

Enabling the 'Breastfeeding-Work Dyad' and Understanding the Contextual Pentad of Productive Work, Reproductive Work, Reproductive Health, Reproductive Rights and Reproductive Politics: The Tantalizing Microcosmic Perspectives Encapsulated with Some Imaginatively Innovative Interventions

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ABSTRACT

This 'Invited Narrative Review' seeks to explore how best to 'Enable Breastfeeding-Work Dyad' extrapolated from conceptualizing the 'Contextual Pentad Components' which have been disposed to reflect 'Optimality begetting Optimality' and situate with 'Logical Sequential Flow' re: 'Optimal Productive Work' flows from 'Optimal Reproductive Work' which itself flows from 'Optimal Reproductive Health' ultimately flowing from 'Optimal Reproductive Rights' also flowing from, and encapsulated and facilitated by, 'Optimal Reproductive Politics'. 'Optimal Infant and Young Child Feeding' is reportedly a 'Programmatic Fulcrum' of 'Optimal Reproductive Work'. The Treatise is replete with 'Tantalizing Teasers' to stimulate and invite further 'Contextual Conversational Surfing'. The 'Thrust' of the Narrative Review: 'Enabling the Breastfeeding-Work Dyad' mirrors the '2023 World Breastfeeding Week Theme' which is 'Enabling Breastfeeding: Making a Difference for Working Parents'. Some 'Imaginatively Innovative Initiatives/ Interventions' are ventilated to whet the appetite. 'Breastfeeding' is a 'Low-cost High-impact Strategy' to achieve 'Optimal Reproductive Work' for engendering 'Optimal Productive Work'.

Keywords

Baby- and Environment-Friendly Initiative, Commercial Food Formula, Commercial Milk Formula, Contextual Pentad, COVID Phenomenon, Eregie Performance Gap Index, GOBIF³E²TH, INAGOSICI Phenomenon, Infant-Friendly Community Initiative, Medical Socioeconosophy, Pre-FOAD Hypothesis, Productive Work, Reproductive Health, Reproductive Politics, Reproductive Rights, Reproductive Work, TEA Triad.

Introduction

A known statement that is relevant to this Treatise is 'Children of Today are the Leaders of Tomorrow' [1-3]. This disposes several 'Intricate and Intertwined Human Processes and Phases

amplifying Interconnectedness': Child-bearing, Child Care and Nurture, Child Growth and Development, Child-Adolescent-Adult Maturation Transformation, Adult Health and Productivity begetting Productive Leadership. These 'Processes and Phases' crystallize a Triad: 'Productive Work', 'Reproductive Work' and 'Reproductive Health'. It is uncertain what the 'Logical Progressive Sequence' should be possibly disposing a 'Near Egg before the Chick or Vice Versa Debate?'. Perhaps a 'Productive Leadership' assures 'Optimal Reproductive Health', which in turn, guarantees 'Optimal Reproductive Work' as the Foundation for 'Good Productive Work'. On the other hand, it can be argued that 'Optimal Reproductive Work' begets 'Optimal Productive Work and Leadership', which ultimately drives 'Optimal Reproductive

Health', and the 'Appropriate Sequence Conversation and Debate' continues. The 'Exclusion of Women from Productive Work' and the 'Devaluation of Reproductive Work' have engendered the emergence of 'Reproductive Rights' with the Canopy of 'Reproductive Politics'. For this Author, a logical 'Tantalizing Disposition' is: 'Optimal Productive Work' is assured by 'Optimal Reproductive Work' which, in turn, is guaranteed by 'Optimal Reproductive Health' with the 'Contextual Exactitude' of 'Reproductive Rights' and 'Reproductive Politics' ventilated as 'Contemporary Teasers'. Therefore, this Treatise disposes the 'Titular Pentad Components Sequence' and will expose the 'Components' of the Pentad only as 'Tantalizing Teasers': Only some 'Aspects' will be distilled but mostly as 'Invitations' to further 'Surf the Web' and the 'Published Literature' to facilitate a 'Conversational Discourse' on 'Enabling' and optimizing the coupling of 'Productive Work (Work)' and 'Reproductive Work (Breastfeeding)' as a 'Child Survival Dyad' while assuring 'Optimal Reproductive Health' within the 'Reproductive Rights-Reproductive Politics Complex'.

Productive Work

There is a plethora of 'Definitions' for 'Productive Work' which possibly apply to different circumstances including, for example: 'Work that narrows, clarifies or resolves issues so that when Section 6 negotiations begin, the parties will be positioned to reach final agreement earlier than would have been the case but for the interim discussions' or 'Work performed specifically for Health Net, as appropriately recorded under a Labour Tracking System or other System acceptable to both Parties' [4]. For this Treatise, 'Productive Work' will relate to 'Employment' defined in the Merriam-Webster Dictionary [5] as 'The extent or degree to which Labour Force is employed'. In this context, 'Productive Work' will be denominated in 'Productivity' which, incidentally, also has a plethora of various and varied 'Definitions' but, again for this Treatise and situate with the context of Economy, it will be regarded as 'Measuring Output per Unit of Input to gauge the Efficiency of Production' [6]. The 'Input' includes, among others: Labour, Capital and other Resources. A method of calculating 'Productivity' is a Ratio of the Gross Domestic Product (GDP) to the Hours Worked. Also, it is the 'Ratio of the Number of Units Produced to the Employee Labour Hours' or 'Ratio of Company Net Sales to Employee Labour Hours' [6]. Simply, 'Productivity' reflects 'Efficiency', which is the 'Ratio of Output to Input'. It is also reportedly possible to dichotomize and dispose 'Corporate Productivity' and 'Individual Productivity'. The 'Productive Work', denominated in 'Employment' and measured by 'Productivity', is stratified as 'Formal/ Organized' and 'Informal/ Unorganized' re: 'Specified Hours of Engagement in a day' and 'Fixed Wages' in a 'Contractual Agreement' between Employer and Employee in the former while these are not applicable to the latter [7,8]. 'Informalization of the Workforce' occurs when the 'Informal Workforce' increases in proportion in the National Economy [7].

Types of Productivity

'Productivity', which characterizes the 'Efficiency of Productive Work', can be disposed in Different Types vide infra [6]:

1. Labour Productivity: Labour Growth, Wage Levels and Technological Improvements.
2. Total Factor Productivity: Investments in Plants and Equipment, Innovations, Supply Chain Logistics Improvements, Education, Enterprises and Competition. It reflects the proportion of 'Productivity' not due to accumulation of Capital and Labour but due to Managerial, Strategic, Financial and Technological Innovations.
3. Capital Productivity: This concerns how 'Physical Capital' generates 'Goods and Services' using the 'Tangible Resources' including, among others, Labour, Materials, Office Equipment, Transportation Equipment and Warehouse Supplies. It is computed from 'The Ratio of the Number of Sales to the Physical Capital less Liabilities'.
4. Material Productivity: This relates to measuring the 'Consumed Materials' for Production of Goods and Services and include, among others: Chemicals, Heat and Fuels. It is computed from 'Ratio of Output to Materials Consumed'.

Importance of Productivity

It is suggested that 'Productivity' assures capacity to achieve 'Milestones and Targets' [9]:

1. Adhere to 'Deadlines/ Timelines'
2. Achieve 'Set Goals'
3. Contributes to 'Corporate Successes'
4. Improve Customer Services and Satisfaction
5. Improve Corporate Profits
6. Fosters Relationships and Collaboration
7. Increased Engagement and Proactive Development of Skills and Knowledge
8. Optimal Time Management with 'Reduced Stress'
9. Higher Staff Retention Rates with 'Increased Output' and 'Reduced Recruitment/ Training Costs'
10. Better 'Brand Image' and 'New Talent Attraction'

Improving Productivity and Factors

These 'Productivity Factors' can be gleaned from previous 'Communications' [9,10] and relate to 'Corporate/ Workplace Productivity' and 'Individual Productivity'.

For 'Individual Productivity':

1. Manage Energy and Time: Create 'Daily Journal of Tasks' and apply the 'Eisenhower Matrix' for 'Optimal Time Management/ Utilization' [11] and 'Pareto Principles' [12] for 'Appropriate Prioritization' situate with the '20:80 Concept'. Also, with the 'Ebbs and Flows' and 'Circadian and Ultradian Rhythms' during the day, identify and optimize the most rewarding 'Times of the Day' to discharge most Tasks'.
2. Have a more 'Realistic To-do List': It is better to set 'Realizable Targets and Tasks' to avoid dampening the zeal to succeed.
3. Avoid Distractions: 'Distractions' are 'Self-imposed Distractions' and 'Environmentally Imposed Distractions' and this can be achieved situate with upholding the 'Eisenhower Matrix Principles'.
4. Avoid Multi-Tasking: Focus on 'One Task at a Time' as it is reportedly suggested the Human Brain is not capable of really

‘Multi-Tasking’ which is equivalent to ‘Frequent and Multiple Disruptions’; rather practise ‘Multiple Coordinated Tasks Switching’.

