BREASTFEEDING, COMPLEMENTARY FEEDING AND HEALTH



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Breastfeeding promotion with elderly: UERJ Community Action Program experience

Promoção do aleitamento materno com idosos: experiência em projeto de extensão universitária na UERJ

Abstract

Food, Nutrition and Elderly Course is the main Community Action of Food, Nutrition and Ageing Project, Nutrition Institute with Third Age Open University /Rio de Janeiro State University (UERJ) partnership. Health Promotion and Popular Health Education are theoretical reference for the weekly classes where food is valorized. Since 2008, breastfeeding has been enrolled as class subject. Thus, this study reports last ten-year experience approaching this theme. Dialogue, respect for different knowledge, problem based approach and interactive methodologies allow participant's active engagement to discuss breastfeeding including their experience as the mother and grandmother; breastfeeding practice beliefs and taboos; adequate breastfeeding management and social support importance for exclusive breastfeeding. Dramatization, sentence production, demonstration and group discussion were pedagogical techniques used. These activities gave space for reflection and experiences exchange among the elderly, as mothers and grandparents, their new role. The Elderly statements

showed changes in breastfeeding guidelines and techniques from their age to the present. Furthermore, they pointed out cultural differences in breastfeeding experience ("old times" women were kept in privacy). Finally, the importance of intergenerational relations debate and "grandmother's" supporting breastfeeding role as a love synonym. The experience provided debate on the complexity of the breastfeeding surrounding issues and its over time evolution.

Keywords: Breastfeeding. Social Support. Elderly. Intergenerational Relationship.

Resumo

O curso Alimentação, Nutrição e Terceira Idade é a principal atividade do projeto de extensão Alimentação, Nutrição e Envelhecimento, do Instituto de Nutrição em parceria com a Universidade Aberta da Terceira Idade/UERI. Tem como referencial teórico a Promoção da Saúde e a Educação Popular em Saúde. É desenvolvido em aulas semanais, valorizando o alimento. Inclui, desde 2008, aula sobre aleitamento materno. O presente estudo objetiva relatar a experiência da abordagem do tema nos últimos dez anos. Metodologias lúdicas e interativas, valorizando o diálogo, o respeito aos diferentes saberes e a problematização do tema oportunizaram o debate das vivências pessoais no papel de mãe e avó; crenças e tabus que envolvem a prática do aleitamento; manejo adeguado da amamentação e importância do apoio ao aleitamento materno exclusivo. As técnicas pedagógicas utilizadas foram: dramatização, produção de frases, demonstração e discussão em grupos. Estas permitiram o espaco para a reflexão e troca de experiências entre as idosas, como mães e em seu novo papel de avós. As falas das idosas evidenciaram mudanças nas orientações e técnicas para o aleitamento, de sua época para a atualidade e diferenças culturais na experiência ("antigamente" como algo privado, em que a mulher deveria estar recolhida). Por fim, tem papel de destaque o debate sobre a importância das relações intergeracionais e o papel da "avó" no apoio ao aleitamento, reconhecido como sinônimo de amor. A experiência possibilitou um debate instigante sobre a complexidade das questões que envolvem o aleitamento materno e sua evolução ao longo do tempo.

Palavras-chave: Aleitamento materno. Apoio social. Idosos. Relação entre gerações..

INTRODUCTION

Breastfeeding is an art to be supported, learned and taught, not only by health professionals, but by society as a whole, highlighting the role of the family in its intergeracionality.¹

The practice of exclusive maternal breastfeeding (EBF) is intervention that offers effective results in infant mortality, without counting the numerous benefits for the binomial mother and child, being a strategic measure of public health. It is recommended that breastfeeding occurs in an exclusive way until the sixth month of life, and in a continuous manner with appropriate complementary feeding and healthy, until two years of age or older.²⁻⁶ It is unquestionable the incentive for adoption, maintenance and extension of this practice, which still has low adherence in the world.

