

# Breastfeeding Bonding Prevents Infant Mortality And Suicide

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*The greatest terror a child can have is that he is not loved, and rejection is the hell he fears. I think everyone in the world, to a large or small extent, has felt rejection. And with rejection comes anger, and with anger some kind of crime in revenge for the rejection, and with the crime, guilt ~ and there is the story of mankind. John Steinbeck, East of Eden, 1952*

Breastfeeding bonding and baby-carrying bonding are the first events of life, which the newborn/infant/child learns about love and non-violence. Love is first learned at the breast of mother and by being carried on her body ~ like *in utero*, where the first lessons of being connected with mother are learned. Baby-carrying is the external umbilical cord that assures that the baby is connected with mother, and breastfeeding bonding for 2.5 years, or longer, has been found to be essential for optimizing brain-behavioral development for the prevention of depression and suicide, which makes possible peaceful, harmonious and egalitarian behaviors later in life possible.

These two behavioral measures of maternal-infant/child affectional bonding: 1) baby-carrying during the first year of life and 2) breastfeeding for 2.5 years or greater are the singular developmental events that can PREVENT infant mortality and suicide in the teen and adult years of life. These early life events form the foundation for the neurointegrative brain (joy, happiness and love) as opposed to the development of the neurodissociative brain (depression, alienation, homicidal and suicidal violence).

These **Two Cultural Brains** are formed during the early years of brain-behavioral development, which makes possible sexual affectional bonding relationships that reinforce the Neurofunctioning Brain, Egalitarian and Harmonious Relationships. The following data are provided in support of this reality.

[http://www.violence.de/prescott/letters/Our\\_Two\\_Cultural\\_Brains.pdf](http://www.violence.de/prescott/letters/Our_Two_Cultural_Brains.pdf)

Baby-carrying bonding was found to predict with 80% accuracy the peaceful and violent behaviors ("killing, torturing, mutilation of enemy captured in warfare") in 49 tribal cultures distributed throughout the world. 100% prediction of Peaceful or Violent cultures was possible when youth sexuality was permitted or punished was added as a predictive variable (Prescott, 1975,1977, 1979,1990, 1996, 2005).

Weaning age of 2.5 years or longer in 26 tribal cultures was found to be characteristic of **77%** (20/26) of tribal cultures rated low or absent in suicide. **82%** (14/17) cultures with weaning age 2.5 yrs and greater and support youth sexuality are rated low or absent in suicides (Prescott, 2005).

Baby-carrying during the first year of life and weaning age of 2.5 years or longer was common to 63% of the cultures studied, thus indicating the high correlation of these child rearing practices (Prescott, 1990).

**TABLE 1. SUICIDE CULTURES AS A FUNCTION OF WEANING AGE, INFANT PAIN AND ADOLESCENT SEXUALITY**

WEANING AGE 2.5 YEARS OR LONGER

SUICIDE CULTURES: TC 473

HIGH SUICIDE		LOW SUICIDE	
	Infant Pain		Youth Sex
Balinese	Yes	Ainu	+
Jivaro	Yes	Andamanese	+
Kwakiutl	Yes	Aranda	Irrelev
Nuer	Yes	Arapesh	Irrelev
Nyakyusa	Yes	Cheyenne	-
Ojibwa	Yes	Chukchee	+
		Cuna	-
		Kurtachi	+
		Lakher	+
		Lepcha	+
		Lesu	+
		Manus	-
		Murngin	Irrelev
		Navaho	+
		Siriono	+
		Tallensi	+
		Thonga	+
		Venda	+
		Wogeo	+
		Woleaians	+
6		20	(17)

77% (20/ 26) cultures where weaning age is 2.5 years or greater are low suicidal cultures.  
 82% (14/17) cultures with weaning age 2.5 yrs and greater support youth sex have low suicides.  
 Irrelevant since marriage occurs shortly after puberty, thus high sexual pleasure.  
 Premarital Sex TC 392; WA > 2 Yrs TC 330; Baby Carry TC 317; Infant Pain TC 324

Source: R. B. Textor (1967). *A Cross-Cultural Summary*. HRAF Press, New Haven.

N.B. Textor Code 473 is not a pure measure of suicide but is mixed with homicidal behaviors.

