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 I-year continuation rates remain below goals set by Healthy People to improve health outcomes.
 - 2010: 6-months (43%), Iyear (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

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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

- I. 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: I4 of I9 (74%) still breastfeeding
 - II of I4 (79%) exclusively breastfeeding
- 6 wks PP: 13 of 19 (68%) still breastfeeding
 - II of I3 (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.

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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.

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