



Anthrolactology Podcast Season 1

Episode 5: Meet Dr. Ifeyinwa Asiodu

October 26, 2020

Episode summary

This episode of *Anthrolactology* features Dr. Ifeyinwa Asiodu! She talks to us about her breastfeeding and human lactation research, the new Community M.I.L.K. lab, Black Breastfeeding Week, and the COVID-19 Birth Worker Relief Fund. Links are included at the end of the show notes!! (Note: this episode was recorded on August 31, 2020).

TRANSCRIPT

[Music]

This is Anthrolactology, a podcast about breastfeeding, science, and society

Aunchalee:

Hi, everyone. Welcome to our newest episode of Anthrolactology I am Aunchalee Palmquist and I'll be your host today. And I am so thrilled to have my colleague and dear friend, Dr. Ifeyinwa Asiodu here as our guest. Hello, Dr. Ifeyinwa.

Ifeyinwa:

Hi. Hello. So nice to be here with you.

Aunchalee:

I am so happy that you're, um, you're speaking with us today. It's really, really an honor, and it's super fun to be able to interview someone whose work I have admired so much over the years, but also just like, my friend. So we'll try to, we'll try to, we'll try to keep it like, nice and focused. But I, you know, this is a podcast about the study of human lactation through an anthropological lens ; and, you are not trained as an anthropologist - and actually I should read your bio here before we get started - but one of the reasons I really was keen, I mean, lots of reasons why I was keen to have you come on this podcast, but to really talk about the way that you approach your work, which is really, really quite anthropological in many ways, and in particular your use of ethnography, and community engaged research.

Dr. Ifeyinwa Asiodu is an assistant professor in the department of family healthcare nursing at the university of California, San Francisco. She is a researcher, a registered nurse and an international board certified lactation consultant. Her research has focused on the intersection of racism, systemic and structural barriers, life course perspectives and increasing access to human milk, breastfeeding

resources, lactation support, and donor milk. And in, in your bio, I love this, Dr. Asiodu uses a critical ethnographic lens to inform her work. And the long-term goal of her project program of research is to reduce infant feeding disparities and increase access to high quality breastfeeding care, lactation support and equitable contraception services for Black women. She's actively engaged in local state and national breastfeeding reproductive health, maternal, and child health and public health organizations geared toward achieving birth and breastfeeding equity and justice. And if you didn't gather from all of that, she is a superstar and just like a shiny light in our field. And I'm. it's just really, really cool.

I would like to know first, like, can you tell us a little bit just like about your background and why lactation? Like what got you interested in the study of breastfeeding and human lactation?

Ifeyinwa:

Yeah, no, thank you so much. And you're always just so kind. And, for folks who don't know, I am equally in awe of Dr. Palmquist and her work, and all that she does at UNC and through CGBI. And, I've learned just as much from her, if not more than she'll say she's learned from me. So just putting that on the record.

In terms of how I've, I've come to where I am now and where I've started. I think a lot of folks may not know that I actually started my nursing career 17, a little over 17 years ago in critical care. I started off in that down ICU intensive care units, and cross-trained into ICU and, um, also were tight acuity med-surge, and so spent most of my early nursing career, with critically ill patients in a hospital setting and in acute care setting. And it wasn't until I started to think about what I wanted to do as it pertains to graduate school and where I saw myself, further out in my career that I really started to explore other opportunities.

I applied for a summer research training program at UCLA, and, had the amazing fortune to be, matched with Dr. Holly Kennedy, who is an amazing, midwifery scholar.

I was matched with her and able to work on a study she had at that time in regard to looking at the impact of centering pregnancy on postpartum depression symptoms and a military setting and that summer really kind of launched what you see now in terms of my completely shift in focus and, my career from adult critical care, to, um, maternal and child health and specifically around inequities and disparities.

And, um, that made me want to do additional research and look at well, what is going on here in California? Within my own community in the Bay area? Also, at that time I decided I wanted to shift gears and focus more on public health, and it just so happened as I was wanting

to make sure that transitioned to public health there was a position open in San Mateo County with the Black Infant Health Program.

And the Black Infant Health Program is a statewide program, which was created to address the high rates of infant mortality, infant mortality in Black communities. And it's, it's been around for over 30 years now, but um at that time it was new to me and I was just like, Oh, wow, this is a program that speaks to everything that I'd want to do! And the communities and populations that I really want to and work with and serve. And so, I applied for that position and didn't really think they were going to hire me, because I had no public health experience.

