



Oxfordshire Breastfeeding Support & Social Media

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The OBS facilitators: Charlotte Gilman, Julie Gallegos, Lisa Mansour and Jayne Joyce (left to right)

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Online feeding support is not for the fainthearted. If we'd known back in 2012 what would be involved in running our brand-new Facebook group – the sheer hard work, occasional panic, and frequent frustration – would we still have done it? We were fortunate not to have walked into it blindly, but with experience and guidelines from La Leche League. Over the last eight years, [Oxfordshire Breastfeeding Support \(OBS\)](#)¹ has given high quality feeding help via Facebook to thousands of women and has fostered a virtual community that has proven especially invaluable during the pandemic. I hope that by sharing some of our learning, we can, in turn, help others to count the cost and provide excellent support.

OBS is a small independent charity that provides feeding support to any family resident in Oxfordshire or whose baby was born here.² We have a team of self-employed [facilitators](#)³ (three of whom are IBCLCs), a superb [Board of Trustees](#),⁴ and two dozen or so [volunteers](#): peer supporters, breastfeeding counsellors, and health professionals who volunteer their time.⁵ Funding comes from a range of sources including trusts, grants, donations from service users, fundraising events, and major [donors](#).⁶ In 2019, we were awarded the largest ever grant to an infant feeding organisation by the National Lottery Community Fund, which will enable us to develop our service over the next five years.⁷ Pre-Covid, we ran six drop-ins per week around the county and offered support via our private [Facebook group](#).⁸

It's easy to set up a Facebook group with a few clicks, but running one responsibly – ensuring quality of care and a safe, supportive environment – takes considerable effort. Ours has very high levels of user

satisfaction (based on two independent impact assessments)⁹ and an excellent local reputation. So, what works in online support?

Decide the parameters

Successful Facebook groups will grow. Our current membership is approximately 2200 (up from 1700 at the start of the pandemic). Decide from the outset what your boundaries are. Who is the group for? Can partners and co-parents join? How about health professionals, relevant private practitioners, students, or academic researchers? We limit our membership to “*anyone in Oxfordshire who is pregnant, breastfeeding /providing their own milk for their baby, or who is not currently breastfeeding/providing their own milk but is aiming to do so.*” We allow health and allied professionals and students to join as observers, but not to post or respond in their professional capacity. We don’t include fathers, non-lactating co-parents, or researchers in our Facebook support group, but have started a second “Friends of OBS” group where they are welcome, and we have a public Facebook page they can follow. It is tempting to allow people beyond our remit to join because they are friends of current members, or because they need help and we like to be helpful. But we do not have time or funding to provide breastfeeding support to the entire planet (we signpost to La Leche League for that). Agree your boundaries and stick to them.

Set clear ground rules

Facebook has functionality for setting group rules and requiring prospective members to agree to them. Think carefully about what you will and won’t allow in your group and write it down: in the rules, in the group description, and in a pinned post at the top of the group. Bullying, discrimination, and antisocial behaviour will not be permitted, of course. How about advertising? Will you allow mothers to name, tag, or criticise health professionals or other individuals, or professionals to post or respond with their work “hats” on? How about diluting the focus of the group: Can members give away or request equipment, feeding-related or otherwise? Recommend specific products? Go off on tangents unrelated to the group’s purpose? We don’t permit any of these in our group and have developed Conflict of Interest and Commercial Activities policies to strengthen our commitment to keeping our service a space that is free of any commercial influence.¹⁰ Members who have been in our group for a while know the rules and often report breaches before admins are aware. You can fine-tune your rules as you go along in response to common issues. If there is a clear rule with a sanction, you can deal with any breaches. If there is no rule, you are not in a position to act, even if you don’t like the behaviour.

Put the hours in

Facebook groups look superficially attractive as a low-energy support option which “runs itself”. They don’t. Beneath the calm surface of an effective Facebook group, admins are paddling vigorously. If you set up a group and leave it, you are likely to end up with members giving inaccurate information and unhelpful advice, being targeted by advertising, being shamed for their feeding stories and, at worst, getting badly hurt (and blaming you).¹¹ The stakes are high. Infant feeding is – partly due to sophisticated strategy on the part of the formula industry¹² – a deeply contentious subject which can

leave feelings running high. If you want your group to provide good care, someone has to be responsible for making sure that it is provided, that the group stays focused, and that group rules and ethos are respected. Admins set the tone in how they respond to posts. We train our volunteers to “provide emotional care first”, rather than simply replying at the informational level. Inaccurate information needs to be challenged, or at least, accurate information needs to be provided – you don’t want families saying, “but I heard it on X group...”. Some groups delete inaccurate posts or responses. We prefer a gentler approach, ensuring that every post receives an empathic response and evidence-based information from our team, without shaming members who have posted incorrect information or unhelpful suggestions. Things can go wrong quickly on Facebook. An unkind or careless comment can escalate into an incident which damages everyone, including your reputation. Feeding support groups need to be closely monitored, with admins available to deal promptly with any issues. This is not realistic without a reliable team. Facebook has options for admins to pre-approve all posts before they are made public. If capacity to monitor the group is limited, this is a safe option. It is your group – you are responsible for its quality and content.