5. Time Blocking: This involves clustering ‘Similar Tasks’ and discharging them within ‘Small Defined Time Periods’.
6. Uphold and Prioritize Healthful Habits: Drink adequate water particularly before ‘Morning Coffee’, Timely Frequent Stretches and Exercises, Adequate Sleep/ Rest.
7. Frequent Breaks: The Human Brain is refreshed with such breaks with enhanced concentration and performance.
8. Improved Workspace and Ergonomics: The ‘Work Environment’ certainly impacts on ‘Work Output’ and should be disposed to assure ‘Maximum Output’.
9. Change Workplace Scenery: It is reported such changes stimulate ‘Dopamine Production’ and has effect on performance.
10. Avoid Perfectionism: Nothing is Perfect as ‘Perfection is a Utopia’ and, therefore, avoid striving to achieve ‘Perfection’ as a MUST even though, in ‘Total Quality Management (TQM)’ [13], this is the ‘Envisioned Terminus’ that should drive a commitment to also avoid ‘Acceptable Quality Level (AQL)’ which is a ‘Recipe for Mediocrity’.
11. Avoid ‘Grit’ and ‘Discombobulation’.
12. Seek ‘Additional Training’.
13. Be ‘Focused, Confident and Optimistic’.
14. Create ‘Good Work-Life Balance’.
15. Seek Help and Clarifications as deserving.
16. Say ‘Loud Daily Affirmations’ to drive ‘Daily Tasks Completion’.

Additional ‘Individual Productivity Factors’ reportedly include: List and Prioritize Tasks, Breaks, Exercises, Eating Healthy Diets, Adequate Sleep, Deadlines/ Timelines and Discharging Largest/ Hardest Tasks First [16].

For ‘Corporate Productivity’ [9]:

1. Conduct ‘SWOT Analysis’ [14] and ‘TOWS Matrix’ [15] to deploy ‘Input/ Resources’ towards enhancing ‘Output’ for improved ‘Efficiency’.
2. Regular Feedbacks to ‘Working Teams’.
3. Create and pursue ‘Short-Term Objectives’ and ‘Long-Term Objectives’.
4. Offer ‘Appropriate Incentives’/ ‘Incentivization’.
5. Ensure ‘Good Tasks-Skills Match’.
6. Assure Provision of Required Essential/ Critical ‘Input/ Resources’.
7. Provide Staff Training and Capacity-building Opportunities.
8. Implement Staff Mobilization Programmes.
9. New ‘Work Schedule Mix’: With ‘COVID-19 Pandemic’ and the ‘New Normals’, new possibilities for ‘Work Schedules’ are now explored re: In-Person, Virtual and Hybrid. Also, the Traditional ‘Work Schedules’ are being revised/ de-emphasized: ‘9-5 Rule’, ‘7 ±2 Chunking’ etc and ‘Remote Working’ and ‘Work-From-Home (WFH)’ are being explored [16,17]. This Author has intellectually and innovatively coined

the ‘COVID Phenomenon’ to reflect the ‘Human Existential Dimensions and Impact’ of the ‘COVID-19 Pandemic’ as a ‘Global Unprecedented Devastating 21st Century Scourge’ [18].

10. ‘High-end Productivity’ is reportedly assured through: Constant Learning and Improvements, Quality Standardization and Elimination of Wastes. Increased Productivity maintains Quality and Efficient Utilization of Resources and may be situated with the ‘Eregie Performance Gap Index (e-PGI)’ [19] for ‘Development Ranking of Nations with Optimal Resource Utilization for Sustainable Development’. While ‘Optimal Resource Utilization’ enhances ‘Corporate Productivity’ in the ‘Ratio of Net Sales and Performance to ‘Input’’, the ‘e-PGI’ disposes ‘Performance Gap’ as a reflection of ‘Performance’ in relation to ‘Input’ as ‘Resource Endowment and Generation (REG)’ together with ‘Other Domains’ in the ‘e-PGI Computational Equation’: ‘Bad Insensitive Leadership with Budgetary Indiscipline (BILBI)’, ‘Followership with Constitutional Expectations (FRCE)’, ‘Corruption Perception Index (C)’, ‘Electoral Credibility (K)’, ‘Mortality Rates (M)’, ‘Inequality Indices (Q)’ and ‘Sustainability (S)’ [19].

Additional ‘Corporate/ Workplace Factors’ reportedly include: Compensation (Salaries/ Wages), Work Environment, Training, Career Development Opportunities, Wellness, Diversity, Increased Responsibility and Management Quality [6]. Also, for the ‘Individual Productivity Improvement’, avoid ‘Toxic Productivity’: The ‘Drive to be Productive at all times even at the Expense of All Other Pursuits’ [20]. The person with ‘Toxic Productivity’ is also reportedly disposed as being a ‘Workaholic’ which ‘Masks Stress and Anxiety’ with worsened ‘Corporate resultant ‘Burnout’; package ‘Manageable Bite-sized Milestones’ [20].

The concepts of ‘Productivity’ and ‘Productive Work’ dispose, in Economic Contexts, Wages, Corporate Profits and Living Standards. While ‘Productive Work’ delivers ‘Goods and Services’ and ‘Performance’ as ‘Outputs’ from ‘Optimizing Inputs’, ‘Reproductive Work’ assures ‘Productive Workforce’ for ‘Productive Work’ through harnessing certain ‘Contributory Contextual Issues’.

Reproductive Work

This reportedly is disposed as ‘ALL the Tasks associated with Supporting and Servicing the Current and Future Workforce that Undertake or Will Undertake Productive Work’ [21]. These ‘Tasks’ reportedly include, among others, Childbearing, Child-rearing/ Nurture and Others such as ‘Household Work’/ ‘Domestic Work’. ‘Reproductive Work’ is reportedly the ‘Essential Foundation of Productive Work’ and the basis for disposing the ‘Economic Importance of Reproductive Work’ and being more than just ‘Biological Reproduction’ and, hence, it is also reportedly captured as ‘Social Reproduction’ [21]. The ‘Reproductive Work’ contextualizes ‘All aspects of Labour which constitute Unpaid and Uncounted Work (Until recently) which enables the ‘Reproduction’ of ‘Waged Labour’ and includes, among others,

Child Birth, Child Care, Cleaning, Cooking and Others regarded as 'Household Work'/'Women's Labour" [22]. Also, 'Reproductive Work' is reportedly disposed as 'Associated with Care-giving and Domestic Housework Roles including Cleaning, Cooking, Child Care and the Unpaid Domestic Labour Force' [23]. Dichotomizing 'Reproductive Work' as 'Nurturant' and 'Non-Nurturant' has also reportedly been disposed for 'Programmatic Contextual Exactitude': 'Nurturant Reproductive Work' is 'Engagement in Child Care, Domestic Work and Healthcare' while 'Non-Nurturant Reproductive Work' involves 'Food Preparation/ Cooking and Cleaning' [23]. There is also reported 'Racial Gendered Division in Non-Nurturant Reproductive Work' with the 'Minority Men, especially Blacks and Hispanics, constituting the Majority of the Workforce'. Further 'Gendered Division in Nurturant Reproductive Work' is reportedly disposed thus: 'Surgeons are mostly Men' while 'Medical Assistants and Registered Nurses are mostly Women' [23]. Simply, 'Reproductive Work' is reportedly 'Work done in the Home/ House' while 'Productive Work' is 'Work done in the Marketplace/ Office/ Factory' [24]. Again, 'Reproductive Work' is reportedly likened to 'Electricity' which is 'Invisible and yet everywhere and Provides Everything' as it is 'Unrecognized, Unpaid and ultimately Necessary and Global' [24].

Importance of Reproductive Work

The importance of 'Reproductive Work' situates with the 'Children of Today are the Leaders of Tomorrow' [1-3]. This Author, however, believes that 'only the Good Children of Today will be the Good and Productive Leaders of Tomorrow'. Ipso facto, 'Only Good Reproductive Work begets Good Productive Work'. Therefore, the importance of 'Reproductive Work' reportedly includes, among others:

1. Nurturant and Non-Nurturant Reproductive Works are 'Fundamental to Functioning of Society' [25].
2. It is the 'Foundational Basis of Productive Work'
3. The Economy is fundamentally dependent on 'Reproductive Work'
4. It is the 'Soul' of 'Care Work' and 'Care Economy' [20].
5. It is the 'Work to sustain current Human Life and Future Generations' [24].

Reproductive Work and Situational Reality

Being reportedly a 'Gendered Workforce', 'Issues' have emerged consistently over time occasioning the need to have an 'Updated Situational Reality' concerning 'Reproductive Work' [20,25,26].

