## BFN News Mums Supporting Mums

**Black Lives Matter** 

How the Breastfeeding Network is working to tackle racial inequality.

### Covid Vaccination and Breastfeeding

A round up of what we know so far.

FEB 2021 WINTER ISSUE 79

# HELLO!

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Forth Valley volunteer Naomi



Haringey team zoo







## Editor's Note

Welcome to the Winter 2021 edition of BfN News.

If like so many of us, you are finding lockdown restrictions are taking their toll, we hope that this edition can bring some positivity and optimism to your week.

Alongside stories and updates from across our network, you have the opportunity to read an update about our commitment to publicly tackling racial inequality in our organisation . This includes the questions we have asked ourselves since last June and the resulting actions we are taking to drive equality.

We have also included information about the Covid-19 vaccine and breastfeeding. As mothers, women, breastfeeding supporters and healthcare professionals, the vaccine roll out has been tricky to follow. We hope that our summary saves you many hours of independent research.

On our cover this edition, we have included Jes Johal and her son. You can read more about Jes's involvement with BfN on page 13.

As always, we are grateful to everyone that has contributed to the newsletter. As we continue to navigate lockdown life, we hope that you are able to take some time out of your busy schedules to read it (preferably with a cuppa!).

As always, we welcome your feedback, comments and ideas for future newsletters. We'd love to hear from you. Please contact leanne.rayner@breastfeedingnetwork.org.uk.

Thank you for continuing all of your hard work and support to families during this testing time.

## Black Lives Matter: how the Breastfeeding Network is working to tackle racial inequality

In June 2020, against the backdrop of the worldwide protests advocating for an end to racial inequality on a mass scale, the Breastfeeding Network shared a statement on Black Lives Matter in solidarity against racism.

It felt especially relevant for BfN to do this given our work with all mothers and our knowledge of the deep inequalities that exist for Black and Asian women in our maternity services highlighted in the MBRRACE report. You can read that statement again below.

#### BfN Black Lives Matter Statement June 2020

We stand alongside all Black mothers and families, and are willing to do anything we can to ensure mothers and babies get real change for the better.

At the heart of BfN's values is empowerment of women, and none of us can feel empowered if we are raising our children with threat from racism.

As a charity we have always believed in social justice for mothers and babies, but often we have felt limited in what to do, in part due to our own ignorance – which is our responsibility to correct.

We hear our fellow Black mothers and families and we are committed to doing more – using our core values of empowerment, empathy and actively listening.

We are committed to learning and educating ourselves.

We will share and amplify Black women's voices.

We are here for you.

### Since we made that statement, what have we done?

We have made the commitment publicly to push for anti-racism within infant feeding and across maternity and the early years agenda. We have done this through becoming a more visible ally to the people and organisations who give voice to anti-racism, including providing monetary support for Black Breastfeeding Week and promotion and awareness raising of the <u>FIVEXMORE</u> campaign in our communications.

Across the charity we have questioned ourselves and heard from others to understand our responsibilities to drive up equality and eliminate racist behaviour. While we, like many other breastfeeding support organisations, don't consider ourselves to be racist, by virtue of the UK's shocking inequalities we recognise that by remaining passive on these issues we perpetuate the same behaviours that allow racism to flourish. We all need to do more and given what we know about the inequalities that persist within breastfeeding and we in particular actually need to do more than most to help correct this.

We aim to drive up racial equality in breastfeeding by further committing to supporting ALL families to feel comfortable accessing our support, training, volunteering and working for us. This is at the heart of our work and we know that we can only truly achieve it by becoming a more representative and diverse charity.

So, informed by early work undertaken by volunteers on a working group in 2018/19, we have been asking ourselves ...

#### What are the changes that we need to make?

Last summer we heard from many of our peer supporters out in communities who knew more than we did to understand how we can implement a lasting inclusion and diversity action plan for the charity.

### Where we are now and, and what actions must we take?

Guided by the insights from the volunteer working group, Black, Asian and Ethnic Minority peer supporters from BfN, and colleagues from <u>BRAP</u>, we have mapped the areas and actions that we want to work on.)

#### Our Board-approved Inclusion and Diversity Action Plan will document change in the following areas:

#### **People we support**

We have always recognised that some women face higher barriers to accessing breastfeeding support. This is why we have and will continue to keep our training for mothers free. We have also always targeted our work in areas where breastfeeding rates are at their lowest.

We routinely collect ethnicity data on our helplines and across our commissioned services but we don't have a complete picture for our volunteers across the charity. We believe that increasing access to our training is key to building a more diverse charity.

However, we recognise that even the act of volunteering is problematic for individuals and communities who are not able to afford to volunteer. We provide a universal service meeting mothers on-wards, and we know that our home visits reach a diverse community, but many services are based at our community groups and attendance at groups is not representative.

Through our action plan we are seeking partnerships with others to help us build representation across our community groups and drop-ins. We recognise that with a few exceptions the majority of the people we support across our helplines and in our commissioned services are white and we want to change this through encouraging wider access to our training.

The charity has a tradition of offering minority language lines. We proactively maintain specific helpline support for Welsh, Polish, Bengali/Syheti women and families – and are able also to offer helpline support in various other languages, because of the diversity and strength in languages that our networks possess. While we see this as a strength it can also be a practical weakness as language lines rely on volunteers. We will proactively report on the take-up of our language lines and develop less volunteer-reliant ways of supporting families who require support in a different language.

