

iLactation

# Ethics Extravaganza 2022

Online: June 1 - 30, 2022

at [www.iLactation.com](http://www.iLactation.com)



# Presentations



## ***Constance Ching, MSW***

Constance Ching currently works for Alive & Thrive (FHI 360), providing technical support in Code advocacy and improved implementation in the ASEAN region. Prior to that, she worked for IBFAN-ICDC, was involved in capacity building with governments, UN agencies and NGOs on Code implementation and monitoring. Constance also participated in the World Health Assembly and other global forums to advocate for stronger Code-related measures. Her other work experiences include supervising a university-wide service-learning program in Hong Kong and managing community programs for homeless people living with HIV/AIDS and mental illness in New York City, USA. She is currently based in Penang, Malaysia.

## **Dangerous liaisons: conflicts of interest and breastfeeding protection**

Health workers and the health system are the primary source of trusted health advice for parents and therefore have immense influence over infant and young child feeding decisions. Because of that, they have always been the prime channel for promotion of breastmilk substitutes. Health workers are increasingly faced with the question of whether to participate in industry sponsored seminars, conferences, and research. Companies also forge financial links with medical establishments, professional associations, and public health agencies. These practices are fraught with conflicts of interest and compromise the integrity, professional judgement, and public credibility at individual and institutional levels. In this webinar, we will identify some examples of conflicts of interest in the health systems, how they come in the form of “help in disguise”, and how conflicts of interest undermine breastfeeding. Definition and meaning of conflicts of interest in the context of the Code will be examined, along with recommended actions that can help strengthen COI safeguards to protect breastfeeding.



## ***Lourdes Santaballa Mora, MS, IBCLC, CLAAS, IYCFS***

Lourdes Santaballa is a community activist and community organizer, having worked in the domestic violence, housing equity and reproductive rights/infant feeding movements. In lactation, Lourdes has worked as a volunteer peer counselor, IBCLC, mentor, researcher and trainer. She is the co-founder of Alimentación Segura Infantil, an organization focused on increasing breastfeeding, leadership, and capacity building in traditionally marginalized communities, with a focus on disaster preparedness, response and recovery, which speaks in non-binary and gender inclusive terminology in the binary language of Spanish. Formed after Hurricanes Irma and Maria in 2017, and still working after the earthquakes of 2019-2020 and the COVID-19 pandemic. ASI is currently the largest non-profit community-based infant and young child feeding organization in Puerto Rico, also providing services wherever Spanish speaking assistance is needed. ASI has also been an IBCLC Care Award recipient and is a mentorship path for aspiring IBCLCs. Lourdes is a former La Leche League leader and has been active in the United States Breastfeeding Committee (USBC), IFE (Infant Feeding in Emergencies) Core Group and United States Lactation Consultant Association (USLCA) and has received various awards and recognitions in the field for her

activism and research. Amidst two category 5 hurricanes, earthquakes, and a global pandemic, she was able to finish her master's degree in Clinical Nutrition and Integrative Health in 2020. You can listen to her weekly podcast in Spanish, *Teta y Pecho: Lactancia Interseccional* on all the major platforms.

### **Also known as the WHO Code: understanding and making the International Code relevant**

The International Code on Marketing of Breastmilk Substitutes is one of the most important documents regarding ethical conduct on education and the promotion of products to our service population. But how many of us have (or will) really read it? In simple words and with everyday examples, we will dissect the most important aspects of the document and give concrete examples of what the International Code covers and doesn't, some of its problems and limitations, and how we can ethically apply its intentions to our work as lactation support professionals.



***Penny Reimers, PhD, RN, IBCLC***

Dr Penny Reimers is a registered nurse, midwife and International Board-Certified Lactation Consultant. She was a founder member of the Human Milk Banking Association of South Africa and supported the roll out of donor milk banks in KwaZulu Natal. She ran a community based human milk bank in Durban, conducted research on ways to support breastfeeding and worked in research and development on a mobile human milk pasteurisation system in the Department of Paediatrics at the University of KwaZulu Natal. She has authored/co-authored articles on breastfeeding and donor milk banking. She is currently based in the UK, is a member of the Lactation Consultants of Great Britain and serves as a Lactation Consultant for Parent Cloud while continuing her research interests in donor milk banking in South Africa.

