

Barriers to Breastfeeding for Marginalized Women in the United States: A Review of Political, Workplace, and Societal Impediments

With emerging studies indicating that encouraging breastfeeding also possesses environmental benefits such as producing significantly less greenhouse gas emissions than breast milk substitutes (TLN, 2020), it becomes ever more important to contextualize breastfeeding justice within the greater frame of combating the same inequities of race, class, and gender which also inflect the threats posed by climate change.

A comprehensive literature search was conducted to identify studies on barriers to breastfeeding. The following databases were searched through December 2023: PubMed, National Center for Biotechnology Information, National Library of Medicine, National Bureau for Economic Research, and ScienceDirect. We also pulled extensively specifically from the International Breastfeeding Journal. We also used public-facing articles from health news outlets, the CDC and other public health institutions, and breastfeeding support organizations such as the Lactation Network. Combinations of relevant keywords and subject headings were used related to breastfeeding (e.g. "breastfeeding", "infant feeding", "lactation") and barriers ("maternal leave", "workplace," "community"), specifically referring to the words utilized to describe barriers within the framework set up by Child Development expert Kailey Snyder in 2021. Reference lists of pertinent reviews and included articles were manually checked to identify additional relevant studies. The narrative review focused on studies conducted in the United States or other high-income countries with robust maternal leave policies, to analyze persistent barriers to breastfeeding among marginalized women in the Global North. The literature search as mentioned, was grounded in Snyder et al.'s work outlining systemic barriers to breastfeeding, with special attention given to studies centering Black, Latinx, and working-class women's experiences of ease of access to breastfeeding in the United States (2021). Both quantitative data and qualitative insights are included to provide a holistic understanding. The case selection prioritizes peer-reviewed studies published in the last 15 years, resulting in a sample of over 20 articles.

The Climate, Health, and Energy Equity Lab (CHEEL Lab) combines research, practice, and teaching to advance just approaches to climate mitigation and renewable transitions. The Lab is co-founded and directed by Dr. Carol Ziegler (Vanderbilt School of Nursing), Dr. Zdravka Tzankova (Program in Climate & Environmental Studies), and Dr. James Muchira (Vanderbilt School of Nursing).