In high-income countries, the prevalence of breastfeeding (BF) to 12 months of life is less than 20%, being found higher values in sub-Saharan Africa, in South Asia and parts of Latin America.⁶ In Brazil, Boccollini et al.⁷ point prevalence of EMB at 6 months and BF among children aged 12 to 14 months which has advanced a lot between 1986 (2.9% and 22.7%) and 2006 (37.1 and 47.2%, respectively). However, the authors observed a stabilization of these indicators in 2013 (36.6% and 45.4%), alerting them to the need to strengthen policies and existing programs and create new strategies in favor of the continuity of a positive evolution of these practices.⁷

The practice of breastfeeding is intertwined in the biological and social aspects, "phenomenon" called by Almeida⁸ as "a nature-culture hybrid". This approach recognizes that the physiological and nutritional issues mingle to politics, economy, culture, religion, finally, to the way of life situated in particular historical moment and for each society. In this context, it is acknowledged that the theme demands understanding and proposition of intervention actions that contemplate its complexity.

Studies have demonstrated the relevance of social and cultural context to maintain exclusive breastfeeding. The experience of breastfeeding is striking, complex and surpasses the relationship between mother and child. Partner/Husband, sisters, relatives, friends and grandparents have direct influence in this process.^{9,10}

Grandmothers play an important role in breastfeeding, which may positively affect the decision and/or maintenance of the practice. The grandmothers' participation "in process, either teaching, encouraging and or supporting breastfeeding, promotes security to the new mother."¹¹ However, various studies indicate a negative interference of grandmothers, in particular as a result of their experience.¹²⁻¹⁴ Cross-sectional study was developed in a hospital

in the interior of São Paulo¹⁴ shows that 67.3% of the grandmothers consider important to give food to the baby before six months of life; 54% think it is important to have a fixed schedule for feeding; 40% believe in weak milk; and 69% had already offered tea and water to their grandchildren.

It is believed that the grandmothers who have not practiced exclusive breastfeeding tend to influence the woman not to perform it.¹¹ These women today, grandparents and great-grandparents were mothers in a period in which it was strong the conception of "weak milk" and the bottle was stimulated, period in which the infant food industry was booming.

Historical analysis of commercial advertising of infant foods published in magazines of large circulation, in the period from 1960 to 1988, highlights the role of industry in the introduction of milk powder as a substitute for breast milk. The same study shows strong influence of marketing actions directed to the public in general and, in particular, for the health professionals. It notes that:

Marketing strategies were used both to promote these products among the general public, how to raise awareness and convince the professionals in the area of health that could indicate and prescribe industrialized food for children since the birth of these, with absolute security.¹⁵⁽⁹⁷⁾

In addition to having experienced breastfeeding in a period of devaluation of this practice, today there are new management techniques and coping with the difficulties to carry out the breastfeeding practice. Older women, before these changes, "find it strange", "surprise" and "suspect". It seems to hover doubt: "Why doing other way around as when I did it worked good?". Before the times of the feedings were fixed, the handle was in the hand of scissors for projecting the nozzle and help the child, water was offered at intervals, the baby was kept in the nursery during the first hours of life and hot water bag was used to 'break the stoned milk".

On the other hand, nowadays the recommendations emphasize the demand with freedom of schedule in the feedings, indications of different techniques for the proper grip and handling of "stoned", not supply of water or teas, the need of skin-to-skin contact and initiation of breastfeeding in the first hour after birth.¹⁶ Thus, these themes are the central axes for the development of actions to stimulate the adoption and maintenance of breastfeeding practices. It is important to reinforce the need for strengthening the support network, emphasizing the role of the older woman - grandmother and great-grandmother - as qualified supporter of these practices.

Revision of Losa-Iglesias et al.¹³ on the theme suggests that the detractor influence exerted by the grandmother's pieces of advices seems to be more related with knowledge acquired as a representative of the "Generation of bottle" than with the intentionality. It indicates that there is susceptibility to modification of standards with respect to breastfeeding, if appropriate information are made available.

It can be argued that breastfeeding has suffered aggression, modification, artificialization along the history. It is an act imbued with ideologies and determinants resulting from the concrete conditions of life. Therefore, actions that elucidate the elements that integrate the process and propagate the evidence to deal with the difficulties are priorities.

In this sense, the present work reports the experience of promoting breastfeeding within the course Food, Nutrition and Third age, activity of extension of the project Food, Nutrition and Aging - PROANE. The actions make it available the rescue of personal experiences of older women in the role of mother and grandmother/grandmother, demystify beliefs and taboos that surround this practice and propagate information about proper breastfeeding management.

METHODOLOGY

The present report reports the experience accumulated in the approach to the theme "breastfeeding" on the course Food Nutrition and Third Age, main activity of the extension project on Food, Nutrition and Aging - PROANE. Data from 2008 to 2018 were used, obtained from the course documental.¹⁷ Planning forms, records of the field notebook, photographic records, brochures/booklets of classes and annual reports of PROANE to the Deputy Dean's Office of Extension make up the analyzed archives. The programmatic contents, methodological strategies and resources will be described.