And, but I was so excited and so eager! And I'm grateful to this day that, uh, Bernestine Benton, who was the supervisor at the time now since retired, took a chance, right, took a chance on me and, hired me the public health nurse for the black infant health program in San Mateo. It really was the catalyst for all of the work that I do now.

And it was during that time that I really started to gain an interest in breastfeeding and lactation. It was one of the core intake questions that we would ask clients on enrollment. I would ask clients on enrollment, how they were planning on feeding their baby. So I really didn't like the question that was there. It really just kind of said, are they going to breastfeed or not like it was a yes or no question, but I learned early on that I couldn't ask that yes or no question. Right? Because I feel like folks were, would say yes, even though they may not, if maybe they were unsure or really wanted to say no, but here I am this question. And so I learned early on that I needed to shift that and ask like, you know, how are you planning on feeding your baby? Or have you thought about what you want to do in regard to infant feeding? And that opened up much more of a dialogue and a conversation.

And I learned that many, if not majority of our clients really wanted to breastfeed and, or they were really unsure. Even if they did want to breastfeed were maybe uncertain. They knew it was best for them and the baby, or were really unsure of how they were going to be able to make it all work, and so that, that was something that was of interest to me. And I was like, okay, okay. So yeah, like, great, like I'm excited about this! And then clients would give birth. And there was a great deal of early supplementation that would happen, either in the hospital or within the first couple of weeks after birth. And I, I saw clients feeling really sad and disappointed that they weren't able to meet their goals, but it wasn't necessarily due to them not wanting to breastfeed. Right? There were other factors that were impacting their ability to meet their goals that they had set for themselves in regard to not receiving enough support or resources, work or education, priorities. There are a lot of competing priorities, right?

Not everyone had access to paid family leave, and then you have the cultural/societal type of pressures in terms of the negative responses to breastfeeding or chestfeeding in public and, access to electric pumps and things of that nature. So, there were a lot of barriers that I noted my clients, experiencing. And so that set me on a path of wanting to better educate myself so that I could be a better resource to my clients and the communities. And so, with the support of, of the program, I was able to become an IBCLC during my time there.

Yeah. And yeah, I don't know if I, without that program that I would have become, IBCLC and be able to utilize that skill set in that way.

And I also have to give, a huge thanks to, the late and just amazingly great Ann Garrett. She was the breastfeeding coordinator in San Mateo County at that time, and she's a legend and just amazing. But she also was very supportive of me becoming an IBCLC and would tell me every time she was telling me at WIC events or a lactation or breastfeeding events, that it was very critical and important that I become an IBCLC, because we needed more Black IBCLCs. And I knew that, because I didn't really see that much diversity among the IBCLCs that I had access to. But, coming from her, I think that was really important. And I think really was another catalyst in terms of, for me, not only becoming an IBCLC, but also wanting to make sure I supported who were also really interested who looked like me, if that makes sense.

Aunchalee:

Yeah. And that story, I've not heard that story before, and it really makes me think about one of your earlier research projects looking at, why do people want to, well, especially, especially people of color, why do they want to enter the lactation support field? Or, how do they do that and what is that experience? And it seems like some of these formative experiences of yours sort of resonate with that research focus, even.

Ifeyinwa:

Right. Exactly. You're talk, speaking about the motivations for entering the lactation profession: the perspectives of people of color that was, that was one of the first studies that I engaged in and becoming a faculty member. Because that was something that was very important to me. And I have to give credit. So, first to Dr. Rachel Hardeman, she and her group had done a paper looking at the motivations, for folks of color entering the doula profession. And I remember reading that paper and just saying it was an amazing, fantastic paper. First of all, her scholarship is amazing, but I thought to myself,

Aunchalee:

She's amazing!

Ifeyinwa:

Yeah, right. I can fan girl over her. Like, all day. [laughing]

I remember reading that paper and just being struck with, we need something like this and lactation or breastfeeding, right? Like how,

why is it that in a field or profession that's predominantly white that no one has asked people of color, specifically Black lactation consultants and breastfeeding peer counselors and CLEs and CLCs, what led them to want to pursue this profession or go down this path, right.

Given the inequities and disparities that we see amongst breastfeeding initiation duration and exclusivity rates, in addition to the disparities and inequities we see in the profession itself, right. I just wondered why has no one asked this question?

