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Before babies hit the bottle

Despite good intentions, nursing mothers in Hong Kong are held back by a lack of support

Vanessa Yung (<u>vanessa.yung@scmp.com</u>)
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Aware of the benefits of breastfeeding, Crystal Ching Wing-yi was keen to take that route when her daughter Sin-yu was born two months ago. She made two attempts on that first afternoon, but gave up because it was too painful.

"I had to ask the nurse to give my baby formula milk," she says. "The nurse warned me that it wasn't easy to switch back once a baby has had milk powder, but I just couldn't go on, so she told me to try later, when I got home."

But by then it was too late. Her daughter had already been drinking formula for two or three days and didn't like the breast milk Ching expressed for her. "I tried breastfeeding her directly, but my breasts were too sensitive ... Eventually, I just gave her milk powder."

Previous generations of mothers opted for formula over breast milk because they found it embarrassing to breastfeed in public and there wasn't enough education on the benefits.

Today, however, although the number of breastfeeding mothers is growing due to a more health-conscious and educated generation, many women still find it difficult to sustain the practice, for various reasons.

Besides pain, the other main obstacles include poor lactation, work strain, a lack of public facilities and short maternity leave, a recent survey commissioned by the Hong Kong Nutrition Association found.

Hong Kong mothers are entitled to just six weeks post-maternity leave, while women in Singapore get 16 weeks' paid leave and British law allows 26 weeks off work after giving birth. The World Health Organisation recommends breastfeeding for at least six months without solid food - impossible for most local working mums - and until the baby is two years old, even after taking solid food.

In the survey of 402 mothers, conducted by Chinese University's Hong Kong Institute of Asia-Pacific Studies, 95 per cent acknowledged the benefits of breastfeeding. Although 80 per cent of them had tried it, about 50 per cent did so for less than three months and only about 6 per cent breastfed for more than a year.

Chan Man breastfed both of her children - now 15 and two years old - from birth. She recognises the benefits as extolled by hospitals, that breast milk is more nutritious and boosts the immune system - and it is also more economical. But it can also be tiring, she says.

"The difficulty with breastfeeding is that it consumes a lot more energy than bottle-feeding. You have to breastfeed your child more frequently, as breast milk is runnier and easier to digest than milk formula. I breastfed both my children for six weeks before going back to work. Then I expressed milk to bottle-feed them until they were about four months old, when I stopped altogether," she says.

"There wasn't enough [breast] milk. While at work, it was inconvenient to go and pump milk regularly. The amount produced depends on how much stimulation the milk gland gets. When I actually breastfed, it produced as much as they needed. But the quantity of milk decreased when I turned to pumping. I gave up and gave them milk formula instead, for fear that they were not being fed enough."

Sarah Hung, a local leader of international non-profit organisation La Leche League and owner of Lotus Lactation consultation service, says mothers should not give up too easily, as breastfeeding takes practice and some getting used to. Ching and Chan's experiences reflect the lack of support and proper assistance in breastfeeding, she says.

"The culture of Hong Kong has changed rapidly in the past 10 years. Twenty-four years ago, when I had my first daughter, I was the only person in the whole of Queen Mary Hospital who even tried to breastfeed. Nobody else even put their baby to the breast and the breastfeeding rate was very low," she says.

"Over the past 25 years, there has been a lot of education, and a lot of people saying we should breastfeed. Now, the initiation rate is up to 75 per cent. And of that 75 per cent, about 95 per cent are failing. So we have many mothers who are disappointed with their breastfeeding experience."

Hung says the encouragement to breastfeed but lack of support is like telling mothers to fathom difficult calculations without teaching them the multiplication tables. She cites problems such as the limited six-week work leave, hospitals' practice of separating mothers from their babies, although babies need to feed on demand, and the Chinese tradition that encourages mothers to do nothing for a month after a birth as the main reasons that breastfeeding is a challenge in Hong Kong.

"The vast majority of babies in Hong Kong have been bottle-fed before they leave the hospital. And having a bottle so early is a real problem, as they forget how to breastfeed," she says. "So we're often helping mothers not to breastfeed but to relactate - to bring back the milk supply they've lost to the bottle, which is a whole different game."

Groups that advocate and offer support for breastfeeding, including La Leche League (www.llhk.org), the Hong Kong Breastfeeding Mothers' Association (www.breastfeeding.org.hk) and the Baby Friendly Hospital Initiative Hong Kong Association (www.babyfriendly.org.hk), have sought to address the issues over the years. They offer seminars, discussion forums, peer sharing sessions, hotlines and useful information such as a list of nursery rooms.

Although the Health Department says it recognises the importance of implementing the WHO's International Code of Marketing of Breastmilk Substitutes and has incorporated it into the Family Health Service's breastfeeding policy, the variety and frequency of television commercials advertising milk formula, for instance, suggests otherwise. However, it set up a multidisciplinary taskforce in June 2010 to develop and promote a Hong Kong code.

The department has also helped launch initiatives with various organisations to promote a more positive attitude towards breastfeeding.

Sally Poon Shi-po, of the Hong Kong Nutrition Association, received a multimedia e-learning kit, aimed at equipping medical practitioners with the necessary knowledge and skills to support breastfeeding mothers and manage problems with lactation. But at the end of the day, she says, in order to create a more favourable environment for breastfeeding - and over a longer period of time - it is crucial to extend maternity leave, starting with more workplace support, and to provide more comprehensive support and better public facilities.

Poon says that as well as boosting IQ, lowering the risk of obesity and strengthening the immune system, breastfeeding also enhances the mother-child bond. For the mother, breastfeeding speeds up healing. As milk production burns calories and some of the fat a mother consumes is passed to the milk, it also helps mothers to control their weight and regain their shape, she says.

Diane Wiessinger, an American La Leche League leader who was in Hong Kong last November to give a seminar for young mothers, says breastfeeding is the most natural way to nourish an infant.

"Breastfeeding doesn't just feed a child, it helps to relate to a child, live with a child and parent a child. So the question has to be, 'Why would we not do that?'" Wiessinger says.

"Bottle-feeding mothers feed their babies. Breastfeeding mothers

nurture their babies. It's not a method of feeding; it's how you mother,
and the food comes along with it."

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