



breastfeeding myth busters

“Yet you brought me out of the womb; you made me trust in you, even at my mother's breast. From birth I was cast on you; from my mother's womb you have been my God.”

Psalm 22: 9-10 | NLT

There are many myths around breastfeeding – what myths have you heard about? This resource will look at the most common myths and bust them!



but first, remember:

- Breastfeeding can be hard! Sometimes mom feels she is doing all she can, but it is not working – make sure you encourage her to talk to someone if she is struggling (e.g. a doctor or lactation specialist). If there are complications – mom must speak to someone soon!
- Sometimes breastfeeding does not go according to plan - mom will need people around her to support her – encourage mom to not be afraid to ask for help
- Encourage mom to decide how long she would like to breastfeed for and have a breastfeeding plan in place that she can share with the hospital staff – this is a list of her wishes of how she would like to breastfeed or do skin to skin after birth
- You, as someone encouraging mom, need to feel informed – make sure you read trusted sources and any information you give mom is from a specialist or reliable source. There are many breastfeeding apps freely available, encourage mom to download one of these if it will help.

Here are a few myths around breastfeeding that can help you inform mom and encourage her to exclusively breastfeed:

1. myth – breastfeeding is easy – not true

Babies are born with the reflex to look for their mother's breast. However, many mothers need support with positioning of baby for breastfeeding and correct latching to the breast. Breastfeeding takes time and practice for both moms and babies. Breastfeeding is also time intensive, so moms need space and support at home and work. Remember breastmilk takes a few days to come in full – usually around 3 days – and baby needs to suck on the breast to stimulate the milk supply – the more baby sucks and feeds, the more milk mom will make. [Watch this video](#) to see how to attach baby to the breast.

2. myth – it is usual for breastfeeding to hurt – sore nipples are inevitable – not true

Many mothers experience discomfort in the first few days after birth when they are learning to breastfeed. But with support on positioning of baby and correct latching to the breast, sore nipples can be avoided. If a mom faces breastfeeding challenges like sore nipples, encourage her to speak up! It should not hurt, but sometimes it does and can be easily corrected. One remedy is to put some of mom's breastmilk on the sore or cracked nipple to soothe it. [Watch this video](#) for more tips on what to do for sore nipples.

3. myth – you should separate a new-born and mother to let the mother rest – not true

Doctors, nurses, and midwives encourage the practice of 'skin-to-skin' – also known as kangaroo mother care – immediately after birth. Putting baby in direct contact, so their skin is against mom's skin, is a very important practice that helps baby to find and attach to the breast. If mom can practice this within one hour after birth and then frequently after, it helps to establish breastfeeding. If mom cannot do this, then dad or another birthing partner or family member can step in and do it. [Watch this video](#) to see the benefits of skin-to-skin and how it helps with the initiation of breastfeeding.

4. myth – you will not be able to breastfeed unless you do it straight away – not true

It is easier to get breastfeeding going if mom can start feeding in the first hour after birth – because baby's reflexes are very strong at that time. If mom cannot latch baby right after birth, for whatever reason, she can do it as soon as she is able to. Mom can ask

for support from a qualified lactation consultant or other skilled professional if she needs help. Frequent skin-to-skin contact and putting baby to the breast will help get breastfeeding going.

5. myth – many mothers cannot produce enough milk – not true

Almost all mothers produce the right amount of milk for their babies. Breastmilk production is determined by how well the baby is latched on to the breast, the frequency of breastfeeding and how well the baby is removing milk with each feed. Breastfeeding isn't a 'one woman' job and mothers need support (e.g. ongoing breastfeeding guidance from health care providers, help at home, staying healthy by eating and drinking well, getting enough rest or sleep, will all help mom produce milk and feed baby.) [Watch this video](#) for signs to tell if baby is feeding well, and [this video](#) for steps to improve mom's milk supply and baby's feeding.