Aunchalee:

When you talk about the importance of amplifying stories and lived experiences, I think this is where our work has the most intersection. And in anthropology, in particular socio-cultural anthropology and, um, my sub fields, medical anthropology, we really, you know, understanding, lived experience through narrative and through that storytelling. And we often get to that place, um, where we understand these things through ethnography and different kinds of ethnographic approaches to research. And this is one of the methodological tools that you also use. And I will, it may not be because you studied with an anthropologist, but I will note that you did a post doc where you were working with an anthropologist Julianne Rutherford, right? At University of Illinois at Chicago. Yeah. So, we had it sort of like a, an anthro connection there, but....

Ifeyinwa:

Yeah. And she's amazing as well. And, um, just an amazing mentor colleague and dear friend. And so, I am grateful to her as well. I actually wouldn't be...

Aunchalee:

So can you find anthropologists in the like the most interesting places - she does, she's a biological anthropologist that studies placentas, and she's in a school of nursing and she teaches all this like really great stuff around, you know, evolution and social justice and anthropology, but, um,

Ifeyinwa:

Yeah. And just all around just, just amazing person. Right. Um, amazing scholar, amazing person. And I'm thinking about this now. I'm really surrounded by amazing anthropologists. Now that I kind of think about it.

[laughing]

I'm like between you, um, Dr. Rutherford, Dr. Hinde, Dr. Nelson, like I'm, I have anthropology just all over me and then Dr. Liese, Kylie, Like, wow. Yeah.

Aunchalee:

Well, so that brings me to this question about how do you use qualitative methods and ethnographic approaches in your own work?

Ifeyinwa:

Yeah, yeah, no, that's, that's such a great question. Um, I mean, full disclosure, anyone who knows me and knows my work, I am a qualitative researcher, through and through, trained in qualitative methods during my doctoral work and continue to do qualitative research and it, and now incorporating more mixed methods and potentially biospecimen type research, in the future. But I think there's something really critically important around, really understanding, lived experiences, and using that to really answer the questions that we're posing

Critical ethnography, really asks you to look at whatever question that you're wanting to explore, examine, and really understand what are the power dynamics, the political dynamics at play? And ultimately, you're using this body of research, this data that you're collecting to drive social change.

Aunchalee:

That's awesome.

I wanted to just give you a shout out about this new lab that you've established and promote it! *[laughing]* If we could use our platform to promote it a little bit, it's super exciting!

You've just established the Communities motivating, interdisciplinary lactation knowledge or M.I.L.K., the milk – Communities M.I.L.K. Research Lab. And I would love for you to tell us a little bit more about this lab and the projects that you have going, and, you know, any that your, your, uh, collaborators and like anything you want to share about this awesome this lab. And we will drop a link in our show notes to, the lab too, so you can check it out there, but yeah, this community's milk research lab sounds amazing. What's it all about?

Ifeyinwa:

We're trying, that's our goal. Thank you so much. So our community's milk research lab is it's a new initiative and, it's something that I've been wanting to create for some time.

So the Communities M.I.L.K. research lab may not be our final name, but it's what we have for right now. Uh, but our mission though is to improve maternal health outcomes of Black women and birthing people by conducting innovative, breastfeeding/chestfeeding and lactation research, really using a reproductive justice and racial equity lens. Like, so that's our, our mission and our goal.

And so again, this goes back to my Black infant health days, right. Um, and that, that really, really drives the work that I do now, and really wanting to focus on, um, making sure you know, that the vision that we've kind of set forth for this lab is that all Black women and birthing people and their families have access to high quality breastfeeding and chestfeeding resources, lactation support, and donor human milk. It's very similar to my overall career goals, right. That you read early on in my bio. And this is something that I think drives all of the work that I

do, uh, whether it's research related or community service related or any part of the many different, uh, service activities that I do both on campus and off campus. It is really about making sure that Black women, Black birthing people, Black families have access to high quality resources and support.

Our lab is really focused on and identifying those questions that are most important to focus on our communities. And hopefully in collaboration with our community partners conducting quality research that really provides some answers to those questions.

Because as Kimberly Seals Allers always says, "the answers are always in the community," right? Like regardless of your question, the answers are there. And so providing a way in which we can amplify what those answers are. So we're really excited. We have a number of different projects that are going on right now.

So definitely check out our website to learn a little bit more. And if there are any projects of interest that you want to participate in and, or want to share with your communities, or just learn more about, there'll be ways in which you can send us an email or contact us to learn more.

