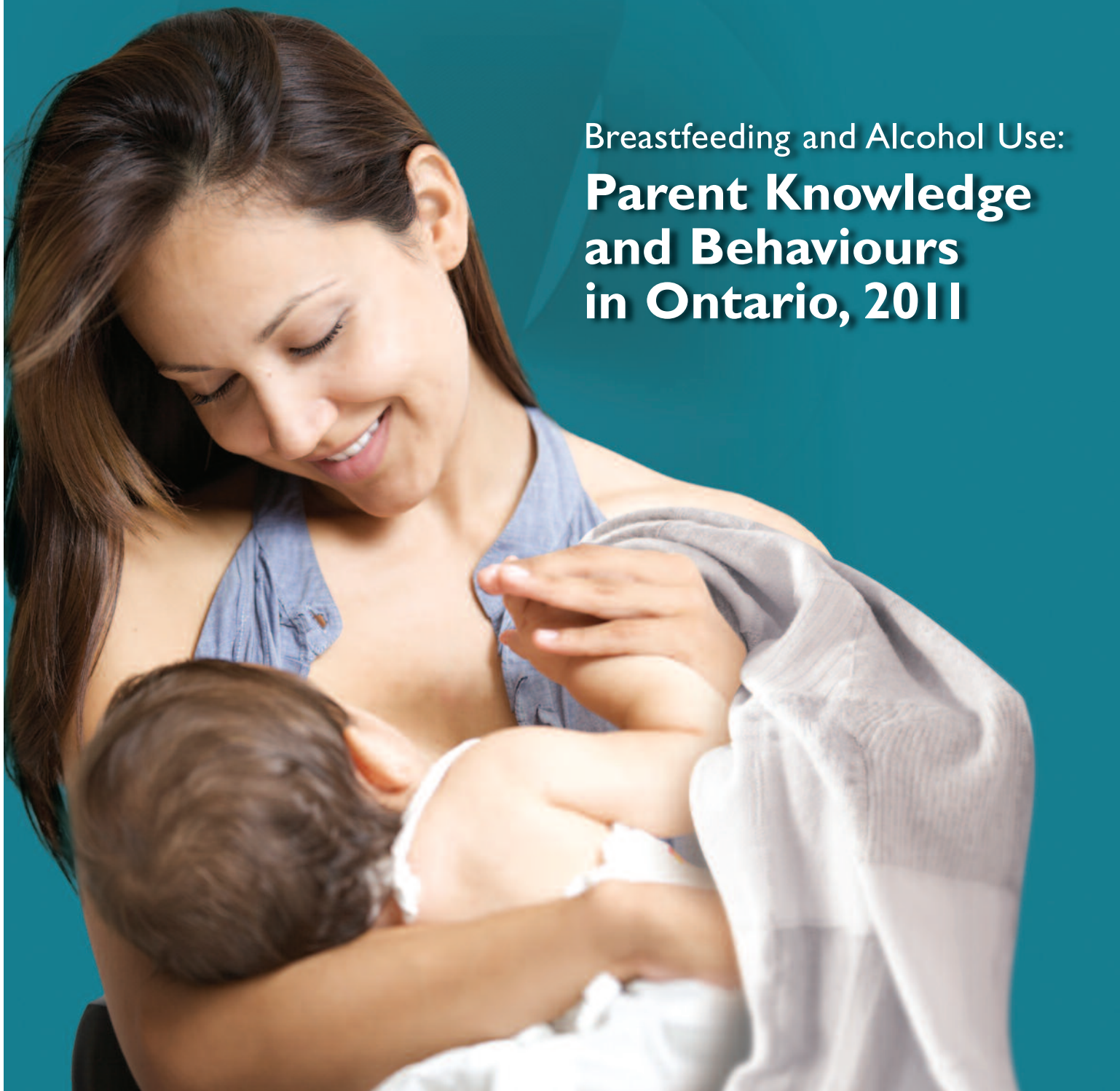




Breastfeeding and Alcohol Use:
**Parent Knowledge
and Behaviours
in Ontario, 2011**



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Section I: Introduction

I.1 PURPOSE

This report describes data from the Best Start Resource Centre 2011 Ontario parent survey to examine awareness and behaviours regarding breastfeeding and alcohol use. The objectives of this survey were to:

- Examine parents' behaviour in terms of alcohol use while breastfeeding.
- Explore awareness about the impact of alcohol use during breastfeeding.

Survey results will help service providers think about effective messages and strategies regarding alcohol use and breastfeeding. This report serves as a baseline for future surveys that examine Ontario trends in parental behaviours, perceptions and attitudes related to breastfeeding and alcohol use.