The course "Food, Nutrition and Third Age" is developed through a partnership between the Department of Social Nutrition Institute of Nutrition and the Open University of the Third Age of Universidade do Estado do Rio de Janeiro (UnATI). It integrates the core of sociocultural and educational activities of UnATI in module of Education for Health, basing themselves on the principles of health promotion, popular education in health and critical perspective of food and nutrition education.^{18,19} It is one of the oldest courses (25 years) and presents, along its trajectory, a great demand (in some years, the inscriptions were performed through drawing). It is developed over a year, in weekly lessons, with duration of 1h50min Approximately 50 elderly attend it, distributed in two classes. The course objectives are: to enumerate the formative

influences of feeding habit, to know the nutritional value of foods and the principles of a healthy diet and relate the care with the power forward to major diseases of the third age.^{20,21}

The PROANE team, responsible for the course development, is composed of undergraduate students (scholars and extension volunteers and trainees of the Discipline of Nutrition in Collective Health) and post-graduate students, supervised by Nutrition Professors. The planning precedes each lesson, is performed in proper form and serves for the definition of the activity coordinator, responsible for registering and supporting (room organization, photographic records and other relevant actions), goals, curriculum, methodological strategies, teaching resources and references. During the lesson, detailed record is performed in the field notebook, including presence list and description of the classroom conduct, contemplating the participants' impressions and statements. The assessment is performed at the end of each lesson, also recorded in the field notebook. The photographic record of different moments for each of the classes and teaching resources used is organized digitally. The classes are summarized in brochures/booklets, delivered to the participants in the subsequent lesson. Annually, PROANE develops report, which is submitted to the Deputy Dean of extension, with data available *online* since 2010.²²

Students enrolled in the course are interviewed by the technical team of PROANE. The interview aims to know the profile of the class and also serves to delineate themes, content and design of methodological strategies that will be used throughout the lessons. It is important to highlight that in this interview it is presented to the student an informed consent, as provided for in the CNS Resolution no.196/1996, for obtaining permission of registration and disclosure of information and images through photos and/or videos. The project was approved by the Research Ethics Committee of Universidade do Estado do Rio de Janeiro (COEP/UERJ no. 051/2005).

The lessons cover food and nutrition issues, contemplating the complexity inherent in the theme, from production to consumption, seeking to articulate the different elements of the food system. Biological, economic, social and cultural aspects are treated critically in view of the construction of coping strategies of the current challenges in the field of Food and Nutrition.

The course schedule is structured in three basic axes. The first, with more general themes, serves as the basis for delineating the nutritional situation, specific issues of aging and controversial issues - Food, nutrition and aging; nutritional situation today; feeding and marketing; foods of fashion; nutrition labelling; food habits and concept of healthy eating are examples. In the second, the focus is on food. The food groups are discussed, contemplating the symbolic value and nutrition, access, shopping, conservation and uses in cooking. Meat and



eggs, fats and oils, spices, fruits and vegetables and milk and derivatives integrate this axis. The theme "breastfeeding" emerges as a consequence of the topic "dairy products", in the perspective of rescuing the personal experiences, problematizing the current recommendations and enhancing the social support network. The strategies to strengthen the discussion of food in everyday life, especially the practicality in the kitchen, compose the last shaft.

RESULTS

Over the examined period, the topic of breastfeeding was worked ten times in the course Food, Nutrition and Third age: eight exclusively and two as adjacent theme (a theme associated to milk and dairy products and other sugars and sweeteners).

Dialogue, respect for different knowledge, problem based approach and interactive methodologies allow participant's active engagement to discuss breastfeeding including their experience as the mother and grandmother; breastfeeding practice beliefs and taboos; adequate breastfeeding management and social support importance for exclusive breastfeeding. The lessons started with the following question: why the insertion of the breastfeeding topic in a course with the elderly? Then, different pedagogical techniques were used, namely:

1) *Drama* - Presentation of theatrical sketch, with the characters mother/baby/grandmother/Neighbor/pediatrician - basic guide in annex 1. The participants were asked about what they saw, taking into account their own experiences and were asked to change something in the scenes presented, being invited to participate in the new scenario

Annex 1

Annex - Theatrical Sketch: Basic Guide

Scene 1: Mother, grandmother, neighbor

Mother comes with a crying baby and speaks:

- "Oh my God! This baby won't stop crying. I don't know what to do anymore. I have already breastfed".

