Exclusive breastfeeding among people in prison: an intersectional and abolitionist approach to analyzing scientific production in Brazil from 2000 to 2022

Aleitamento materno exclusivo entre pessoas em situação de cárcere: abordagem interseccional e abolicionista para análise da produção científica no Brasil entre 2000 e 2022

Abstract

In Brazil, there has been an uncontrolled increase in incarceration of women, and this situation is not interrupted during periods of pregnancy or lactation. A scoping review was carried out to systematically map and synthesize evidence published since 2000 on the practice of exclusive breastfeeding (EBF) among imprisoned people in Brazil. Intersectionality and penal abolitionism were the theoretical-methodological approaches used to analyze the studies. A total of 25 studies were selected, 90% of which were published from 2010 to 2020. In the context of maternal and child health, they mainly exposed the difficulties of maintaining EBF in prison, including the lack of definition of a minimum period of stay for the baby, the lack of professional guidance for the practice of EBF, and the inadequate structure of prison units. In the area of law, the studies reported tensions between the disciplinary order and children’s irreducible human right to food. The studies focused the investigation on the mothers’ experiences, but did not question the practical and historical forms of imprisonment, especially regarding Black, female, and poor bodies. Critical and propositional approaches are necessary to produce evidence toward the guarantee of rights to health and food.

Keywords: Breastfeeding; Prisons; Maternal and Child Health; Brazil.

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Resumo

No Brasil, houve crescimento descontrolado do encarceramento feminino, sendo que não se interrompe essa situação em períodos de gravidez ou lactação. Foi realizada uma revisão de escopo com objetivo de mapear e sintetizar sistematicamente evidências, publicadas a partir do ano 2000, sobre a prática de aleitamento materno exclusivo (AME) entre pessoas em situação de cárcere no Brasil. A interseccionalidade e o abolicionismo penal foram as abordagens teórico-metodológicas utilizadas para análise dos artigos. Ao todo, 25 estudos foram selecionados, sendo 90% publicados entre 2010 e 2020. No âmbito de saúde materno-infantil, eles expuseram principalmente as dificuldades de manter o AME no cárcere, incluindo a indefinição de um período mínimo de estadia do bebê, a falta de orientação profissional à prática de AME e a estrutura inadequada das unidades prisionais. Na área do direito, os estudos relataram tensões entre a ordem disciplinar e o irredutível direito humano das crianças à alimentação. Os estudos focalizaram a investigação na vivência das mães, porém não questionaram as formas práticas e históricas do aprisionamento, em especial sobre corpos negros, femininos e pobres. Abordagens críticas e propositivas são necessárias para a garantia de direitos à saúde e à alimentação.

Palavras-chave: Aleitamento Materno; Prisões; Saúde Materno-Infantil; Brasil.

Introduction

Breastfeeding is a process that involves deep interaction between the breastfeeding person and the baby. The World Health Organization (WHO), endorsed by the Brazilian Ministry of Health, recommends breastfeeding for two years or more, being exclusive for the first six months and preferably started within the first hour after birth (Brasil, 2021). Despite the increases recorded in recent decades (Boccolini et al., 2017), the Brazilian National Survey of Child Nutrition (ENANI) estimated that the prevalence of exclusive breastfeeding (EBF) for up to six months was 45.8% in 2019, without significant differences across macro-regions (UFRJ, 2021). Among the aspects that need to be addressed in the discussion about the practice of EBF in the country is attention to vulnerable and minority populations, including those in prison (Boccolini et al., 2017). As the first healthy eating practice, EBF is part of the understanding of food as a basic human right, guaranteed by article 6 of the 1988 Federal Constitution, as well as the protection of motherhood and childhood.

In Brazil, the incarceration of women when they are pregnant or lactating is not avoided. Thus, these experiences make up the experiences of incarcerated women, in the same way that incarceration must make up food scenarios in the country. However, it is noted that national surveys do not systematically document the prevalence of EBF under such conditions. The situation of breastfeeding women is protected by article 5, item L, of the Federal Constitution, which ensures that incarcerated women can stay with their children during the breastfeeding period (Brasil, 1988). Therefore, penal establishments intended for women must be equipped with a nursery where they can take care of their children, including breastfeeding them until at least six months of age (Law 7210/84, art.83, §2º, with changes to Law 11942/09) (Brazil, 2009). It is necessary to highlight that female imprisonment in the country grew 664% from 2000 to 2019 (Brazil, 2019), and of the women incarcerated, 56% are Black, more than half are under 30 years of age and 66% did not have access to high school (Brazil, 2018),...
which reveals the intensification of gender, race, and class inequalities. A recent scoping review published in Portuguese assessed 33 studies on breastfeeding in prison conducted in Brazil, USA, Canada, England, Mozambique and Malawi according to actions to promote, protect and support the practice (Santos et al., 2022a). In different scenarios, the authors emphasized the health professionals as a solution to overcome the lack of knowledge and activities that encourage breastfeeding in the prison environment. Despite mentioning the occurrence of rights violations and affirming that the environment can “often be sickening” (Santos et al., 2022a. p. 2698), this review did not focus on the means of knowledge production or the agents involved in breastfeeding practices and their effects in prison. On the contrary, the evidence was synthesized to highlight the consummate fragility of women, the lack of support to meet WHO recommendations and the potential of breastfeeding as “a new perspective for change” (Santos et al., 2022a. p. 2698).

For a better understanding of health and food conditions and access to rights for incarcerated women and their children, we believe it is necessary to pay critical attention to the context and practices of the prison system in Brazil today. In this sense, we turn to a field of prison studies that has been fueled by what is known as penal abolitionism. This theoretical-political framework is based on a critique of punitive reason, which rejects punishment itself as a general model for resolving conflicts, rather than the historical forms that shape these dynamics (Batista, 2015; Passetti, 2004). Instead of re-socializing the person in prison, this framework considers that the penal system proliferates suffering, violence and stigmatization, does not restore the rights of the victim, and creates and reproduces delinquency, failing to satisfactorily resolve the issues (Pinto, 2008).

Much of this way of thinking discusses the extreme racism of the prison system in countries like Brazil and the USA, which takes on particular forms of suffering in women and young people (Davis, 2018; Batista, 2015; Alves, 2017).