I.2 BREASTFEEDING AND ALCOHOL USE

Exclusive and sustained breastfeeding, and the use of human milk when breastfeeding is not possible, are the normal ways to nurture all children from birth to two years of age and beyond (Breastfeeding Committee for Canada, 2002). Breastfeeding and breastmilk provide benefits beyond nutrition that are unparalleled by infant formula.

Almost three quarters (73.9%) of the women in Canada drank alcohol in the last year (Health Canada, 2010). While most Canadian women (68.4%) were light



drinkers, 5.4% were heavy drinkers. Most Canadian women (87.5%) breastfeed their babies (Statistics Canada, 2009).

Studies in Australia and Finland showed low levels of awareness about alcohol use and lactation (Giglia & Binns, 2007; Laantera, Pietila & Polkki, 2010). An Australian study showed that while the rate of alcohol use decreased in pregnancy (29%), it increased in breastfeeding mothers (43%) (Maloney et al., 2011). Australian studies show that alcohol use while lactating is more common in women who are older (Giglia and Binns, 2007; Maloney et al., 2011).

Historically alcohol use was promoted as a way to support milk production and breastfeeding. Breastfeeding women were encouraged by medical establishments such as hospitals to drink wine or beer to help establish and maintain breastfeeding. Alcohol was thought to increase milk yield, facilitate milk release and relax the mother and infant. The benefits of alcohol use on breastfeeding are not supported by research and there is no evidence of benefits to the mother or child (Bowen & Tumback, 2010; Giglia & Binns, 2006; Koren, 2002).

Alcohol consumed by the mother passes into her bloodstream and her breastmilk. Alcohol levels in the breastmilk are similar to the blood alcohol levels of the mother at the time of feeding (Mennella, 2001). Alcohol leaves the body as it is metabolized. Alcohol is not stored in the breastmilk. Alcohol enters breastmilk at a similar rate as it enters the bloodstream. It also clears breastmilk at a similar rate. Alcohol is not stored in the breastmilk and therefore is not passed to the infant at a later feeding. The practice of 'pumping and dumping' breastmilk does not reduce the alcohol content of the breastmilk (Mennella, 2001). It does assist in maintaining milk production while waiting to resume breastfeeding.

The benefits of breastfeeding outweigh the risks of an occasional drink of alcohol (World Health Organization, 2001b). While occasional alcohol use while lactating has not been shown to harm to infants, the possibility of negative consequences cannot be ruled out (Koren, 2002).

Excessive or daily alcohol use is not recommended for any mother, regardless of infant feeding choices, due to issues of impairment of care and the risk of Fetal Alcohol Spectrum Disorder for a subsequent pregnancy. Excessive use of alcohol can affect milk flow in lactating mothers as well as impact the health and development of infants. Consequences to the mother include reduced milk production (Burgos, 2004; Mennella, 2001). Potential consequences to the infant include delayed motor development (Burgos, Bion & Campos, 2004; Little et al., 1989) as well as disruptions to sleep patterns (Mennella & Garcia-Gomez, 2001).

Despite the evidence of potential risks, women receive mixed advice from family, friends and health care providers regarding alcohol use and breastfeeding. One study showed that 25% of breastfeeding women were informed by their health care provider that alcohol is beneficial during breastfeeding, improving the quality or quantity of milk, helping the letdown reflect, or promoting infant sleep (Mennella, 2002). In the same study, half of the breastfeeding women received no advice at all about breastfeeding and alcohol use, and the remainder were advised to abstain from alcohol use.

Women can protect their infants from the adverse effects of alcohol by scheduling their occasional alcohol consumption around breastfeeding (Koren, 2002). Ideally it is best to avoid breastfeeding for about 2 hours after drinking one alcoholic beverage to allow the alcohol to clear from the breastmilk, depending on the mother's weight and metabolic rate (Best Start Resource Centre, 2005; Mennella, 2001). Women can also choose to express milk prior to alcohol use for use when they may want an occasional alcoholic drink. If women choose to have more than one drink they will need to wait longer before resuming breastfeeding and meanwhile 'pump and dump' to maintain their milk production.

For service provider and client tools from Best Start Resource Centre to promote breastfeeding, visit: www.beststart.org/resources/breastfeeding/index.html



1.3 METHODOLOGY

In February 2011 Best Start Resource Centre implemented an on-line survey across Ontario pertaining to breastfeeding and alcohol use. Leger Marketing was contracted to conduct the survey, provide data analysis, and identify findings of significance. The survey included 501 Ontario residents who were parents of children aged 0-6 years and/or were pregnant at the time of the survey. A probability sample of the same size would yield a margin of error of $\pm 4.4\%$, 19 times out of 20.