#### Board

While progress had been made to engage younger mothers with lived experience of breastfeeding on the Board as Directors, there has been a clear lack of diverse ethnic representation on our Board of Directors for some time. In November 2020 we were pleased to welcome two new board members and there is an ongoing commitment to ensure strong representation on the Board to support effective decision-making.

#### **Workforce and volunteers**

BfN attracts a diverse range of candidates for jobs but we need to do more work to see if the people who get offered jobs are also representative and diverse. We commit to doing an employee survey in 2021 and benchmarking with other appropriate organisations. We will also explicitly recruit staff from diverse backgrounds for a range of specialist and skilled roles across the organisation.

#### **Training and Supervision**

We are working with a partner to undertake a review of our Helper training and resources to ensure equality, diversity, inclusion and accessibility. This will be complete by February 2021 and then we will look to extend the review across the rest of our training resources over the course of the year. Our commissioned work in Cheshire and Merseyside, where some trainees were recruited through the Black Mum Magic Project, will provide invaluable ongoing learning for our training. As the vast majority of our trainees are white, attracting, training and retaining women from more diverse ethnic backgrounds is a key focus of our work in many communities. We intend to offer targeted training to these communities independently or in collaboration with a partner.

#### **Internal Culture**

We recognise that we have not done enough to help our workforce adopt and implement inclusive and diverse practices and to build knowledge and cultural sensitivity. In early 2021 we are training our tutors and supervisors in inclusion and diversity, we are doing this with two external providers – BRAP, an equality charity, and Vanisha Virgo, Mama and Me, who has trained with BfN.

We will extend this offer to staff by the end of 2021. We have reviewed our mandatory training requirements to cover training that is important to our volunteers and staff and this now includes inclusion and diversity training. We are committed to diversity and inclusion being on all agendas – wherever we meet we will actively discuss and invite feedback and learning on diversity and inclusion. This includes our Board, manager meetings and meetings of our project leads, tutors and supervisors.

#### **Black lives matter article cont**

We are collecting and updating resources, policies and documents on inclusion and diversity and we will make these available for all staff and volunteers as part of the induction process.

#### Website

The working group in 2019 guided us on changes that have largely been implemented but we want to do more. Our website requires an overhaul both in design, images and content and this is a goal to achieve in 2021/22.

#### **Marketing and Communications**

Our communications team do and will continue to ensure that our values around diversity and inclusivity are publicly demonstrated. This covers our newsletters, all social media channels, blogs, campaigns and printed materials.

#### Next Steps...

We are committed to taking lasting and ongoing action and progressing our plans publicly. We will share progress. We have dedicated resources within our team and a commitment from the charity to implement real change.

We will work with partners and agencies to help guide us as we bring on these changes to ensure that the impact of the changes we make is evaluated and prove to be effective. We are grateful to the many peer supporters in BfN from Black, Asian and other Minority Ethnic backgrounds who took the time to talk with us about their lived experience of our support, training and volunteering.

BfN at its heart is a listening organisation and we believe that it is really only through listening that we can fully understand the needs of the women and families whom we serve. However, it is through action that we can really build trust and confidence.

### We welcome any other feedback, especially where you think we could do better.

Please contact us: ceo@breastfeedingnetwork.org.uk

### BfN Peer Support Services - contacts at a glance

As an organisation we are committed to helping increase breastfeeding rates locally through our Peer Support Programmes.

To help you to stay in touch and share experience, we have compiled this list of the contact(s) for each project:

- London Islington Hannah Leonard
- London Haringey Linda Vellosa
- London Tower Hamlets Tracey Murkatt
- London Hackney (2 Children Centre contracts) -Susy Gilvin
- London Camden Agnes Leger (Volunteer Coordinator)
- London Lambeth Lisa Whipp
- St Helier and Sutton Fay Brookes
- Portsmouth Eleanor Johnson
- South & East Hampshire Ginny Dupont
- Stoke Jill Smith
- Derbyshire Jill Smith
- Sandwell Anna Cooney
- Wolverhampton Virtual Groups Anna Cooney
- Oldham & Tameside (partnership with Homestart) - Nina White
- Cheshire & Merseyside (training only, volunteers coordinated locally) Sophie Walters
- Wokingham Kirsty Beck
- Frimley & Wexham (Phone support upon hospital discharge) Rebecca Reeves
- Ayrshire Kayleigh Lindsay
- Glasgow & Renfrewshire Melanie Woodward
- Forth Valley Project Lead Kirstin Worsley, Local Coordinator Gemma Hamilton
- Midlothian Project Lead Kirstin Worsley, Local Coordinator Carol Hodgkin
- Western Isles Project Lead Kirstin Worsley, Local Coordinator Phillipa Rewaj

More information on each Peer Support Service can be found on our website here

### **BfN Board Update**

We're pleased to announce that two new trustees have joined our Board of Directors. Dr Ernestine Gheyoh Ndzi and Joy Hastings tell us about their decision to join BfN in their own words.



### Joy Hastings

When I mentioned in the earshot of a certain BfN person that I was planning to retire from the NHS – the person came back immediately with the idea that I could join the Board.

