Breastfeeding Is Hard. Can Using an Infant Carrier with Your Baby Make It Easier?

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INTRODUCTION

The American Academy of Pediatrics recommends that infants be fed only breast milk for the first six months of life. However, in the United States, only 26% of parents feed their six-month-old infants only breast milk – also known as exclusive breastfeeding – and 58% of parents feed them any breast milk. Exploring ways to encourage breastfeeding could help more parents achieve medical recommendations.

It is well established that skin-to-skin contact between parents and infants immediately after birth increases the chances that the parent will breastfeed their child. But much less is known about whether caregiver-infant physical contact through carrying – without direct skin-to-skin contact – increases feeding with breast milk.

Carrying infants in close contact throughout the day is a common part of childrearing in many cultures around the world. For example, over 90% of mothers in Guatemala reported carrying their babies. Yet in the US, baby carrying has been largely replaced by car seat-style carriers and strollers.

Previous studies have shown that birth parents who spend more time in physical contact with their infants are more likely to detect early hunger cues and breastfeed more frequently than birth parents who spend less time in physical contact. Therefore, interventions that increase day-to-day parent-infant physical contact through carrying may increase breastfeeding.

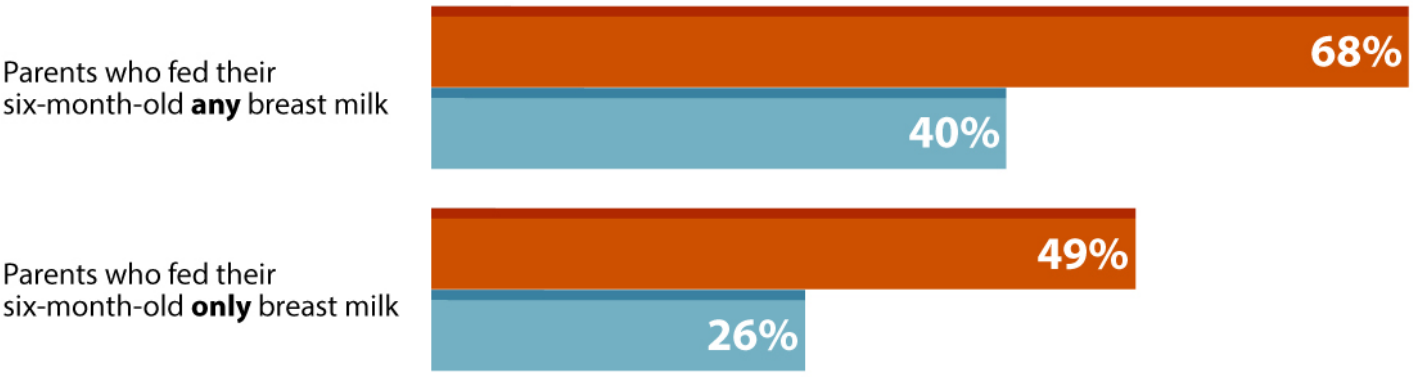
This brief reports on a recent study in which the authors recruited 100 pregnant parents from a home visiting program for families from low income ZIP codes in the US. The parents were then randomly assigned to receive a soft-structured ergonomic infant carrier to begin using at birth (the intervention group) or put on a waitlist to receive the carrier when their child was six months old (the control group). The aim was to test whether the parents who received an infant carrier before birth would be more likely to breastfeed their child during the first six months of life, compared to the group of parents that were put on the waitlist.

KEY FINDINGS

As shown in the figure on the next page, compared to parents who did not receive an infant carrier until their child was six months old, **parents who received an infant carrier before birth were:**

- **more likely to feed their six-month-old *any* breast milk** – either through nursing or feeding expressed breast milk; *and*
- **more likely to feed their six-month-old *only* breast milk**. The difference between the groups that exclusively fed with breast milk was not statistically significant, so this result is not definitive but rather suggestive of a trend.

Larger percentages of parents who received an infant carrier fed their six-month-old infant breast milk, either partially or exclusively, compared to parents who did not receive an infant carrier



Note: This figure shows that parents who received an infant carrier before the birth of their child (the intervention group) were more likely to breastfeed their infant when it was six months old compared to parents who did not receive an infant carrier until the baby was six months old (the control group). Note: the difference between the parents who fed their infant only breastmilk is suggestive but not definitive, because the difference was not statistically significant.

POLICY IMPLICATIONS

Providing parents with infant carriers is an efficient and economical way to increase breastfeeding in the US. Perinatal healthcare providers, pediatricians, hospitals, insurance companies, and healthcare systems should all encourage the use of infant carriers. For example, programs could be developed to subsidize the costs of infant carriers.

More broadly, this intervention shows that policies designed to improve lactation must take into account physical proximity between parents and infants. Current policies that aim to be inclusive of lactating parents often neglect the importance of parent-infant physical contact. For example, workplace accommodations provide time and space for breastfeeding parents to express milk at work, but more helpful policies would be more paid parental leave and onsite childcare to keep parent and baby as close as possible throughout the day.

Breastfeeding is a complex process that is more than just milk production – it is a physiological and psychological interaction between parent and baby. Physical contact is a key feature of human childrearing around the globe; designing policies and workspaces that allow parents and babies to stay close to each other should be the norm.

REFERENCE

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