The survey was completed using Leger Marketing's on-line panel LegerWeb, which has approximately 36,000 members in Canada, with between 10,000 to 20,000 new members added each month, and a retention rate of approximately 90%. Panel members are randomly selected to receive email invitations to individual surveys. Stringent strategies are in place to ensure high data quality standards and privacy protection for respondents.



Survey sample demographics include:

Base: Parents of children ages 0-6 years (n=501)	Proportion of Respondents
Gender	
Female	60%
Male	40%
Parent of child between ages of 0-6 years old	
Yes	94%
No	6%
Pregnant (Self or Partner)	
Yes	19%
No	81%
Age	
18-24 years	9%
25-34 years	44%
35-44 years	46%
45-54 years	1%
Education	
High school or less	11%
College pre-university, technical training, certificate	32%
University	57%
Marital Status	
Single	9%
Married/living together	88%
Separated/divorced	2%
Area of residence	
Urban	79%
Rural	20%
Annual household income	
Under \$60,000	30%
\$60,000 and over	71%

Table 1.3: Summary of Demographics of Ontario 2011 Respondents

LIMITATIONS

Limitations of this report include:

- Given the survey size, it is not possible to identify statistically valid findings for certain smaller subsets of respondents.
- The survey was conducted on-line, which may result in an under-representation of lower income, lower educated respondents, and/or respondents with less computer skills.
- The survey was completed in English, which may result in an under-representation of respondents with a first language other than English.

Leger Marketing has found that on-line surveys show similar results to telephone surveys. However, as telephone surveys only include land lines and not mobile phone numbers there is also a demographic bias in phone surveys.



PLEASE NOTE:

Data categories in this report may add up to slightly over or under 100% as a result of rounding, and/or because response categories for “don’t know” or “prefer not to answer” were not included in the data table.

Table titles indicate the population(s) represented in the data. The discussion below each table provides relevant information about sub-populations in the survey data.

In this report the term “significant” refers to findings of statistical significance with a minimum 95% confidence interval.



Section 2: Survey Highlights

This section presents a summary of survey highlights, while Sections 3 and 4 explore survey findings in more detail. Implications for program planning are discussed in Section 5.

2.1 INFANT FEEDING

Most women breastfed their children when they were babies (84%).

2.2 ALCOHOL USE

Most women drank little or no alcohol when not pregnant or breastfeeding:

- 13% did not drink alcohol
- 47% had less than 1 drinks in an average week
- 24% had 1 to 3 drinks per week on average
- 12% had 4 to 10 drinks a week
- 4% had more than 10 drinks per week

Most women drank little or no alcohol when breastfeeding:

- 64% did not drink alcohol while breastfeeding
- 27% drank less than 1 drink a week.
- 5% drank 1 to 3 drinks per week
- 4% drank 4 to 6 drinks per week

Most women stopped drinking or reduced the amount that they drank while breastfeeding:

- 57% stopped drinking altogether
- 26% reduced the amount of alcohol they drank
- 18% did not change their drinking habits



2.3 DECISIONS ABOUT ALCOHOL USE AND BREASTFEEDING

Women were split on the impact of alcohol use on their decision to feed their baby:

- 48% felt that drinking alcohol did not impact their decision about how to feed their baby
- 39% felt that alcohol use did impact their decision on how to feed their baby

There was partner support for choices around alcohol use and breastfeeding:

- Most women indicated that their partner supported their decision about alcohol and breastfeeding (69%)
- Most men indicated that they supported their partner's decision regarding alcohol and breastfeeding (65%)

In terms of choices around drinking alcohol and breastfeeding:

- 33% would not drink any alcohol if breastfeeding
- 26% would wait 2 to 3 hours after having an alcoholic drink before breastfeeding
- 21% would not breastfeed at all if they were drinking alcohol
- 13% would 'pump and dump' their breastmilk prior to breastfeeding if they were drinking alcohol
- 6% would continue to breastfeed if they were drinking alcohol



2.4 IMPACT OF ALCOHOL USE WHILE BREASTFEEDING

Most respondents believed that there are negative consequences to alcohol use while breastfeeding:

- 75% believed that alcohol goes through your breastmilk to the baby
- 73% believed that it is not safe to drink alcohol and breastfeed
- 68% believed that any amount of alcohol can have a negative effect on the baby's development
- 55% believed that any amount of alcohol can have a negative effect on breastmilk supply
- 64% believed that alcohol does not improve your milk supply