I thought about whether this was something I could do and be useful and decided I would put myself forward. I have been involved with the BfN since it was formed (my membership number is 002) and so I hope I have something to contribute as a retired midwife and Baby Feeding Service manager and with years of involvement in supporting mums and as a tutor. I was very keen to stay involved in the world of breastfeeding and I continue to volunteer on the NBH (recently receiving my 2000 call badge) and with more time I will be tutoring some courses in the coming months.

Tower Hamlets has been a great place to be involved in infant feeding with the support of Public Health and properly funded support for mothers. Hospital and community have been fully accredited with BFI for several years now and its known as a place where all stakeholders work together and are on the same page. I'm hoping to bring all the experience of managing and developing the breastfeeding work within an NHS service to the BfN.

I am also a very proud grandparent. It was fascinating to follow 2 mothers (my daughter & daughter-in-law) through their breastfeeding experiences from start to finish and through the ups and downs. A privilege not often granted to breastfeeding supporters. I certainly learnt a lot.

Which brings me to the final point of how I stay interested in the world of breastfeeding – there is always something to learn, its not possible to know everything and the ramifications of whether a mum breastfeeds or not and whether she feels supported or not seep into all aspects of society.



### Dr Ernestine Gheyoh Ndzi

I encountered the BfN when I started researching on the impact of shared parental leave policy on breastfeeding. I was/still interested in exploring how breastfeeding mothers wanting to take shared parental leave could return to work, with minimum disruption to breastfeeding. I am an advocate of breastfeeding and researching on barriers to mothers returning to work.

As a black mother of two, I realise that women of the black community do not tend to access breastfeeding support when they need it for various reasons. My aim is to work with the BfN to find viable and sustainable ways of reaching out to the BAME community.

In my other life, I am a senior lecturer in law. My area of expertise includes Company Law, Corporate Governance and Employment Law. I am excited about the opportunity the BfN has offered me because I will be able to share my skills as well as acquire skills and experience.

> Our Board of Directors are all volunteers and bring with them a wide range of experience and skills.

We thank them all for their passion and dedication.

**Read more about them here.** 



### Update from the National Breastfeeding Helpine By Fliss Lambert, NBH Manager

2020 was a year unlike any other on the helpline. With most other forms of face to face breastfeeding support closed across the country, the National Breastfeeding Helpline really became a lifeline to so many families.

And the volunteers on the helpline rose to this challenge.

We have worked out some statistics for 2020 and the numbers are record breaking in so many ways!

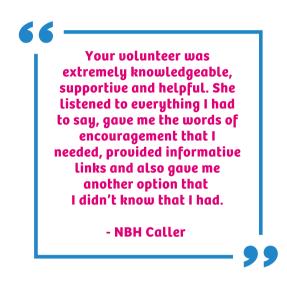
Helpline volunteers answered 45% more incoming calls during 2020 than they did in 2019 (and let's not forget that 2019 was already a record breaking year as well!) We also implemented a voicemail return service in March this year, just as lockdown began – and if we add in the number of calls they returned as well, it means we spoke to 66% more callers than we did in the previous year.

Talk time (the amount of time spent actually listening to and supporting callers) was up by a MASSIVE 75%! The helpline team spent 4907 hours listening and supporting – that is the equivalent of more than 29 full weeks! And that amazing amount of time doesn't include all the time spent logged into our virtual call centre waiting for calls or web chats to come in, or the time spent supporting each other, attending voluntary supervision and webinars or study days.

Web chat also hugely increased this year – we answered over 400% more chats than in 2019! And social media support was super busy too, with 2000 families supported on the NBH and BFN social media accounts alone – this doesn't include the Drugs in Breastmilk pages which would take the numbers even higher!

The number of volunteering hours in 2020 is difficult even to estimate!

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Overall the helpline has directly supported more than 18,500 individuals this year – a bigger number and in a wider range of ways than ever before. And as we all know the ripples from each of these individuals means the reach is actually far more than that.

At least 275 individuals spent time volunteering on the helpline, web chat or social media messaging this year. This is 31% more than in 2019. We can't thank you all enough – we know it was (and is!) very difficult to fit volunteering in alongside home working and home learning and all the other responsibilities you have.

Increasing numbers of volunteers makes us hopeful for the future – we have lots more new volunteers making their way through helpline training currently. With the vast experience of our well established volunteers, alongside the enthusiasm of our newer volunteers and everyone working together so well to learn from each other, I am feeling really positive...

#### ...NBH update cont

...about the helpline in 2021 – yes we are likely to be busier than ever, but we are well equipped to cope with whatever the year throws at us!

> I just wanted to say such a huge thank you for all your support, and the service you run. Your volunteer was so kind and understanding and took such care to make sure I was ok and had a plan to get my through the weekend which was invaluable especially as I was so tired.

> > - NBH caller

Increasing numbers of volunteers makes us hopeful for the future – we have lots more new volunteers making their way through helpline training currently. With the vast experience of our well established volunteers, alongside the enthusiasm of our newer volunteers and everyone working together so well to learn from each other, I am feeling really positive about the helpline in 2021 – yes we are likely to be busier than ever, but we are well equipped to cope with whatever the year throws at us!

If you are a Helper and interested in training for the helpline, please chat to your supervisor about opportunities for this. We'd love to have you!

Finally I am sending a massive thank you to all our helpline volunteers – all those answering calls, returning voicemails, staffing our language lines, responding to social media messages and supporting via webchat – as well as supporting each other - you make such a difference every single day.