It is therefore important to develop analytical paths that take into account an intersectional logic. Intersectionality as a form of critical investigation into differences, inequalities, and power relations demands an analytical and practical effort to complexify forms of oppression. This theory helps to understand axes of power and inequality, such as those marked by gender, race, class, sexuality, etc., in a situated, articulated, and codependent way (Collins; Bilge, 2021). The understanding of inequalities related to racism, critical contexts, and violence has been increasingly used in Brazilian public health (Couto et al., 2019; Shannon et al., 2022).

Therefore, this article seeks to advance the understanding of theoretical, political, and methodological frameworks through which EBF practices by people in prison in Brazil are investigated. To this end, empirical evidence published since 2000 on the topic is critically synthesized, focusing on literature produced in the areas of health and law. To deepen reflections, it is essential to identify the types of evidence available on this topic and which research lenses have been favored, through research questions and their methods, as well as the most important gaps regarding the breastfeeding experience for consideration of women and the punitive reasons of the prison system, a topic not yet reported in the studies found. It is of particular interest to dispute reflections on this topic in order to advance in the construction of knowledge that is useful to state actors in guaranteeing the rights of this population, as well as to the social movements of survivors of the prison system.

Methodology

We used the scoping review based on the following research question: what is the state of knowledge regarding exclusive breastfeeding practices among people in prison in Brazil since 2000?

The search strategy focused on EBF among imprisoned women in Brazil, from the year 2000 onwards. We highlighted the framing of the breastfeeding period under the current recommendation of exclusivity of this practice (Brazil, 2021). The search filter was applied to words...
or terms for each database, with the search strategy built on three topics: (1) Breastfeeding; (2) Prison; (3) Brazil. The variation of terms was defined with the OR operator, while the three topics were connected by the AND operator.

The following databases were searched to find manuscripts on the subject: PubMed; Scopus; Portal Regional da BVS; CINAHL; Lilacs; APA PsycInfo; and Scielo. Additional searches were carried out on Google Scholar, as well as the Theses and Dissertations Library of the University of São Paulo (USP), the Brazilian Digital Library of Theses and Dissertations (BDTD), and the Theses and Dissertations Catalog of the Coordination for the Improvement of Personnel Foundation. Higher Education (CAPES). The search procedures took place between May and June 2022.

All the material was exported to the online version of the Endnote platform. Duplicate studies were excluded. For screening, two independent researchers read title and abstract of all manuscripts. Eligibility was confirmed by reading all the studies that were approved in the previous phase, following the criteria:

- **Study design**: Quantitative, qualitative or mixed-methods empirical studies published in English, Spanish, and Portuguese were considered;
- **Context**: Studies published between the years 2000 and 2022 were considered, given the expansion of the female prison population in Brazil documented in this period;
- **Population**: The population of interest comprised cis or trans women who were in prison during the recommended EBF period, i.e., during the first six months postpartum, as described after using the terms breastfeeding, exclusive breastfeeding, or lactation;
- **Concept**: Studies that investigated EBF practices up to the age of six months in the population of interest, considering research in the context of incarceration in Brazil (prison units, prisons, penitentiaries, detentions, cells in police stations, in closed regime, and on a temporary or definitive basis).

Manuscripts not derived from scientific research, single case studies and review studies were excluded. Studies carried out in other countries or prior to 2000 were disregarded, as well as those that did not cover, partially or completely, the period of the first six months postpartum.

After confirmation of eligibility, data from each study selected for this scoping review were extracted into standardized forms. As possible, the following information was considered: year of publication, authors, title of the work, place of study, characterization of the study population, methodological approach, research question, and main findings.

The extracted data were summarized into two main areas of research, namely maternal and child health and reproductive rights. A first layer of analysis sought to understand the selected material in its own logic and framework. Subsequently, in the light of penal abolitionism and intersectionality, a reading "against the grain" was performed (Stoller, 2002 apud Lowenkron; Ferreira, 2014) to critically analyze the limits and possible effects of the knowledge produced.

**Results and discussion**

**Study selection overview**

Findings were organized in a flowchart, as shown Figure 1. During identification, 156 articles were found from the databases and 106 articles from complementary searches, from thesis and dissertation bases and Google Scholar, totaling 262 articles. Of these, 77 duplicate records were removed. In the screening phase, 99 articles from the databases and 86 articles from complementary sources were evaluated, of which 127 were excluded based on the title and abstract. After fully reading the papers to confirm eligibility, a total of 58 studies were analyzed, of which 33 were excluded according to the following criteria: concept/population (29); context (1); and study design (3). Overall, 25 studies were included in this scoping review.
General characteristics of the included studies

Among the 25 studies included, only two were published between 2000 and 2010, and the others published from 2011 to 2022. They were conducted with participants or referred to the population of the states of São Paulo, Mato Grosso do Sul, Rio de Janeiro, Rio Grande do Sul, Amapá, Pará, Pernambuco, Paraíba, Ceará, Bahia, Santa Catarina, Mato Grosso, Paraná, Sergipe, and Espírito Santo. The studies were divided into two tables, separated into those that sought to address aspects of maternal and child health (n=19) in the prison system and those that brought results within the field of reproductive rights (n=6).

The studies that sought to study EBF practices in prison in the context of maternal and child health directed their questions to: (1) analyze participants’ perceptions and experiences about breastfeeding in prison; (2) identify participants’ knowledge about breastfeeding; (3) understand maternal and child health conditions in the prison system. Details about the location, methodological approach and main findings of these studies are shown in Table 1. The main characteristics of the participants included: age ranging from 20 to 57 years, having low schooling, serving a sentence in a closed regime, sharing prison with a child, being single, and incarcerated for non-violent crimes, mostly theft and drug trafficking.

In turn, studies that examined breastfeeding in the light of issues related to reproductive rights in the country sought to: (1) analyze the guarantees and violations of mothers’ right to breastfeed in prison, using national and international laws and conventions as parameters; (2) understand the knowledge of legal guarantees and daily practices for breastfeeding by mothers and health professionals in the prison system. Information about the questions and the context of these studies is available in Table 2.

