Becoming a breastfeeding mother: An interactionist perspective

Original Citation


This version is available at http://eprints.hud.ac.uk/11321/

The University Repository is a digital collection of the research output of the University, available on Open Access. Copyright and Moral Rights for the items on this site are retained by the individual author and/or other copyright owners. Users may access full items free of charge; copies of full text items generally can be reproduced, displayed or performed and given to third parties in any format or medium for personal research or study, educational or not-for-profit purposes without prior permission or charge, provided:

- The authors, title and full bibliographic details is credited in any copy;
- A hyperlink and/or URL is included for the original metadata page; and
- The content is not changed in any way.

For more information, including our policy and submission procedure, please contact the Repository Team at: E.mailbox@hud.ac.uk.

http://eprints.hud.ac.uk/
Becoming a breastfeeding mother: An interactionist perspective

Dawn Leeming, University of Huddersfield, UK
Iain Williamson, De Montfort University, Leicester, UK
Sally Johnson, University of Bradford, UK
Steven Lyttle, De Montfort University, Leicester, UK

Understanding the establishment of breastfeeding by focussing on the mother-child dyad offers only a limited perspective. Instead, breastfeeding can be understood as becoming established or breaking down within broader networks of relationships (e.g. Dykes, 2006; Tiedje et al., 2002). Quantitative research has suggested that support from various others (lay and professional) can be an important factor in sustaining breastfeeding (Sikorski et al., 2003). However, those around the mother may orientate to breastfeeding in various ways. For example, fathers play a key role in decisions about infant feeding and in supporting breastfeeding, and yet need to define and adjust to their new parenting role and changed relationship with their partner in a way that accommodates breastfeeding (Bar-Yam & Darby, 1997). From the perspective of the mother, breastfeeding can be an important aspect of the transition to motherhood. However, becoming a mother is not an individual project but one that involves redefining roles and relationships with others (Mercer, 2004; Nelson, 2003), and negotiating mothering practices such as breastfeeding in the context of others’ expectations and cultural prescriptions for motherhood (McBride-Henry, 2010).
The present research aims to extend understanding of how breastfeeding mothers experience their relations with others and how these are implicated in their experiences of breastfeeding and their developing relationship with their infant. The data discussed here have been taken from a longitudinal qualitative study of 22 new mothers in the UK who expressed an intention to breastfeed and were interviewed during the first week following birth and one month later. At each time point they were also asked to keep an audio-diary of their experiences of feeding their baby for one week.

The analysis discussed here draws on symbolic interactionism and other theoretical perspectives which emphasise the relational nature of the self and assume that relations with others are part of, rather than external to, lived experience and mediate more distal cultural influences. The themes explored include the women’s sense of duty to balance what they saw as the needs of their baby, their own needs and the needs, demands and sensibilities of others, and the ways in which they negotiated these. We also discuss the way in which, as the participants were developing their new identities as breastfeeding mothers, others with expertise in breastfeeding or perceived to have knowledge regarding related norms and expectations took on a particular significance in the women’s lives. As such, these "experts" were experienced by the participants as in a powerful position to provide either validation or invalidation of them as breastfeeding mothers. We discuss (i) the implications of our analysis for facilitating supportive interactions between health professionals and breastfeeding mothers and their immediate networks and (ii) the implications for breastfeeding promotion of viewing ongoing engagement with the practices of infant feeding as mutually negotiated and enabled, rather than as the choice of individual women.
References


