

Editorial: 'Breast-only' fanatics hurt own cause



Piri Weepu fed baby Taylor a bottle in an anti-smoking advert. Photo / Supplied

The problem with fervent, one-issue lobbyists is that their very passion for the cause can take it backwards, not forwards. They can be blind to the greater good or broad public sentiment.

So it is with the wholly unnecessary dispute this week over a move by the pro-breastfeeding crowd to remove, from a TV advertisement against smoking, a scene showing All Black Piri Weepu bottle-feeding his child. An ad against smoking, not child neglect or malnutrition. And a bottle, not a wooden spoon or a clenched fist.

The scene was deleted at the urging of the La Leche League, Plunket and others. The decision has prompted a profound public backlash against those who would try to force women, and their families, to embrace a fundamentalist view that breastfeeding isn't just the best option, it is the only option.

The censoring of Weepu's bottle-feeding moment brought to the surface the complaints of a substantial minority of mothers and their partners about the actions of hospitals and other publicly funded organisations to force breastfeeding upon vulnerable, incapable or unwilling women.

The passive-aggressive policies of the health ministry and some hospital maternity units to even the suggestion of "formula" or "substitute" milk - and the refusal to assist with bottle filling, heating or feeding - have been resented by many for years.

As the debate grew this week the Herald and our website nzherald.co.nz were inundated with women explaining why feeding from a bottle was their only choice and the "best" option for their children. Many made the point that women express breast milk to bottles for themselves and partners like Piri Weepu to use it to feed and settle babies throughout the night. The bottle is not the enemy. Nor is formula, when the alternative is a mother in pain or despair, a baby deprived of nourishment and a family denied peace.

La Leche and Plunket have apologised for impugning Weepu's fathering abilities but they had already damaged their cause. Moreover, in judging a young, popular Maori man who is a devoted dad they infringed on the territory of another cause, for fathers to bond lovingly with their children. Proponents of that virtue probably cringed at the implications.

The breastfeeding advocates overstepped the mark. Their conviction that keeping a bottle out of sight will keep it out of mind was naive. Few could understand their busybodying into an anti-smoking advertisement in the first place.

Yet it was instructive of how hardline the feeding debate has become and showed well-meaning lobbying can have unintended consequences. Official urgings have seeped into the public consciousness to such a degree that we heard reports of individual mothers being harassed by strangers in shopping malls for bottle-feeding, with no knowledge of the circumstances.

Those who have been forced to bottle-feed children have been given their voice. They report that their breast- and bottle-fed children have been equally allergic or non-allergic, big or small, good or bad sleepers, quick or slow to meet developmental milestones.

They praise the efforts of their husbands or partners in sharing the intense pressure of feeding in the early hours. And, almost to a woman, they acknowledge that breast is very likely "best" but just was not possible for them or their babies.

It would be a shame if the actions of the overzealous end up moderating breastfeeding rates among those who are able. The benefits are manifest. The bonding between mothers and babies, the nutritional reward and the convenience and cost should not be overlooked. Encouragement and education through an affirming message will always trump a scolding and judgmental attitude, particularly among the young.

Perhaps the "breast is best" mantra needs to be modified to "breast is ideal - bottle-feeding can be okay, too".

http://www.nzherald.co.nz/health/news/article.cfm?c_id=204&objectid=10784543