#### **Thank You!**



Kate (pictured right) enjoying pre-Covid times at the 2019 BfN conference, along with fellow Helpline Volunteer Co-ordinators Kirsty and Gillian.

### Farewell to a longstanding BfN team member

Sad news this month from NBH as we say good bye to the wonderful Kate Roberts. After more than 11 years as part of the helpline team - volunteer, linkworker and helpline volunteer co-ordinator, Kate has decided it's time to head off into pastures new (literally as she's actually a trained archaeobotanist - an archaeologist of plants and seeds!).

Kate also worked as a volunteer and staff member for many years in face to face projects in London. Kate's kindness, along with her passion and enthusiasm for supporting families, and supporting volunteers on the helpline is immense. The impact she's had on so many lives is difficult to measure.

#### Thank you Kate for all your hard work and dedication over so many years - we will miss you!



### **Special Feature: Our surrogacy story**

Everyday across our network we hear inspirational stories of the women and families who reach out to us for breastfeeding support. Today we are privileged to share Donna's story, which will restore your faith in humanity and offer a gentle reminder to have as much compassion for ourselves as we do for other people.

My wife and I had our son in 2017. I carried and we had chosen to try breastfeeding our boy. Unfortunately my experience with breastfeeding was not easy. We did manage successfully feed him breast milk, however he never fully established feeding.

It was a very bittersweet time, with many low points, stress, conflicting information, self-blaming and feeling like a failure. We made the decision after 5 months that we would stop trying and that was an extremely hard blow for me. In 2019, we had the absolute joy and pleasure of being surrogate parents to a beautiful baby for another family.

We had successfully managed to achieve a positive pregnancy in the February and the journey began of myself growing this little one who was due in the October. During the pregnancy I had spoken with my wife that I felt that to discard the milk I was producing, instead of giving it to either this baby or another baby, felt like a waste to me. It played on my mind that I wanted to ensure that someone benefitted from this 'liquid gold'.

We discussed it at length, especially with this not only being a surrogacy, but the first time I had done a surrogacy. There was a lot of concern over my emotions from my wife, understandably. She was concerned that it would be hard enough on my emotions to go through the process of birth, coming home without the child. She was concerned about how low I had gotten after our son's pregnancy, and that I would head down the same road again. Her concerns did not lie in handing the breastmilk to someone else, quite the opposite actually she thought that was a great thing to do, she was just concerned that I could be increasing the chances of ending up with postnatal depression again.

We started to look into the idea of expressing, harvesting and feeding in order to gain more information to make a decision. Quite quickly I had agreed that I did not want the baby to feed directly from me. Although there were many benefits of this with regards to the milk being tailored to this individual, we both held a slight concern to how this would be emotionally. I was being very realistic and honest in that I had never experienced a surrogacy before, so I couldn't possibly know how my emotions would be post birth.



It is impossible to predict how your emotions and feelings will be after giving birth to your own child, never mind someone else's child. I wanted to ensure that whichever decision we went with, we were all protected, no one was left vulnerable.

We spoke with the parents whilst researching into this to enquire how they felt about the idea. If they had not wanted to have the baby fed breastmilk and wanted to formula feed, we would have then been looking into donating the milk to a milk bank. The parents were delighted and had similar views to ourselves of the 'liquid gold'.

I was advised very early on that there were absolutely no pressures at all and even if I should decide at the last minute that I had changed my mind, this was no issue and they would support any decision I made. I spoke with my antenatal team regarding if it was safe for me to harvest colostrum. This is where you begin to collect tiny amounts of colostrum from your breasts before birth to provide the first feed for baby initially after birth. I knew that this could hold some risks under certain circumstances and wanted to check that medically there were no risks to myself or baby to proceed.

Once I had the all clear from the medical team, and advised they knew little about it and could not provide any information, I knew exactly where to go. During my son's first few months I had been put in contact with the Breastfeeding Network and my...

#### (cont)

1 08

...local group. I had went along a few times with my son and had met with the lady who ran it, Melanie, who had provided a lot of support and advice.

I remembered from my son's experience that the health team gave some help, however the Breastfeeding Network and other mothers was where I should have focused my information. I had stopped going after a month or two myself to this group, but that's for another time. I hadn't spoken to the group since, so I reached out and contacted Melanie to find out if there was any adice or information they could provide me about harvesting colostrum.

Melanie, true to form, was so incredibly helpful. I was advised she had no direct knowledge regarding the subject, however to give her a day or two and she would get back to me with information. I was invited along to the local group, which was so lovely, as in my head this wasn't my baby so I didn't feel I had a place. I went along to the next meeting and Melanie provided me with so much more information than I could have found online. She gave me information on how to carry out the process, information on dangers, information to keep me safe, website links and video links.... It was amazing! I went home that day feeling more informed and went through it all with my wife.

We decided to begin harvesting colostrum. This was not what I had initially thought it was of sitting machine expressing for hours, it was a 5-10 minute thing that happened only a couple of times a day, each day. I would sit with my water, as I would get thirsty like expressing or feeding, I would hand express, very gently and using a small syringe would collect the tiny amounts of colostrum. This would then be frozen with a date on it to ensure the oldest was used first. I carried this out every day for a few weeks before giving birth to the baby. I could see the amount of colostrum increasing slightly, I could see the colour of it change to a richer looking colostrum. Every day I ensured to do it gently and if there were any cramping I stopped immediately.