Most studies used qualitative methods, from a descriptive and cross-sectional perspective. There were no reported cases of breastfeeding by incarcerated trans people.
Table 1 — Details of the context, methodological approach, and main findings of studies in the field of maternal and child health included in the scoping review on the practice of exclusive breastfeeding among imprisoned people in Brazil (2000-2022).

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| Diuana, Corrêa e Ventura (2017) | Regional prison in a city in the interior of the state of Rio Grande do Sul. | Elucidate the repercussions of women’s imprisonment in the context of motherhood and interpersonal relationships, established before and during the sentence. | Qualitative cross-sectional exploratory research, with data collected through 13 individual semi-structured interviews and three focus groups. 15 participants imprisoned in a closed regime were included, aged 20-57 years and with education predominantly equivalent to incomplete primary education. | - Weaning identified as a practice of renouncing motherhood;  
- Some of the participants chose not to breastfeed so that their child would not suffer, while others suffered from weaning because breastfeeding was a bond with the baby. Both justifications are related to the perception of punishment and control practices in the penitentiary. |
| Fochi et al. (2017)       | Women’s penitentiary in the interior of the state of São Paulo. | Understand the experiences of pregnant women in prison.                                                    | Qualitative and descriptive study, with a period of “acculturation,” for contact with health professionals and leaders of the institution and organization of a lecture cycle. Use of the content analysis technique based on psycho-emotional approaches. 14 pregnant inmates were included, who were on average 25 years old and had two children. | - The analysis with a psycho-emotional approach identified the following categories of experiences: search for self-protection, feelings of guilt and construction of a new identity;  
- Lack of quality food for the mother to be able to breastfeed the baby;  
- Fear and pain when knowing that they will only be able to keep the baby for the first six months to breastfeed;  
- Motherhood and breastfeeding as a mechanism of pain and also of building a new identity. |
| Rios & Silva (2010)       | Hospital care center for imprisoned women, in the city of São Paulo. | To analyze the breastfeeding process in a prison in the state of São Paulo.                                | Qualitative research, carrying out semi-structured interviews analyzed according to thematic content. 20 exclusively breastfeeding mothers and three professionals involved in the practice of breastfeeding promotion were included. | - Breastfeeding in women’s prisons is a reality, but there are obstacles to complying with what is stipulated by legislation;  
- Exclusive breastfeeding was reported up to 4 months, followed by compulsory withdrawal;  
- Mothers recognize the importance of milk for their babies and recognize breastfeeding as a divine and special state, but complain about the allowed breastfeeding time and the separation, which generate discomfort and suffering;  
- The hospital care center for imprisoned women faces obstacles in complying with the recommendations, due to a lack of integration between the Health and Public Security Departments to preserve the child’s rights, regardless of the condition of imprisonment. |
Table 1 – Continuation.

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<td>Picoli et al. (2014)</td>
<td>Women’s Prison Irmã Irma Zorzi, (Agepen - MS), in Campo Grande, Mato Grosso do Sul.</td>
<td>Describe the sociodemographic characteristics, criminal history, and prenatal and postpartum care of female inmates.</td>
<td>Cross-sectional descriptive study, with data collected in a structured questionnaire during individual interviews conducted in a prison room, from May to August 2011. 12 women were included (nine pregnant women and three postpartum women). The participants reported being mixed race (n=8), with the majority being single and with incomplete primary education.</td>
<td>- The participants reported having received prenatal and postpartum consultations, but were not instructed on breast care during breastfeeding and the newborn; - Actions to promote and manage breastfeeding in the pregnancy and puerperal cycle face challenges in their implementation, although recommended by the Ministry of Health.</td>
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<td>Oliveira et al. (2015)</td>
<td>Paraíba State Penitentiary System, from July to December 2012.</td>
<td>Understand the experience of motherhood for prisoners.</td>
<td>Exploratory-descriptive study, with questionnaires and semi-structured interviews, in a physical space supervised directly by a prison officer. Content analysis was carried out. 21 women in a closed regime were included, sharing prison with a child or with a previous history of sharing, the majority aged between 18 and 25 years old, single and with incomplete primary education, a history of alcohol and/or other drug use and imprisoned for drug trafficking, with provisional legal status.</td>
<td>- Report of exclusive breastfeeding and exclusive care for the baby made possible by the prison situation as a means of strengthening the mother’s relationship with her child; - Great fear, suffering, and anguish regarding the period of separation of the mother-baby binomial and the end of the breastfeeding period; - Family abandonment gives rise to a feeling of helplessness for women, and when they are mothers, suffering and insecurity are heightened due to the lack of family support to take care of their children while they serve their sentence.</td>
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<td>Santos et al. (2018)</td>
<td>Recife Women’s Penal Colony (CPFR), in March 2014, in Recife, Pernambuco.</td>
<td>Identify the nursing diagnoses (ND) presented by nursing mothers deprived of liberty.</td>
<td>Quantitative, descriptive study, with data collected in a structured instrument. Clinical evidence was grouped and identified according to the North American Nursing Diagnosis Association I (NANDA-I) taxonomy. 18 women were included, mostly aged 19 to 21 years old, self-declared mixed race, with incomplete primary education, and imprisoned due to drug trafficking.</td>
<td>- All nursing mothers presented the following NDs: risk of impaired mother-child bond, ineffective sexuality pattern, poor knowledge about breastfeeding and poor recreational activity; - The imminent separation experienced by nursing mothers, in addition to the announced risk of interrupted breastfeeding, translates into the breaking of the bond between mother and child; - Risk factors found in the breastfeeding process refer to the inability or inconvenience of placing the child at the breast for breastfeeding and the need to wean the baby suddenly.</td>
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| Guimarães et al.   | Prison unit located in Recife (PE). | Unveil the promotion of breastfeeding in the prison system based on the perception of incarcerated nursing mothers. | Qualitative study with semi-structured interviews, conducted by guiding questions, and analysis guided by the Collective Subject Discourse technique and conceptual framework support from Imogene King’s Goal Achievement Theory (perception, interpersonal relationships, and organization). 14 nursing mothers aged 19 to 29 years old were included, most of them single and imprisoned for drug trafficking, still awaiting trial. | - The promotion of breastfeeding focused on the child’s health;  
- Conflicting interaction with health professionals thanks to the approach centered on the biomedical model and harmonious and trusting relationship with the psychosocial sector;  
- Goals and rules trigger an increase in stress in nursing mothers, interfering with their perception, and hindering their social interaction;  
- The authority exercised by the prison system reduces the decision-making power of nursing mothers, which may lead to an increase in resistance to the implementation of strategies to promote breastfeeding. |
| Cavalcanti et al.  | Four prison units located in the state of Paraíba, 2015. | To analyze the perception of breastfeeding people deprived of liberty about breastfeeding. | Cross-sectional study with a non-probabilistic sample of prisoners who were breastfeeding and collection of data on prenatal care, breastfeeding, and sucking habits. 13 women were included, mainly aged 19 to 23, without a partner, with low schooling and other children. | - 90% of mothers participated in educational activities about breastfeeding, with nurses being the health professionals who provided this guidance (66.6%);  
- Only 69.2% of mothers reported breastfeeding, with the period of exclusive breastfeeding being a maximum of 2 months for 33.3% and 1 month for 66.7%;  
- 15.4% of mothers reported nighttime breastfeeding for the child sleep;  
- All the mothers complement breastfeeding. |
| Mariano e Silva    | Six penitentiaries in the state of São Paulo, between February 2014 and May 2016. | Understand the meanings of the breastfeeding experience attributed by women deprived of their liberty. | Qualitative research, with comparative data analysis and symbolic interactionism as a theoretical framework. Interviews carried out by appointment and with the permission of the prisons. 27 nursing mothers and three pregnant women were included. There was no characterization of the interviewees. | - Breastfeeding identified as a form of protection for nursing mothers and children, with a feeling of self-worth and acceptance, allowing the perception of full capacity and completeness in carrying out the maternal role;  
- Concrete beginning of the separation process perceived with the need for weaning, determined by the institution, with a feeling of submission to the rules of the prison system and symbolic distance;  
- Despite the difficulties, breastfeeding allowed dedication, care, and love for the child, making it worth it for both parties. |