1. It is the 'Centre of Gendered Inequality and Understanding' and 'Devaluation of Cooking, Cleaning, Child Care and other "Women's Work"'.
2. There has reportedly been 'Transformation in the Demographics of Valued Reproductive Work' such that the ordinarily 'Unvalued, Unrecognized and Unpaid Work' mostly populated by women now has a 'Transformational Shift' with the 'Valued and Paid Reproductive Work' being mostly populated by men.
3. Women, especially of Colour and from Ethnic Minorities, are the 'Most Under-valued, Exploited, Lowest Paid and with Inequality'.

4. Further to (3) vide supra, these 'Women of Definite Description' are reportedly usually at the 'Forefront of Strikes, Struggles and Fights' for 'Better Working Conditions for All'.
5. 'Reproductive Work' is reportedly now 'Signposted' with 'Contemporary Issues' regarding: Gender, Race, Tasks, Wages and Ethnic Characterization
6. For 'Reproductive Work' and 'Productive Work', the 'Situational Disposition' is reportedly that 'Men are the Primary Bread-Winners' and 'Women are the Primary Home-Makers'
7. Further to (5) vide supra, '3 Classes of Women' are now reportedly recognized and classified in 'Reproductive Work': 'The Upper Wealthier Whites who engage the Migrants Ethnic Minorities and Blacks as Domestic Servants', 'The Engaged Migrant Ethnic Minorities and Blacks who are Domestic Servants Abroad' and the 'Women engaged by the Migrants as Watchers of their Children in their Home Countries'. This is reportedly the 'International Division of Reproductive Labour'/'International Division of Reproductive Work' [20].

'Reproductive Work' reportedly remained 'Unrecognized, Unpaid and Ultimately Necessary and Global' [24]. There reportedly was, with the '3 Classes of Women in the International Division of Reproductive Work', the 'Commodification of Reproductive Work' resulting from the 'Exportation of Migrant Workforce' and 'Outsourcing'/'Offshoring' and disposing the 'Triad of Globalization, Feminism and Capitalization': 'Migrant House Wages and Economy' [24]. This will be addressed further in this Treatise re: 'Reproductive Rights' and 'Reproductive Politics' reportedly disposed to eclipse the 'Ethnic and Racial Dimensions in Reproductive Work' and 'Close the Division and Wage Gap' and 'Implant Child Care Programmes in the Workplace' [20].

Reproductive Health

The World Health Organization (WHO) disposes 'Reproductive Health' as the 'State of Complete Physical, Mental and Social Well-being and not Merely the Absence of Diseases or Infirmary in All Matters Relating to the Reproductive System and to its Functions and Processes' [27]. This 'Concept of Reproductive Health' reportedly explores, and includes, 'Satisfying and Safe Sex Life and have the Capability to Reproduce and the Freedom to Decide If, and When and How, to Do So' [27]. It is also reportedly disposed that 'Abortion Care' is a 'Critical Part of Universal Rights of Women to Health and is Essential to the Health of Women and Girls Everywhere': It reportedly involves Clinical Practice, Health Services Delivery and Legal Policy and Interventions to Support Quality Abortion Care' [27]; implied is 'Post-Abortion Care too'.

The WHO also defines Health as 'A State of Complete Physical, Mental and Social Well-being and Not Merely the Absence of Disease and Infirmary' [28,29]. A plethora of 'Definitions for Health' exists and includes, among others: 'Health is a State of Complete Physical, Mental, Social, Emotional and SPIRITUAL Well-being, Not Merely the Absence of Disease or Infirmary' [29-31]. This Author is amplifying the 'Concept of SPIRITUAL HEALTH' to dichotomize between 'Responsible Parenthood' and

‘Planned Parenthood’ and to dispose that ‘Abortion Care’ (And presumably ‘Post-Abortion Care’) is within the ‘Conversational Discourse’ of the Latter while it is COMPLETELY ECLIPSED from the ‘Approved Conversational Doctrinal Space’ of the Former particularly as regards ‘Catholicism’.

Another perspective to ‘Reproductive Health’ reportedly disposes it as the ‘Condition of Male and Female Reproductive Systems during All Life’s Stages’ [32]. This reportedly covers the discourse on Reproductive Organs, Hormone-producing Glands and Tissues including the Pituitary and the Brain, Ovaries in females and Testes in males. Expanding the ‘Reproductive Health Conversational Discourse and Space’ and ‘Women Sexual and Reproductive Health’, but as mere ‘Tantalizers’, disposes these ‘Women Health Issues’: Menstruation, Fertility, Cervical Screening, Contraception, Pregnancy, Sexually Transmitted Infections (STIs), Endometriosis, Polycystic Ovary Syndrome (PCOS), Menopause, Unplanned Pregnancy, Abortion and Safer Sex [33]. The Concept of ‘Women Sexual and Reproductive Health’ reportedly disposes ‘Choices and Decisions concerning Pregnancy, Having or Not Having Children, Right to Healthy and Respectful Relationships, Inclusive Safe and Effective Health Services, Access to Reproductive Health Information, Effective and Affordable Contraceptive Methods and Access to Timely, Safe and Effective Support and Services re: Unplanned Pregnancy’ [33]. Again, situate with ‘Spiritual Health’, this Author disposes that ‘Sexual and Reproductive Conversations and Practices’ MUST be expanded to take cognizance of ‘Catholicism’ and ‘Natural Procreative Technology (NaProTech)’ re: Doctrinal Dispositions concerning ‘Contraception’, ‘Assisted Reproductive Technologies (ART)’ and ‘Abortion/ Abortion Care and Post-Abortion Care’ [34-36].

Importance of Reproductive Health

‘Reproductive Health’ is better understood and appreciated as part of ‘Sexual and Reproductive Health and Rights’ [37].

1. Within the WHO ‘Definition of Health’, ‘Reproductive Health’ is necessary for ‘Holistic Health and Well-being’.
2. It is important for Safe Sexual Reproduction as the Natural Way of Producing ‘Offspring from two Parental Organisms’.
3. It is necessary for Satisfying and Safe Sex-Life.
4. Prevents the ‘Spread of Sexually Transmitted Infections’ which are mostly through Sexual Intercourse.
5. Guarantees ‘Overall Health in the Creation of New Organisms’.
6. It is necessary for the ‘Proper Functioning of the Reproductive Systems for the Production of New Organisms’.

Objectives of Reproductive Health

1. Enabling Youths to be better aware of, and understand, ‘Sexual Health’.
2. Improve Adolescents’ Awareness of the Hormonal Basis of Initiation of Reproduction.
3. Assisting with the Prevention of Sexually Transmitted Infections (STIs).
4. Assuring Healthy Pregnancy, Delivery of Baby and Prevention of Infections and Disorders in both Baby and Mother.

Components of Reproductive Health

‘Reproductive Health’ reportedly includes important ‘Components’ [37]:

1. Family Planning: The ‘Ability of a Couple to Anticipate, and Attain, the Number of Children with Proper Spacing and Timing between Births’.
2. Sexual Health: Sexual Relationships with a ‘Positive Approach’ and ‘Proper Use of Contraceptives’ to ‘Prevent Unwanted Pregnancies and Sexually Transmitted Infections’. Situate with ‘Spiritual Health’ within the ambit of ‘Holistic Health’, this Author embraces, and completely aligns with, the capture of ‘Catholicism’ and ‘Natural Family Planning (NFP)/ Fertility Awareness’ [38,39].
3. Maternal Health: This consists of ‘Provision of Care of a Woman’s Health during Pregnancy and Access to Relevant Care in Emergencies’.

Birth Control Methods and Reproductive Health

Several ‘Birth Control Methods’ are reportedly deployed situate with ‘Reproductive Health’ and include, among others [37]:

1. Natural and Traditional Method
2. Barrier Method
3. Intrauterine Devices (IUDs)
4. Oral Contraceptives
5. Injectables and Implants
6. Surgical Methods

This Author, umpteenth time, disposes that, situate with ‘WHO Holistic Health’ and guided by ‘Spiritual Health’ and ‘Catholicism’, a veritable ‘Birth Control Method’ to be explored is ‘Natural Family Planning (NFP)/ Fertility Awareness’ and ‘Natural Procreative Technology (NaProTech)’.

Reproductive Health in Both Sexes

The specific peculiarities are reportedly disposed for ‘Male Reproductive Health’ and ‘Female Reproductive Health’ [37]:

1. Male Reproductive Health: This covers the Penis, Testes, Scrotum, Epididymis, Prostate, Vas Deferens, Vas Efferens and Seminal Vesicles; ‘Good Hygiene and Injury Protection’ assure ‘Healthy Male Reproductive System’.
2. Female Reproductive Health: This covers the Ovaries, Uterus, Fallopian Tubes, Vagina, Vulva, Mammary Glands/ Breasts and also ‘Reproductive System in Different Stages’ concerning Menstruation, Fertility, Contraception, STIs, Menopause and ‘Chronic Infections and Disorders’ resulting in, for example: ‘Polycystic Ovary Syndrome (PCOS)’ which involves possible ‘Anovulation’, a more severe Disorder and frequently affects Fertility compared with ‘Polycystic Ovary Disease (PCOD)’ which is less serious, involves release of ‘Immature or Partially Matured Eggs’ with Fertility reportedly possibly unaffected [37].