Almost one half believed there are things breastfeeding women could do if they want to drink alcohol:

- 43% felt that that it is safe to have one drink and breastfeed 2 to 3 hours later

Most respondents felt that even low levels of use of alcohol while breastfeeding are not advisable:

- 64% felt that breastfeeding women should not drink in moderation
- 55% felt that breastfeeding women should not drink alcohol at special events
- 71% felt that breastfeeding women should not drink to relax
- 77% felt that breastfeeding women should not drink to help the baby relax

2.5 HEALTH CARE PROVIDER

There were mixed results concerning health care providers talking to respondents about breastfeeding and alcohol use:

- 50% said their health care provider did speak with them on this topic
- 33% said their health care provider did not speak with them on this topic
- 17% could not recall



Section 3: Survey Results

3.1 INFANT FEEDING

Survey Question: *Did you breastfeed your child/children when they were babies?*

Women's Infant Feeding Choices	Percent Response
No, I did not breastfeed by child/children when they were babies.	15%
Yes, I did breastfeed my child/children when they were babies.	84%

Table 3.1a: Infant Feeding Choices of Female Respondents, Ontario 2011 (responses from women with children, n = 290)

Discussion: The majority of women in this study breastfed their children when they were babies (84%), while a minority did not breastfeed their children (15%).

3.2 ALCOHOL USE

Survey Question: *How much alcohol do you drink when you are not pregnant or breastfeeding?*

Level of Alcohol Use	Percent Response
Never drink alcohol	13%
No drinks during an average week	20%
Less than 1 drink in an average week	27%
1 to 3 drinks a week	24%
4 to 6 drinks a week	8%
7 to 10 drinks a week	4%
11 to 14 drinks a week	2%
15 to 17 drinks a week	1%
18 or more drinks a week	1%

Table 3.2a: Level of Alcohol Use of Female Respondents when not Pregnant or Breastfeeding, Ontario 2011 (responses from women, n = 300)

Discussion: Most women drank little or no alcohol when not pregnant or breastfeeding. Overall, 60% of women indicated that they had less than 1 drink per week when not pregnant or breastfeeding (13% indicated that they do not drink and 47% indicated that they had less than 1 drinks in an average week). Roughly one-quarter (24%) said they had 1 to 3 drinks per week, on average, while a smaller proportion had 4 to 10 drinks a week (12%), or more than 10 drinks per week (4%).

Lower incomes were associated with lower levels of alcohol use. Women earning less than \$40,000 were more likely than those earning more than \$40,000 to have less than one drink during an average week while not pregnant or breastfeeding (49% vs. 24%).



Survey Question: *How much alcohol did you drink while you were breastfeeding?*

Level of Alcohol Use	Percent Response
No drinks during an average week	64%
Less than 1 drink in an average week	27%
1 to 3 drinks a week	5%
4 to 6 drinks a week	4%
7 or more drinks a week	0%

Table 3.2b: Level of Alcohol Use of Female Respondents when Breastfeeding, Ontario 2011 (responses from women who indicated that they drank alcohol when not pregnant or breastfeeding, and who breastfed n = 215)

Discussion: Most women chose to drink little or no alcohol when breastfeeding. Two thirds of women (those who indicated that they drank alcohol when not pregnant or breastfeeding, and who breastfed) indicated that they did not drink alcohol while breastfeeding (64%) and an additional 27% indicated that they drank less than 1 drink a week in an average week. Five per cent indicated that they averaged 1 to 3 drinks per week, and 4% averaged 4 to 6 drinks per week.

Survey Question: *Did you change the amount of alcohol you drank due to breastfeeding?*

Changes in Alcohol Use	Percent Response
I stopped drinking	57%
I cut back on the amount of alcohol that I drank	26%
No changes in alcohol use	18%

Table 3.2c: Female Respondents Changes in Alcohol Use due to Breastfeeding, Ontario 2011 (responses from women who indicated that they drank alcohol when not pregnant or breastfeeding, and who breastfed, n = 215)

Discussion: Most women stopped drinking or reduced the amount that they drank while breastfeeding. Over half of women (those who drank alcohol when not pregnant or breastfeeding, and who breastfed) stopped drinking altogether while they were breastfeeding (57%). About a quarter (26%) reduced the amount of alcohol they drank, while 18% did not change their drinking habits.

Women with lower incomes were more likely to stop drinking while breastfeeding. Those earning less than \$40,000 were more likely to indicate that they stopped drinking while breastfeeding compared to those earning over \$80,000 (74% vs. 38%).

