

The Midwife.

THE IMPORTANCE OF BREAST FEEDING.

Dr. Helen Y. Campbell, Chief Medical Officer of the Bradford Health Committee, in her sixth annual report presented to the Chairman and members of that Committee, on the City of Bradford Infants' Department, Morley Street, Bradford, states that—

Bad or indifferent "mothering" or the infant's lack of good "mothering," as met with in the actual practical work of an Infant Welfare Centre, may be due to (a) ignorance of mother-craft, which is very general; (b) physical or mental inefficiency of the mother, and (c) low standard of character and lack of ideals in mother. While these factors to some extent overlap in many cases, our main difficulty undoubtedly lies with the mothers of the last group, whose mothering can be little if at all improved at such a Centre.

In regard to breast feeding, after stating that the breast-fed babies when first seen at the Clinics are under fifty per cent., Dr. Campbell says:—

The tendency of this figure to maintain a fairly uniform level during these six years, I think, clearly shows that it is not materially affected by such factors as greater or lesser economic prosperity, more or less industrial employment of mothers, or the professional or educative efforts of the staff at the Clinics. If so, then some other factor must be responsible for the fact that the majority of infants are, from a very early age, being artificially fed, and the importance of the question is such as to demand the fullest possible enquiry into these factors and the institution of any further measures which such enquiry may indicate.

I would preface all my remarks in this connection by stating that it is my conviction that the entire and satisfactory breast-feeding of an infant, for the first eight or nine months of its life, is the first and most essential condition of its welfare.

The value of breast milk to the infant cannot be reckoned in terms of perfect digestibility and adaptation to nutritional needs alone, though these properties are unquestionable, and no artificial food, however scientifically devised, can be provided which includes them. The *vitalising* effect upon the infant of breast milk is well seen in those few cases in which one is able to obtain it for bottle-fed infants who are seriously ill, mal-nourished and cold and miserable, from whatever cause.

The much higher resistance of healthy breast-fed babies than of bottle-fed, to infection of all kinds, is also a matter of common observation. The evident content and happiness of the baby obtaining its feeds from the breast, even when previously bottle-fed, and the much more stable

equilibrium of its nervous system are in marked and striking contrast to the experience of the bottle-fed baby.

The direct menace to life and health of artificial feeding in the case of the average urban working class infant under present conditions of milk supply and other adverse environmental factors is patent to all who have the responsibility for these infants.

These are, very briefly and therefore quite inadequately stated, some of the facts which emphasise the inestimable loss and misfortune of the bottle-fed baby and the danger to which it is subjected. They are, to judge by the rarity of breast feeding, wholly unrealised by present-day mothers, and it would seem by no means appreciated at their full value by a considerable section of the medical, nursing and midwifery professions. Bottle-feeding has, in consequence, become an established tradition among us in Bradford, and is undertaken as lightly as if it were a substitute for natural feeding—if not, indeed, a *more* satisfactory method of rearing an infant. I am confident that this tradition can only be broken by a universal recognition firstly of the fact that maternity is scientifically incomplete unless it includes the fulfilment of the functions not only of pregnancy and child-birth, but of lactation, in other words, that a mother who does not suckle her baby is strictly only half a mother; and secondly, that the natural nourishment, which is the baby's birthright, is the *first* condition of its welfare, if healthy, and still more if in any way defective.

If this understanding is to become general, I am convinced that our medical practitioners, nurses and midwives, who are all "maternity and child welfare workers," the medical and other workers attached to ante-natal and infant welfare centres, and the health visitors must lead the way by a resolute and united effort, which will include, not only advising the mothers to suckle their babies, but the detailed investigation of each case in which difficulty arises, and the acquisition of a thorough knowledge of the proper management of lactation, of the causes of difficulty and of the methods of increasing an inadequate secretion of breast milk.

The birth rate for the first quarter of 1921 shows a decline of over 61,000 from the corresponding period last year. Excluding the war years, the births are the fewest recorded in the first quarter of any year since 1872.

At the North Sydney Hospital, N.S.W., it is now intended to establish a maternity wing, and for this purpose a street of cottages near by has been purchased, and these buildings are to be adapted.

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