Grandmother comes in and says:

- "My daughter I have already told you, this child has colic. Where is that tea? You should give him every time he had colic"

Mother:

- "Will that work out mom? I think he is hungry, because my milk is weak."

The neighbor comes in:

- "Is your milk weak? When I had my daughter I ate a lot of hominy and black beer to increase the milk".

Mother:

- I think it would be better to go to the pediatrician, so she can see what it is.

Scene 2 - mother, grandmother, Pediatrician

Grandma:

"Doctor, my granddaughter won't stop crying. My daughter does not know how to breastfeed".

Mother:

- "It is a short time in the breast. I think he is always hungry."

Pediatrician:

- "Are you giving the bottle to him?"

Mother:

- "No"

Grandma:

- "Did you see my daughter? Did I not tell you to give bottle?"

Pediatrician:

"Then I'll prescribe a milk for you to give the baby."

END



Figure 1. Dramatization.

2) *Demonstration* - use of a breast of cloth and/or doll to approach the correct handle. The participants were encouraged to use the material and show the different positions for breastfeeding.

3) *Production of phrases* - proposal to divide the class into pairs or trios. Each pair/trio received a word - "stoned milk", pacifier, colostrum, banana peel, hominy, colic, grandma, donation of milk and weak milk - and drew up a phrase on a piece of paper. The sentences were presented and exposed on the board for discussion. This dynamic was also used with the class sitting in a circle, written individually on an A4 paper and fixed on the chair of each student so that everyone could see the sentences constructed (Figure 2).



Figure 2. Sentence Construction.

4) *Discussion in small groups*: proposal to divide the class into small groups. Each group worked with a specific topic within the breastfeeding: advantages and disadvantages of breastfeeding, problems that can occur during breastfeeding, what to do when the milk is weak and what is the role of family and friends during breastfeeding (Figure 3).

| ALETAMENTO MATERIO QUAL O PAPEL DA FAMÍLIA E DOS AMIGOS NA AMAMENTAÇÃO? |
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Figure 3. Form used for group discussion.

Chart 1 summarizes the findings relating to the programmatic contents and methodological strategies to discuss breastfeeding in Food Nutrition and Third Age course, in the period 2008-2018.

| Chart 1. Main methodological strategies, description and content used to work breastfeeding in Food, | |
|---|--|
| Nutrition and Aging 2008-2018. | |

| Strategy | Description | Content |
|---------------|--------------------------------------|---|
| | Use of theatrical sketch with the | Weak milk/ hominy/black beer |
| Dramatization | characters: the mother, grandmother, | colic/use of tea |
| | the neighbor and the pediatrician. | Prescription of artificial milk |
| Demonstration | use of a breast of cloth and/or | Proper breastfeeding |
| | doll to approach the correct handle. | technique/handle/frequent complications |

| Strategy | Description | Content |
|-------------------------|---|---|
| Group Discussion | Debate. | Advantages and disadvantages of breastfeeding Frequent complications Attitudes toward the myth of "weak milk" Social Support Network Breastfeeding experiences Historical changes in the guidelines and techniques for breastfeeding |
| Production of sentences | Selection of words for the production of phrases (pairs or individual): "Weak Milk ", "stoned milk", "pacifier", "colostrum", "banana peel", "hominy", "colic", "Grandma", donation of milk". | Importance of breastfeeding Beliefs and taboos Proper breastfeeding technique/handle/frequent complications Milk Donation Social Support Network (family/social support) |

Chart 1. Main methodological strategies, description and content used to work breastfeeding in Food, Nutrition and Aging 2008-2018. (Continues)

The supply of fridge magnet giveaway with the slogan "I'm a breast grandma/grandpa/ friend" (Figure 4) and fundraising campaign of glasses to the human milk bank strategies were used which reflected positively to the elderly group. It is important to highlight that the summary of the content of the lesson is available to students in the form of handout/booklet.



Figure 4. Magnet "I'm a breast grandma/grandpa friend".

The proposed activities made it available rich moments of interaction between the professionals and the elderly women and among them. Thus, memories of their experiences as mothers and grandmothers/grandfathers were shared and discussed in the light of different life contexts, social meanings and cultural and scientific knowledge.

