and children, and a Master of Health Leadership degree focusing on program innovation from Western Governors University. Having a diverse career background, from being a middle and high school teacher to working the past 15+ years in the field of public health, Tonya has pulled from those various experiences to influence the lives of people she encounters.

Tonya is a DONA certified birth doula, birth doula trainer, Lamaze Certified Childbirth Educator, Lamaze program trainer, and International Board Certified Lactation Consultant. She's been working with expectant and parenting families for more than 20 years and she's passionate about providing labor support, childbirth education, and lactation services to families in her North Carolina community, especially those in areas of limited resources or access. She has had the honor of joining other birth workers to train healthcare staff and community workers in the United States, Kenya, and Kuwait with the hopes of improving pregnancies, births, and maternal/child health globally. She continues to partner with like-minded individuals and local health departments, hospitals, and community organizations to increase the number of doulas and breastfeeding advocates in areas at risk for high maternal and infant mortality.



# It's Not Just About The Destination – it's the Journey!

Impact of birth practices on breastfeeding initiation and duration

Presented by:

Tonya Daniel,

MHL, IBCLC, LCCE, FACCE, CD/BDT(DONA)



# OBJECTIVES



- Discuss why it's important to **address birth goals in light of lactation support**
- Identify **birth practices that are protective** for human milk feeding
- Identify **practices that may present challenges** for early feeding success
- Determine ways to **collaborate** with others in perinatal professions & community

\* Mother/Birthing person will be used interchangeably.