Disorders of Reproductive Health

These are better appreciated from the perspectives of the ‘Male Reproductive System’ and ‘Female Reproductive System’ albeit as ‘Tantalizing Teasers’ [32]:

Reproductive System and Health/ Male Disorders

1. Impotence and Erectile Dysfunction.
2. Low Sperm Count and other 'Sperm Count Disorders'.
3. Injury to the Male Reproductive Organs from 'Contact Sports', Very Tight Underwear etc.

Reproductive System and Health/ Female Disorders

1. Early and Delayed Puberty
2. Endometriosis
3. Breastfeeding Difficulties and Inadequate Breastmilk Supply
4. Reduced Fertility and Infertility
5. Menstrual Disorders
6. PCOD and PCOS
7. Pregnancy Disorders
8. Uterine Fibroids
9. Pelvic Inflammatory Disease (PID)
10. Medical Disorders in Pregnancy

Environment and Reproductive Health

The 'Environment' affects 'Holistic Health' and is the undergirding 'Determinant' of the '1984 WHO Definition of Health and Well-being' [40]. The 'Environment', of necessity, affects 'Reproductive Health' but will not be ventilated exhaustively and comprehensively situate with this Treatise as a 'Tantalizing Teaser'. However, the role of 'Endocrine Disrupting Compound (EDCs)' will be disposed as 'Further Tantalizers' [32]. The 'EDCs' are reportedly 'Compounds which Interfere with 'Hormones Production'' with resultant effects on 'Reproductive Health'. Some 'Environmental Compounds' and 'EDCs' are disposed *vide infra*:

1. Lead: It is reported to affect Fertility in both males and females
2. Mercury: Affects Memory, Attention and fine Motor Skills
3. Diethylstilbesterol (DES): Increases Cancer occurrence, Infertility, Pregnancy Complications in the daughters of 'Exposed Persons'
4. Endocrine Disrupting Compounds (EDCs): Have effects on the Pituitary, Fertility and Pregnancy.

The National Institute of Environmental Health Sciences (NIEHS) reportedly funds 'Research into Environmental Factors affecting Human Reproductive System and Reproductive Health' [32,41,42]. The 'Research Thrusts' of the NIEHS reportedly include, among others:

1. Study of Environment, Lifestyles and Fibroids (SELF)
2. Pregnancy and Children Epigenetics (PACE)
3. Calorie Restriction, Environment and Fitness: Reproductive Effects Evaluation (CaREFREE)
4. Environment and Reproductive Health (EARTH) Study.

Some of the 'NIEHS Research Findings' reportedly include, among others [32]:

1. Lifting Heavy Loads, Non-Daytime Shifts reportedly result in 'Reduced Number of Eggs in the Ovaries'.
2. Flame Retardants and Plasticizers reportedly result in 'Reduced Number of Ovary Cells'. Flame Retardants leach easily into the Environment: Dust, Food and Water.

3. Flame Retardants and Plasticizers available in Substances from Manufacturing, Use and Disposal and also reportedly affect 'In-Vitro Fertilization Successes'. Some of the 'Flame Retardants' reportedly include, among others, Bromine, Chlorine, Phosphorous, Boron, Metals:
 - a. Brominated Flame Retardants (BFRs); EDCs
 - b. Hexabromocyclododecane (HBCD)
 - c. Organophosphate Flame Retardants (OPFRs)
 - d. Polybrominated Diphenyl Ether (PBDE)
 - e. TetrabromobisPhenol A (TBBPA)
4. Several 'Other Reported Results' are Endocrine Disruptions, Thyroid Disruptions, Immunotoxicity, Reproductive Toxicity, Cancers, Adverse Reactions on Foetal and Child Development and Neurobehavioural Functions.
5. Exposures to several 'Other Agents' (Dioxins, Phythates, Phenols, Arsenics) reportedly result in Obesity, Sperm Chromosomal Abnormalities, Hypertension, Low-Birthweight, Early-onset Puberty. Bisphenol A (BPA) reportedly causes 'Insufficient Breastmilk' and 'Reduced Breastfeeding'.
6. Soy Forms: Menstrual Pain and Disorders from Endometriosis, Large Fibroids.
7. Normal Vitamin D: Reduced Uterine Fibroids.
8. Hair-Straightening Products: Increase Uterine Cancers.

Strategies for Maintaining Reproductive Health

Several 'Tips and Ways' have reportedly been suggested for 'Maintaining the Reproductive Health' [43]:

1. Uphold 'Precautionary Measures' to keep the 'Reproductive System Healthy': Avoid Trauma and Infections which prevent Pregnancy, Increase Infertility and Reduced Overall Well-being.
2. Maintain 'Healthy Lifestyles': Proper/Adequate Diet, Exercises, Healthy Body Weight, Adequate Sleep and Rest, Avoid Excessive Stress.
3. Avoid Smoking to reduce 'Toxins Exposure' and reduced Addiction, Cancer and Coronary Heart Disease.
4. Regular Screening and 'Partner Screening': Pap Smears, STIs Tests and Tests for Infections.
5. Engage in Respectable Relationships and Satisfying Safer Sex.
6. Beneficial Regular Orgasms reportedly thought to release 'Healthy Hormones', facilitates Good Sleep and Uterine Contraction with 'Easy Birthing' and 'Delivery of Baby'.
7. Increase Consumption of Calcium and Magnesium: Magnesium reportedly reduces Headaches, Sugar Cravings and Dizziness while Calcium reportedly reduces Premenstrual Fatigue, Depression and Cravings. Calcium and Magnesium are reportedly available in Coconut, Seaweed, Sesame Seeds, Lentils, Avocado, Nuts and Dark Leafy Green Vegetables; Magnesium is also obtained through the Skin from Magnesium-containing Bath Salts.
8. '4 Pillars' for 'Good Reproductive Health' also include: Nutrition, Exercise, Relaxation and Sleep [44].

This Author has consistently subscribed to ‘WHO Holistic Health and Well-being’ [28,40] with particular amplification of ‘Spiritual Health’ in tandem with ‘Catholicism’ and related ‘Doctrinal Principles, Practices and Ethos’ because of the determinant belief in ‘HOLISM’ (Not ‘REDUCTIONISM’) undergirding the ‘Medicine and Health/ Well-being’-‘Religion and Spirituality’ Dyadic Complex [45-48]. Indeed, ‘Religion’ is intricately intertwined with ‘Reproductive Politics’ as will be disposed subsequently vide infra: ‘Religion and Reproductive Politics’ and ‘Reproductive Politics covers Religious Issues’.

Reproductive Rights

From the United Nations 1994 International Conference on Population and Development (ICPD) [49], ‘Reproductive Rights’ is reportedly disposed to ‘Embrace certain Human Rights that are already recognized in National Laws, International Laws and International Human Rights Documents and other Consensus Documents. These Rights rest on the recognition of the Basic Rights of all Couples and Individuals to Decide Freely and Responsibly the Number, Spacing and Timing of their Children and to have the Information and Means to do so, and the Right to attain the Highest Standard of Sexual and Reproductive Health. It also includes the Right to make Decisions concerning Reproduction Free of Discrimination, Coercion and Violence, as Expressed in Human Rights Documents’ [49-51]. As indicated in the ‘Tool for Monitoring State Obligations to Reproductive Rights’, ‘Reproductive Rights’ are ‘Human Rights’ [52]. International Standards on ‘Reproductive Rights’ are reportedly grounded in Core Human Rights Treaties. Therefore, ‘Reproductive Rights’ are reportedly derived from a range of ‘Fundamental Human Rights’. States are, therefore, reportedly expected to Respect, Protect and fulfill the ‘Rights Protected in these Treaties/ Documents’. States, situate with their Obligations, MUST ensure that Reproductive Health Information, Goods and Services are ‘Available, Accessible, Acceptable and of Good Quality (AAAQ)’ in order for States to Meet their Obligations to Respect, Protect, and Fulfill ‘Reproductive Rights’ [52].

The ICPD Programme of Action [50] reportedly defines ‘Reproductive Health’ as previously disposed vide supra in this Treatise [27]. The Mission of the United Nations Population Fund (UNFPA) is reportedly ‘To deliver a World where Every Pregnancy is Wanted, Every Birth is Safe and Every Young Person’s Potential is Fulfilled’ [50].

