

The Breastfeeding Experience of Mothers in Postnatal Hospital Environments: An Ethnographic Study

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the degree of

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under the supervision of Deborah Fox, Christine Catling, Maralyn Foureur

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Certificate of Original Authorship

I, Susanna Irene Scurry declare that this thesis, is submitted in fulfilment of the requirements for the award of Master of Midwifery (Research), in the School of Nursing and Midwifery, Faculty of Health at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise referenced or acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

This document has not been submitted for qualifications at any other academic institution. This research is supported by the Australian Government Research Training Program.

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“Where, after all, do universal human rights begin? In small places, close to home – so close and so small that they cannot be seen on any maps of the world. Yet they are the world of the individual person; the neighbourhoods he lives in; the school or college he attends; the factory, farm, or office where he works. Such are the places where every man, woman, and child seeks equal justice, equal opportunity, equal dignity without discrimination. Unless these rights have meaning there, they have little meaning anywhere. Without concerted citizen action to uphold them close to home, we shall look in vain for progress in the larger world.”

Eleanor Roosevelt

United Nations 1958

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LIST OF TERMS

Caesarean Section C/S: an elective or emergency surgical procedure used to deliver a baby through an incision in the abdomen and uterus.

Multigravid (Multi): A term given to a woman who has had more than one pregnancy.

Normal Vaginal Birth (NVB): A natural spontaneous vaginal birth at term without routine medical interventions and pain medications.

Primigravid (Primi): A first time pregnant mother.

Post-Partum Haemorrhage (PPH): Blood loss at birth greater than 500mls.

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Abstract

Up to 90% of Australian infants commence breastfeeding in hospital but by one month of age exclusive breastfeeding rates drop to 61.4%. This change suggests that postpartum care fails to meet the longer-term breastfeeding needs of new mothers and infants. Very little research has considered the kind of postnatal hospital accommodation that women experience as having an impact on the initiation and maintenance of breastfeeding. The aim of this study was to explore the influence of the hospital postnatal physical environment on the breastfeeding experiences of new mothers.

A qualitative ethnographic study using observations, field notes, reflective diary, photographs and semi-structured interviews took place in a tertiary-referral, Baby Friendly Health Initiative accredited hospital in New South Wales, Australia. Observations of women and infants accommodated in typical postnatal rooms (single or shared 4-bed rooms) took place, day and night. Semi-structured interviews were undertaken with 10 women and six partners located in either single or shared 4-bed rooms, to discuss their experiences of breastfeeding in their allocated postnatal environment.

Thematic analysis of the data revealed two main themes, "Being on guard" and "Building a nest", each comprising three subthemes. "Being on guard", described how women in shared rooms experienced breastfeeding in a cubicle surrounded by curtains that could be opened at any time, leaving them exposed. The subthemes, "You just feel the noise", "Behind the curtains" and "Babies at the desk", described how women were unable to rest due to high activity and noise levels, an inability to turn down the lights, and unable to have the support of a partner in sharing the care of their baby, particularly overnight. Women were stressed and in a constant state of high alert, which is counterproductive when breastfeeding. The opposite situation occurred for women in single rooms who did not need to be on guard. "Building a Nest" described how women in both single and shared rooms endeavoured to build a quiet, restful and

supportive family space, a nest, in which to initiate breastfeeding. The subthemes, “Space for a supporter to stay”, “Feeling protected and private” and “Furnishings to support breastfeeding” revealed how physical boundaries enhanced privacy, rest, physical and emotional support, critical elements supportive of breastfeeding.

There is an urgent need to implement the Australasian Maternity Health Facility guidelines published by the Australasian health infrastructure alliance in 2017, which recommends postnatal women and families are accommodated in single rooms to be supportive of the needs of breastfeeding women.