# PLANNING THE TRIP

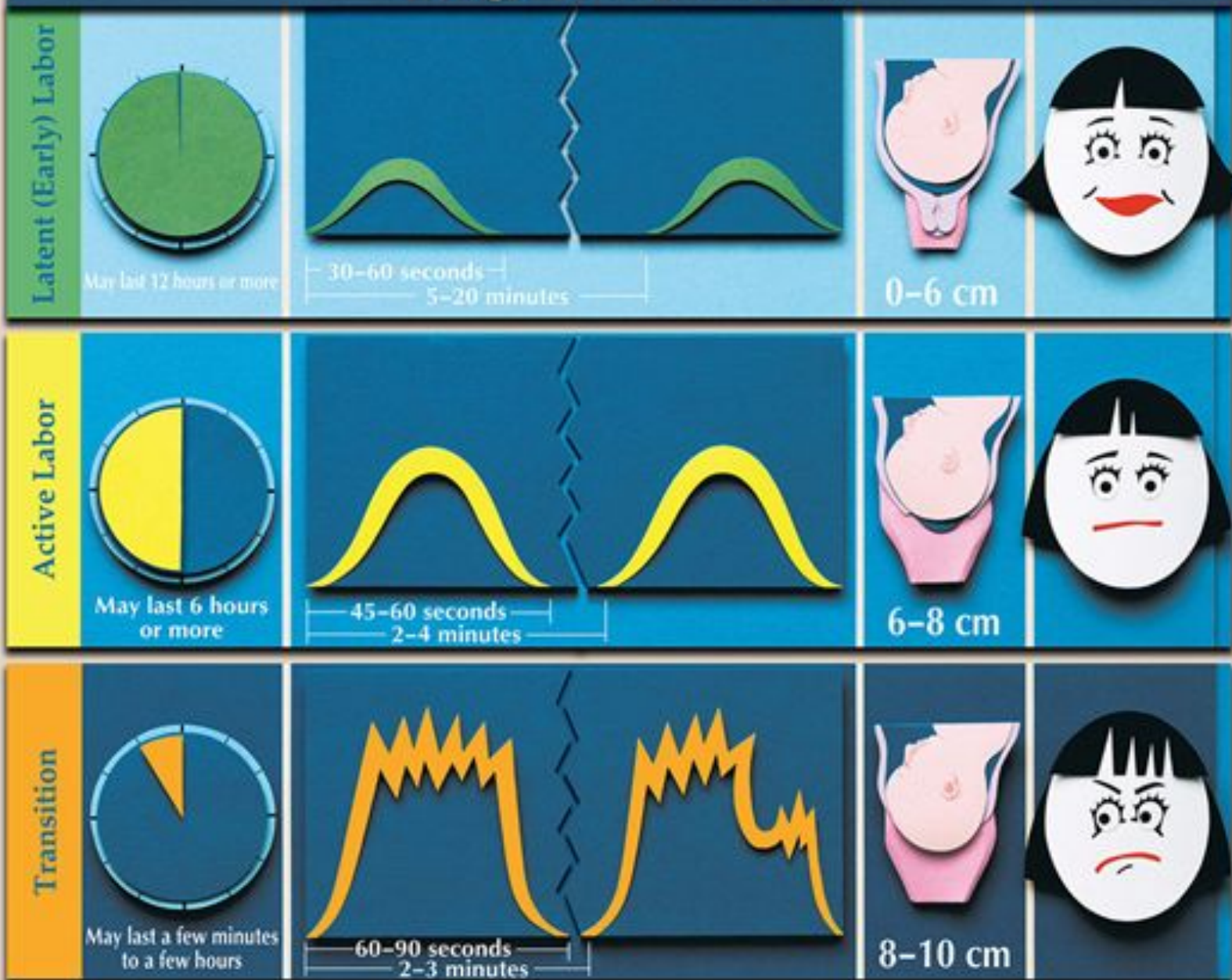
## Knowing Your Landmarks: Birth Basics



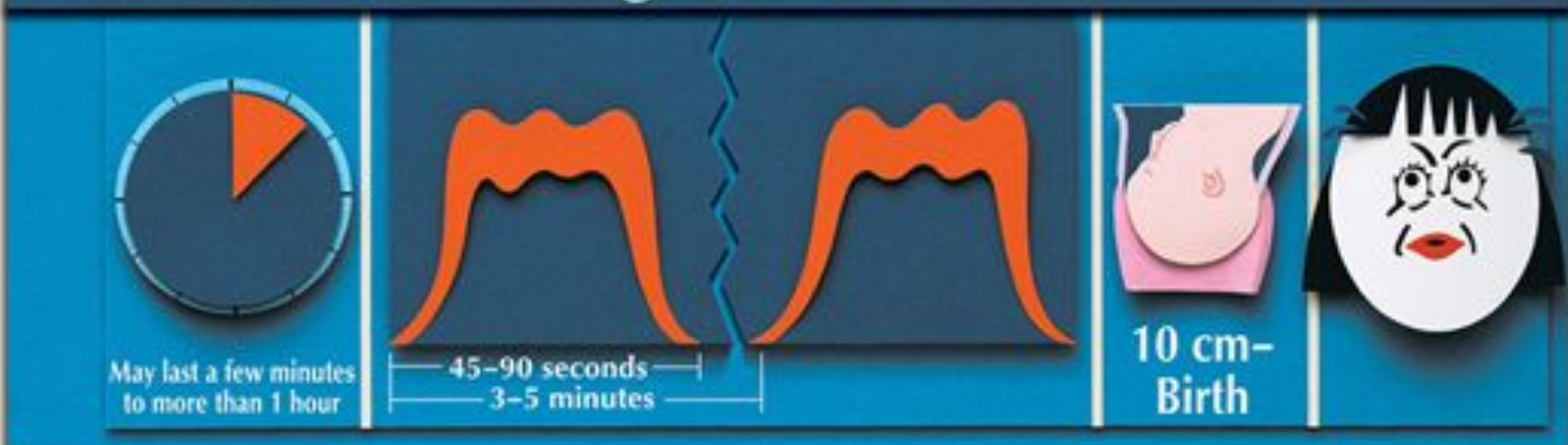


# Stages of Labor

## Stage One: Labor



## Stage Two: Birth



## Stage Three: Delivery of the Placenta

### HORMONES

# Stage 1

**Estrogen** – makes uterus sensitive to oxytocin

**Progesterone** – maintains pregnancy

**Oxytocin** – "love hormone", stimulate contractions

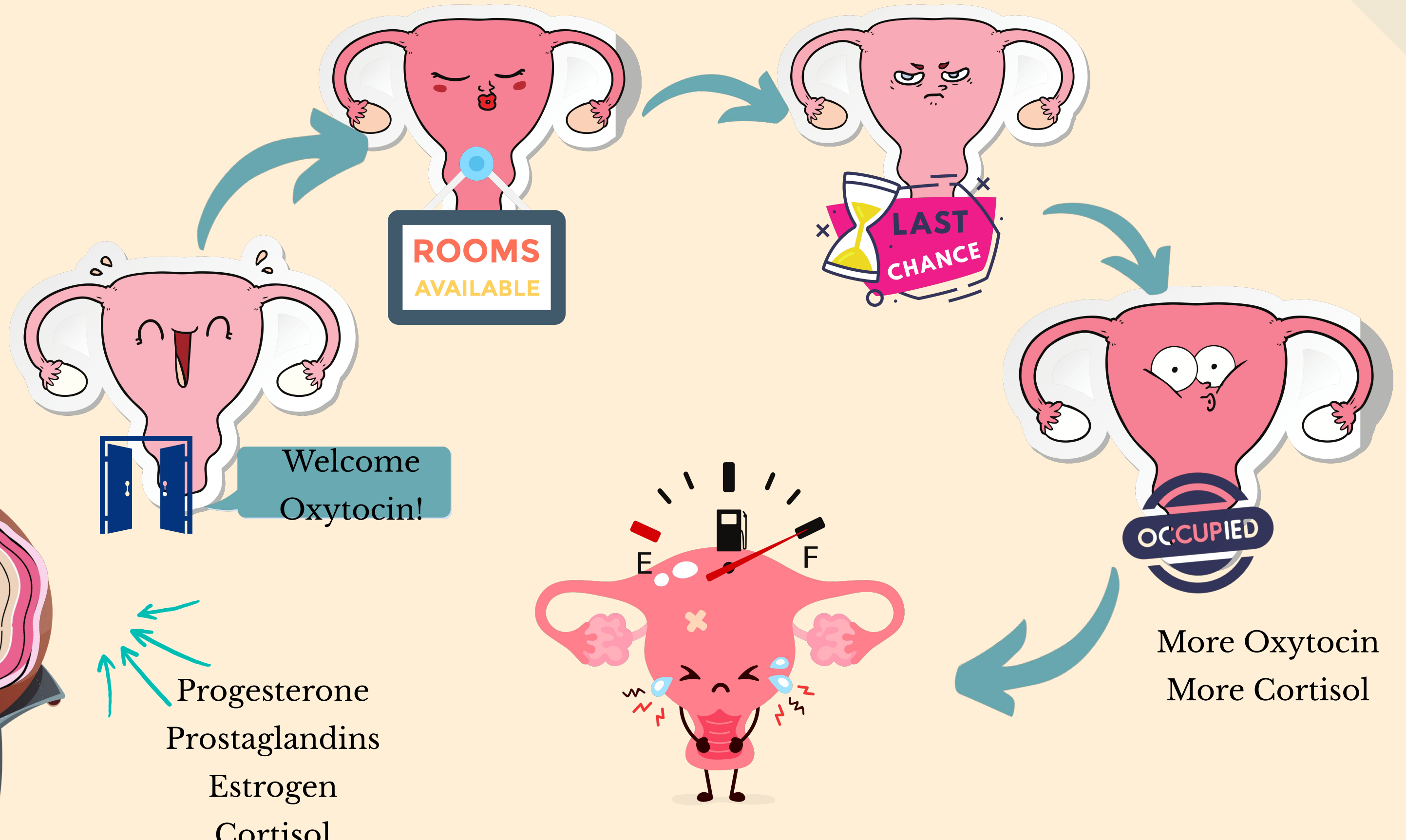
**Prolactin** – "milk-making" & "mothering" – builds to prepare for feeding

**Catecholamines/Cortisol** – stress hormones

**Endorphins** – "feel good" hormones



# Pregnancy & Birth Airbnb





# Knowing Your Landmarks: Basics of Lactation





# UNDERSTAND THE PROCESS



1. Stimulation

2. Signal “the calvary”

3. Dispatch



***“Realize that everything  
connects to everything  
else.”***

Leonardo DaVinci

## SIX HEALTHY BIRTH PRACTICES



[Handouts \(lamaze.org\)](https://lamaze.org)

*\*Note – current research is limited as interventions & methods change.*



# Lamaze Healthy Birth Practice #1

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Let labor begin  
on its own.