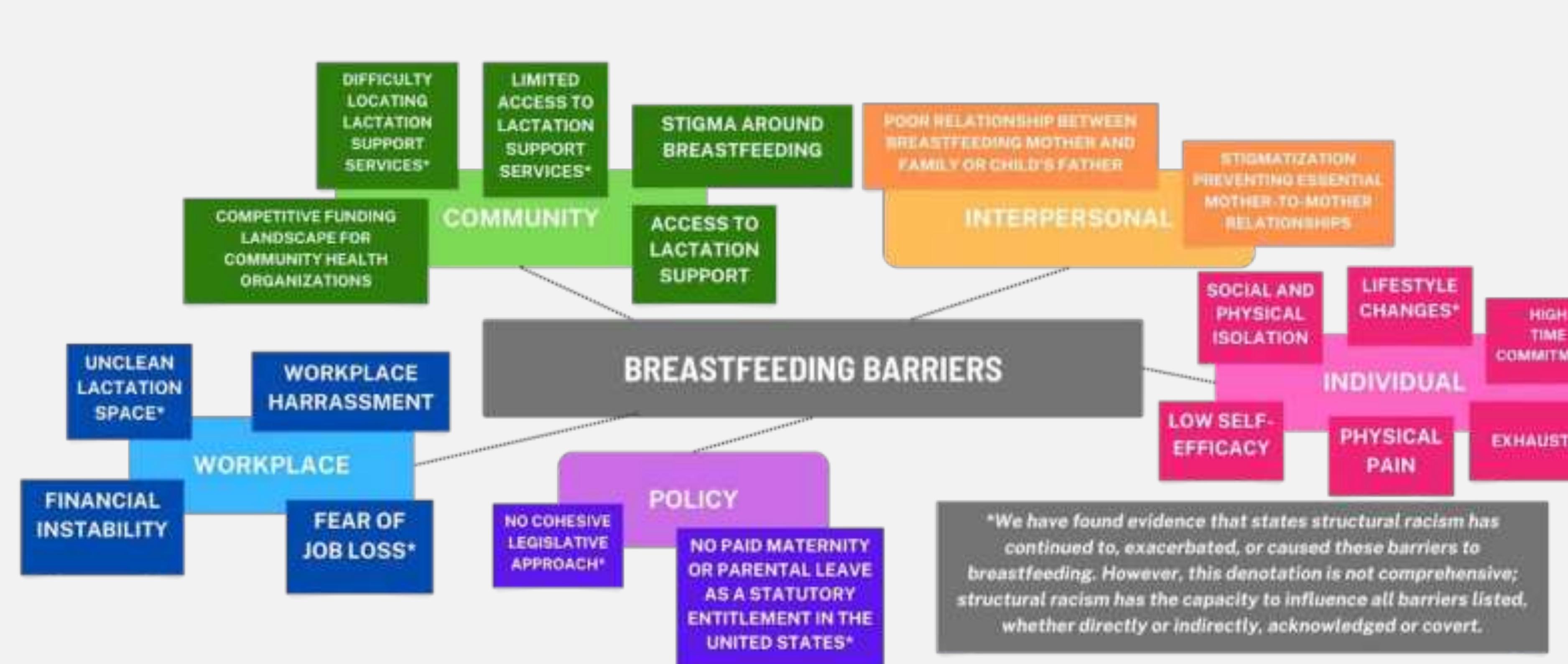


Figure 1: Graphic of breastfeeding barriers for new mothers

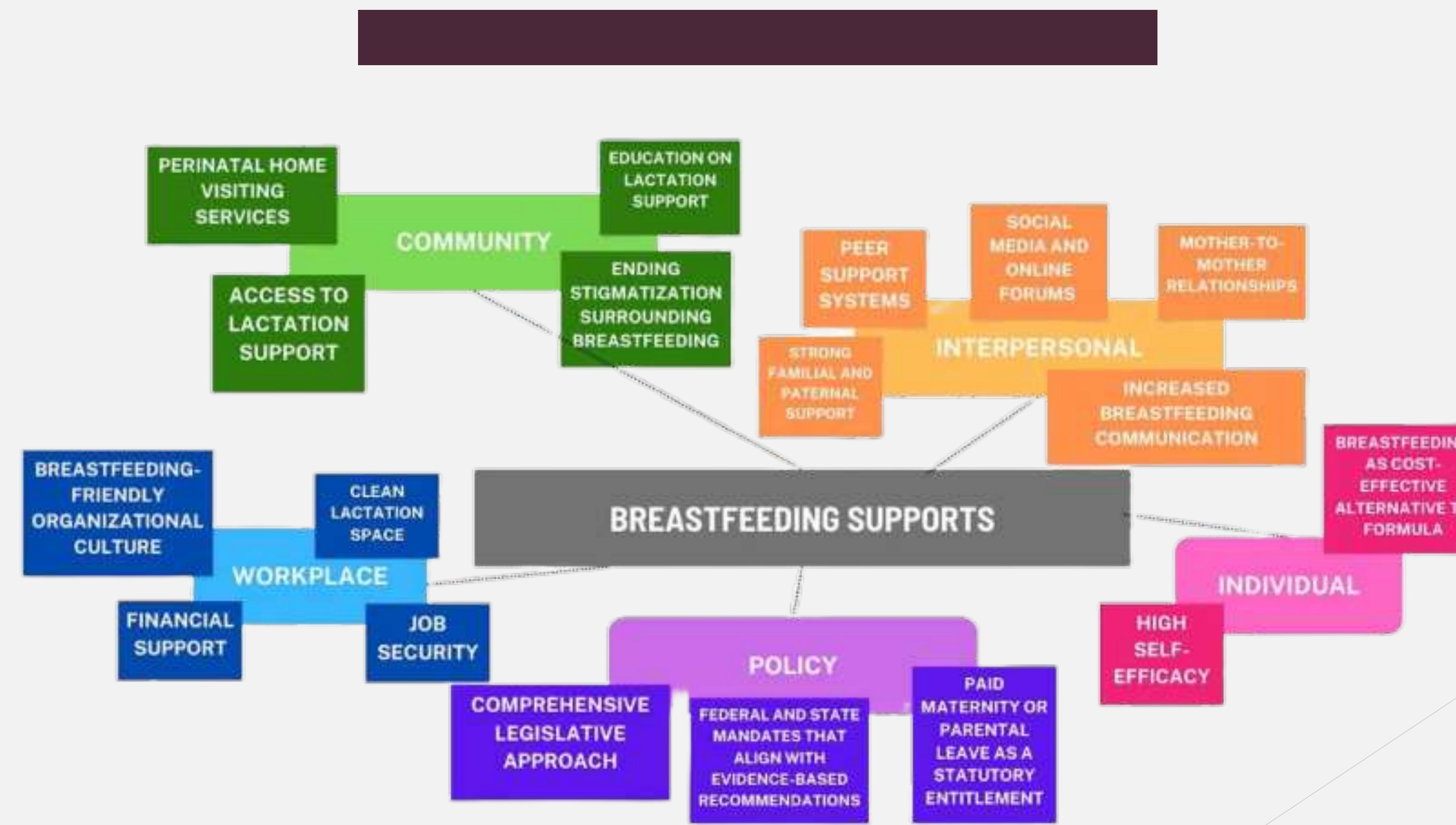


Figure 2: Graphic of breastfeeding supports for new mothers

Future Direction

To address these challenges comprehensively, there is an urgent need for increased federal intervention, evidenced by the success of state-level initiatives like California's Paid Family Leave program, the first program in the U.S. that specifically provides working parents with paid time off for bonding with a newborn. After the program was introduced in July 2004, hospital admissions for infants declined by 3-6% in the state (Pihl & Basso, 2019). To enhance breastfeeding support for communities of color and working mothers, an integrated community-based strategy is crucial. Peer support networks can offer culturally attuned guidance and reassurance. Ensuring continuous care and accommodating workplace policies will help sustain breastfeeding practices for working mothers (Asiodu et al., 2021). Targeted funding for nonprofits within communities of color can amplify tailored educational programs. Moreover, embedding breastfeeding education in Maternal, Child, and Adolescent Health (MCAH) programs and promoting it through national campaigns can shift public perception favorably. Upholding the WHO Code against aggressive marketing of breastmilk substitutes will also protect breastfeeding as a health-promoting norm. These collective efforts can create a supportive ecosystem for breastfeeding mothers (Asiodu et al., 2021).

IK: Oversaw project design and execution;
Designed poster

LF: Designed poster

SR: Designed poster

AZ: Generated data in Figures 1 and 2

References

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