6. myth – the first milk is “dirty milk” – not true

There are cultures all over the world who believe this myth, and many babies do not benefit from nature's wonder-food, the first milk called colostrum. Colostrum is present in small amounts but packed with the antibodies and nutrients that baby needs. If baby does not breastfeed within the first hour or two of birth it would be hugely beneficial to express a few drops or more, if mom is able to, onto a clean teaspoon and offer it to baby. If baby is born premature it is even more essential for baby to get the colostrum.

7. myth – babies should receive traditional mixtures/formula before mom starts breastfeeding – not true

In South Africa, there are many traditions or cultures that believe in giving baby medicines / formulas / mixtures before mom starts breastfeeding to protect against witchcraft. Foods made from different mixtures of maize, sour milk etc. is given to baby as it is believed to provide babies with energy to grow well and to assist them in passing stools. [None of this is true](#) and giving baby anything other than breastmilk within the first hour or two of birth should be avoided – in fact, baby only needs breastmilk for the first 6 months – nothing else.

8. myth – a hiv positive mother should not breastfeed – not true

Exclusive breastfeeding is in fact the healthiest way to feed any baby, irrespective of the mother's HIV status. If a mother is on life-long Anti-retroviral (ARV) and she chooses to breastfeed, her baby will receive a medicine called Nevirapine or AZT for 6 weeks or longer. This will reduce the risk of HIV transmission. Mom should speak to a health care provider who will assist her to breastfeed with the right information around HIV and reducing the risk to baby.

9. myth – if mom breastfeeds, she will not fall pregnant – not true

If mom is exclusively breastfeeding she produces a hormone called prolactin that regulates ovulation – the amount of prolactin naturally decreases over time; but if baby sleeps through the night at an early age, or is supplementary fed with formula, mom's prolactin levels will reduce and she will become fertile again. If mom does not want to fall pregnant whilst breastfeeding it is recommended to go on birth control after labour. Mom should speak to a health care provider about family planning options.

10. myth – if mom goes back to work, she will have to wean her baby – not true

Many mothers continue breastfeeding after going back to work. Mom can speak to her workplace about her desire to continue breastfeeding and ask about a good place and time for her to either breastfeed or express during working hours. Mom may be able to go home and breastfeed, or she could ask a family member or friend to bring her baby to work to breastfeed. If mom is not able to breastfeed during working hours, she could look for moments during the day to express milk, store it in the fridge and take it home to feed her baby at home. [Watch this video](#) to see how to hand express milk. If mom decides to give her baby a breastmilk substitute for some feeds, it is good to continue breastfeeding whenever mom is with her baby.

11. myth – mom should only eat plain food while breastfeeding – not true

Like everybody else, breastfeeding mothers need to eat a balanced diet. In general, there is no need to change food habits. Babies are exposed to their mothers' food preferences from the time they are in the womb. If a mother perceives that her baby reacts to a specific food she eats, it is best to consult a specialist or healthcare provider.

12. myth – mom should not breastfeed if she's sick – not true

Depending on the kind of illness, mothers can usually continue breastfeeding when they're sick. Mom needs to make sure she gets the right treatment, rests, eats and drinks well. In many cases, the antibodies mom's body makes to treat a disease or illness will pass on to baby, building his/her own defences. Mom should always seek advice from her healthcare provider, especially if she needs to take medication.



With this information: encourage mom to write a breastfeeding plan that she can take with her to the hospital and give the staff of her wishes for breastfeeding and skin to skin with her baby, should there be any reason why she is not able to do so immediately after birth.

*“He comforts us in all our troubles so that we can comfort others.
When they are troubled, we will be able to give them the same
comfort God has given us.”*

Corinthians 1:4 | NLT

Adapted from the following sources:

<https://www.unicef.org/parenting/food-nutrition/14-myths-about-breastfeeding>

<https://www.medela.us/breastfeeding/articles/6-common-breastfeeding-myths-busted>