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Managing self-conscious emotion in interactions with breastfeeding supporters: A theoretically informed meta-synthesis

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Professional and peer support can increase the duration of breastfeeding, though less is known about the relational and emotional processes within breastfeeding support that facilitate a positive outcome. Researchers have tended to focus on the effectiveness of support rather than looking at how it achieves those effects or how particular aspects of an intervention are perceived and experienced by breastfeeding women. Receiving support related to infant feeding can be emotionally complex. This relates in part to the way in which the meanings of breastfeeding and formula feeding are constructed by moral and other cultural discourses around mothering and infant feeding which potentially position women as ‘good’ or ‘less good’ mothers, and which call into question how competently, ‘naturally’ or socially appropriately women perform mothering. Therefore, when receiving support for breastfeeding, mothers might at times be concerned with how they evaluate themselves and their feeding methods and how they are viewed by others. Indeed research has confirmed that when women are asked to talk about experiences of breastfeeding support many refer to success, failure, self-blame, self-confidence, self-doubt, exposure and the importance of feeling approved of and valued by others rather than judged (McInnes & Chambers, 2008).

Useful theoretical resources for understanding experiences of self-evaluation and perceived other-evaluation of the self can be found in the literature on self-conscious emotion. Emotions such as pride, shame, guilt, humiliation and embarrassment are grouped together because of their focus on the self and how the self and self-in-interaction is viewed (Tracy & Robins, 2007). Conceptualising experiences of self-evaluation as emotional phenomena draws attention to the way in which the experience is usually not just cognitive and can invoke powerful feelings and bodily responses. Additionally, theory regarding interpersonal processes in self-conscious emotion might illuminate some of the trickier emotional dynamics in breastfeeding support and how these can be managed. Some emotional aspects of women’s feeding experiences may have been under-explored due to taboos in western societies on acknowledging and labelling self-conscious emotions such as shame and pride, which means that reference to these emotions may often be oblique or fleeting in research participants’ accounts. We therefore undertook a re-examination of existing research on experiences of breastfeeding support using self-conscious emotion as a sensitising concept.

From a systematic literature search of qualitative studies of support for breastfeeding mothers in the UK from 2007 to 2016 we identified 29 papers. Using Template Analysis, we analysed the findings from these studies with reference to theoretical perspectives which attend to interpersonal as well as intrapersonal processes in managing self-conscious emotion (e.g. Brown, 2006). The findings demonstrated how transition to motherhood, breastfeeding and obtaining support with breastfeeding form a social context which presents multiple challenges to the self, so that identity is precarious. As such, mothers exercise agency in maintaining an intact self, engaging in emotion work which includes strategic connection with and disconnection from others, selective adoption of
advice, impression management with breastfeeding supporters and ongoing reconstruction of identity. The analysis also highlighted how those supporting breastfeeding can support a mother’s emotion work through validating her sense of self or respond in ways that are invalidating.

Using a conceptually informed lens to synthesise prior literature inevitably draws attention to some issues rather than others, and therefore the current findings are not presented as a synthesis of the totality of women’s experiences of breastfeeding support. However, our analysis draws attention to aspects of breastfeeding support which may often be unspoken but are important for mothers’ wellbeing.