Share the load

One person cannot manage a Facebook group, unless all posts and responses are pre-approved and the pace is very slow. Feeding is a very time-sensitive business; mothers need responses quickly. Our team ideally has two IBCLCs sharing responsibility, with one being “on duty” on any given day. This means keeping an eye on the group from first thing in the morning until bedtime. In the evenings Facebook is typically busiest, and new parents at their most desperate. Most posts receive a direct response from one of the IBCLC facilitators. Increasingly, as their skills and confidence grow, our volunteers turn into “first responders”, with facilitators being tagged by volunteers for additional help with more complex queries. We support our volunteers to develop their online helping skills and we encourage all who are confident in this format to do as much as they can. Facilitators check and add new members and deal with misinformation or infringement of group rules. If necessary, we delete posts or responses and contact the poster by private message (PM) to explain why this action was taken. The ultimate sanction is to remove a member from the group – we have only resorted to this a couple of times. “Facebook burnout” is a well-known risk in the lay breastfeeding support organisations, who have blazed the trail in online support. For the first time this year, after five months of intense Facebook activity triggered by lockdown, we “archived” (temporarily closed) our Facebook group for a fortnight, to give the team a complete break. In the long term, we need more of our team to step up and share the supervisory load, which is mostly carried by one person, or perhaps to bring in another IBCLC specifically to help with Facebook.

What do mothers say? – Voices of OBS Facebook group members

“It’s given a sense of community at a time when we can’t see our support network face to face”.

“You have helped me keep my sanity during the trickier times when no one else was

available to help”.

“Everything I know about breastfeeding I know from here :) all the problems I ever had were solved quickly thanks to advice I got here.”

“The Facebook support from the OBS team and the members of the group were indispensable in a time of full lockdown, no relatives in this country, no breastfeeding friends and no other peer support. It was a reliable community I could turn to at ANY time during the day and night!”

“There is always someone awake, no matter what time at night, the OBS Facebook support has meant that I am never alone. I have never had a message from anybody, facilitator or other group member, that didn't make me feel connected, cared for and supported. I am grateful for the expert support and advice always delivered with love and I will be breastfeeding to one year and beyond because of it.”

“It's meant [that] throughout lockdown and when I've been unable to go out with a vulnerable premature baby, I've felt connected with other women, mothering alongside me, providing solidarity and understanding, caring support, and wisdom. It's meant [that] when exclusively feeding from the breast felt impossible, there were people encouraging me... It's meant having a place to celebrate highs and lows”.

“At the moments of total parenting and breastfeeding despair, fear, frustration, exhaustion and burnout there was someone at the other end nurturing and soothing... It showed the best of local people and I felt connected and belonging.”

Conclusion

Mothers enjoy the sense of connection with a virtual community, particularly at a time when other supports, both informal and professional, may be difficult to access. They value the immediacy, the quick responses round the clock. They appreciate the emotional care given by the team and other mothers, beyond factual information. All of these take thought, skill, and time – lots of time, often at hours when we might rather not be working. It isn't an easy option, but it is a useful strand in feeding support, for a generation who have grown up with mobile phones. Our next challenge will be to figure out how to reach the next generation of younger mothers. They are opting for more visual, transient platforms like Instagram or Snapchat, which don't lend themselves to text-based large group conversation.

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1 www.oxbreastfeedingsupport.org

2 For our full Mission and Vision, see www.oxbreastfeedingsupport.org/index.php/aboutus/mission

3 www.oxbreastfeedingsupport.org/index.php/aboutus/howeare/team

4 www.oxbreastfeedingsupport.org/index.php/aboutus/howeare/trustees

5 www.oxbreastfeedingsupport.org/index.php/aboutus/howeare/volunteers

6 www.oxbreastfeedingsupport.org/index.php/donors

7 www.facebook.com/watch/?v=2327459134218937 and
www.oxfordmail.co.uk/news/18209405.national-lottery-funding-oxfordshire-breastfeeding-support-group/

8 www.facebook.com/groups/OxBreastfeedingSupport

9 www.oxbreastfeedingsupport.org/images/OBS_ImpactAnalysisReport_2020.pdf and
www.oxbreastfeedingsupport.org/images/OBS-Impact-Report_full.pdf

10 www.oxbreastfeedingsupport.org/index.php/aboutus/policies

11 Regan S & Brown A (2019) "Experiences of online breastfeeding support: Support and reassurance versus judgement and misinformation." *Maternal & Child Nutrition*, 15(4),
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