Aunchalee:

I love that. It's so exciting. And I think one of the projects that you are getting ready to initiate is a project that includes, like, as you mentioned not just this ethnographic and qualitative piece, but also looking, actually look doing a study of human milk in the context of communities and their lives and their experiences, which is what we would call in anthropology, "a biocultural approach" to understanding, you know, different patterns of lactation and differences in lactation outcomes. And so, I don't know if you want to talk a little bit more about that yet, but it's a really, like, I just love the integration of the milk science, and the qualitative piece, and the clinical piece and the public health piece. And it really just like centering it on these questions that are so important to Black families, around what happens with contraception and lactation.

Ifeyinwa:

Oh yeah. The CHARM study, which is like my baby right now.

Aunchalee:

Oh, it's so awesome!

Ifeyinwa:

I, I'm really excited about this study and this work. This is a project that came out of discussions that I've had over the years with other lactation consultants and more specifically my community partners and really being concerned about the impact of contraception and really early contraceptive use, right. And its impact on lactation and ultimately breastfeeding and chestfeeding outcomes.

There's still grave concerns in regard to the way in which early contraception and early contraceptive use is introduced to birthing

people in communities of color, and, specifically Black women and Black birthing people, right. Because not everyone is being asked about a Depo shot or an IUD or an IUC in that early postpartum period. Some people are afforded the opportunity to birth in peace and go home and think about what type of contraceptive method they want to utilize. Right? However, there are, there's this bias that is unfortunately associated with, Black, indigenous, Latinx, adolescent, mothers and birthing people.

They're not afforded the same type of reproductive autonomy that white women are afforded. And I think that's important that we have to call that out. You know, from a lactation and breastfeeding perspective, there's still grave concerns in our field in regard to early contraceptive use; however, we're really not talking about it yet.

We hear it from patients anecdotally all the time, right? My milk supply was this and that. And then I received depo or started this, or I started that and my milk supply completely dropped. And again, I know that what the literature says - but those concerns are still there, right?

Folks shouldn't have to choose but one or the other, right. It shouldn't have to be a choice, because they're both really important public health priorities. And so, we have to figure out a way in which we can support, um, individuals or families' infant feeding goals in addition to their contraceptive needs.

Aunchalee:

Absolutely. And I, you know, there's so little that we know about the impact actually on milk and milk composition. So I think that's another piece of this question is like, not only will we have, we're asking the questions that are of concern in the community, taking into consideration, like their lived experience as a really important form of evidence. And then also saying, well, we can also look at, look at the milk and see what's happening here in a way, you know, that hasn't been done before, so it's really groundbreaking work and, it's, you know, just super, super exciting that it's all coming together finally for you and, your lab so.

Ifeyinwa:

So it's, it's been a long time coming, but it is really nice to see it all coming together. [*Prince the dog barks*]

Aunchalee:

Yeah. So important "Hi Prince". [*laughing*]

Ifeyinwa:

Yeah. He wanted to make sure he got his airtime.

Aunchalee:

Yes. He's giving you a shout out. It's like, yeah mama!

Ifeyinwa:

Yes, he's been so good. I was like thinking we were going to make it without hearing from him, but, you know, that's life.

Aunchalee:

I love it. My favorite podcast episode recording episode was we were in the early days, EA and I were on a call together. And, um, she was telling a story and Ben like just, just loaded up a diaper and it was so loud. It was like several seconds long. You could hear it. I am not sure if it made it in the episode or not, but it was really, it was pretty funny.

So I'm going to switch gears really quickly. We are, um, just rounding out. This is actually the last day in August 2020, of the, we are in the midst of the coronavirus pandemic. But, August is national breastfeeding month. And this past week we just celebrated Black breastfeeding week.

You are one of the leading sort of pioneering Black researchers doing this work and really elevating the experiences and the need to conduct research that really, um, helps us to understand how to disrupt the racism that Black people experience, during pregnancy and during lactation.

But I wanted to ask you, what is black breastfeeding week? And then why is it important to you?

Ifeyinwa:

No, that's a great question. And first I have to give a shout out to the creators and founders of Black breastfeeding week: Kiddada, Kimberley, and Anaya. The three of them had this amazing idea and drive and initiative in 2013 and launched what we now know is Black breastfeeding week, really to call out, um, the inequities and disparities experienced by black women, Black birthing people, and families, and to really highlight and bring awareness to the disparities and inequities in regards to breastfeeding rates that has been ongoing for over 40 years.