# LABOR PRACTICE:

## INDUCTION

*medically starting labor*

*Rate – about 1 in 4  
first time parents*

- **Past due date**
- **Health issues of mom or baby**
- **Suspected large baby – 8.8 lbs or more\***

**\*Several Cochrane Reviews of benefits and risks**



# Possible impacts of

# INDUCTION

- **Delayed release of prolactin**
- **Stronger contractions; parental/infant stress and fatigue**
- **Delayed release of oxytocin**

**TIP: Discuss natural ways to induce labor**

# Lamaze Healthy Birth Practice #2

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**Walk, Move Around &  
Change Positions  
Throughout Labor.**





Possible impacts  
of:

## RESTRICTING MOVEMENT

- **Slower labor**
- **Increased need of Pitocin to augment**
- **Increased need of pain medication**

**TIP: Encourage moving and changing positions at least every hour - 1.5 hours. Use birth or peanut balls.**

# Lamaze Healthy Birth Practice #3

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**Bring a loved one,  
friend, or doula for  
support.**





Possible impacts  
of :

RESTRICTING  
UNLIMITED  
SUPPORT

- **Increased fear**
- **Lack of advocacy of birthing person's wishes**
- **Decreased birth satisfaction and feeling of inadequacy**

**TIP: Secure a doula to work *with* support team (partner, friend, etc).**

# Lamaze Healthy Birth Practice #4

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**Avoid interventions  
that are not  
medically necessary.**





# LABOR PRACTICE:

## IV Medications

- **Analgesia: relieves pain without loss of feeling or muscle movement. The medications are used to lessen pain but usually do not stop pain completely.**

Systemic – opioids

Nitrous oxide

- **Anesthesia: relieves pain by blocking most feeling, including pain.**

Epidurals

Possible impacts  
of:

## IV Medications

- **Fluid retention; breast edema (swelling)**
- **Drowsy/uninterested birthing person and baby**
- **Baby disorganized suck; inability to latch**
- **Possible changes in baby's heart rate, breathing and muscle tone.**

**TIP: Use Nonpharmalogical pain relief & hydrate by mouth as much as possible.\***



Possible impacts  
of :

IVs &  
RESTRICTION  
OF FOOD &  
DRINK

**What if you had to go 16-24 hours  
without food or drink?**

- **Lack of stamina**
- **Increased swelling**
- **Drops in blood sugar, etc.**

**TIP: Labor at home & hydrate by mouth as  
much as possible. Advocate for snacks in  
hospital. \***

Possible impacts  
of :

## CESAREAN/ SURGICAL BIRTH

- **Delay in increased prolactin/oxytocin**
- **Possible delay in skin-to-skin**
- **Possible trauma for infant and birthing person**

Which may lead to intensive care or other separation

**TIP: Follow the 6HPB. Consider S2S in the OR.  
Feed, hand express or pump within first  
hour after.**



# Lamaze Healthy Birth Practice #5

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**Avoid giving birth on  
your back and follow  
your body's urge to push.**



Possible impacts  
of :

SUPINE  
POSITIONS  
FOR 2<sup>ND</sup> STAGE

- **Longer, more stressful labor**
- **Increased likelihood of forceps/vacuum**
- **Decreased oxygen to baby**

**TIP: Vary positions! Use tools available - that bed is a transformer!**



Possible impacts  
of :

FORCEPS/  
VACUUM  
EXTRACTOR

- **Possible nerve damage**
- **Possible bruising (cephalohematoma)**
- **Increased risk of facial & jaw asymmetry**

# Lamaze Healthy Birth Practice #6

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**Keep you & baby together.  
It's best for you, baby and  
breastfeeding!**







Global Health Media Project: *Early Initiation of Breastfeeding - Breastfeeding Series*

Possible impacts  
of :

## SEPARATION

- **Delay in skin-to-skin**
- **Disruption of 9 instinctive behaviors**
- **Inhibits physiological recovery processes**

**TIP: Uninterrupted S2S within the first hour minimum! All newborn procedures can be done on mom/birthing person.**



# Thought-Provokers & Action Steps



1. How can we inform families about the impacts of birth choices on breastfeeding **BEFORE** they give birth?
2. How can this information inform your practice or support?
3. Who can you collaborate with to further support families as they prepare for birth? **Reach out NOW.** (Step #10)

***"Do the best you can until you know better. Then when you know better, do better."***

***Maya Angelou***



# RESOURCES/REFERENCES

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# Questions?







In time, every family that wants to chest/breastfeed will receive education and support that enables the family to continue for as long as that family chooses.

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# Questions?





Thank you for all  
that you do!

A special thank you to

**Tonya Daniel**

and

all of our community  
partners.





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[BreastfeedingDurham.org](https://www.breastfeedingdurham.org)



Evaluation link & CERP credit for the event

[https://unc.az1.qualtrics.com/jfe/form/SV\\_3NRrGuLe6iiwYF8](https://unc.az1.qualtrics.com/jfe/form/SV_3NRrGuLe6iiwYF8)