### **To pay or not to pay? The ethics behind paying mothers for donor milk**

The last decade has brought an explosion of research and interest into the properties in human milk and have made it a much sought-after commodity. The growth of donor milk banking globally has reduced infant morbidity and mortality by providing life-saving human milk for the most vulnerable infants. For-profit milk banks are also emerging and the demand for donor mothers and their precious 'liquid gold' is too. Opinions on the ethics of paying donor mothers are polarised. Should compassion and altruism be the motivation for donations? Interesting comparisons have been made with organ donation and blood banking. With the sale of human milk largely unregulated, there are growing concerns around the possible exploitation of women in low resource countries by for-profit milk banks. Global breastfeeding rates are low, efforts should be directed at empowering and supporting women to breastfeed, providing them with adequate maternity leave, acknowledging the important role breastfeeding plays in their health and that of their infant.



## **Zainab Yate, BSc, MSc**

Zainab Yate is a Biomedical Ethicist, Vice Chair and named qualitative lead on a pediatric flagged Research Ethics Committee Panel for the Health Research Authority (HRA) in the UK, for over a decade. Her working background is in Public Health and Commissioning with a Primary Care Trust for the National Health Service (NHS) in the UK. She is also a member of Kings College London Ethics Governance, Policy & Operations Committee (KCL). She has been a volunteer breastfeeding peer supporter with the NHS for a number of years and is the owner-author of the resource site for mothers and healthcare practitioners on Breastfeeding / Nursing Aversion and Agitation (BAA), [www.breastfeedingaversion.com](http://www.breastfeedingaversion.com), where she researches and writes for the viewers of this site, to try to understand what aversion is and why it arises. She also volunteers to support the work of the World Breastfeeding Trends initiative in the UK (WBTi), a key tool to inform policy and change for all infant feeding partners and government bodies.

### **Normative ethics & lactation: what came before autonomy and consent?**

Ethics provides a framework for making the best possible decision in situations where a dilemma has arisen, many of us make an ethical decision on a daily basis but do we know about the major moral theories that underpin ethical practice?

This lecture will give an overview of the main normative theories, including consequentialism, deontology, & virtue ethics and introduces the 4 principles approach that has been adopted in healthcare settings. I invite participants to look at which theory they are more drawn to, and what underlies their assumptions, positions and decisions. The use of case studies will help illustrate the complexity of a breastfeeding mother's position and of our roles in assisting them. We will explore some common moral-based assumptions and positions with regard to formula, for both lactating mothers and health care professionals, and ask if using these ethical theories as healthcare professionals can frame the assessments of harm and risk in using breastmilk substitutes to 'change' the conversation about formula. We will also consider the case of a mother who struggles with severe breastfeeding aversion and agitation, in the lack of any evidenced-based treatment or practice, we look at why something like using ethical frameworks matter.

### **Research ethics and infant feeding**

Research ethics institutions protect the rights, safety, dignity, and well-being of research participants, and also have a duty to ensure 'good' research. This means research that can be completed, research that can stand up to scientific scrutiny, research that adds to the body of literature and can be used to benefit people and society. Conducting poor research is unethical, and there are many studies in the field of breastfeeding and lactation that have been challenged when published, simply because their findings and results are, at best, incorrect. Proper definitions, project design and industry conflict of interest are important factors, and these can be critiqued and challenged right at the beginning - at the ethical review stage. By scrutinising the research questions, the definitions of words used and even the research methodology we can, often quite quickly, decide if a study will have both scientific and ethical merit in the field of breastfeeding and lactation. If you are a donor, an applicant, a manager or a researcher you need to be aware of the process of ethical review of research protocols, the possibility of specialist review, and also of how to sift through published studies that have questionable study designs, and findings.

# Continuing Education

## CERPs

[International Board Lactation Consultant Examiners® \(IBLCE®\)](#) have approved this activity for Continuing Education Recognition Points (CERPs)

CERPs approval number = **CL2022-1HK**

CERPs allocated = **5.00 E CERPs**

Please note that if you are thinking of taking the IBLCE® exam, our continuing education counts for 5.00 pre-exam education hours.

iLactation CERPs can be used for re-certification for both IBCLC® and CLC certificants.

