A PHENOMENOLOGICAL STUDY EXPLORING THE PERCEPTIONS AND LIVED EXPERIENCES OF FIRST-TIME BREASTFEEDING MOTHERS

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Problem

- Infants not breastfed more susceptible to severe respiratory illnesses and infections.
- Despite evidence of health benefits of breastfeeding, 6-month and 1-year continuation rates remain below goals set by Healthy People to improve health outcomes.
  - 2010: 6-months (43%), 1 year (22%)
- Exclusive breastfeeding rates at 3(40%) and 6 months (17%) also below Healthy People Goals.
  - 2010: 3 months (33%), 6 months (13%)

AAP, 2005; CDC, 2011; USDHHS, 2000; WHO, 2011
Study Purpose

- To explore the perceptions and lived experiences of 19 first-time breastfeeding mothers of the influence of breastfeeding education, anticipatory guidance, and postpartum lactation support on breastfeeding continuation from birth to 6 weeks postpartum.
Research Question

What are the perceptions of first-time breastfeeding mothers with regard to breastfeeding education, anticipatory guidance, and postpartum lactation support on breastfeeding continuation from birth to 6 weeks postpartum?
Design and Method

- Qualitative
- Phenomenological
- Van Manen’s Hermeneutic approach to data analysis

Van Manen, 1990
Theoretical Framework

- Humanistic nursing theory
- Self-efficacy theory
- Adult learning theory

- Bandura, 1986; Knowles, 1970; Paterson & Zderad, 1988
Study Sample

- Purposeful sample
- 19 English-speaking women
- Breastfeeding for the first time
- Age range: 21-40 years of age
- Term infants (37 weeks or more)
- Infants: Well-newborn care only
- Breastfeeding at time of discharge
Data Collection

- Data gathering: semi-structured face-to-face interviews, observations, open-ended questions.
- Three data collection points:
  - 24-48 hours after birth
  - 4 weeks postpartum
  - 6 weeks postpartum
- Trustworthiness/Credibility:
  - Pilot Study
  - Peer Review
  - Member Checking
  - Bracketing
Study Findings

1. Breastfeeding Best For Baby
2. Early Influences on Breastfeeding
3. Idealistic Versus Realistic Image Of Breastfeeding
4. Breastfeeding Support Crucial to Breastfeeding Continuation
5. Strategies Enabling Breastfeeding Success
6. Breastfeeding Had Difficult Beginnings
7. Length of Stay Influenced Breastfeeding Success
8. Pumping A Viable Option
9. Successful Breastfeeding Attributed to Certain Maternal Traits
10. Comprehensive Approach Increased Potential For Success
BREASTS

- B: Breastfeeding Education
- R: Rooming-In
- E: Early Initiation
- A: Anticipatory Guidance
- S: Self-Efficacy
- T: Telephone Follow-Ups
- S: Support (Lactation and Social)
Breastfeeding Rates

- Discharge: 11 of 19 exclusively (58%)
  - 8 breast/bottle combination (42%)
- 4 wks PP: 14 of 19 (74%) still breastfeeding
  - 11 of 14 (79%) exclusively breastfeeding
- 6 wks PP: 13 of 19 (68%) still breastfeeding
  - 11 of 13 (85%) exclusively breastfeeding
Practice Implications

- Identification of influential factors that enhance current practices.
- Improved prevalence of breastfeeding in subsequent births.
- Central role in improving health outcomes for 2 generations.
- Comprehensive approach increases potential for longer duration.

Steube, 2009; Taylor et al., 2006
Practice Implications

- Reinforced need for prenatal and postpartum education.
- Reinforced need for improved communication and consistent message.
- Enhanced ability to:
  - assess existing breastfeeding knowledge
  - improve breastfeeding education
  - influence hospital practices
  - advance policy development.
Study Limitations

- Time constraints of study.
- Multiple data collection points.
- Honesty and retrospective self-report of participants.
- Multiple interruptions during breastfeeding.
- Fatigue and/or cesarean birth deferred breastfeeding initiation.
- Potential for bias: Researcher a lactation consultant.
- Purposeful sample, not generalizable.

L. Li, Zhang, Scott, & Binns, 2004; Morrison, Ludington-Hoe, & Anderson, 2006; Rowe-Murray & Fisher, 2002; Spear, 2006
Recommendations

- Maternal traits that facilitate breastfeeding success.
- Length of stay and breastfeeding success.
- Exploration into physician office practices regarding breastfeeding.
- Replication of study with a more diverse sample.
Conclusions

• Need for prenatal and postpartum breastfeeding education.
• Importance of knowledge, guidance, and support of healthcare professionals and social networks.
• Communication, collaboration, and consistent message crucial.
• Need for comprehensive approach.
References


References


References