3.3 DECISIONS ABOUT ALCOHOL USE AND BREASTFEEDING

Survey Question: *To what extent do you agree that drinking alcohol was part of your decision about how to feed your baby?*

Alcohol was Part of Decision on Infant Feeding	Percent Response
Strongly Agree	26%
Somewhat agree	14%
Somewhat disagree	8%
Strongly disagree	40%

Table 3.3a: Influence of Alcohol on Infant Feeding Choices, Ontario 2011
(responses from women, n = 300)

Discussion: Women were split on the impact of alcohol use on their decision on how to feed their baby. Almost one-half of women (48%) felt that drinking alcohol did not impact their decision about how to feed their baby, while a smaller proportion (39%) felt that alcohol use did impact their decision on how to feed their baby.

Survey Question: *To what extent do you agree with the following statement: My partner supports the decision I have made regarding drinking alcohol and breastfeeding our baby?*

Partner Supports Decision around Alcohol and Breastfeeding	Percent Response
Strongly Agree	55%
Somewhat agree	14%
Somewhat disagree	4%
Strongly disagree	16%

Table 3.3b: Partner Support for Female Respondent's Decision around Alcohol Use and Breastfeeding, Ontario 2011 (responses from women, n = 300)

Discussion: Most women indicated that their partner supported their decision about alcohol and breastfeeding (69%). A minority (20%) indicated that their partner did not support their decision around alcohol and breastfeeding.



Survey Question: *To what extent do you agree with the following statement: I agree with my partner’s decision regarding drinking alcohol and breastfeeding our baby?*

Partner Supports Decision around Alcohol and Breastfeeding	Percent Response
Strongly Agree	46%
Somewhat agree	19%
Somewhat disagree	9%
Strongly disagree	16%

Table 3.3c: Partner’s Support for Wife’s/Partner’s Decision around Alcohol Use and Breastfeeding, Ontario 2011 (responses from men, n = 201)

Discussion: Most men indicated that they supported their partner’s decision regarding alcohol and breastfeeding (65%). One quarter of men indicated that they did not support their partner’s decision regarding alcohol and breastfeeding (25%).

Survey Question: *If I wanted or needed to drink alcohol after I had my baby I would... ?*

If Wanted/Needed to Drink Alcohol	Percent Response
Not drink at all	33%
Drink only I drink and wait 2-3 hours before feeding my baby	26%
Not breastfeed at all	21%
‘Pump and dump’ my milk before breastfeeding	13%
Breastfeed even if I had a drink	6%

Table 3.3d: If Wanted/Needed to Drink Alcohol, Ontario 2011 (responses from women, n = 300)

Discussion: About a third of women indicated that they would not drink any alcohol (33%) if breastfeeding. Almost half (47%) indicated that they would change their breastfeeding patterns if they drank alcohol, with 26% indicating that they would wait 2 to 3 hours after having an alcoholic drink before breastfeeding, and 21% indicating that they would not breastfeed at all if they were drinking alcohol. Thirteen percent indicated that they would ‘pump and dump’ their breastmilk prior to breastfeeding. A small proportion (6%) indicated that they would continue to breastfeed if they had an alcoholic drink.

3.4 IMPACT OF ALCOHOL USE WHILE BREASTFEEDING

Survey Question: *To what extent do you agree with each of the following statements?*

Statement	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Unsure
Any alcohol you drink will go through your breastmilk to your baby	42%	33%	14%	5%	7%
It is perfectly safe to drink alcohol and breastfeed your baby	7%	14%	22%	51%	6%
Any amount of alcohol can have a negative effect on your baby's development	42%	26%	19%	9%	5%
Any amount of alcohol can have a negative effect on your milk supply	32%	22%	23%	9%	15%
Alcohol can improve your milk supply	5%	16%	19%	45%	16%
You can safely drink one drink and feed your baby 2-3 hours later	17%	26%	16%	28%	14%
You have to pump and dump your milk if you drink alcohol and breastfeed	21%	24%	14%	16%	25%

Table 3.4a: Impact of Alcohol During Breastfeeding, Ontario 2011 (responses from all respondents, n = 501)

Discussion: Most respondents (male and female) believed that there are negative consequences to alcohol use while breastfeeding. Three quarters believed that alcohol goes through your breastmilk to your baby (75%) and that it is not safe to drink alcohol and breastfeed (73%). Over half believed that any amount of alcohol can have a negative effect on the baby's development (68%). Over half believed that alcohol use has a negative impact and on breastmilk supply (55%) and that alcohol does not improve your milk supply (64%).

