

ON WEANING

What Is Weaning?

WEANING means to accustom a young child to the loss of mother's milk. Weaning can be a mother-led, child-led, or mutual process. It seems to be expected in our society that weaning is solely a mother-led process, even though mother-led weaning may possibly be detrimental to the child's mental and physical health. Ideally, the weaning process occurs naturally over months or even years. Babies rarely wean themselves before a year of age. The American Academy of Pediatrics recommends breastfeeding a minimum of 1 year. UNICEF and the World Health Organization recommend 2 years and beyond. The length is based upon studies about the risk of illness when breastfed infants are compared to formula fed infants. The risks are highest in the first year of life because a child's immune system is not fully functioning. In fact your baby's system is only working at 60% at 1-year and is not mature until about age 5.

PREMATURE weaning or early weaning refers to weaning that occurs before the mother or the baby is ready and necessitates substituting mother's milk with artificial baby milk/formula. This is not ideal since mother's milk is far superior to artificial milk at any age. In addition, early withdrawal of breastfeeding compromises a child's ability to fight infection. If early weaning occurs before 6 months of age, the child will not receive optimal protection against chronic diseases such as colitis, diabetes, obesity, heart disease, and muscular sclerosis, etc.

PARTIAL WEANING is continuing to nurse a young baby as little as once a day as well as supplementing with artificial baby milk. Mothers of toddlers who still nurse may maintain some milk production and continue to nurse their baby as little as once or twice a week. If considering prematurely weaning, consider partial weaning as a better choice than full weaning because it still confers some protection for your child. You will not have to pump to maintain milk production. Some moms will choose partial weaning because they are unable to pump at work. Remember, every drop of breastmilk has immense value to your child. Don't worry about supply, think of your milk as extra food or a medicine.

NURSING STRIKES are often confused with infant-led premature weaning. A nursing strike refers to an infant's sudden refusal to nurse. There are many known possible triggers such as, a change in breastmilk flavor due to ovulation and menstruation, mother crying out because baby inadvertently bit mother, or an infant adversely reacting to mother using a new lotion or soap. Sometimes a cause cannot be identified. The treatment for a nursing strike revolves around eliminating the use of bottles to feed a child. Don't starve the baby; continue to feed by cup or spoon. This works because; the baby's urge to suck will overcome their need to refuse the breast. Offer pumped breastmilk in a cup. Baby may cry for the bottle. Don't give in! This won't be the first time your child cries because you have decided what is best for your child and the child doesn't agree (at least initially). Remember, the baby will cry longer and harder if he or she develops chicken pox or an ear infection because breastfeeding has ceased. Nursing strikes usually resolve within 3-5 days. The more gradual the weaning the better it is for both you and your baby. If you are prematurely weaning a fully nursed baby, it should not occur in under 3 weeks. Drop one nursing every couple of days. Completely weaning quicker than this may cause plugged ducts or mastitis in the mother. If you are uncomfortable while prematurely

weaning its because it is not normal to wean so early. It is a survival of the species mechanism. What you can do is wean even slower, listen to your body. DO NOT abruptly stop nursing and bind your breasts as this is extremely painful, cause flu-like symptoms, and worse may cause mastitis. If you wean and regret it you can restart your milk in part or whole-see restarting your milk handout.

MOTHER-LED weaning suggestions for an older child include; refusing to nurse a child in certain situations or times, dropping the nursing the child is least likely to demand and substitute another bonding activity, reading a book or playing with a favorite toy, and getting the child involved in a favorite activity like going to the park at a certain time daily until child is out of the habit of requesting a nursing at that certain time. Breastfeeding your child is a special attachment behavior between mother and child. It is a special relationship—be patient. Your child will all too soon be an adult and you will have your body back to yourself. Sometimes a mother just needs to ask a child to wait until she has completed a task or there is just one feeding that she dislikes and once the mother and child have worked this out mom will feel like she can continue the other nursings for a while longer. If you wean and you regret it simply put your baby back to the breast, continue to feed baby his or her regular diet, think of any milk that results as an extra bonus. If you are having trouble weaning because your breast become engorged with a missed feeding, here are a few options: delay a feeding a little longer each day until that feeding is missed. Feed baby only one breast at that feeding. Partially feed baby both breasts. Partially pump or express breasts at that feeding. Any combination of the above.

CHILD-LED weaning may be somewhat abrupt or more gradual over months or even years. A one-year-old child may suddenly one day refuse to nurse or a child will drop a least favorite nursing one at a time over a period of months. Some children resume nursing when a sibling is born.

MUTUAL weaning has components of both mother-led and child-led weaning. Child may decrease nursings to as little as one a month before completely ending this part of your relationship. Natural weaning is a type of mutual weaning which encourages the mother to guiltlessly set boundaries for her body while recognizing the child's need to outgrow nursing in his or her own fashion.

IN CLOSING, how you handle the weaning relationship process may foreshadow or reflect how you handle future challenges with your child. For more information on weaning, the following books are recommended: “How Weaning Happens” by Diane Bengson. “Weaning your Nursing Toddler” by Kathleen Huggins.