Reports were observed involving different feelings (joy, surprise, fear, pain, guilt, anxiety, conflict). The speeches of the elderly revealed experiences of success. Words such as "pleasure", "peace" and "love" described the moment. On the other hand, the failure was attributed to the different roles of women, including the work; the difficulties in the management, such as: "stoned milk", "Lack of nozzle", "cracked nozzle", "sore breasts"; the lack of guidance and recommendation of pediatricians to the use of artificial formula or early introduction of complementary feeding, aspect widely discussed in the study of Amorim.¹⁵ A report of a participant of the course illustrates the issue: "Pediatricians got in the way sometimes upon recommending the inclusion of other foods before six months." The use of foods or preparations, such as "hominy", "chicken soup", "black beer" to increase milk production also appeared in the reports. It was evident the process of changes in the guidelines and techniques for coping with the difficulties. The "news", at the same time that amaze, generate distrust. The maintenance of some beliefs based on experience and knowledge, such as fixed schedules of the feedings and supply of water and teas, were cited in the discussion and have already been evidenced in the literature.^{13.14}

According to Gross et al.:¹²

Exclusive breastfeeding is not a common practice within the studied environment, which, among other factors, is motivated by the practice of the use of teas, especially when children fall ill. The previous experiences related to the use of teas, considered positive, influence the way the grandparents and the primiparous women conceive the infant feeding reproducing the action learned, inherited culturally. (p. 536).

Another important point is the question of cultural significance of breastfeeding, the empowerment of women and the feeling of guilt before the impossibility to maintain breastfeeding. Historically, at the beginning of the 20th century, breastfeeding was a normative practice, in a hygienist vision, exclusive benefit for the baby and for the development of society. The voice of the woman and the freedom of her body was silenced, and she could feel incomplete or ashamed if not able to breastfeed.²³ The elderly reported that "an old time ago" feeding was something private, in which the woman should be alone, "before the woman went to a reserved place". In a counterpoint, currently breastfeeding is brought to the public sphere, being an integral theme of female empowerment and protection of breastfeeding.²³

(6) Breastfeeding promotion with elderly

Finally, the importance of intergenerational relations debate and "grandmother's" supporting breastfeeding role as a love synonym. It can be observed, in the speech below, the identification of the participation of the elderly in family moment: "When breastfeeding, you forget the pain of childbirth. The baby arrives naming: daddy, mommy, grandma. The first and most important food, it is so much love!". However, it also arises in another speech the need to be incorporated into the practical support in everyday life: "The support of other things in addition to the breastfeeding: food, cleanliness."

FINAL CONSIDERATIONS

The experience made an exciting debate about the complexity of the issues surrounding breastfeeding, and the meanings of breastfeeding, the positive and negative experiences, the impact of the industry in breastfeeding and its effect on the "bottle" generation, changes of techniques for the management and the importance of the social network of support and the role of parents/grandparents in this process.

For professionals and undergraduate students in Nutrition, coordinators of activities, this experience enables the extension of look about the determinants of the practice of breastfeeding and, in a unique way, instigates that strategies for the promotion and support of breastfeeding should be reconsidered.

REFERENCES

- Teixeira MA, Nitschke RG, Silva LWS. A prática da amamentação no cotidiano familiar um contexto intergeracional: influência das mulheres-avós. Revista Temática Kairós Gerontologia 2011;14:205-221.
- 2. WHO Collaborative Study Team on the Role of Breastfeeding on the Prevention of Infant Mortality. Effect of breastfeeding on infant and child mortality due to infectious diseases in less developed countries: a pooled analysis. Lancet 2000;355(9202):451-5.
- **3.** World Health Organization, UNICEF. Global strategy for infant and young child feeding. Geneva: World Health Organization; 2003.
- **4.** Horta BL, Bahl R, Martinés JC, Victora CG. Evidence on the long-term effects of breastfeeding: systematic review and meta-analyses. Geneva: World Health Organization; 2007.
- 5. World Health Organization Statement. Exclusive breastfeeding for six months best for babies everywhere. Geneva: World Health Organization; 2003. Statement 15 January 2011 available at https://www.who.int/mediacentre/news/statements/2011/breastfeeding_20110115/en/