Reproductive Rights ‘Issues’

1. Freedom from Discrimination
2. Contraceptive Information and Services
3. Safe Pregnancy and Childbirth
4. Abortion and Post-abortion Care
5. Comprehensive Sexuality Education
6. Freedom from Violence against Women
7. HIV/AIDS.

The ‘Reproductive Rights’ disposed vide supra reportedly derive from more ‘Fundamental Human Rights’ equally distilled vide infra [52]:

1. The Right to Life
 2. The Right to Liberty and Security of the Person
 3. The Right to Health
 4. The Right to Decide the Number and Spacing of Children
 5. The Right to Consent to Marriage and Equality in Marriage
 6. The Right to Privacy
 7. The Right to Equality and Non-Discrimination
 8. The Right to be Free from Practices that Harm Women and Girls
 9. The Right to be Free from Torture or Other Cruel, Inhuman, or Degrading Treatment or Punishment
 10. The Right to be Free from Sexual and Gender-Based Violence
 11. The Rights to Education and Information
 12. The Right to Enjoy the Benefits of Scientific Progress
- ‘Reproductive Rights’ reportedly derive from ‘Fundamental Human Rights Protections’ and States MUST ensure that ‘Women and Adolescents can Determine When and Whether to Bear Children, Control their Bodies and Sexuality, Access Essential Sexual and Reproductive Health Information and Services, and Live Lives Free from Violence’ [52].

Reproductive Rights and Groups Requiring Special Considerations

With ‘Vulnerabilities’, ‘Inequalities’ and ‘Structural Disparities’, some ‘Special Groups’ are reportedly identified for ‘Special Considerations’ concerning ‘Reproductive Rights’ Implementation [52]:

1. Adolescents
2. Migrant Women
3. Minorities, Indigenous Peoples and Afro-descendants
4. Older Persons
5. Persons with Disabilities
6. Women and Adolescents in Conflict and Post-Conflict Zones
7. Women in Institutional Settings

Reproductive Politics

‘Reproductive Politics’ is the Contextual and Conceptual ‘Melting Pot’ or ‘Potpourri’ for the ‘Pentad’ representing: Productive Work, Reproductive Work, Reproductive Health, Reproductive Rights and the Reproductive Politics inclusive. ALL ‘Core Contents and Technicalities’ of the ‘Pentad’ are redispersed herein. It is reportedly suggested that ‘Politics’ is all about ‘Power’: ‘Who has it’, ‘How it is obtained’, ‘What is its Magnitude or Quantum’ and ‘What is it used for as an End?’ [53]. Therefore, it is reportedly conjectured that ‘Reproductive Politics’ is disposed with Politicians, Policy-makers and Governments pursuing ‘Decisions and Trajectories’ to ‘Actualize and Nurture Power’ for their own ends and benefits. It is reported that ‘Political Decisions and Associated Policies that Undermine or Intentionally attack Sexual and Reproductive Health and Rights (SRHR) are often Driven by the Political Priorities of those in Power, underwritten by the Incentive of Politicians and Decision-makers to Gain or Retain Political Power’ [53]. ‘Reproductive Politics’ is, however, reportedly expected to address ‘The Capacity of People to Access and Realize their Sexual and Reproductive Health and Rights (SRHR)’ [53] and as a ‘Melting

Pot/ 'Potpourri' for ALL the 'Contextual Pentad Components'.. The 'Perspectives, Scope and Meaning' of 'Reproductive Politics' differ in 'Local, National, Regional and International Spaces'. It is, in fact, reportedly disposed 'How All Politics is Now Reproductive Politics' [54].

There is reportedly a plethora of 'Definitions and Contextual Perspectives' disposing 'Reproductive Politics'. Concerning 'Human Reproduction', 'Reproductive Politics' relates to 'Policies, Debates and Decisions/ Solutions' affecting its 'Fundamental and Sequential Steps' [55]:

1. First Step is Sexual Intercourse: 'Who should be sexually active and with Whom?' are Active Debates requiring Formal Decisions and Policies situate with Political and Religious Persuasions with 'Conservative Religions' subscribing only to 'Heterosexual Marriages and Coital Relationships'.
2. Second Step is Conception: Natural Conception and Artificial Conception through 'Assisted Reproductive Technologies (ART)' present 'Conversational Discourse and Debates' with 'Formal Decisions and Policies' concerning 'Eligibility, Parental Involvement and Cost-bearing', 'Use of Fertilized Eggs for Stem Cell Research and Embryo Adoption' among others.
3. Third Step is Pregnancy and Birth: There are reportedly several 'Issues' for 'Debates, Decisions and Policies' concerning Abortion and Pregnancy Termination. There reportedly are 'Pro-Choice Groups' committed to Comprehensive Sex Education and Access to Contraceptives and 'Pro-Life Groups' committed to Abstinence-only Sex Education requiring 'Formal Decisions and Policies'. The 'Pro-Life Groups' may also facilitate 'Sexuality Education (Not Sex Education)'.

Thus, 'Reproductive Politics' reportedly disposes 'Issues' including, among others: Sexuality, Marriage, Regard for Life and Regard for Self and Body. These 'Issues' mostly involve 'Women' and the 'Formal Debates, Decisions and Policies' relate largely to 'Women' [55]. This undergirds the appreciation of the emergence of 'Feminism' in 'Contemporary Conversations' and will be distilled further in this Treatise.

Further to the '1973 Roe v. Wade 'Issues'', 'Reproductive Politics' became a Technicality reportedly introduced by 'Feminism Proponents' to focus on: Contraception, Abortion, Adoption and Surrogacy to address the related Medical, Religious, Social, Political, Ethical and Economic 'Issues', among others, and whether they are enmeshed in 'Public Space' and/ or 'Private Space' [56].

'Reproductive Politics' also reportedly concerns 'Women', 'Family and Family Life' and 'Work Life' and 'The Balancing Act as a Major Contributor to How Women Manage Work, Family, and Health' [57]. The 'Twin Challenges' of 'Family Life' and 'Work Life' reportedly affect women's ability to be self-determinant requiring time to break out of 'Poverty and into Economically Independent Life' [57]. 'Reproductive Politics', from the various 'Contextual Perspectives', reportedly disposes 'Unique Matters' concerning 'Women' and 'Economy/ Economics', 'Capitalism',

'Gender/ Sexism', 'Patriarchy', 'Circumstances in the South', among several others, reportedly with resultant 'Feminism and Marxism in Reproductive Politics' and 'Social Reproduction' [57]. Consequently, this Treatise disposes, in a 'Tantalizing Teaser', the Concepts of 'Marxist Feminism', 'Socialist Feminism' and 'Feminist Economics' among other 'Contemporary Conversations'.

The 'Contextual Pentad' and Marxist Feminism, Socialist Feminism and Feminist Economics

Capitalism and Traditional Economics typically reportedly have two 'Spheres': 'Economic Realm' and 'Household Realm' [58]. The 'Economic Realm' reportedly involves the 'Production of Goods and Services', 'Captured in the Economy' with 'Paid Work' and mostly 'Dominated by Men' while the 'Household Realm' reportedly involves the 'Production/ Creation and Care for Life and the Environment', 'Unrecognized in the Economy' with 'Unpaid Work' and mostly 'Dominated by Women' [58]. The 'Marxist Feminism', 'Socialist Feminism' and 'Feminist Economics' are reportedly 'Reactions/ Responses' to the 'Contextual Situational Realities' of the dichotomous 'Economic Realm' and 'Household Realm' [58,59].

'Marxism' is reportedly the 'Movement' by 'Men and Women' inspired by Karl Marx (1818-1883) and Friedrich Engels (1820-1895) who reportedly contextualized that 'Capitalism' is a 'Mode of Economic Production based on the Exploitation of the Working Class ('Proletariat') Labour by the Bourgeois Class (Owners of Capitalist Companies)' [59]. Thus, 'Capitalism' reportedly has two dichotomous 'Classes': The 'Bourgeoisie (Owners of the Means of Production)' and the 'Proletariat (Workers engaged in Waged Labour)' [59]. Reportedly, the workers received 'Lower Wages' in exchange for their 'Labour and the Produced Goods and Services' with the 'Blue-collar Worker Working for Another Person's Profit with 'Commodification' of the Former' [59].

'Feminism' is reportedly the 'Advocacy of Women's Rights on the Basis of Equality of the Sexes' deriving from the disposition that 'All Genders Have Equal Rights and Opportunities' [5,60]. While 'Socialism' is reportedly the 'Political and Economic Theory and Practice that the Means of Production, Distribution and Exchange are Owned or Regulated by the Community as a Whole' deriving from 'Property and Means of Production being Owned and Controlled by the State/ Government' [5,61].