*Table 1 — Continuation.*
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<td>Silva et al. (2011)</td>
<td>Nursery Gallery of the Madre Pelletier Women’s Penitentiary (PFMP), Porto Alegre (RS).</td>
<td>Understand the experiences of motherhood in prison and maternal and child health conditions in the prison system.</td>
<td>Qualitative, exploratory research, with semi-structured interviews conducted in the prison facilities from January to February 2010, at scheduled times, and thematic content analysis. Eight participants between 19 and 33 years old and an average of seven years of schooling were included, four of whom single.</td>
<td>- Concerns about breastfeeding due to the recognition that it is a protective source of health conditions, but in an environment that is not conducive to the baby’s growth and development, and with fear that their children will become ill; - Difficulties related to lactation and lack of specialized support to overcome problems, resources and family support for child health care; - Institution employees indicate that it is often in prison that, for the first time, these women take care of their child with attention, hygiene, and affection, truly feeling like mothers.</td>
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<td>Oliveira (2011)</td>
<td>Amapá Women’s Penitentiary Complex.</td>
<td>Analyze the perception of female inmates about the importance of experiencing the practice of breastfeeding, identifying the meanings involved.</td>
<td>A qualitative and descriptive study, with individual semi-structured interviews, explored through content analysis. 14 female inmates aged between 22 and 35, with low schooling, single or in a common-law marriage were included.</td>
<td>- Women report not being in an environment that motivates them to breastfeed, which can directly interfere with the success of breastfeeding; - Breastfeeding was presented in an ambiguous way, with statements that milk supports the child in addition to the need to supplement it with water, tea or others; - Absence of health professionals to assist in the breastfeeding process, showing that the information to which the inmates had access was not passed on by the institution.</td>
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<td>Stella et al. (2016)</td>
<td>Women’s penitentiary in São Paulo.</td>
<td>Describe and analyze the only prison in the state of São Paulo that houses mothers and their babies.</td>
<td>Qualitative approach through systematic observations and interviews during weekly five-hour sessions, for six months, according to the desire and availability of the interviewees and without the presence of guards. Thematic analysis was performed. Eight incarcerated women aged 19 to 31 were included, the majority of whom were arrested for drug trafficking or robbery.</td>
<td>- Mothers complained a lot about the fact that there was not enough supply of industrialized milk by the State; - Penitentiary staff expressed the opinion that mothers who for any reason could not breastfeed their babies should not be in that particular unit; - Breastfeeding considered by the team from a medical point of view, without a socio-emotional approach, and as a requirement for mothers who adhered to this program.</td>
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<td>Monteiro et al. (2011)</td>
<td>Women’s penal colony located in Recife, opened in 1945, in the state of Pernambuco.</td>
<td>Identify the reaction of women prisoners to the confirmation of pregnancy, knowledge about breastfeeding and drug use, and describe perceptions about breastfeeding in conditions of deprivation of liberty.</td>
<td>Qualitative approach with a script for characterization and open questions, with data collection between January and February 2008 and analysis using the collective subject’s discourse. 13 women were included, eight pregnant women and five nursing mothers, the majority aged 18 to 28 years old and with low schooling.</td>
<td>- Knowledge about breastfeeding may be intertwined with their previous experience; - Reports of joy, satisfaction, high maternal self-esteem with breastfeeding experiences; - Re-educated women who did not breastfeed their children reported regret and incapacity; - Conflicting feelings between the desire to be close to their children, because they find a safe haven in them, and the desire to protect them from the difficulties and insecurities of prison, represented as a cold, gray, dark place, covered in cruelty and fear; - Cellmate relationships with solidarity and support, but there may be a risk to the baby’s physical integrity in moments of exacerbation and disagreements, and in an overcrowded environment, with restrictions on occupational activities and precarious hygiene conditions.</td>
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<td>Araújo et al. (2014)</td>
<td>Women’s Penal Complex of Bahia.</td>
<td>To analyze the perception of female prisoners about the breastfeeding process.</td>
<td>Qualitative approach, with semi-structured interviews. Eight women who were in the pregnancy-puerperal cycle and who went through the breastfeeding process in the prison were included.</td>
<td>- Manifestations of feelings of love, affection, and recognition of the importance of the baby being breastfed, despite the difficulties caused by prison; - Breastfeeding is understood as a supreme and special state; - In relation to guidance on pregnancy and breastfeeding, there was conflict over whether or not the guidance given by health professionals was known.</td>
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<td>Freire (2017)</td>
<td>Maternal and Child Unit of the Women’s Recovery Center of Ananindeua (PA).</td>
<td>Analyze the guarantee of the right to breastfeeding, based on National and International Legislation and Conventions, and know its importance for incarcerated women.</td>
<td>Quantitative and qualitative approach, with semi-structured interviews carried out on two visits in March 2017, with content analysis. Seven participants aged 19 to 26 and self-declared Black or mixed race were included, most of whom had committed drug trafficking.</td>
<td>- Breastfeeding mentioned and related to the meanings of importance and motivation; - The majority of participants related the importance of breastfeeding to the child’s physical and mental health, highlighting the nutritional aspect of breast milk and highlighting the feeling of satisfaction regarding breastfeeding within prison.</td>
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| Santos et al. (2022b) | Female prison unit, specifically for women to breastfeed their babies (Maternal and Child Unit - UMI), in the state of Rio de Janeiro. | Understand the perceptions of the values of breastfeeding for breastfeeding women in custody by the criminal system. | Descriptive-exploratory research, with a qualitative phenomenological approach, based on the axiological dimension of Schelerian thought. Seven participants aged 20 to 35, self-declared as mixed race and Black, with low schooling and family income were included. The majority reported having partners and being imprisoned due to trafficking, without a trial yet. | - Guidance on breastfeeding provided within UMI, by health professionals and nurses;  
- Two participants reported not having received guidance;  
- Under “bonding value as a process of expanding breastfeeding,” there was a perception from the first feeding, with a pleasant sensation and a good relationship with health professionals. Conflicting feelings between expanding the bond, with breastfeeding being a tool for well-being, and the weight of being the baby’s only reference, with feelings of insecurity, tiredness, and anxiety;  
- Under “breastfeeding as a value of safety and protection for the baby,” there was recognition of the safety value of breastfeeding for the baby, despite obstacles to women’s physical health. Milk has biological protection value for the baby’s health in the prison system, thus being an instrument of protection and doubt for women. |
| Santos et al. (2022c) | Institutions that received the booklet in the states: SC (1), MT (2), SP (1), PR (1), BA (1), SE (1), RS (1), ES (2), DF (2) and RJ (2). | Understand the use of the booklet “Breastfeeding in prison in times of COVID-19” by those who work with pregnant and breastfeeding women deprived of liberty. | Descriptive and exploratory research, with a qualitative approach. 13 participants, five of whom directors (managers) of prison units and eight health professionals (seven nurses and one from social services) were included. | - Professionals reported educational material as a strengthening tool for promoting breastfeeding in prison, by valuing women and disseminating information to family members, alleviating the anxieties of breastfeeding women;  
- Professionals expressed interest in the esteem and attention to inmates, stating that the booklet favored the perspective of attention to the needs of this specific public;  
- Clarifications of the material made it possible to guarantee the right to breastfeeding, being a relevant strategy for confronting the pandemic and a strengthening instrument promoting breastfeeding in prison in times of COVID-19. |
Table 1 – Continuation.

