



ORIGINAL ARTICLE

A qualitative look into mother's breastfeeding experiences



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Abstract The objective of the project was to gain a holistic understanding of the current breastfeeding experiences of mothers, while identifying resources and support for breastfeeding in the Athens-Clarke County and surrounding areas. This was an exploratory qualitative study of in-depth interviews with a total of 21 mothers (12 from WIC; 9 from Full Bloom) from Athens-Clarke County and surrounding areas. The inclusion criteria of the participants were mothers of infants who were 12 months old or younger who delivered in Athens. The mothers were individually interviewed. Informants attributed their success, or lack of, to the presence of a breastfeeding role model. Successful mothers shared how important it is to have peers who breastfed and/or are supportive of breastfeeding. While some reported positive support, others reported negative reaction from their work environment. About 75% of the mothers reported negative or no support from their clinician or staff of the hospital. Some informants reported a perceived lack of honesty on the clinician's part about the possible difficulties and possible problems. It is important that clinicians provide honest and consistent breastfeeding information to prepare mothers for potential challenges that may arise during the course of breastfeeding.
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Introduction

Breastfeeding provides numerous health benefits to both the mother and the nursing child. The

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American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, and the American Academy of Family Physicians all acknowledge breastfeeding as the preferred method of feeding for newborns and infants (American College of Obstetricians and Gynecologists, 2007; Gartner et al., 2005; AAFP, 2008). Acknowledging the importance of breastfeeding for the future health of the newborn and mother, and bridging the health disparity gaps between racial and ethnic groups, the *Healthy People 2020* document includes breastfeeding objectives. Even though all of the *Healthy People 2010* objectives for breastfeeding were not met, the *Healthy People* committee further challenges mothers, healthcare providers, and the nation by increasing the breastfeeding goals for 2020 from that of 2010, and for the first time, including a target for exclusive breastfeeding at 6 months postpartum (U.S. Department of Health and Human Services, 2010). The objectives for 2020 include an increase in the proportion of mothers who initiate breastfeeding from 75% to 81.9%, 60.6% continue breastfeeding at 6 months from the previous 50% and at 1 year from 25% to 34.1%, and exclusively breastfeeding at 3 months from 33.6% to 46.2% (U.S. Department of Health and Human Services, 2010). The *Healthy People 2020* goals for exclusively breastfeeding at 6 months is 25.5% (U.S. Department of Health and Human Services, 2010) in conformation to estimates by UNICEF that exclusively breastfeeding to 6 months postpartum could save about 1.5 million infant deaths (UNICEF, 1990).

While breastfeeding has health benefits for the baby and mother, it is necessary to have the support of others to help mothers reach their personal breastfeeding goals, as well as, meeting national goals. The support can come from two sources: clinical, social or both. Clinical support includes support via education, conversations, or instructions from clinical staff, which can be but not limited to: obstetricians, gynecologist, pediatricians, nurses, lactation consultants, midwives, peer counselors, and other professionals within the healthcare system. In the breastfeeding field, social support is identified as support from the baby's father, partner, peers, friends, family, co-workers, community members, and others that the mother identifies as having a personal relationship with. Social support from peers is reported as being beneficial because they share their experience and "are there for the mother" (Schmied et al., 2011). A study conducted in the UK showed that while clinical support is very important, mothers will not be able to successfully

breastfeed if it is not accepted by people in their social circles, which includes family and friends (Brown et al., 2011). The support given by clinical staff to mothers can be very helpful in increasing confidence of the breastfeeding mothers, yet can also be a negative influence to the mother's confidence to breastfeed if she is not receiving positive or helpful support from a clinician (Brown et al., 2011; Sheehan et al., 2009). It is important to understand how both social and clinical support collectively influences American mothers decision to initiate and continue breastfeeding.

The purpose of the research project was to gain a holistic understanding of the breastfeeding experience of mothers, while identifying breastfeeding resources and support in the Athens-Clarke County and surrounding areas.

Study design and methods

Study design

This was a qualitative study that employed in-depth interviews for data collection. The interviews were done from a phenomenological framework, which are to elicit the direct description of a particular situation or event as it is lived through without offering causal explanations or interpretive generalizations (Roulston, 2010). The study was conducted between December 2011 and June 2012 by a collaborative team of researchers from the University of Georgia, Northeast Georgia Health District WIC office, and Full Bloom Pregnancy and Early Parenting Center, which are all located in the United States. The Institutional Review Board of the University of Georgia approved the study and all participants provided written informed consent before their participation.

The study included mothers of infants 12 months old or younger, who delivered in Athens and reside in Athens-Clarke County and surrounding towns. Participants included 3 groups of mothers 1) exclusively breastfed, 2) successful at breastfeeding (i.e., breastfed for more than 2 months), and 3) not successful at breastfeeding or did not breastfeed. To use phenomenological interviews effectively, it is essential that the interviewer identify participants who have both experienced, and are able to talk about the particular lived experience under examination (Roulston, 2010). Participants were recruited from the East Athens WIC Office and Full Bloom Pregnancy and Early Parenting Center in the Athens-Clarke County of the State of Georgia.

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