'Socialist Feminists' reportedly dispose that 'Women are Exploited by a Dual System: Capitalism and Patriarchy, and, therefore, 'Over-Exploited'' [59]. 'Patriarchy' is reportedly 'How Societies are Organized Based on Male Domination and the Subordination of Women'. Just as 'Capitalism' organizes both the Economy and Society, 'Patriarchy' reportedly has Political, Economic, Social and Cultural Dimensions and Implications [59]. On the other hand, 'Marxist Feminists' reportedly dispose that 'Capitalism' begets 'Patriarchy' and, in order to 'Protect Property Bequeathal', uphold 'Monogamous Marriages' with 'Women Subjugated/ Subordinated to Fathers initially and Husbands subsequently' [59].

There is reportedly some confusion about the entities ‘Socialist Feminists’ and ‘Marxist Feminists’: Same, Interchangeable or Different. While ‘Marxist Feminists’ reportedly believe ‘Women are Disadvantaged and Discriminated Against on the Basis of Class’, the ‘Socialist Feminists’ reportedly dispose that ‘Women are Disadvantaged and Discriminated Against Based on Class and Gender’ [59]. Capitalism has reportedly resulted in an ‘International Division of Labour’ but also in a ‘Sexual Division of Labour’ with ‘Men Dominating Economic Production (‘Paid and Recognized work’) while ‘Women Dominate Social Reproduction’ [59] and more importance is reportedly ascribed to ‘Economic Production (Of Material Goods)’ than to ‘Social Reproduction (Of People)’ with ‘Controversial Ethical Disposition’. It is reportedly disposed that ‘Social Reproduction’ concerns ‘Women’s Work within the Family’ which is for the ‘Reproduction of Life (Giving Birth, Child Rearing, Society Functioning and Male Workers’ Productive Capacity and Work Ability)’ and reportedly subsumes ‘Domestic and Care Work (Work by Women, including Household Chores and Unpaid/ Devalued, for Men, Elderly and Children)’ [59].

‘Feminist Economics’

The entity ‘Economics’ is the ‘Branch of Knowledge dealing with Production, Consumption and Transfer of Wealth’ and ‘The Study of Resources and How to Efficiently and Effectively Manage them for People to be Endowed with What They Need to Live’ [5,62]. Therefore, ‘Feminist Economics’ is reportedly intended to address the fact that ‘Mainstream Economics’ reportedly neglects the Devalued, Unrecognized and Unpaid ‘Social Reproduction’ that is mostly reportedly ‘Discharged by Women’ [58]. ‘Market Labour’ also reportedly produces ‘Goods and Services’ for ‘Compensation/ Pay/ Wage’ while ‘Household Labour’ reportedly produces ‘People and Nurtures Life’ but is ‘Unpaid and without Wage’ and yet necessary for the ‘Functioning of Life and Society’ [58].

On the other hand, ‘Critical Feminist Economists’ reportedly request a ‘Transformation of the Economy and Reorganization of the Society by Integrating Women and Care Work into the ‘Labour Market’ reportedly as an important ‘Emancipatory Step’ [63]. Also, ‘Critical Feminist Economics’ reportedly highlights the ‘Resultant ‘Double Burden of Women’ who continue to ‘Do the Unpaid Care Work’, and the ‘Justification of the Market not Complying with Care Requirements’ further disposing ‘Critical Feminist Economics’ as reportedly amplifying and focusing on the ‘Underlying Structures of Inequalities’ [63]. Again, ‘Feminist Economics’ reportedly concerns ‘The Study of Economics and Economies with a Focus on ‘Gender-aware and Inclusive Economic Inquiry and Policy Analysis’ and reportedly covers ‘Neglected Issues’ regarding ‘Care Work’, ‘Intimate Partner Violence’, ‘Economic Theories for Improved Incorporation of Gendered Effects and Interactions re: ‘Paid and Unpaid Sectors of Economies’ [64]. Some ‘Feminist Economists’ reportedly advocate new ‘Data Collection’ re: ‘Gender Empowerment Measure (GEM)’ [64].

The ‘Contextual Pentad Components’ and ‘Gender Construct Conversations’

To recapitulate, the ‘Contextual Pentad Components’, for this Treatise, include: ‘Productive Work’, ‘Reproductive Work’,

‘Reproductive Health’, ‘Reproductive Rights’ and ‘Reproductive Politics’. From the ‘Tantalizing Microcosmic Contextual Expositions’ of the ‘Pentad Components’, there is an undergirding ‘Common Thread of Cognitive Disposition’ concerning ‘Gender Issues’ suggesting a ‘Binary Gender Construct’: ‘Male’ OR ‘Female’. For ‘Contemporary Conversations and Discourse’, the ‘Confines of Gender Construct’ are dissolved, eroded and extended to capture ‘Other Situational Realities’ as a ‘Rainbow of Possibilities’ within the ‘Ambit of Non-Binary Gender Construct’.. The currently canvassed ‘LGBTQIA2S+ Gender Construct Spectrum’ comes to the fore. Ipso facto, how do we situate ‘Intellectual Critical Comprehensive Contextual, Conceptual, Technical and Technicalized Conversational Discourse’ concerning the ‘Pentad Components’? Therefore, several ‘Issues’ are expected to be ‘Redefined, Redenominated and Reconceptualized’ re: ‘Males/ Men are Breadwinners and Females/ Women are Homemakers’, ‘Marxist Feminism’, ‘Socialist Feminism’, ‘Feminist Economics’, ‘Productive Work’ is dominated by Men/ Males and ‘Reproductive Work’ is dominated by Women/ Females as Cases-in-Point among several others.

The ‘Three 2023 Lancet Breastfeeding Series Papers’ [65-67], in disposing ‘Matters’ relating to ‘Breastfeeding and Gender Construct’ indicated thus: ‘For brevity believing most who ‘Breastfeed’ identify as ‘Women’ recognizing that not all ‘People’ who ‘Breastfeed’ or ‘Chestfeed’ are ‘Women’’. This Author, however, and situate with ‘Holistic Health’ with amplification of ‘Spiritual Health’ and cognizant of ‘Religion and Reproductive Politics’ verifiably subscribes with an avowal and commitment to ONLY ‘Binary Gender Construct’.

The ‘Contextual Pentad’ and Optimal Infant and Young Child Feeding (OIYCF)

Recapitulating the ‘Contextual Flow and Essence’ of this Treatise, ‘Optimal Productive Work’ flows from ‘Optimal Reproductive Work’ which flows from ‘Optimal Reproductive Health’ flowing from ‘Optimal Reproductive Rights’ which further flows from, and is encapsulated by, ‘Optimal Reproductive Politics’. The contextual and technical thrust in this segment of the Treatise is ‘OPTIMALITY’ disposing ‘The Best’, ‘The Most Effective’ and ‘The Most Desirable’ [5]. Presumably, ‘OPTIMALITY BEGETS OPTIMALITY’ and, therefore, ‘An Optimal Entity’ begets ‘Another Optimal Entity in Part and in Whole’. ‘A ‘Contextual Microcosmic Subsumption’ within ‘Optimal Reproductive Work’ as it concerns ‘Optimal Childbearing, Child-rearing and Child Care’ is ‘Optimal Infant and Young Child Feeding (OIYCF)’.

The World Health Organization (WHO) Recommendation for OIYCF is disposed thus: ‘Early Initiation of Breastfeeding (EIB)’ within the 1st Hour of Life, ‘Exclusive Breastfeeding (EBF)’ for the first 6 months of Life’, ‘Introduction of Safe, Age-appropriate and Nutritious-Diverse Complementary Foods from 6 months’ with ‘Continued Breastfeeding (CBF) until two years or beyond’ [68,69]. The recently launched ‘2023 Lancet Series Papers’ [65-67] indicated that the ‘IYCF Ecosystem’ has reportedly been

'Negatively Altered' with such 'Bothersome Data' as: 'Less than 50% of children are fed according to WHO Recommendations' [68,69], 'Less than 50% of babies are breastfed within the 1st Hour of Life', '45% receive formula within the first 6 months of Life' and 'One-third of children prematurely stopped Breastfeeding'. A major 'Determinant' was 'Self-Reported Insufficient Milk (SRIM)' by the mothers [65] and the use of 'Prelacteals' was also reportedly associated with low EIB, EBF and Breastfeeding Duration [65]. To optimize the 'Contextual Pentad', the 'OIYCF Ecosystem' has to be critically addressed [70] so as to ultimately also beget 'Optimal Reproductive Work' and 'Optimal Productive Work'. 'Breastfeeding' is the 'Operational Programmatic Fulcrum' of the 'OIYCF Ecosystem' and will be further disposed in this Treatise, albeit in a 'Tantalizing Teaser'.