**TABLE 2. ANALYSES OF WEANING AGE ONSET IN HIGH AND LOW SUICIDAL TRIBAL CULTURES**

	Average Weaning Age Months		Sum
	<u>24 MO/Less</u>	<u>30 MO/Plus</u>	
Low Suicide	5	31	36
High Suicide	10	19	29
Sum	15	50	65

Chi Square Equals 3.84; p = .05, N = 65

1. **14 % (5/36) of low suicide cultures have weaning age of 24 months or less.**
2. **86 % (31/36) of low suicide cultures have weaning age of 30 months or greater**
3. **34 % (10/29) of high suicide cultures have weaning age of 24 months or less.**
4. **66 % (19/29) of high suicide cultures have weaning age 30 months or greater.**
5. **77 % (20/26) of low suicide cultures have weaning age onset of 2.5 years or greater (previous Textor study).**

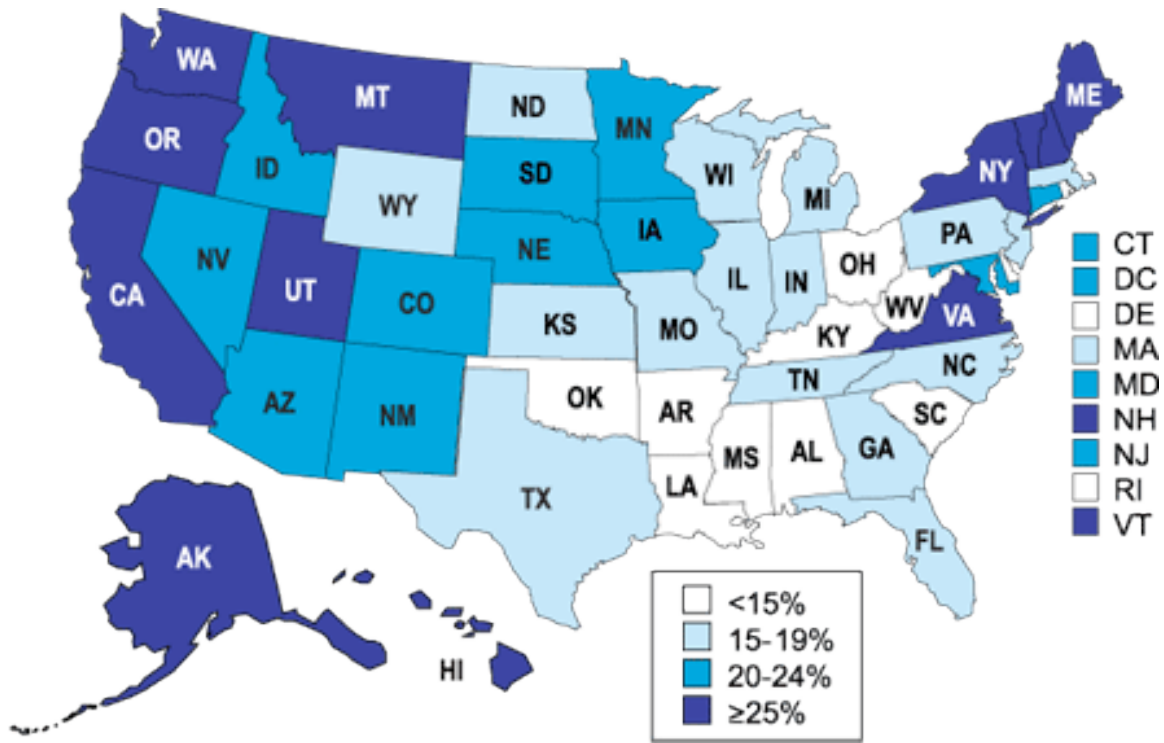
These data support the following conclusions:

1. The additional culture samples from Barry and Paxon (1971) in evaluating both high and low suicide cultures has increased the prediction of low suicide cultures with weaning age of 2.5 years or greater in Textor from 77% to 86%. Given the nature of cross-cultural data and other factors this degree of variation should not be surprising. These data need to be validated un modern human cultures.
2. A greater significant difference could be expected if the low weaning age was 6 months or less, which does not exist in tribal cultures, rather than the 24 months or less used in this study.
3. There is no question that the benefits of breastfeeding for the prevention of suicide will be much greater in the American culture where only 6.8% of mothers are breastfeeding at one year of age. **Only about 10% of tribal cultures breastfeed for 12 months or less compared to 93.2% of American mothers who breastfed for 12 months or less (NHANES III data)-National Health and Nutrition Survey Examination 1988-1994.**
4. Barry III, H. and Paxon, L.M. (1971). *Infancy and Early Childhood: Cross-Cultural Codes 2. Ethnology* X(4):466-508.