We went in to the maternity and gave birth to the beautiful boy, who was able to have a feed of colostrum from his Daddy. This was such an amazing thing to know he was getting this 'liquid gold' and it was skin to skin with his parent. After birth I was asked about feeding and expressing. I explained I felt happy enough to express and was provided with a midwife who was specialist in feeding. I was extremely lucky to have this support as I had not experienced this two years previous with my son.

Although the midwife helped with setting the expressing machine up and helped with bits, it was more the information and knowledge provided from this time around. I knew things that worked and advice that was invaluable, I knew tips and tricks and I knew things this time round that I hadn't before.

Still, the memories and experience I had with my son still sat with me. There was less pressure this time around as if I couldn't see a decent amount expressing, then maybe it was just my body was not able to breastfeed. I expressed every few hours and used all the information I had.

A few days after birth, back at home, I was still expressing and collecting milk, my wife and I would put it into the fridge and the parents would collect it for the baby. One of the days I was expressing, I burst into tears. I had managed to express more milk in 10 minutes, than I had managed in a day for my son. I cried with relief. I cried with happiness. I cried with all of the emotions. I realised that it wasn't my body that had failed my son. It wasn't anything I had done. This had shown me I was able to breastfeed a child. I was able to look back and see that there had been some advice provided by the health visiting medical team, in the interest of my son losing a little weight, which now appeared to be a quick safe fix.

I was advised constantly during the first 5 months to increase my 'top up feed's' of formula, I was advised to increase my calories, I was advised that sometimes it just doesn't work. Instead of being advised to increase breast time, increasing expressing, increase skin to skin and the one which I personally seen a difference with myself, to increase my water intake. If I had a limited water intake, even in those first few weeks of expressing for the baby, I noticed a reduction in my expressing.

Carrying a baby for someone else is a blessing. Seeing another family in a blissful bubble of happiness and awe is indescribable. Having that child teach you things, you never knew were possible and to leave you with hope about any future children I carry, is priceless. I knew I was giving someone something by growing and carrying this baby, but I didn't know the baby was going to give me something.

I am forever grateful to the baby for teaching me that it's ok and it wasn't my fault the issues my son and I experienced. My wife and I are hoping to have another child and we are full of information, knowledge and hope for being able to feed our next child.

A special thank you to Donna for sharing her journey with us. We are humbled to meet women like Donna and support them whenever possible.





### Gosport and Havant becomes BfN South and East Hampshire

By Ginny Dupont

Following a period of consultation with local volunteers The Breastfeeding Network Gosport and Havant, will now be known as The Breastfeeding Network South and East Hampshire.

Operating since 2014, The Breastfeeding Network Gosport and Havant was originally commissioned in 2014 by Hampshire County Council to support families in the boroughs of Gosport and Havant. The project was named Gosport, Fareham, Havant and Waterlooville reflecting the areas we offered support in, later being shortened to The Breastfeeding Network Gosport and Havant.

In 2016 Hampshire County Council stopped funding for all third sector breastfeeding support in Hampshire. We are currently funded by the Breastfeeding Network Innovation and Development fund alongside donations and small grants, which has allowed for expansion in to East Hampshire District Council covering Clanfield, Petersfield and Bordon.

Given all of the changes, we felt it was time that we had a name more reflective of all the areas where families can access our support. We offer support via Zoom 1:1's, Zoom peer support groups, social media and outdoor walking groups, all of which have been incredibly well received by the local communities. We currently have 19 inspirational volunteers in South and East Hampshire and since the arrival of COVID-19 have been working in partnership with BfN Portsmouth to provide a joint service to families in these areas.

Since March 2020 our wonderful volunteers have given over 840 hours of their precious time to support over 550 mums and/or their partners, 295 of these for the first time. A massive thanks to each and every one of them for enabling us to keep our services running during these tough times.

### Finding new ways of working thanks to Forth Valley volunteers

#### **By Gemma Hamilton**

In Forth Valley we have around 40 volunteers who were on the wards supporting mums in the first few days after their babies were born.

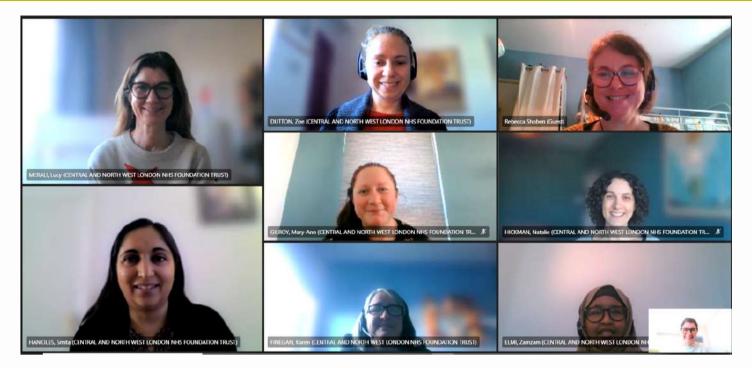
March brought our services to an abrupt halt due to the coronavirus outbreak, and we re-evaluated how we could best support the families in Forth Valley.

We put in place a team to call mums when they were discharged from the hospital, as well as a weekly zoom group for any mum to attend to get some virtual support and to build a community.

In the past few months Naomi Forbes (pictures on pg 1) has been instrumental in the running of the group, taking ownership of it while caring for her own young family during lockdown.