# Conference Timeline

1. iLactation Conference *Ethics Extravaganza 2022* registration is now open.
2. iLactation Conference *Ethics Extravaganza 2022* officially begins on June 1, 2022.
3. Presentations will not be available after June 30, 2022.
4. Handouts to be downloaded by June 30, 2022.

# Registration Information

Registration for the online breastfeeding conference, *Ethics Extravaganza 2022*, is open now at <https://ilactation.com>.

**The conference begins online with presentations viewable from June 1 - 30, 2022.**

Below you will find the registration price according to your country, which is determined by the International Lactation Consultant Association membership categories.

	Individual
Cat A Countries	US\$60
Cat B, C & D Countries	US\$20

Participants will have unlimited access to all of the presentations until the end of the conference on June 30, 2022. The Conference is a complete package; it is not possible for you to register for individual presentations.

iLactation uses PayPal as the main payment method. If Paypal is not available in your country or you encounter other difficulties with PayPal please contact us at [info@ilactation.com](mailto:info@ilactation.com) for an alternative payment method.

## Membership Categories

Country categories are based on those of the [International Lactation Consultant Association](#).

### Category A:

Andorra, Anguilla, Australia, Austria, Bahamas, Bahrain, Barbados, Belgium, Bermuda, Brunei, Canada, Cayman Islands, Croatia, Cyprus, Czech Republic, Denmark, Finland, France, Germany, Guam, Hong Kong, Iceland, Ireland, Israel, Italy, Japan, Kuwait, Liechtenstein, Luxembourg, Macao, Malta, Monaco, Netherlands, New Zealand, Norway, Oman, Poland, Portugal, Qatar, San Marino, Saudi Arabia, Singapore, Slovakia, Slovenia, South Korea, Spain, Sweden, Switzerland, Taiwan, Trinidad and Tobago, UAE, UK and USA.

### Category B:

Albania, Algeria, American Samoa, Antigua and Barbuda, Argentina, Azerbaijan, Belarus, Belize, Bosnia and Herzegovina, Botswana, Brazil, Bulgaria, Chile, China, Colombia, Costa Rica, Cuba, Curaçao, Dominica, Dominican Republic, Ecuador, Estonia, Fiji, Greece, Grenada, Guatemala, Hungary, Iran, Jamaica, Jordan, Kazakhstan, Kiribati, Latvia, Lebanon, Libya, Lithuania, Macedonia, Malaysia, Maldives, Mauritius, Mexico, Montenegro, Palau, Peru, Puerto Rico, Romania, Russia, St. Kitts and Nevis, St. Lucia, St. Vincent & the Grenadines, Serbia, Seychelles, South Africa, Thailand, Turkey, Uruguay and Venezuela.

### Category C:

Angola, Armenia, Bhutan, Bolivia, Cape Verde, Côte d'Ivoire, Djibouti, Egypt, El Salvador, Gabon, Georgia, Ghana, Guyana, Honduras, India, Indonesia, Iraq, Marshall Islands, Micronesia (Fed. Sts.), Moldova, Mongolia, Morocco, Namibia, Nigeria, Pakistan, Palestine, Panama, Paraguay, Philippines, Samoa, Sri Lanka, Suriname, Swaziland, Timor-Leste, Tunisia, Turkmenistan, Tuvalu, Ukraine, Uzbekistan and Vietnam.

### Category D:

Afghanistan, Bangladesh, Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Central African Republic, Chad, Comoros, Democratic Republic of Congo, Equatorial Guinea, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Haiti, Kenya, Kyrgyz Republic, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Nauru, Nepal, Nicaragua, Niger, North Korea, Papua New Guinea, Rwanda, Sao Tomé and Príncipe, Senegal, Sierra Leone, Solomon Islands, Somalia, South Sudan, Sudan, Syria, Tajikistan, Tanzania, Togo, Tonga, Uganda, Vanuatu, Yemen, Zambia and Zimbabwe.