<p><b>THESE DATA SUPPORT THE NECESSITY OF BREASTFEEDING FOR 2.5 YEARS OR LONGER TO REALIZE THE OPTIMAL BENEFITS OF BREASTFEEDING BONDING FOR SUICIDE PREVENTION and OTHER HEALTH BENEFITS FOR CHILD AND MOTHER</b></p>
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FIGURE 1

PERCENT CHILDREN BREASTFED AT 12 MONTHS BY STATE (2004)  
AND STATE INFANT MORTALTY RATE (2004) N = 51: 2007 FD



< 15 %	15-19 %	20-24 %	>25 %	
N = 10	N = 15	N = 14	N = 12	
M: 2258	6518	4477	1314	
F: 2178	6187	4196	1297	
Σ: 4436	12705	8673	2611;	Total: = 28425
%: 15	45	31	9	

**90% (9/10) States With Less Than 15% of Children Breastfeeding At 12 Months Have Highest Infant Mortality Rates**

**83% (10/12) States With Greater Than 25% of Children Breastfeeding At 12 Months Have Lowest Infant Mortality Rates**

**60% (9/15) States With Second Lowest Breastfeeding At 12 Months (15-19%) Have Higher Infant Mortality Rates.**

**57% (8/14) States With Second Highest Breastfeeding At 12 Months (20-24%) Have Lower Infant Mortality Rates .**

CDC (2008). *Breastfeeding Practices—Results from the National Immunization Survey*. Center for Disease Control. [http://www.cdc.gov/breastfeeding/data/NIS\\_data/index.htm](http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm)

Minino, A.M , et al (2007) *Deaths: Final Data for 2004*. CDC. National Vital Statistics Report. V55(19). Table 32.. Hyattsville, MD <http://www.cdc.gov/nchs> August 21.

Prescott, J.W. (2008). Table 13: Breastfeeding At 12 Months of Age By State and Infant Mortality Rate. October 18.( Revised 16 Feb 10).

**Table 3. PERCENT CHILDREN BREASTFED AT 12 MONTHS BY STATE (2004)  
AND STATE INFANT MORTALTY RATE (2004) N = 51  
CDC 2007**

<u>&lt; 15 %</u>		<u>15-19 %</u>		<u>20-24 %</u>		<u>&gt;25 %</u>		<u>&gt;30%</u>	
N = 10		N = 15		N = 14		N = 12		N = 6	
	IMR		IMR		IMR		IMR		
DE	8.62	FL	7.05	AZ	6.73	AK	6.67	AK	
AL	8.67	GA	8.51	CT	5.54	HI	5.69	CA	
AR	8.27	IA	5.07	DC	11.42	CA	5.16	HI	
KY	6.78*	IL	7.48	ID	6.17	CO	6.34	OR	
LA	10.46	IN	8.03	MD	8.44	ME	5.67	VT	
MS	9.81	KS	7.16	ME	5.67	MT	4.51	WA	
OH	7.67	MI	7.58	MN	4.70	NH	5.56		
OK	8.01	MA	4.84	NC	8.79	NY	6.07		
SC	9.28	MO	7.51	NE	6.57	OR	5.49		
WV	7.57	ND	5.62	NJ	5.65	UT	5.21		
		PA	7.25	NM	6.31	WA	5.52		
		RI	5.32	NV	6.39	VT	4.55		
		TN	8.63	SD	8.20				
		TX	6.31	VA	7.47				
		WI	5.99						
M	2258		6518		4477		1314 ///		2293
F	2178		6187		4196		1297 ///		2189
<b>SUM</b>	<b>4436</b>		<b>12705</b>		<b>8673</b>		<b>2611 ///</b>		<b>4482</b>
<b>TOTAL = 28,425</b>									
<b>%</b>	<b>15</b>		<b>45</b>		<b>31</b>		<b>9</b>		<b>/16/</b>

Median Infant Mortality Rate = 6.67

The number of subjects in each of the four breastfeeding groups is given and it should be noted that only 2,611 subjects are represented in those States that have children breastfeeding at 12 months of age compared to 25,814 individuals in the remaining States for a total of 28,425 subject sample-- only 9% of the sample.