Less than half of respondents believed there are things breastfeeding women can do if they wanted to drink alcohol. Almost one half of respondents felt that that it is safe to have one drink and breastfeed two to three hours later (43%).



Survey Question: *To what extent do you agree with each of the following statements?*

Statement	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Unsure
Women can drink alcohol when breastfeeding at special occasions	10%	27%	19%	36%	8%
Women can drink alcohol anytime while they are breastfeeding as long as it is in moderation	9%	20%	21%	43%	7%
Women can drink alcohol when breastfeeding to relax them	6%	17%	20%	51%	6%
Drinking a little alcohol when breastfeeding can help the baby relax	3%	8%	20%	57%	12%

Table 3.4b: Impact of Alcohol During Breastfeeding, Ontario 2011 (responses from all respondents, n = 501)

Discussion: Most respondents (men and women) felt that even low levels of use of alcohol while breastfeeding are not advisable. Two thirds of respondents (64%) felt that breastfeeding women should not drink in moderation, should not drink alcohol at special events (55%), should not drink to relax (71%), and should not drink to help the baby relax (77%).

Those with a university education were more likely to believe that breastfeeding women can drink alcohol at special occasions (44% vs. 28%). Individuals who were single were more likely to believe that breastfeeding women can drink in moderation (51% vs. 26%). Women were more likely than men to feel that breastfeeding women should not drink alcohol to relax the baby (82% vs. 69%). Women pregnant with their first baby were more likely than those who already had children to think that breastfeeding women should not drink alcohol to relax (93% vs. 70%). Those who are married were more likely to believe that breastfeeding women should not drink alcohol to relax themselves (73% vs. 50%) or the baby (80% vs. 49%).

3.5 HEALTH CARE PROVIDER

Survey Question: *Did your health care provider talk to you about drinking alcohol while breastfeeding your baby?*

Health Care Provider Spoke about Alcohol and Breastfeeding	Percent Response
Yes	50%
No	33%
Can't recall	17%

Table 3.5a: Health Care Provider Spoke about Alcohol and Breastfeeding, Ontario 2011 (responses from all participants, n = 501)

Discussion: One-half (50%) of all respondents (male and female) said a health care provider spoke with them about breastfeeding and alcohol use, while 33% said their health care provider did not talk with them about breastfeeding and alcohol use.





Section 4: Discussion and Recommendations

This section discusses the implications of the survey results for Ontario parents and service providers, and provides recommendations for future programming and resource development. Local communities are encouraged to consider the provincial findings presented in this report as well as information specific to their community.

4.1 POPULATIONS OF INTEREST

Awareness strategies are most effective when they are designed for a specific population of interest (The Health Communication Unit, 1999). Carefully defining the population of interest will help in determining key messages, specific strategies, desired outcomes, etc. In general, this survey showed that:

- Women with higher incomes had higher levels of alcohol use
- Women with higher incomes were less likely to stop drinking while breastfeeding

While all women require information about breastfeeding and alcohol use, women with higher incomes may be considered a priority population.

Health care providers should also be provided with information, guidance and tools to address this topic.

4.2 KEY MESSAGES

Breastfeeding is the normal and optimal way to feed infants. Infants should receive only breastmilk for the first 6 months of life, with continued breastfeeding for up to 2 years and beyond (World Health Organization, 2001a). Key messages around breastfeeding should first and foremost encourage women to breastfeed and link them to needed information and support.

Key messages about alcohol use and breastfeeding should address myths and areas of confusion about alcohol use while breastfeeding. Common myths include:

- Maternal alcohol does not reach the baby
- Maternal alcohol use promotes breastmilk production
- Maternal alcohol use helps infant's sleep
- Maternal alcohol use does not harm the baby

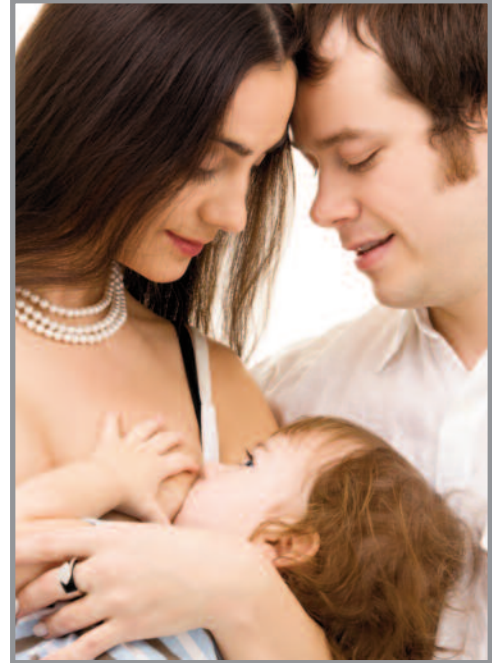
This survey shows that common areas of confusion include:

- The negative effect of alcohol use on the milk production
- The potential negative impact of alcohol use on child development
- The safety of drinking one drink and feeding your baby 2-3 hours later
- The inefficacy of the 'pump and dump' approach
- The relative safety of different levels of alcohol use while breastfeeding

The benefits of breastfeeding outweigh the occasional single alcoholic drink.