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<th>Research question/objective of the study</th>
<th>Methodological approach and participant characterization</th>
<th>Main findings</th>
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<tr>
<td>Medeiros et al., (2020)</td>
<td>Women’s Penal Colony Bom Pastor (CPFBP), Recife (PE).</td>
<td>Understand the feelings of breastfeeding women in prison about breastfeeding.</td>
<td>Qualitative, exploratory, and descriptive research, using thematic content analysis. Eight participants between 21 and 32 years old were included, the majority of whom were single, had low schooling and had other children. The period of incarceration varied from eight months to more than three years.</td>
<td>- Knowledge about the importance of breastfeeding for disease prevention, with reports on biological aspects of the composition of breast milk and its influence on the infant’s health; - Discourses transmitted by cultural values, based on experiences in relation to mothers and grandmothers; - Breastfeeding associated with the possibility of fulfilling the expected role of mother, with a feeling of obligation, or instinctively, as a way of mutual compensation between mother and baby; - Contexts of early weaning and the process of separation from children, with a dichotomy of positive feelings (desire and pleasure in breastfeeding and transmitting love) and negative feelings (inclination not to breastfeed for fear of suffering); - There was no consensus on the intramural experience regarding the impacts of prison on breastfeeding, with indifference and feelings of regret (lack of family support and breastfeeding management provided by the prison environment).</td>
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<tr>
<td>Ferreira et al. (2021)</td>
<td>Women’s Penal Institute (IPF) Aquiraz (CE).</td>
<td>Understand maternal feelings in relation to caring for their child within the penal unit.</td>
<td>Exploratory study with a qualitative approach, using the Story- Drawing technique so that women could represent caring for their children. 17 participants were included (four pregnant women and 13 with children in the nursery), aged 20 to 29 years, with low education, mostly mixed race and with more than one child.</td>
<td>- All inmates in the unit breastfed, but breastfeeding was represented only once in the drawings. One case of cross-nursing was observed. - Breastfeeding care was represented by inmates in the child’s relationship in a prison environment.</td>
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Table 2 – Details of context, methodological approach, and main findings of studies in the field of reproductive rights included in the scoping review on the practice of exclusive breastfeeding among people in prison in Brazil (2000-2022).