- **6.** Victora CG et al. Amamentação no século 21: epidemiologia, mecanismos e efeitos ao longo da vida. Epidemiologia Serviços Saúde 2016;25.1:1-24.
- 7. Boccolini CS, Boccolini PDMM, Monteiro FR, Venâncio SI, Giugliani ERJ. Tendência de indicadores do aleitamento materno no Brasil em três décadas. Revista de Saúde Pública 2017;51: 108.
- **8.** Almeida JAG. Amamentação: um híbrido natureza-cultura [online]. Rio de Janeiro: Editora FIOCRUZ; 1999. 120p. ISBN: 978-85-85239-17-4.
- **9.** Sousa AMD, Fracolli LA, Zoboli ELCP. Práticas familiares relacionadas à manutenção da amamentação: revisão da literatura e metassíntese. Revista Panamericana de Salud Publica 2013;34:127-134.
- **10.** Kuschnir K. Maternidade e amamentação: biografia e relações de gênero intergeracionais. Sociologia, problemas e práticas 2008;(56):85-103.
- **11.** Siqueira FPC, Castilho AR, Kuabara CTDM. Percepção da mulher quanto à influência das avós no processo de amamentação. Revista Enfermagem UFPE online 2017;11(supl. 6):2565-2575.
- **12.** Gross, FM, Van der Sand ICP, Girardon-Perlini NMO, Cabral FB. Influência das avós na alimentação de lactentes: o que dizem suas filhas e noras. Acta Paulista de Enfermagem 2011;24(4):534-540.
- **13.** Losa-Iglesias ME, Vázquez RR, Bengoa-Vallejo RB. Papel de la abuela em la lactancia materna. Aquichan 2013;13(2):270-9.
- 14. Ferreira TDM, Piccioni LD, Queiroz PHB, Silva EM, Vale IND. Influência das avós no aleitamento materno exclusivo: estudo descritivo transversal. Einstein 2018; 6(4):1-7.
- **15.** Amorim STSP. Alimentação infantil e o marketing da indústria de alimentos. Brasil, 1960-1988. História: questões & debates 2005;42(1):95-111.
- **16.** Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Atenção Básica. Saúde da criança: aleitamento materno e alimentação complementar. 2 ed. Brasília: Ministério da Saúde; 2015.
- **17.** Sá-Silva JR, Almeida CD, Guindani JF. Pesquisa documental: pistas teóricas e metodológicas. Revista Brasileira de História e Ciências Sociais 2009;1(1):1-15.
- 18. Brasil. Ministério do Desenvolvimento Social e Combate à Fome. Marco de referência de educação alimentar e nutricional para as políticas públicas. Brasília, DF: MDS; Secretaria Nacional de Segurança Alimentar e Nutricional; 2012.
- **19.** Ministério da Saúde. Portaria nº 2.761. Institui a Política Nacional de Educação Popular em Saúde no âmbito do Sistema Único de Saúde. 2013 19 nov. Diário Oficial da União.
- **20.** Menezes MFG. Educação nutricional no processo de envelhecimento. In: Veras R, Lourenço R. Formação Humana em Geriatria e Gerontologia: uma Perspectiva Interdisciplinar. Rio de Janeiro: UnATI/UERJ; 2006. p. 217-220.



- 21. Menezes MFG, Santos DM, Tavares EL, Fernandes LP, Santos MS, Trindade, PL. Metodologia participativa com idosos: experiência do Curso de Nutrição e Terceira Idade. In: VI Seminário de Metodologia para Projetos de Extensão, 2008, São Carlos. Anais do VI Sempe Livro eletrônico metodologia para Projetos de Extensão: apresentação e discussão. São Carlos: Cubo Multimídia; 2008;(29):359-368.
- 22. Universidade do Estado do Rio de Janeiro. Sistema de Extensão da Sub-Reitoria de Extensão da UERJ [https://www.sistemasextensao.uerj.br/consulta web siext/f/t/consultaprojetosel]. Rio de Janeiro: SR3; [Rio de Janeiro, 26 de Junho de 2019; Rio de Janeiro, 26 de Junho de 2019].
- 23. Kalil IR, Costa MC. Entre o direito, o dever e o risco: olhares de gênero sobre amamentação. PerCursos 2014;14(27):07-32.

Contributors

Tavares EL, Menezes MFG and Santos DM Manezes integrated the conception and design of the research, data collection, analysis and interpretation of data, writing of the manuscript and review and approval of the final version of the article. Menezes MFG; Bahia ES, Martins TCF, Basílio EM, Freire JAL integrated the obtaining, analysis and interpretation of data and review and approval of the final version of the article.

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