There are concerns that discussion about potential risks of alcohol consumption while lactating, or about limiting alcohol use while lactating, may discourage breastfeeding. Caution should be used in the tone and emphasis of messaging, in order to not discourage initiation and duration of breastfeeding. Mothers should be provided with information and support to breastfeed. They also have a right to informed choice – and should be provided with information about alcohol use and lactation. Women who were advised not to drink alcohol while breastfeeding, were shown to drink less than women who did not receive this advice (Mennella, 1997). Health care providers can discuss a range of options with women including:

- Abstinence while lactating
- Waiting for 2 hours per standard alcoholic drink prior to breastfeeding
- Pumping breastmilk prior to breastfeeding, for use when consuming alcohol



4.3 RECOMMENDATIONS

This section summarizes current recommendations regarding alcohol use and breastfeeding from a few key organizations, and provides additional recommendations to service providers in Ontario as a result of this survey.

The World Health Organization recommends that women restrict or abstain from alcohol use while lactating (World Health Organization, 2001b). The Canadian Paediatric Society (2008) also recommends limiting use of alcohol while breastfeeding. These organizations do not provide specific recommendations concerning safe limits. Motherisk (2002) and the College of Family Physicians of Canada suggest that women can drink alcohol while breastfeeding if they pump and store breastmilk prior to alcohol use and/or wait until alcohol has cleared from their system prior to breastfeeding.

Service provider strategies related to alcohol use and lactation should address common myths and areas of confusion (see Section 4.2).

In addition it is recommended that health care providers:

- Talk to all pregnant women and women planning a pregnancy about the benefits of breastfeeding
- Encourage exclusive breastfeeding for 6 months with continued breastfeeding for up to 2 years and beyond
- Provide information and supports to all pregnant and lactating women related to breastfeeding
- Provide information about the potential risks of alcohol use while breastfeeding and about how to reduce the risks

More specifically, Bowen and Tumback (2010) suggest informing women that:

- Alcohol does not improve the quality or quantity of breastmilk
- Alcohol can hinder milk let-down
- Alcohol does not improve the infant's or the mother's sleep
- Alcohol use while lactating can have negative effects on infant development
- The amount of alcohol in beverages varies, and may also be present in low alcohol beverages
- Mothers can pump and store breastmilk for use while consuming alcohol and/or can wait 2 hours after each standard alcoholic drink before breastfeeding
- Milk that is pumped within 2 hours following consumption of an alcoholic beverage should be discarded





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Appendix A: Survey Questionnaire

PARENT SURVEY ON ALCOHOL USE WHILE BREASTFEEDING

ASK ALL

1. You are...

- Male
 Female

ASK ALL

2. Have you or your partner had a child in the last five years?

- Yes
 No

ASK ALL

3. Are you or your partner currently pregnant?

- Yes
 No

TERMINATE IF RESPONDENT IS NOT A PARENT OF A CHILD BETWEEN THE AGES OF 0 AND 6 OR PREGNANT

ASK ALL

4. How many children do you have?

RECORD NUMBER OF CHILDREN _____

ASK THOSE WITH CHILDREN

5. What are the ages of your children?

ASK AGE FOR EACH CHILD _____

ASK WOMEN WITH CHILDREN

6. Are you currently breastfeeding any of your children?

- Yes
 No



ASK PREGNANT WITH NO CHILDREN

Do you plan on breastfeeding? _____

ASK WOMEN WITH CHILDREN

7. Did you breastfeed your child / children when they were babies?

- Yes
- No

ASK ALL WOMEN

8. How much alcohol do you drink when you are not pregnant or breastfeeding?

- No drinks during an average week
- Less than one drink during an average week
- 1 to 3 drinks a week
- 4 to 6 drinks a week
- 7 to 10 drinks a week
- 11 to 14 drinks a week
- 15 to 17 drinks a week
- 18 or more drinks a week
- Never drink alcohol
- DK/NA