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<td>Simas et al. (2015)</td>
<td>Databases of the STF, STJ, and courts of justice in Rio Grande do Sul, Paraná, São Paulo, and Mato Grosso, from 2002 to 2012.</td>
<td>Critically analyze decisions involving women prisoners and their children born in prison.</td>
<td>Sectional study with analysis of local case law for a comparative approach in the state Courts of Justice. Official positions of second instance magistrates and Superior Courts were systematized, with contributions from law, social sciences, public health, and criminology. 122 documents were selected.</td>
<td>• Court rulings have moved towards reaffirming the discourse of security and maintenance of order in the face of the child’s unavailable and inalienable right to food, including the practice of breastfeeding, to health and to living with their mother.</td>
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<tr>
<td>Nunes, Deslandes and Jannotti (2020)</td>
<td>Maternal and Child Unit of the Gericinó Penitentiary Complex, Rio de Janeiro.</td>
<td>Analyze the exercise of maternal care practices in prison.</td>
<td>Qualitative study with narrative analysis, based on interviews carried out between March and July 2018, including two women who experienced motherhood during the period of imprisonment (open regime and semi-open regime) and four NGO professionals, who worked with women who had babies during their imprisonment.</td>
<td>• Prison standards and care standards are tensioned and converge in a dynamic that seeks to benefit the baby, but without ceasing to punish the woman, reaffirming gender morality; • Reprimand for women who offer bottles due to exhaustion with breastfeeding; • Early introduction of food motivated by the moment of separation of mother and baby and breakdown of the relationship; • Tension between WHO and MS recommendations and the judicially established separation of mother and baby.</td>
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<td>Diuana et al. (2016)</td>
<td>Prison units that housed mothers living with their children located in capitals and metropolitan regions (24 states and FD).</td>
<td>Identify and discuss violations and challenges to the realization of the reproductive rights of women deprived of liberty, with an emphasis on sexual and reproductive health.</td>
<td>Survey of the main national and international legislation on the reproductive rights of women deprived of liberty. Profile interviewed: pregnant women and women whose children were with them in prison (n=22) and professionals who work in the context of criminal execution (n=19), whose practices interfere with the experience of pregnancy and the exercise of motherhood in this context.</td>
<td>• The ban or restriction on monitoring children in hospital constitutes serious violence committed against mother and child in the context of healthcare; • Violation of the child’s right to family protection, simultaneously with a moral violation by preventing the mother from breastfeeding, caring, being informed and providing information to the health team at a time of great anxiety.</td>
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| Santa Rita   | Rio Grande do Sul (daycare), São Paulo (traffic and breastfeeding) and Rio de Janeiro (maternal and child unit). | Analyze institutional actions related to a particular situation experienced by women prisoners with children in the criminal execution space. | Documentary analysis of legislation and review of specialized literature to build a historical-conceptual reference framework; data collection from the State Secretariats, which manage the local penitentiary system; and semi-structured interviews with women prisoners in prison units in Rio Grande do Sul, São Paulo, and Rio de Janeiro. 10 participants were included, whose majority were between 20 and 28 years old, single, with low schooling and in a situation of incarceration for drug trafficking. | - The criterion for a child’s stay in the prison unit or in female wards or cells refers to the period of breastfeeding, and may be linked to the unilateral decision of the prison administration, whether or not it stipulates a time limit;  
- The Federal Constitution and the Criminal Execution Law do not define a minimum period for the child to remain with the mother who is serving a prison sentence, they only mention the right to breastfeeding;  
- Assistance Center for Imprisoned Women in the State of São Paulo, with length of stay with the mother of 4 months, is considered the most limited;  
- Opinion of women prisoners about the “ideal” length of stay with the baby reflects the period pre-established by the institution (RJ: 6 months, SP: 4 months, RS: 3 years) of a policy of respect for diversity;  
- Testimonials convey the connection between the mother’s pain and the separation from her child. |
Critical analysis of Brazilian production on the practice of EBF in prison settings

In this review, studies on EBF practices in prison in the area of maternal and child health showed that breastfeeding women reported ambivalent experiences. For some of these women, breastfeeding was portrayed as a special state, which could be worthwhile for both mother and baby. Care actions exclusively carried out by the mother were perceived as a means of strengthening the connection with her child, generating feelings of joy and satisfaction, in addition to benefiting maternal self-esteem (Rios; Silva, 2010; Montiero et al., 2011; Araújo et al., 2014; Oliveira; Miranda; Costa, 2015). There was an understanding that breastfeeding is a means of protection for the baby (Silva et al., 2011; Mariano; Silva, 2018; Santos et al., 2022b), as well a chance to fully exercise motherhood (Silva et al., 2011; Mariano; Silva, 2018; Medeiros et al., 2020) and also building a new identity (Fochi et al., 2017).

However, most of the studies included highlighted the great suffering associated with these women’s experiences during pregnancy and EBF. Feelings of fear, anxiety, incapacity, and regret were mentioned when the practice was interrupted (Rios; Silva, 2010; Oliveira; Miranda; Costa, 2015; Fochi et al., 2017; Diuana; Corrêa; Ventura, 2017; Medeiros et al., 2020; Santos et al., 2022b). The impossibility of breastfeeding in prison was commonly reported as mothers giving up in order to avoid suffering separation and weaning their babies, as well as the compulsory removal of the children after the maximum period provided by the prison administration (Rios; Silva, 2010; Montiero et al., 2011; Oliveira; Miranda; Costa, 2015; Diuana, Corrêa; Ventura, 2017; Fochi et al., 2017; Mariano; Silva, 2018; Santos et al., 2022b; Medeiros et al., 2020). For these women, breastfeeding becomes an artifact of punishment and control. In situations where there was a choice to wean, there were reports of women being reprimanded for offering bottles due to exhaustion from breastfeeding (Nunes; Deslandes; Jannotti, 2020).

Even with the preponderance of perceptions of distress, several studies identify participants’ understanding of the importance of the practice of breastfeeding during the period in which such practices are recommended exclusively. Knowledge about the benefits of EBF is influenced by the experiences of the interviewees’ mothers and grandmothers (Medeiros et al., 2020) and covered biological aspects and nutritional characteristics of breast milk, in addition to contributions to safety, disease prevention and promotion of physical and mental health in children (Freire, 2017; Ferreira et al., 2021; Silva et al., 2011; Araújo et al., 2014; Santos et al., 2022b; Medeiros et al., 2020).

These findings conflict with the emphasis on the lack of knowledge about breastfeeding by women in prison outlined in the scoping review by Santos et al. (2022a). In the present review, the studies recorded participants’ questions regarding breastfeeding time (Diuana; Corrêa; Ventura, 2017; Rios; Silva, 2010; Cavalcanti et al., 2018; Mariano; Silva, 2018; Medeiros et al., 2020) and repeatedly denounced the lack of adequate structural conditions for EBF in penitentiaries. The various obstacles identified included the lack of quality food for breastfeeding women (Fochi et al., 2017; Silva et al., 2011), insufficient health care (Rios; Silva, 2010; Pícoli et al., 2014; Oliveira, 2011; Stella et al., 2016; Medeiros et al., 2020), very unfavorable environment for child development (Silva et al., 2011), described as cold, dark, cruel, and unhygienic (Monteiro et al., 2011), and the lack of a family support network (Oliveira; Miranda; Costa, 2015; Silva et al., 2011; Medeiros et al., 2020).