Breastfeeding and Breastmilk: More than Feeding and Food Respectively

'Breastfeeding' is reportedly the 'Perfect Start in Human Nutrition' BUT it is reportedly 'More than Feeding' and 'Breastmilk' is reportedly the 'Perfect Food from the Mother's Breasts, which is 'Most Nutrient- and Energy-dense', and for nourishing the Offspring' BUT it is also reportedly 'More than Food' [71-75]. 'Breastfeeding' reportedly disposes a 'Complex Human System Biology' with the plethora of benefits for the IYC and Mother as 'Breastfeeding' is 'More than Feeding' with 'Nutritional Epigenetics', 'Nutrigenomics' and 'Nutrigenetics' [71-75].

Breastfeeding is more than Feeding

Ontologically, the 'Human Fetus-Newborn-Infant-Young Child Tetrad' is reportedly equipped with the 'Anatomical and Physiological Armoury' for 'Breastfeeding' with Embryological Neuromuscular and Bone-Cartilage Development of the 'Oral-Motor Complex' reportedly manifesting a 'Growth-Developmental Sequence' of Growth, Maturation, Function and Coordination of the 'Jaws-Lips-Tongue-Gums-Hard Palate-Soft Palate Complex' and, during 'Breastfeeding', the 'Peristaltic Movement of Breastmilk within the Breast', into the mouth and 'Within the Oral Cavity' and to the 'Back of the Mouth for Swallowing' at a 'Slow-Milk Flow' disposes a 'Complex Coordinated Suckling Process': Breathing-Suckling-Swallowing [76-79]. The 'Suckling Process' of 'Breastfeeding' reportedly facilitates 'Cranio-Facial Complex Formation' and as a 'Tool for Natural Postnatal Prophylaxis against Cranio-Facial Abnormalities' and also it facilitates the 'Normal Speech-Language Development' [76-79]. The process of 'Breastfeeding' also reportedly has some 'More Fundamentals' disposing that it is 'More than Feeding': 'Breastfeeding', as 'Tantalizing Teasers', has 'Conceptual-Contextual Technicalities' re: 'Mechanics of Galactokinesis', 'Rheological and Rheometric Factors in Milk Expression', 'Viscoelasticity of Obtained Breastmilk' and 'Galactopoeisis and Determinants'; some 'Tantalizing Teasers' [80-82].

Breastmilk is More than Food

'Breastfeeding' and 'Breastmilk' reportedly confer a unique 'Infant Microbiome' on the 'Human Infant' ('Rapid Response':

(<https://www.bmj.com/content/364/bmj.11279/rr-6> of 4th April 2019). 'Human Breastmilk' reportedly contributes, together with 'Breastfeeding', to the 'Last 2 Stages' in the 'Infant Microbiome Evolution' reportedly documented through the following 'Stages': 'Prenatal', 'During Delivery', 'Immediate Postnatal', 'Birth to 6 months' and 'Beyond 6 months'. A 'Microbiome Diversity' is reportedly facilitated by 'Breastmilk' and beneficial for long-term 'Health Outcomes' [83,84]. The 'Microbiome' reportedly generates 'Pro-Inflammatory Cytokines' (Interleukin (IL)-6, Tumour Necrosis Factor (TNF)- α) to establish and activate the 'Immune System'. Additionally, it is reportedly suggested that the 'Microbiome' interacts, via 'Cortisol Production', with the 'Endocrine Pathway (Hypothalamus-Pituitary-Adrenal Axis (HPA))' and the 'Neural Pathway (Vagus Nerve)' with the development and regulation of 'Gut Health' [85].

It is reportedly disposed that 'Breastmilk' is a 'Complex Dynamic Constantly Transmuting Biological System' containing 'Nutrients', 'Epigenomes', and 'Other Bioactive Factors' [65-67,70]. The disposed 'Epigenomes' reportedly include, among others, 'Exosome-containing microRNAs'. The disposed 'Operational Epigenetic Mechanisms' reflect 'DNA Methylation'- 'Histone Modification'- 'Chromatin Remodelling'- 'microRNAs' with several 'Regulatory Pathways' including 'AMP-activated Protein Kinase (AMPK) Signalling' [71-73].

These 'Unique Attributes' of 'Breastmilk' and 'Breastfeeding' are amplified, herein again as previously disposed [70], to further justify my Presentation at the 2007 Paediatrics Association of Nigeria Conference re: 'Breastmilk Substitutes: Myth or Reality?' and the Conclusion that 'There is no 'Breastmilk Substitutes (BMS))' and also 'Breastmilk is not Formula' which was a Presentation, by another Author, at the 20th Academy of Breastfeeding Medicine (ABM) Meeting in 2014 in Cleveland, United States of America.

The recently launched 'Three 2023 Lancet Breastfeeding Series Papers' also appropriately criticize the term 'Breastmilk Substitutes (BMS)' and suggest a replacement: 'Commercial Milk Formula (CMF)' [65-67]. This Author has consistently disposed *vide infra* thus:

1. There is Strictly and Technically 'No Breastmilk Substitutes (BMS)' and, therefore, 'Breastmilk Substitutes (BMS)' is 'INAPPROPRIATE'.
2. The suggested replacement in the '2023 Lancet Breastfeeding Series Papers', 'Commercial Milk Formula (CMF)', is also 'INADEQUATE' as 'Breastmilk Substitutes (BMS)' include 'Other Foods'/ 'Non-Milk Foods' beyond 'Milk'.
3. A better and superior replacement suggested by this Author for 'Breastmilk Substitutes (BMS)', intended to capture both 'Milk' and 'Non-Milk Foods', is 'Commercial Food Formula (CFF)'.

The 'Commercial Milk Formula (CMF)' was published in 'The 2023 Lancet Breastfeeding Series Papers' [65-67] and the superior and better 'Replacement Suggested By This Author', 'Commercial Food Formula (CFF)', was also subsequently communicated by this

Author as an ‘Unsolicited Comment’ to ‘The Lancet’ as a ‘Reaction to the Formal Launch of the 2023 Lancet Breastfeeding Series Papers’ though ‘Questionably Not Accepted and Not Published’. This Author is, therefore, using this ‘Intellectual and Academic Communicative Space’ of this ‘Invited Narrative Review’ to, once again, dispose the ‘Programmatically, Technically and Contextually Superior Technicality (‘Commercial Food Formula (CFF)’), as a ‘Contextual and Conceptual Tantalizing Teaser’, to excite a ‘Robust Programmatic Intellectual Conversational Critique and Conceptualization’ among the ‘Objective Dispassionate Relevant Stakeholders’ in the ‘Optimal Infant and Young Child Feeding Ecosystem’ [65-67,70].

Enabling Breastfeeding (Reproductive Work)-Work (Productive Work) Dyad

‘Breastfeeding’ is the ‘Operational Programmatic Fulcrum’ of ‘Optimal Infant and Young Child Feeding (OIYCF)’ which is an integral part of ‘Reproductive Work’ and ‘Work’ (‘Work for Pay’) reflects ‘Productive Work’ such that ‘Reproductive Work-Productive Work Dyad’ can be ‘Programmatically and Hermeneutically’ rephrased as ‘Breastfeeding-Work Dyad’. Indeed, ‘Enabling Breastfeeding-Work Dyad’ has been a consistent and persistent ‘Challenge to Breastfeeding Campaign Initiatives and Interventions’ to assure ‘Breastfeeding-Working Mothers Harmony and Success’.

The International Labour Organization (ILO) has focused on this ‘Issue’ through its ‘Maternity Protection Rights of Breastfeeding Working Women’ [86,87]: Maternity Protection Convention 2000 (No. 183), Maternity Protection Recommendation 2000 (No. 191) and ‘Other Relevant Instruments/ Documents’. These reportedly address the ‘Triad of Time, Place and Support’ to enable a ‘Permissive Conducive Workplace and Conditions’ for ‘Breastfeeding Working Women’ and reportedly include, among others: Provision of Creches in the Workplace, Appropriate and Revised Maternity (And ‘Paternity’) Leave and ‘Conditions’, Flexible Working Hours/ Work Schedules with ‘Breastfeeding Breaks’ and ‘Workplace Support’ for ‘Breastfeeding Working Mothers’. Also, Health Protection at Work, Employment Security, Non-Discrimination Provision of Healthy Environment for Mother-Child Dyad, Opportunity for Women to Choose Motherhood Freely and Job Retention, among others, are ‘Issues’ similarly addressed to ‘Enable Breastfeeding-Work Dyad’ [87].

Also, the World Alliance for Breastfeeding Action (WABA) has consistently and repeatedly focused on ‘Enabling Breastfeeding-Work Dyad’ through the ‘Themes for the World Breastfeeding Week (WBW) Celebrations’ [88] disposed vide infra:

1. 1993; ‘Women, Work and Breastfeeding: Everybody Benefits’
2. 2015; ‘Breastfeeding and Work: Let’s Make It Work’
3. 2023; ‘Enabling Breastfeeding: Making a Difference for Working Parents’

The WABA provides ‘WBW Celebration Toolkits’ to guide and support ‘Successful Global WBW Celebrations’ with ‘Objectives’ and ‘Strategies’ re: Inform, Anchor, Engage and Galvanize.

