



Figure 1: Nutrition source used in child's life as of questionnaire completion time.



The prevalence of receiving milk from another mother was assessed:

- 21.3% Thought about feeding another mother's milk.
- No participants received milk from a health care provider.
- 3 Received milk from a relative.
- 5 From a friend.
- 2 From someone they met online.
- Received donor breastmilk • 11
 - while in neonatal intensive care.



Figure 2: Percentage of feeding mode for those whose child had reached the listed age.



5. Discussion

- Qualitative analysis indicates obstacles preventing mothers from feeding at the breast from day 0. Other studies previously found poor milk supply, pain, and medical interventions can delay breastfeeding, and each hour that passes after birth before the initiation of breastfeeding increases the likelihood of challenges. • Although many participants express fed, past studies show expressed breastmilk could be less beneficial health outcomes than feeding at the breast due to loss of contact between the infant's saliva and the mother's breast as well as the process of storing, defrosting and reheating expressed milk. • The awareness and prevalence of milk-sharing behaviours of a representative sample of Ireland have not yet been investigated. • This lays the groundwork for future research into this topic. A crosssectional study could be carried out to obtain a true prevalence of milk sharing within the Irish nation. A longitudinal follow-up study could also be carried out to assess health outcomes associated with milk sharing. • These studies would allow for evidence-based advice surrounding the practice of milk sharing.
- Figure 4: Participants who did provided milk (n=79) gave to.

6. Conclusion

- Many participants used a blended feeding approach, breastmilk and expressed breast milk with some also using formula. A high prevalence of milk expression among participants.
- An awareness of the concept of milk sharing with some participants engaging in either providing or receiving shared breastmilk.
- As woman are informally sharing milk, evidence-based advice could be created to minimise the associated risk.
- Current feeding behaviours are more complex than what we are currently measuring. Healthcare workers need to be aware that there are multiple modes of feeding a child breast milk; directly from the breast, expressing or milk from another mother.
- The possibility of breastmilk expression and breastmilk-sharing needs to be considered when asking questions surrounding infant feeding behaviours to get a true prevalence of children who have consumed breast milk.

References

HEALTHCARE PRICING OFFICE [Internet]. 2022. Available from: www.hpo.ie

HSE. Breastfeeding in Ireland A five-year strategic action plan National Committee on Breastfeeding Department of Health and Children. 2005;

O'Sullivan EJ, Geraghty SR, Rasmussen KM. Human milk expression as a sole or ancillary strategy for infant feeding: a qualitative study. Matern Child Nutr. 2017 Jul 1;13(3)

Chang YC, Chen CH, Lin MC. The macronutrients in human milk change after storage in various containers. Pediatr Neonatol [Internet]. 2012 Jun [cited 2023 May 5];53(3):205-9. Available from: https://pubmed.ncbi.nlm.nih.gov/22770111/53. Hanna N, Ahmed K, Anwar M, Petrova A, Hiatt M, Hegyi T. Effect of storage on breast milk antioxidant activity. Arch Dis Child Fetal Neonatal Ed. 2004 Nov;89(6).

Figure 3: Source where milk sharing was first heard.

Dudukcu FT, Aygor H, Karakoc H. Factors Affecting Breastfeeding within the First Hour After Birth. Niger J Clin Pract. 2022 Jan 1;25(1):62-8. 43. Carberry AE, Raynes-Greenow CH, Turner RM, Jeffery HE. Breastfeeding Within the First Hour Compared to More Than One Hour Reduces Risk of Early-Onset Feeding Problems in Term Neonates: A Cross-Sectional Study. https://home.liebertpub.com/bfm [Internet]. 2013 Dec 9 [cited 2023 May 8];8(6):513-4. Available from: https://www.liebertpub.com/doi/10.1089/bfm.2013.0041