The precarious conditions of the prison environment were compounded by the participants’ tensions with the professionals involved. In this sense, at least two layers of discussion are possible, namely: interaction with professionals working in the settings studied and the researchers’ role, particularly in the field of maternal and child health.

The first layer revealed professional approaches centered on the biomedical model of health care and focused on children (Stella et al., 2016; Guimarães et al., 2018), amid insufficient guidance on the promotion and management of EBF, breast care, and maternal health (Silva et al., 2011; Oliveira, 2011; Pícoli et al., 2014). In a supervisory tone, breastfeeding was portrayed as a conditional
element for mothers and babies to continue together (Guimarães et al., 2018; Stella et al., 2016), without considering related socio-emotional aspects. In the work by Santos et al. (2018), the standardized application of nursing diagnoses, according to the NANDA-I taxonomy, classified all situations as risk of interrupted breastfeeding and impaired mother-child bonding, poor knowledge about breastfeeding, ineffective sexuality pattern and poor recreational activity.

Despite findings on the high participation of imprisoned mothers in educational activities developed by nurses on breastfeeding (90%) (Cavalcanti et al., 2018), Guimarães et al. (2018) highlighted the stressful effects of authoritarian rules imposed by the prison system that reduce the decision-making power of breastfeeding women and increase their resistance to implementing strategies. Still, the exploratory research by Santos et al. (2022c) concluded that, for managers and health professionals from several Brazilian states, a booklet on breastfeeding in prison proved to be a tool that strengthens the practice, guaranteeing rights, alleviating anxieties, and valuing breastfeeding women, in addition to reaching family members with relevant information.

Demétrio (2014) reflects on how health professionals with excessively biomedical perspectives are more authoritarian, oblivious to the subjectivity of subjects and uncommitted to social transformations. The inconsistency between the reports of imprisoned women and professionals working in such institutions seems to diagnose this scenario, which is exacerbated by the unilateral definition of the minimum period of EBF by the penitentiary administration, varying up to four months in São Paulo (Rios and Silva, 2010; Santa Rita, 2006) and six months in the state of Rio de Janeiro (Santa Rita, 2006). In Rio Grande do Sul, it was found that the child could remain with their mothers until the age of 3, with compulsory withdrawal after this period (Santa Rita, 2006), but in a unit in João Pessoa (PB) almost 70 % of women practiced EBF for only two months (Cavalcanti et al., 2018). With the above in mind, the overall progression of EBF indicators in the “world outside prison” does not seem to be consistent behind bars, with a relevant cross-over through professional activity and the inevitable transfer of sentences (judged or not) to the children.

In a second layer of analysis, attention must also be paid to the position of researchers, as well as their means and methods of scientific production within the scope of EBF in prison. Recent analyses of available evidence continue to highlight propositions based on greater professional support to overcome this problem, circumscribing the need for specialized actions to promote, protect and support breastfeeding in prisons (Santos et al., 2022a).

In the USA, for example, Paynter et al. (2019) indicated that the topic is understudied due to the physical situation of the imprisoned woman, which generally prevents contact with the baby to participate in a breastfeeding relationship. According to the study, fewer than 12 prisons in the country have a program that allows the mother to reside with her baby, despite reports that imprisoned pregnant women wanted to be able to breastfeed and felt that the practice could help develop agency and self-esteem.

In Brazil, despite existing regulations (Santa Rita, 2006; Oliveira; Teixeira, 2014; Ventura et al., 2015), reports characterized prison environments as hostile to the physical and mental health of the mother-baby binomial. There was no evidence in this review that prison units had any positive influence or protection from the stigmas of prison punitivism, as assistance to EBF was consistently subjected to the typical dynamics of surveillance and punishment in these environments.

To this end, research in the field of maternal and child health were mostly limited to the development of interviews and focus groups, systematic observation, and the application of structured or semi-structured questionnaires, for thematic analysis of conditions, feelings, and perceptions of imprisoned women about

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2 North American Nursing Diagnosis Association NANDA International Inc. (NANDA-I).
breastfeeding. Sudbury (2005) questions how such means of research may simply replicate the discourse of responsibility and language of correction that incarcerated people learn (and sometimes internalize) as they are processed by the system. The physical environment was certainly identified among the main barriers to promoting breastfeeding (Santos et al., 2022a), but linked to the need for investment from the State, with staff training and the creation of specific spaces and breastfeeding rooms. These studies naively seem to suggest better prisons. Among the questions and analyses of the reviewed studies, there was no movement by researchers to take an in-depth look at the prison environment that surrounds pregnant and postpartum women and their children.

For an analysis with an alternative theoretical-political framework on EBF practices in this context, normalization or even the defense of a more “inclusive” structure in prison must be questioned head-on. It is necessary to understand how racist and patriarchal structures reverberate in the prison system, in a permanent form of punishment on certain bodies (Davis, 2018), and how the field of health and nutrition can ally itself with impunity to these structures. The participants in the research reviewed here reflect the sociodemographic profile of the female prison population in the country. According to Germano, Monteiro and Liberato (2018), in a macrostructural context, the scenario of mass incarceration of these women is the result of a set of processes, from the rise of neoliberal policies reducing the welfare state, the consolidation of a global policy of the war on drugs, and the feminization of poverty, added to the general phenomenon of the criminalization of poverty, which encourages the penalization of the poorest sections of the population. It is possible to observe how these phenomena intersect and perpetuate each other to induce penal selectivity and incarcerate these women. While the spotlight is on the personal failings of poor and Black women or the technical inadequacies of one prison or another, the political and economic interests that drive the expansion of prisons remain hidden (Sudbury, 2005), so that they can be framed as a black hole into which the detritus of contemporary capitalism is deposited (Davis, 2018).