Well, but with the caveat, right? Like, so the focus wasn't only to bring awareness to the disparities and inequities that they also, which I, which is one of the reasons why I love Black breastfeeding week a most is that they wanted to highlight, I like that Black women do breastfeed. Right?

Aunchalee:

I feel when I see the Twitter post and I'm not on social media a whole lot, but I do peruse Instagram every now and then just the joy and the celebration of, you know, that this beautiful relationship between a birthing parent and their infant, and then being supported by their community and their families, the intergenerational knowledge, the cultural knowledge, just like this, it just feels so celebratory. And I have learned so much all of the people who are, who participate. It really feels like Black women and Black communities are coming together to say, like, we don't want to be defined by how, white historians or white folks are talking about our experience. Like we are setting our narrative for ourself and it's a time for reflection, but also a time for celebration

Ifeyinwa: I agree.

Aunchalee: I think it's a very wonderful and important thing just, and a really powerful form of resistance in a way. I don't know if that is part of the vision for it at all, but it just feels like just, um, in the, in light of all of this history around breastfeeding over even just the past 50 years of the past century, where so much of Black history has been erased and all of that experience has just not been part of like our, our, even our nation's story about what breastfeeding has meant to Black and Indigenous and Latinx and other communities of color. It's a really powerful statement.

Ifeyinwa: And so that's one of the beautiful things I think about Black breastfeeding week. And that's why I think we should be talking about Black breastfeeding 365 days is that all of the imagery that comes out this week is just so beautiful and just so powerful that it also helps to normalize that Black women do breastfeed. And even thinking about the theme this year, in terms of "Revive, Restore, and Reclaim" how powerful that is. I think, especially given where we are right now, as it pertains to COVID-19, but also the racial reckoning that's happening in our country, related to the racism, systemic racism experienced, by Black communities, but also the police violence that, um, is experienced by both by all black people. Right? In regards to the murders of black men and women and, our LGBTQ, brothers and sisters

[and children]

And children and children. Right? Many of the unfortunate, the hashtags that we talk about in the individuals and the lived experiences that we bring up year after year, are children. And the way which right now folks aren't seeing the humanity in us. And so I think Black breastfeeding week is a time to really draw attention to that aspect of humanity that folks sometimes ignore.

Aunchalee: Yeah. That's, that's powerful and important.
Is there anything else that you wanted to shout out or mention or discuss?

Ifeyinwa: I think if anything, I just want to say thank you to the individuals and birth workers that have, even during this very challenging time, have been providing really critical resources and support to pregnant and postpartum, women and people and families within their community.

I've been fortunate to work alongside several colleagues, um, Robbie Gonzalez Dow, Robin Qualls, Brenda Reyes and Mona Lisa Hamlin. In addition to our two graduate student researchers, Alexis Bradley, and Shirley Ma, together, we've been working on the COVID-19 birth worker relief fund. And so, it's been a humbling experience to have reviewed the over 500 applications that we received in regard to the

types of support and resources that folk were asking for and needed just to continue some of the amazing work that they're currently doing. So, I just wanted to spend my last few minutes just thanking each and every one of them for their commitment to not only birth equity, the birth justice and their commitment to their communities.

Aunchalee: Thank you so much for that. And we can drop a link to that relief fund in our show notes as well. And it's a tremendous testament to your and your colleagues' commitment to communities and to, um, birth and lactation work. So thank you for your leadership and all that you do.

Ifeyinwa: No, thank you! *[laughing]*

[Music]

You've been listening to Anthrolactology. It's a podcast about breastfeeding, science, and society! Anthrolactology is hosted by me, Aunchalee Palmquist, EA Quinn, and Cecilia Tomori. Check out our blog at [Anthrolactology.com](https://anthrolactology.com) and follow us on Twitter @Anthrolactology!

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Recorded: August 31, 2020

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Artwork by Aunchalee Palmquist

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Title music, "Big Plans", by Grace Mesa

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<https://anthrolactology.buzzsprout.com/>

Episode Links:

Dr. Ifeyinwa Asiodu's [faculty profile](#) at the University of California at San Francisco that includes links to her many fabulous publications

Check out the **NEW [Communities Motivating Interdisciplinary Lactation Knowledge \(M.I.L.K.\) Lab WEBSITE!!!](#)**

Black Breastfeeding Week happens in August! Click these links to find events on your favorite social media platform <https://linktr.ee/blkbfgingweek>

[COVID-19 Birth Worker Relief Fund](#)