What is remarkable about this WHO Study on **PERCENT CHILDREN BREASTFED AT 12 MONTHS BY STATE (2004)** are the significant linkages to infant mortality with only **9% of the sample breastfeeding for greater than 12 months.**

## **The Third National Health and Nutrition Examination Survey, 1988-94**

For the 2,685 sample of 3-5 yr olds from NHANES III, (variable HYB5) - the following information is provided (Hedger, 2001).

### **For all children**

9.6% were breastfeeding at 11 months **6.8% were breastfeeding at 12 months**  
2.7% were breastfed for 24 months or more, **1.0% was breastfed for 30 months or more.**

### **For the children who were ever breastfed:**

17.9% were breastfeeding at 11 months 12.7% were breastfeeding at 12 months  
5.1% were breastfed 24 months or more 1.8% for 30 months or more.

The findings for all children where only **6.8%** were breastfeeding at 12 months; **2.7%** were breastfeeding at 24 months and **1%** for 30 months or more indicates the crises that exists in America for compromised brain development of our infants and children and for the realization of peace, harmony and happiness.

In an article in the *New York Times* (8.2.10) by Nicholas Wade "Breast Milk Sugars Give Infants a Protective Coat", he states: "A large part of [human milk](#) cannot be digested by babies and seems to have a purpose quite different from infant nutrition — that of influencing the composition of the bacteria in the infant's gut".

Dr David Mills, University of California, stated:

"Such findings have made the three researchers keenly aware that every component of milk probably has a special role. "It's all there for a purpose, though we're still figuring out what that purpose is," Dr. Mills said. **"So for God's sake, please breast-feed."**  
<http://www.nytimes.com/2010/08/03/science/03milk.html>

**Breastfeeding Bonding for "two years or greater" is essential for life: prevention of infant mortality, depression and suicide and many other health benefits for mother and child.**

**Human societies must support mothers being nurturing mothers and respect the emerging sexual development of children and youth, if sexual affectional and egalitarian relationships are to become a reality**

[http://www.violence.de/prescott/letters/WHO\\_Innocenti\\_Declaration.pdf](http://www.violence.de/prescott/letters/WHO_Innocenti_Declaration.pdf)

"Women are the mothers of humanity; do not let us ever forget that or underemphasize its importance. What mothers are to their children, so will man be to man" (pp. 247- 248); Ashley Montagu. *The Natural Superiority of Women* 1952

## TABLE 4. TWO CULTURAL BRAINS

### LIMBIC-SUBCORTICAL EMOTIONAL BRAIN

		PAIN	PLEASURE
N E O C O R T I C A L	P A I N	<b>Theistic Religions</b> <b>Patrilineal</b>  Gender Inequality <b>Sexual Puritanism</b> Addictive Synthetic Drugs Authoritarian Control Pain Is A Moral Good Depression-Violence-War <b>NeuroDissociative Brain</b> <b>Science of Pain-Depression</b> <b>BioMedical Health Model</b> <b>Legislative Gender Inequality</b> <b>Politics of Betrayal</b>	
B R A I N	P L E A S U R E		<b>Earth Religions</b> <b>Matrilineal</b>  Gender Equality <b>Sexual Liberty</b> Natural Botanical Drugs Egalitarian Freedom Pleasure Is A Moral Good Joy-Happiness-Peace <b>NeuroIntegrative Brain</b> <b>Science of Pleasure-Happiness</b> <b>BioBehavioral Health Model</b> <b>Legislative Gender Equality</b> <b>Politics of Trust</b>

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<http://ttfuture.org/violence> **BLOG:** <http://ttfuture.org/blog/1181>

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**6 August 2010**