We are incredibly lucky to have such passionate volunteers like Naomi on our team.

Thank you.



### **Camden Baby Feeding Team**

#### by Smita Hanciles - Project Coordinator

The Camden Baby Feeding Team in London is a specialist team within the Camden Health Visiting Service. The five incredibly dedicated members of the team started as volunteer peer supporters after initially completing the BfN Helper course but are now all trained to BfN Supporter level.

They are employed by CNWL NHS Foundation Trust as Baby Feeding practitioners where they have been able to combine their lived experience and infant feeding support skills to become a highly valued service receiving regular referrals from Health Visitors, Midwives, Family Support Workers and GPs. Mothers also often self-refer and have highly complimented the service.

"This past year has been full of change, adaptation, trials and rewards. I feel so lucky to have worked through this year with the (Camden Baby Feeding) Team." says team member Zoe.

"We have supported so many families through their feeding challenges and pandemic related anxieties, but we also supported each other through the pandemic. What an amazing and supportive group of women they are. I look forward to working with them every day." she told us

Before the pandemic, the team held regular drop-ins and carried out home visits as well as providing telephone support. Student Health visitors and midwives regularly attended the drop-ins and this was where volunteer BfN Helpers gained valuable experience. Volunteer Helpers have always been a valuable part of the team and a new group had just started training when the first lockdown started.

The tutor very skilfully and patiently accommodated the continuation of training via zoom, WhatsApp and email and 7 inspirational women completed the training under very challenging circumstances.

The Covid-19 pandemic has presented challenges, but also opportunities to test new ways of working. The initial substantial fear of providing support via videocalls has been replaced with a growing confidence in what has now become a valuable way of supporting mothers.

One mum told us "I rang up your team and in 2 hours we were on zoom and you were giving me tailored advice that not only seemed manageable, it also made sense to me."

She went on to say that "For the first time I was given practical advice that didn't feel pressured. Following that call, I made some real progress and felt the most relaxed I had felt since my baby was born."

We were able to recruit a volunteer co-ordinator through BfN who also helped us all successfully make the difficult transition to providing support in online groups so the volunteers could get involved and feel like part of the team.

### ...Camden Baby Feeding Team cont

The team also support the virtual Health Visiting clinic. Working within the NHS has meant we have been able to continue to support women

Working within the NHS has meant we have been able to continue to support women individually face to face in clinics with appropriate PPE and two of the team were able to carry out a placement in a Mother and Baby Unit (MBU) which has opened up new opportunities for collaboration with different services which we are now exploring further.



### Insights from the team



When we went from drop-ins and home visits to online support, I felt afraid that support would not have the same impact for mums. The key to me was to continue providing support with the same sincerity than I did in face to face, and providing the same "safe space" where they can feel able to share their concerns and worries. I have had to adapt...for example I have had to be more directive about where the camera should be when I observe a baby feeding, and ask for the camera to be moved around. This was quite different from how I would normally interact with mums, where I would encourage them to do what was most comfortable for them. Accepting the change in how I provided support has made me refer back to my training as a peer supporter, and reminded me that it's not about the environment: it's about the mum, and her baby.

- Zamzam

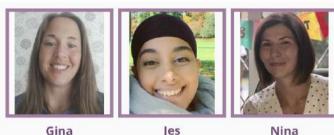
I feel that I am moving forward little by little with each session because thanks to our great facilitator, I came to be able to share something every time lately. I learned again in the online groups that mums' concerns are not limited to breastfeeding issues and mums are always worried about everything of their loving babies. I hope I could be one help to relieve mums' feelings by listening to them and sharing my experiences as a mum. - Yuri, Volunteer





Since the online groups have started I have really enjoyed it as it gives me something to look forward to during the week. Especially in these times it's nice to see some different faces and speak to different mums. I feel like as the weeks have gone on and the more groups we are doing the more relaxed I feel. When we started the groups I was unsure how it would work out, but I feel like we've adapted to the situation very well. The thing I find the most challenging is that it is easy to get distracted at times with my baby daughter around. If she happens to nap at the same time during group calls I actually find it such a peaceful space to be in. - Grace, Volunteer

### Wolverhampton project



Gina

Nina

Gina Mark, Nina Adams and Jeskirat Johal (managed by Nina White and Anna Cooney and supported by Donna Ebanks for Supervision) have been involved in an exciting development in Wolverhampton during the Covid-19 lockdowns.

In August 2020, the team launched a virtual support group service funded by Wolverhampton Public Health, initially for a 6-month period.

The pilot project aims to support local mums during the pandemic via virtual support groups on Zoom for two-hours twice a week. The need arose to cover the gap in lockdown whilst BfN Volunteers who usually support at New Cross Hospital and community dropin groups. The team have been working closely with Diana West (BfN Tutor and Supervisor) and her colleagues at New Cross Hospital IFT and maternity, who have been actively referring new mothers to the online service.

The groups are attended on average by 6 mums a week and have created a virtual community for mums to have a casual social catch-up as well as accessing trained peer support. The group attracts both new mums and returning mums who have been re-joining the sessions months after their initial support.

We have recently received excellent news that the service has been extended by a further 7 weeks to the beginning of April 2021.

e:: wolverhampton@breastfeedingnetwork.org.uk f: @WVBreastfeeding



It's a wonderful service especially in these times where new mums can feel especially isolated. Wolverhampton mum

### **Cheshire and Merseyside** project gets off to a great start **By Sophie Walters**

We are really excited to be working in partnership with Improving Me in Cheshire and Merseyside to train 100 new breastfeeding peer support volunteers by October 2021.