Enabling ‘Breastfeeding-Work Dyad’/ The Code

With ‘Women engaged in Formal Work’ out of their homes, ‘Infant and Young Child Foods’ entered into the ‘IYCF Ecosystem’. The ‘Aggressive Marketing Promotional Campaigns’ by ‘Infant Foods Industries’ reportedly very quickly resulted in the ‘4Ms’: ‘Milk’-‘Marketing’-‘Malnutrition’-‘Mortality’ with consequent ‘Reactive Publications’: ‘Milk and Murder’ [89] and ‘Commerciogenic Malnutrition’ [90]. Subsequent reported ‘Actions’ and ‘Counter-Actions’ of relevant ‘Stakeholders in the IYCF Ecosystem’ ultimately resulted in the convened ‘1979 United Nations Meeting on IYCF (1979 UNMIYCF)’ [91] with a produced resultant ‘Draft Code’ for the ‘Regulation of the Marketing of Breastmilk Substitutes (BMS)’. Several ‘Revisions and Reworking’ of the ‘Draft Code’ resulted in a ‘Significantly Weakened Draft Code’ which was formally adopted in 1981 by the World Health Assembly (WHA) Resolution 34.22 (1981) as the ‘International Code of Marketing of Breastmilk Substitutes’ BUT to be implemented as the ‘MINIMUM’ and in its ‘ENTIRETY’ [92].

Further to the ‘1981 Code Adoption’ [92], and in order to address the ensuing, with ‘1981 Code Implementation’, ‘Uncertainties’, ‘Ambiguities’, ‘Misconceptions’, ‘Clarifications’, ‘Conflicts of Interest (COIs)’, among others, towards strengthening the ‘1981 Adopted Code’ to reclaim its ‘Original Spirit, Principles and Intendment’, there have been several ‘Relevant Subsequent WHA Resolutions’ sharing ‘Legal and Statutory Parity’ with the ‘Original Code Provisions’ [92]. Today, ‘The Code’ represents the ‘Original 1981 Adopted Code’ read and implemented in conjunction with ALL ‘Relevant Subsequent WHA Resolutions’. One such ‘Relevant Subsequent WHA Resolution’ is WHA 69.9/ ‘WHO Guidance’ 2016 on ‘Ending the Inappropriate Promotion of Foods for Infants and Young Children’ which ‘Expressly Prohibits Industry Sponsorship of the Meetings/ Conferences of Healthcare Professionals and their Associations’ [93]. Strategies and Interventions ‘To Make The Code Work’ will greatly facilitate ‘Enabling Breastfeeding-Work Dyad’.

Breastfeeding, OIYCF and ‘Enabling Breastfeeding -Work Dyad’/ Innovative Interventions

Over the years, this Author has developed ‘Imaginatively Innovative Interventions/ Initiatives’ to ‘Protect, Promote and Support’ Breastfeeding and OIYCF and towards ‘Enabling Breastfeeding-Work Dyad’. These ‘Interventions/ Initiatives’ should also greatly facilitate ‘Optimizing Reproductive Work’ towards begetting ‘Optimal Productive Work’. Some will be listed vide infra, ONLY as ‘Tantalizing Teasers’ but for possible ‘Ventilation in other Communications’:

1. ‘Infant-Friendly Community Initiative (IFCI)’ 1996: Transformed the ‘Baby-Friendly Hospital Initiative (BFHI)’ from ‘Baby’ and ‘Hospital’ to ‘Infant’ and ‘Community’ as UNICEF Nigeria Consultant and for ‘1996 WBW Celebration’.
2. ‘GOBIF³E²TH’ 1996: Developed as UNICEF Nigeria Consultant, to capture the ‘Child Survival Interventions (CSI)’ [94,95] and disposed ‘Breastfeeding’ as the ‘Mother of ALL Child Survival Interventions’ and for ‘1996 WBW Celebration’.

3. 'Baby- and Environment-Friendly Initiative (BEFI)' 1997: Developed, as UNICEF Nigeria Consultant, to highlight 'Breastfeeding' as an 'Eco-Friendly Natural Feeding Intervention' and relevant to 'Climate Change Crisis' and for '1997 WBW Celebration'.
4. 'INAGOSICI Phenomenon' 1998: Developed, as UNICEF Nigeria Consultant, disposing 'INdustry And GOvernment Similar In Code Implementation' [96-98] to highlight 'Industry-Government Dyad (Ind-Gov Dyad)' for the 'Programmatic Targeting' of the 'Ind-Gov Dyad' for productive 'Code Implementation' to 'Make The Code Work' for OIYCF and Child Survival, Health, Nutrition, Growth, Protection and Development.
5. 'Pre-FOAD Hypothesis' 2009: Developed to situate 'Exclusive Breastfeeding' as the 'Starting Locus' for a 'Transgenerational Model' for the 'Prevention of Adult Disease induction (ADI)' to assure 'Optimal Productive Work' from 'Optimal Reproductive Work' [98].
6. 'TEA Triad' 2009: Developed to dispose 'Eco-Friendly Research Output' amplifying that 'Technology to Ecology, not an Apology'; as a Case-in-Point: 'Breastfeeding is driven as a Low-cost High-impact Intervention' [98].
7. 'Expanded Continuum of Care Initiative (ECOCI)' 2009: Developed to optimize the 'Continuum of Care' for 'Antenatal/ Prenatal-Foetal-Newborn-IYC-Older Child-Adolescent-Adult' [98,99].
8. 'Code Players' 2010: Disposed the '5 Groups' at the '1979 UNMIYCF' related to their 'Code Commitment' re: 'Pro-Code' (UN Bodies and NGOs; 'Committed'), 'Anti-Code' (Ind-Gov Dyad; 'Not Strictly Committed') and 'Toti-Code' (Experts/ Professionals; 'Totipotent Commitment' (From 'Totipotent Stem Cells') mirroring 'He who Pays the Piper Dictates the Tune'; 'Experts' as 'Pipers' are conflicted by 'Industry Sponsorship/ Funding (The 'Payment')'.
9. 'Eregie Performance Gap Index (e-PGI)' 2014: Developed as a 'Development Ranking Tool (DRT)' [19] for Nations to drive 'Optimal Resource Utilization' for 'Sustainable Development' and has nexus with the 'Contextual Pentad'.
10. 'Medical Socioeconosophy (MSE)' 2014: Developed for 'Basic Medical Education Curriculum Improvement (BMECI)' with 'Interdisciplinarity' and inclusion of 'Non-Medical Academic Disciplines (NMADs)' for 'More Robust Rounded Doctors' compliant with 'Collaborative Multidisciplinary Productive Work' [100].

This Author also was, and is, the 'Creator/ Driving Force' for 'Institutional Initiatives/ Interventions' [96] at the Institute of Child Health, University of Benin, Benin City, Nigeria and include the following, among others, disposed vide infra:

1. 'Community-based Interventions for Child Health (COBICH)':
 - a. Expanded Programme of Early Child Care Health Education and Development (EPECCHED)
 - b. Programme of Integrated Community Child Health Interventions in Nigeria (PICCHIN)
 - c. Household Integrated Interventions for Child Survival (HIICS)

2. 'Public Enlightenment and Mobilization Programme (PEMP)':
 - a. Code Awareness and Breastfeeding Action Network (CABAN)
 - b. Infectious Disease Control Action Network (IDCAN)
 - c. Integrated Child Survival Action Network (ICSAN)
 - d. Fathers' Empowerment and Mobilization Action Network (FEMAN)
 - e. Perinatal Action Network for Newborn (PANN)
 - f. Child Health Awareness and Mobilization Programme (CHAMP)

These 'Imaginatively Innovative Interventions/ Initiatives' ultimately have nexus with 'Optimal Reproductive Work' towards achieving 'Optimal Productive Work' and, indeed, have a 'Programmatic Thrust' to successfully 'Enable Breastfeeding-Work Dyad'.

Conclusion

This Treatise has exposed the 'Contextual Pentad Components' with a 'Logical Sequential Flow' and disposed 'Optimality begetting Optimality' viz: 'Optimal Productive Work' flows from 'Optimal Reproductive Work' flowing from 'Optimal Reproductive Health' which, itself, flows from 'Optimal Reproductive Rights' ultimately flowing from 'Optimal Reproductive Politics'. Similarly, 'Optimal Reproductive Work' subsumes 'Optimal Infant and Young Child Feeding' with its integral 'Breastfeeding' and various 'Strategies'/ 'Interventions'/ 'Initiatives' were disposed, albeit as 'Tantalizing Teasers', to 'Enable Breastfeeding-Work Dyad' in seeming semblance with the '2023 WBW Celebrations Theme'.

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