ASK WOMEN WHO DRINK @Q8

9. How much alcohol did you drink [PREGNANT WOMEN: would you drink] while you were [are] breastfeeding?

- No drinks during an average week
- Less than one drink during an average week
- 1 to 3 drinks a week
- 4 to 6 drinks a week
- 7 to 10 drinks a week
- 11 to 14 drinks a week
- 15 to 17 drinks a week
- 18 or more drinks a week
- Never drink alcohol
- DK/NA

ASK WOMEN WHO DRINK @Q8

10. Did you change the amount of alcohol you drank due to breastfeeding?

- Yes, stopped drinking alcohol
- Yes, cut back on the amount of alcohol that I drink
- No

ASK PREGNANT WOMEN WITH NO OTHER CHILDREN

11. Would you change the amount of alcohol you drink due to breastfeeding?

- Yes, I will stop drinking alcohol
- Yes, I will cut back on the amount of alcohol that I drink
- No

ASK ALL WOMEN

12. To what extent do you agree that drinking alcohol was part of your decision about how to feed your baby?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

ASK MEN

13. Is your wife / partner currently breastfeeding any of your children?

- Yes
- No

ASK MEN

14. Did your wife / partner breastfeed your child / children when they were babies?

- Yes
- No



ASK MEN

15. How much alcohol does your wife / partner drink when they are not pregnant or breastfeeding?

- No drinks during an average week
- Less than one drink during an average week
- 1 to 3 drinks a week
- 4 to 6 drinks a week
- 7 to 10 drinks a week
- 11 to 14 drinks a week
- 15 to 17 drinks a week
- 18 or more drinks a week
- Never drink alcohol
- DK/NA

ASK MEN

16. How much alcohol did your wife / partner drink [PREGNANT WOMEN: would your wife / partner drink] during the months or years while they were [are] breastfeeding?

- No drinks during an average week
- Less than one drink during an average week
- 1 to 3 drinks a week
- 4 to 6 drinks a week
- 7 to 10 drinks a week
- 11 to 14 drinks a week
- 15 to 17 drinks a week
- 18 or more drinks a week
- Never drink alcohol
- DK/NA

ASK MEN

17. Has breastfeeding stopped your wife or partner from drinking alcohol?

- Yes
- No

ASK MEN WITH PREGNANT WIVES/PARTNERS WITH NO OTHER CHILDREN

18. Would breastfeeding stop your wife or partner from drinking alcohol?

- Yes
- No

ASK MEN

19. To what extent do you agree that drinking alcohol was part of your and your wife or partner’s decision about how to feed your baby?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree

ASK MEN

20. Did your health care provider talk to you about drinking alcohol while breast-feeding your baby?

- Yes
- No
- Can’t remember

ASK ALL

21. To what extent do you agree with each of the following statements:

Rotate Attributes	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Unsure
It is perfectly safe to drink alcohol and breastfeed your baby					
Alcohol can improve your milk supply					
You can safely drink one drink and feed your baby 2-3 hours later					
You have to “pump and dump” your milk if you are drinking alcohol and breastfeeding your baby (that is, use a breastpump and then throw out the milk)					
Any alcohol you drink will go through your breastmilk to your baby					
Any amount of alcohol can have a negative effect on your baby’s development					
Any amount of alcohol can have a negative effect on your milk supply					



ASK ALL

22. To what extent do you agree with each of the following statements:

Rotate Attributes	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Unsure
Women can drink alcohol when breastfeeding to help them relax					
Women can drink alcohol when breastfeeding at special occasions					
Women can drink alcohol anytime while they are breastfeeding as long as it is in moderation					
Drinking a little alcohol when breastfeeding can help the baby relax					
ASK WOMEN: My partner supports the decision I have made regarding drinking alcohol and breastfeeding our baby					
ASK MEN: I support my partner's decision regarding drinking alcohol and breastfeeding our baby					

ASK WOMEN

23. If I wanted or needed to drink alcohol after I had my baby I would...
[CHOOSE ONE]

- Not breastfeed at all
- "Pump and dump" my milk before breastfeeding
- Drink only one drink and wait 2-3 hours before feeding my baby
- Breastfeed even if I had had a drink
- Not drink at all

ASK MEN

24. If my wife / partner wanted or needed to drink alcohol after she had our baby I believe she should... [CHOOSE ONE]

- Not breastfeed at all
- "Pump and dump" her milk before breastfeeding
- Drink only one drink and wait 2-3 hours before feeding the baby
- Breastfeed even if she had had a drink
- Not drink at all

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The Best Start Resource Centre supports service providers across Ontario through consultation, training and resources, in the areas of preconception, prenatal and child health. The Best Start Resource Centre is a key program of Health Nexus.