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*Editorial*

One of my favorite movies is *The Girl in the Café*. It is a quirky, and somewhat improbable love story between two very lonely people, Lawrence and Gina (played brilliantly by Bill Nighy and Kelly MacDonald), who meet by chance in a café in London. Lawrence is painfully shy (it's almost hard to watch), but eventually we learn that he works for the Chancellor of the Exchequer (the minister of economics and finance) in Great Britain. His team is preparing to attend the G8 Summit with the other world leaders. On impulse, he invites Gina to accompany him to the G8, and she learns about the Millennium Development Goals for the first time. What she learns becomes the central focus of the rest of the movie.

### The Millennium Development Goals

In 2000, 189 heads of state issued the UN Millennium Declaration, which was a plan for countries and development partners to work together to reduce poverty and hunger, tackle ill-health, gender inequality, lack of education, lack of access to clean water, and environmental degradation. They established eight Millennium Development Goals (MDGs), with targets set for 2015. One of the most important goals is MDG 4: Reduce child mortality.

Fortunately, there has been some progress here, but there is obviously more to do. Annual deaths of children under five years of age in 2009 fell to 8.1 million, down by 35% from 1990. Diarrhea and pneumonia cause the deaths of nearly three million children under five each year worldwide. An estimated 40% of deaths in children under five occur in the first month of life.

According to the World Health Organization, infant and young child feeding is a key area to improve child survival. The first two years of a child's life are particularly important, as optimal nutrition during this period will reduce morbidity and mortality, reduce risk of chronic diseases, and lead to overall better development. **“In fact, optimal breastfeeding and complementary feeding practices are so critical that they can save the lives of 1.5 million children under five every year”** (<http://www.who.int/mediacentre/factsheets/fs342/en/index.html>).

UNICEF also made a similar statement regarding deaths from pneumonia and diarrhea, the two most-common causes of child death worldwide.

We know what needs to be done. Pneumonia and diarrhoea have long been regarded as diseases of poverty and are closely associated with factors, such as poor home environments, undernutrition, and lack of access to essential services. **Deaths due to these diseases are largely preventable through optimal breastfeeding practices and adequate nutrition**, vaccinations, hand washing with soap, safe drinking water and basic sanitation, among other measures ([http://www.unicef.org/media/files/UNICEF\\_P\\_D\\_complete\\_0604.pdf](http://www.unicef.org/media/files/UNICEF_P_D_complete_0604.pdf)).

### Does MDG 4 Apply to Mothers in the U.S.?

Yes, you might say, breastfeeding is important in the Third World, but not really critical in the U.S., where “safe” alternatives abound. Of course, I've heard all this before. But consider this. The U.S. now ranks 41st in infant mortality (<http://usatoday30.usatoday.com/news/opinion/editorials/story/2011-10-03/infant-mortality-ranking-US-41st/50647658/1>). **In other words, our babies are dying too.** What is particularly concerning is the large disparity by ethnic group.

According to the Centers for Disease Control and Prevention, African Americans have 2.3 times the infant mortality rate as non-Hispanic whites. They are three times as likely to die as infants due to complications related to low birthweight as compared to non-Hispanic white infants (Table 1).

**Table 1. Infant mortality rate per 1,000 live births, 2008**

Non-Hispanic Black	Non-Hispanic White	All Races	Non-Hispanic Black / Non-Hispanic White Ratio
13.1	5.6	6.7	2.3

Source: CDC 2012. Infant Mortality Statistics from the 2008 Period Linked Birth/Infant Death Data Set. [http://www.cdc.gov/nchs/data/nvsr/nvsr60/nvsr60\\_05.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr60/nvsr60_05.pdf)

A key factor in these statistics is breastfeeding. In a national CDC survey, 54.4% of African American mothers, 74.3% white mothers, and 80.4% of Hispanic mothers attempted to breastfeed. Breastfeeding rates were the lowest for African American mothers in 13

states, where they had breastfeeding initiation rates at least 20% lower than white mothers. In six states (Alabama, Arkansas, Kentucky, Louisiana, Mississippi, and South Carolina), the prevalence of initiating breastfeeding among African-American women was less than 45% (<http://www.webmd.com/parenting/babynews/20100325racial-gap-in-us-breastfeeding-rates>).

Now for some good news. As Tanya Lieberman shares, the answer to this problem is right in front of our faces.

Evidence is accumulating that not only does following the Ten Steps improve breastfeeding success rates in general, it actually eliminates or significantly reduces race-based disparities.

Consider the following examples:

One [study](#) of Baby Friendly hospitals in the U.S. found that “breastfeeding rates were not associated with number of births per institution or with the proportion of black or low-income patients.” In other words, whether you had a large or small population of women who were African American, breastfeeding outcomes were the same. Disparity? Poof!

Here’s another study from Boston Medical Center, which became a Baby-Friendly Hospital in 1999. The [rate of breastfeeding](#) among African American women went from 34% in 1995 to 74% in 1999. Yes, that’s super impressive on its face. But consider this: the overall breastfeeding rate went from 58% to 78%. So that means African American moms were within 4 percentage points of the overall hospital rate. A [study found](#) that, “Among a predominantly low-income and black population giving birth at a U.S. Baby-Friendly hospital, breastfeeding rates at 6 months were comparable to the overall U.S. population.”

Disparity? Gone, baby, gone (<http://www.bestforbabes.org/racial-breastfeeding-disparity-disappears-at-baby-friendly-hospitals>).

## One Every 21 Seconds

In the climactic scene in *Girl in the Café*, Gina makes an impassioned speech to the assembled world leaders (shortly before she is removed from the gathering), pleading with them to do something to help. She points out that one child dies of extreme poverty every three seconds. She snaps her fingers and says, “There’s one...and another...and another.”

We can make a similar statement. If we consider the WHO estimate of 1.5 million infant and child deaths annually, **we can say that one child dies every 21 seconds due to lack of breastfeeding.** “There’s one...and another...and another.” In the time it takes me to complete a 60-minute lecture, 171 children have died. With the U.S. ranking 41st in the world in infant mortality, this problem is not just “out there.” It is at our door as well.

We have made wonderful strides in 2012 in improving breastfeeding rates. It’s been an excellent year. Not surprisingly, there has also been a backlash. When people claim that breastfeeding advocacy is a matter of “upper-class white women” interfering needlessly in the lives of patients and trying to deny them “choice,” I hope you will see that they have truly missed the point. We need to continue to hold the line and remember what we are really fighting for. I long for the day when we can no longer say “there’s one...and another...and another.”

Wishing you a happy and healthy 2013. Thanks for fighting the good fight.

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