In the research on reproductive rights, it has been recognized that the 1988 Federal Constitution innovated by guaranteeing that imprisoned women could stay with their children during the breastfeeding period (Santa Rita 2006; Oliveira; Teixeira, 2014), ensuring the individual, free, and responsible exercise of reproduction, and by determining the State’s duty to promote conditions and resources for this exercise, in conjunction with civil society. The right to breastfeeding must presuppose the recognition of imprisoned women as subjects of rights and understand the mother-child bond as much broader than just the act of feeding the child, or a place to simply shelter their children due to the lack of family conditions (Ventura et al., 2015).

However, the Federal Constitution and the Penal Enforcemen Law do not define a minimum period for the child to remain with the mother who is serving a prison sentence (Santa Rita, 2006). In the last 20 years, with the increase in the female prison population, there has been an increase in legislation and regulations on the subject, but state scenarios can vary widely, given the low (if any) specific regulations on the matter in some places. On the other hand, even with more incorporated state legislation on the practice of breastfeeding in prisons, as is the case in São Paulo, the established standards may not respond satisfactorily to the needs of prisoners and their children, as rights defense entities point out.

The study by Simas (2015) identified that the rulings by the Federal Supreme Court (STF), Supreme Court of Justice (STJ), and courts of justice have moved towards reaffirming the discourse of security and maintaining order. Several violations were highlighted by Santa Rita (2006), Diuana et al. (2016), Nunes, Deslandes and Jannotti (2020) in the analysis

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3 Theory from which it is understood that the recognition of a criminal is also the result of social labeling, in addition to the deviant condition (Ganen, 2019). Thus, it is possible to commit acts defined by law, but not be criminalized, thanks to the arbitrary selection of the penal system by specific groups, reproducing social standards.
of institutional actions, with decisions that resulted in the reaffirmation of gender morality. Even though the granting of a Habeas Corpus order is possible in cases of unavailability of a suitable place for the right to breastfeeding to be respected, as is the case in almost all prisons, there are still opposing positions, due to the clash of rights (Oliveira and Teixeira, 2014).

It can therefore be seen that these legal instruments and their mechanisms and conceptions of fundamental rights are inadequate and insufficient to meet demands (Colombaroli; Braga, 2014), particularly in the practice of EBF. Although crimes committed by women are less violent, the layers of exclusion to which they are exposed are remarkable (Germano; Monteiro; Liberato, 2018). Furthermore, from an intersectional perspective it is important to mention that, although race is declared as a predominant characteristic in studies with imprisoned women, none of the articles reviewed found results that related these women’s possibilities of EBF to the racial issue.

According to Dina Alves, a thinker of the Brazilian abolitionist movement, the Brazilian legal system can be considered as a (re)updating of the slave order on which the country was built. The patriarchal-punitive system had—and still has—one of its main targets in the body of Black women, which can be illustrated not only in their experience as Black domestic servants in the kitchens of White elites—most well-known image—but also in prison statistics (Alves, 2017).

Although EBF is a widely recognized practice for promoting the health of populations and the well-being of generations, there is a profound contradiction between this recognition and the technical, legal, and academic apparatus when placed in relation to the prison context. In a sense, what is revealed is precisely a profound contradiction whose effect is the lack of guarantees for the rights of incarcerated women and their children. On the one hand, the training and performance of health professionals regarding EBF practices in the prison context are in absolute disagreement with the principles of fundamental rights and universal access to health implied in the promotion of EBF. However, on the other hand, there is no legal or programmatic provision in the field of health and nutrition, including the academic production analyzed, to protect EBF and its actors from the widely known and described violations of the prison system.

As a result, breastfeeding within the prison context is generally impacted and used by the punitive power of the State, represented in the prison apparatus. This, as has been shown, is updated from time to time in the most heavily patriarchal and racist forms of the social context. So, what relationships can and should the health and nutrition field build, in terms of rights, with this apparatus? What forms, approaches and questions should be safeguarded when the academic field investigates health and nutrition, such as the promotion of EBF, in the prison context?

**Final considerations**

With the growth of the prison population over the last 20 years, there has been an increase in studies on the subject since 2010, mainly focused on the Center-South of Brazil. This article analyzes academic works in the areas of health and law on the practice of breastfeeding in prison, and reflects on the dynamics of academic knowledge production in the field of health and nutrition, in relation to the punitive power of the State. From a penal abolitionist and intersectional perspective, the findings highlighted analyses about the conditions of exclusive breastfeeding in prisons that do not question the practical and historical forms of imprisonment, especially regarding Black, female, and poor bodies. These perspectives persist over time, even with advances in legislation and guidance in the Dietary Guidelines for Brazilian Children Under 2 Years of Age.

The review found a scenario of studies that set out to learn about mothers’ experience, focusing only on noting the hostile situation for the practice of EBF and for women’s health, without more critical and purposeful approaches to changing the reality presented. Similarly, surveys of the main laws that support the reproductive rights of women in prison analyzed institutional actions and case law regarding the practice of breastfeeding, without any major points towards questioning
as to the effectiveness of the penal system in re-socializing these women.

Even though there are studies that present testimonies of health team professionals, there is a lack of research that seeks to listen to prison and health agents more broadly. This could help to explain and understand their views on EBF practices, given that according to various studies, they are involved in deciding how long breastfeeding women and their babies stay together in prison. Furthermore, there is a noticeable lack of proximity to the principles of the Brazilian Unified Health System (SUS), especially integrality and particularly through conceptions of humanization in health.

Finally, there is a need for more in-depth and broader studies on breastfeeding in prisons, using different approaches to qualify the discussion and enable better parameters to support the proposition of public policies by society and the State. The production and use of scientific evidence, combined with anti-racist, anti-punitive, and pluralistic feminist perspectives can favor better health protection for countless women, closer ties with their children, family and social coexistence, respect, and the preservation of exclusive breastfeeding without harm to their babies’ development. The analysis developed here allows us to envision that, in terms of promoting and guaranteeing rights to health and food, especially for people in contexts suffering from precariousness and extreme illness, it is still necessary to stretch the limits of the imagination and ethical alliances in the political-academic field of health beyond the bars of surveillance and punishment.

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Contributions of the authors
Santos was responsible for the study design, bibliographic review, data analysis, and interpretation, and writing the article. Tarrão contributed to the bibliographic review and data analysis and to the review of the final article. Olivar contributed to the interpretation of the analysis and the writing of the final article. Lourenço was responsible for designing the study and supervising the literature review, data analysis and interpretation, and writing the article.

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