Improving Me operates across 27 NHS Trusts in Cheshire and Merseyside to "reduce unwarranted variations in outcomes and experiences by working together through collaboration, co-operation and coproduction."

Online training has already been rolled out, with the first cohort of 20 trainees nearing the end of their course. They will go on to volunteer with Improving Me, overseen by their local infant feeding leads. The Tutors for this huge project are a great team, working hard to learn from each other's experiences of remote teaching, ahead of Course 2 starting at the end of February.

It's been really interesting to see how, during the evolving Covid-19 pandemic and lockdowns, our online training has given lots of our trainees a positive focus. The chance to "see" (albeit via a video call) some grown-ups they don't live with has been a bit of a novelty for everyone!

One trainee said they had particularly welcomed: "The opportunity to participate in group discussions, despite the current restrictions," while another trainee enjoyed "getting to hear others stories and learning more about my own journey".



#### ...Cheshire and Merseyside cont

Courses have had overwhelming interest – peer support is clearly something which our trainees value and recognise the importance of.

We are particularly keen to welcome applications from trainees across Cheshire and Merseyside who are from diverse ethnic backgrounds. We'd also love to hear from those who speak English as an additional language.

For more information, contact: cheshire@breastfeedingnetwork.org.uk

### Walk, Talk and Feed Groups in Midlothian

By Carol Hodgkin Midlothian Volunteer Coordinator

We embarked on a new venture in Midlothian in November 2020 with our first Walk, Talk & Feed group. After many months of not being able to see other volunteers and mums face-to-face, it was absolutely wonderful to be back together again.

We have enjoyed many walks with lovely mums and their beautiful babies during a picturesque 1.5 mile woodland walk through a country estate, nestled at the bottom of the Pentland Hills. We've been blessed with quite a few weeks of uncharacteristic sunshine, but even when we have been hit by snow and rain we have got together regardless – enjoying some lovely fresh air and amazing conversation.

We're running the group in conjunction with the charity "Paths for All" who have supported us during the entire process of creating the group. They ran online sessions to train our volunteers as Walk Leaders, aided us to locate a suitable route and helped us regarding risk assessment - especially making the walks as COVID safe as possible.

Walking is a great all-round activity to benefit physical, social and mental health and after the year we have had, finding ways to help boost our health is more needed than ever. The walks have been incredibly popular with other mums in the local area and beyond.



Those joining the walks tell us that theyare so glad to be able to meet up with other mums, share their experiences, and validate that the things they are going through are normal.

Friendships are also forming which is lovely to see with one mum telling us: "I think the walks have been great and it's been lovely to get to know other mums. I think the volunteers were great at facilitating and starting conversations with the group especially with more nervous mums...I found advice helpful and the volunteers just normalising stresses in relation to feeding and giving tips that might help ease that stress".

These mums have missed out on so much of the normal "new mum group" experiences because of COVID-19. We've been delighted to hear that even when they haven't felt like joining us because of a bad night's sleep, they've pushed themselves and felt brilliant once they have been out of the house for fresh air, exercise and companionship.

The walking group has been a positive opportunity for volunteers too, many had been left feeling frustrated because of the limited opportunities to support mums at the moment. So, this has been the perfect opportunity for them to share their skills again. The Walk, Talk & Feed group has been so popular we are now looking forward to starting new walks in other parts of Midlothian in 2021.



I've really enjoyed coming on the walks and it's been really good for me to chat to other people about breastfeeding, amongst other things!

- Mum, Midlothian

### Covid 19 vaccination and breastfeeding

Even if you've been trying to dodge doom scrolling over the last few months, it's unlikely that you will have been able to avoid the news about the Covid-19 vaccine roll out. On the whole, the UK's vaccination efforts have been positive in the otherwise bleak landscape of news – watching the figures for vaccinations go up generally while hospital admissions begin to go down – it finally feels like there could be a light at the end of the tunnel.

As mothers, women, breastfeeding supporters and healthcare professionals though, the vaccine roll out story has been a tricky one to follow. When the vaccine programme began back in early December, it started with the over 80s, as well as frontline healthcare workers. Anyone in the healthcare worker group who also happened to be breastfeeding were told at that time that they should not have the vaccination, this despite the fact that there was no evidence to show that it was not safe.

Many breastfeeding HCPs had to make the difficult decision to stop breastfeeding in order to have the vaccine. Many more who were due to return to work after maternity leave were highly anxious about what they should do – not ready to stop breastfeeding, but equally understanding the importance of the need to be vaccinated.

During December 2020 volunteers on the National Breastfeeding Helpline started reporting more and more contacts from callers worried about the vaccine and what it would mean to them – we had calls from dentists and dental nurses, GPs, critical care nurses, community nurses, radiographers, care home workers and many other keyworkers, some of whom had already had the vaccine, others wanting to discuss their options.

The roll out of a vaccination programme (of any kind) is often a controversial subject anyway, causing tensions to run high particularly on social media, and the Covid-19 vaccine caused even more controversy. This was particularly evident on our Drugs in Breastmilk Facebook page, where several posts sharing evidence based, government approved information, had to be taken down as the DIBM team just couldn't keep up with moderation - hundreds and hundreds of comments came flooding in 24 hours a day from all over the world – everything from people sharing non-evidence-based information and rumours to outright abuse (along with lots of supportive, appreciative comments as well).



