Qualitative

Perceived breast milk inadequacy was related to sociocultural influences and the behaviour of women and their babies

Dykes F, Williams C. *Falling by the wayside: a phenomenological exploration of perceived breast-milk inadequacy in lactating women*. *Midwifery* 1999 Dec;15:232–46.

QUESTION: What are women's perceptions about the adequacy of their breast milk for the purpose of exclusively nourishing their babies?

Design

Heideggerian phenomenology.

Setting

North of England, UK.

Participants

A convenience sample of 10 white, primiparous women between 21 and 36 years of age who had delivered at term, had a baby with an Apgar score of 8–10 at 10 minutes and a birth weight of ≥ 2.5 kg, and planned to exclusively breast feed for ≥ 3 months, were recruited during their postnatal period before discharge from a maternity unit.

Methods

In-depth interviews lasting 45–60 minutes were done in women's homes at 6, 12, and 18 weeks after birth. Women who supplemented with artificial milk during the study were still followed up, and those who completely discontinued breast feeding were interviewed once after the change in feeding practice. A total of 18 interviews were tape recorded, transcribed verbatim, and studied to develop emergent themes.

Main findings

3 women were still breast feeding at 18 weeks but had begun supplemental use of solids at 16 weeks, and 1 woman had also introduced artificial milk. These women became increasingly confident and empowered by breast feeding and were classified as "successful breast feeders." 7 women had completely stopped breast feeding by 14 weeks. These women experienced progressively decreased confidence with breast feeding and were classified as "unsuccessful breast feeders." 4 main themes emerged. The first theme, *the quest to quantify and visualise breast milk*, reflected the women's perceived failure to "manufacture" milk and the comparison of breast milk with the quality and quantity of artificial milk. The second theme, *dietary concerns—"my milk is what I eat"*, related to how most women equated the quantity and quality of their milk with their dietary intake and felt responsible for the baby's weight gain and wellbeing. The third theme, *breast feeding as a challenging journey—"falling by the wayside"*, reflected inexperience during the initial weeks, the use of feeding practices that may have undermined milk production (eg, restricting the duration or frequency of breast feeds, using nipple shields,

and introducing water or formula), inappropriate advice from health professionals, and the interpretation of the baby's behaviour and feeding patterns. The fourth theme, *"giving out" and the need for support, nurturing, and replenishment* expressed how the women had to juggle activities to meet the baby's demands and their own needs for support and approval.

Conclusion

Women's perceptions of breast milk inadequacy were related to lactation physiology, the adequacy of their own diet, sociocultural influences, breast feeding practices, the baby's behaviour, and their own psychological state.

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COMMENTARY

Although there has been considerable study of the initiation and duration of breast feeding among women,¹ there are many gaps in our understanding of why some new mothers persist and others do not. This study by Dykes and Williams increases our understanding of perceived breast milk inadequacy among primiparous women. The findings of this study expand upon those of previous research by examining women's perceptions associated with the duration of breast feeding using an in-depth analysis. Documentation of these perceptions helps us to recognise the synergistic interaction among the relevant factors.

This study describes both successful and unsuccessful breast feeding experiences among women and links them to the interpretations related to perceived breast milk inadequacy. In presenting the phenomenon from the women's perspectives, Dykes and Williams uncover interpretations that have been largely absent in the recent literature. For example, the theme of dietary concerns ("my milk is what I eat") helps us to understand how women relate to their bodies as producers of breast milk. These findings move away from the more theoretical understanding commonly held in Western medicine that the more a baby suckles, the more prolactin is released and the more milk is secreted. Although we generally accept that this biological process can be affected by a number of psychological and behavioural factors, we often forget the role of dietary concerns in breast milk production. In this study, most mothers completely stopped breast feeding by 14 weeks and were concerned about the relation between dietary intake and the quality and quantity of breast milk. This finding showed that beliefs about diet powerfully influenced breast feeding practice.

Research into the breast feeding behaviour of minority women often includes consideration of health beliefs as a relevant aspect of their practices. However, recognition of the clinical relevance of culturally based knowledge has rarely been extended into socially dominant populations. This study suggests that health professionals must understand the degree to which such practices are socially and culturally based.

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1 Scott JA, Binns CW. Factors associated with the initiation and duration of breastfeeding: a review of the literature. *Breastfeed Rev* 1999;7:5–16.