On 30th December thanks to hard work and pressure from many organisations, and following guidelines set by the World Health Organisation, the UK government moved to change their advice on vaccinations for breastfeeding mothers, saying now:

<u>'You can have the COVID-19 vaccine if you're</u> <u>breastfeeding. Speak to a healthcare professional</u> <u>before you have the vaccination. They will discuss the</u> <u>benefits and risks with you.</u>'

We then started to hear from women wanting to relactate because they had stopped based on the earlier advice.. And the questions continued – how could the vaccine not be safe, then suddenly be safe now? Why does it only say 'not thought to be a risk'? People want (and deserve) the best possible information to help them make their own informed decisions about what to do.

Despite the updated position from Government on the safety of all three vaccines for breastfeeding women the confusion and anxiety remains an issue. Around 15% of all helpline calls in January mentioned the coronavirus vaccine. On the 8th January Dr Hilary Jones appeared on Good Morning Britain and clearly told viewers that breastfeeding women should not have the vaccine. Those trying to use one of the online vaccination booking systems were faced with banners telling them not to book an appointment if they were breastfeeding. The Scottish Government were still sending out printed materials in January advising that breastfeeding women should not have the vaccine. We are still receiving many calls on the helpline from families with real concerns about this. The uncertainty and mixed messages are adding to the stress that new families have faced all year.

### ...Covid 19 vaccination update cont

Shereen Fisher, Chief Executive for the Breastfeeding Network writes 'The Government's early decision not to recommend the vaccine in breastfeeding women was without evidence. It also jars with the vision statement set out in the <u>MHRA strategy</u> launched in January 2021 that:

'All women will have access to accurate and accessible information to make informed decisions with their healthcare professional about taking medicines before or during pregnancy or breastfeeding.'

We know through our work as a charity it has unleashed untold damage on breastfeeding experiences of mothers and the confusion for HCP will endure. It's absolutely crucial for our future responses to pandemics for Governments and researchers to give full consideration to the evidence so we can uphold maternal and infant health and public confidence.'

This article, published in the British Medical Journal on 5th January is worth reading.

In it, the authors say 'It is the result of a system of researching and licensing drugs that routinely discriminates against women, excludes them from the evidence base, and denies them the right to make informed choices about their own health.'

The issues that have surrounded the vaccine for breastfeeding women are perhaps indicative of a much larger scale issue that affects breastfeeding support, and in fact women's health, in general.

Things are moving fast and we're aware that even between writing this piece and it being published, there may be further developments. We're working hard to keep the <u>BfN Coronavirus page</u> as up to date as possible, with regular reviews – so this is the best place to signpost families to at the moment. It includes an updated statement on Covid-19 vaccines while breastfeeding.

#### Other useful links:

- Statement from the UK Chief Medical Officer
- Hospital Infant Feeding Network
- <u>Royal College of Obstetricians & Gynaecologists</u>
- <u>COVID-19 vaccination: women of childbearing</u> <u>age, currently pregnant or breastfeeding</u> (currently being update by PHE 12.02.21)

## The power of positive thinking in lockdown

Across our network, people are struggling with lockdown. Here an anonymous member of our community shares her experience with us, along with a gentle reminder of the power of gratitude in our everyday life.

"Overwhelmed. Like many people, I went into lockdown last March as someone who felt like their day-to-day life involved juggling spinning plates on a treadmill, and lockdown didn't make it easier. It seemed like all around people had time off, were learning new skills, decluttering their homes, catching up on box sets or were bored. I just added more spinning plates on a different treadmill.

I felt like I was giving it my all and it was not nearly enough. I felt like I must be doing something wrong and I was failing. My eldest was newly diagnosed with a major lifelong disability and faced the first exam results fiasco. As a clinically extremely vulnerable person, in a house where I am a keyworker, we've had to make difficult decisions to keep her safe.

My son now faces the second exams debacle and I worry about him as he considers his future. My youngest's anxiety became debilitating. Schools have never closed, as such I need to work daily with my bubbles of pupils but haven't seen my parents, other family and friends for over a year. My health hasn't held up either and I've gone through some difficult times.

Struggles are not a competition, many have had it much worse, some less so, but I don't think anyone is really in a good place. As we make our way through the current lockdown, I still feel overwhelmed and like I'm failing but I'm able to reflect on some positives: I have a safe, warm, happy home; a job; food in the cupboard and a family who care.

My children talk to me daily about the big and little things. My husband has stood by my side for nearly 30 years. My eldest never gives up, despite her precarious health, and gained her place at her preferred university. My son gets on with it, is considerate and dependable. My youngest is thriving during home learning, is compassionate and kind. I have friends and work colleagues who support me through my darkest moments. I've had access to medical care that is facilitating diagnosis and recovery.

We've played family boardgames, taken daily walks, had regular zoom calls with our extended family, and I've used about 60kg of flour to make bread and cakes! Overwhelmed, and this too is a phase that will pass."

### Congratulations

A huge thank you to everyone that makes BfN what it is. You all make a difference to families across the UK.

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Thank you to all of our helpers - supporters - tutors - supervisors - staff - friends - fundraisers - donors - funders.

