

“I Just Want to Do Everything Right:” Primiparous Women’s Accounts of Early Breastfeeding via an App-Based Diary

Jill Demirci, PhD, RN, IBCLC, Erin Caplan, BA, Nora Murray, & Susan Cohen, PhD, APRN

ABSTRACT

Introduction: Our objective was to describe the early breastfeeding experience of primiparous women. Methods: Healthy, primiparous women intending to exclusively breastfeed downloaded a commercial infant feeding mobile application (app) during their postpartum hospitalization. Women free-texted breastfeeding thoughts and experiences through 8 weeks postpartum in the app’s diary. Diary content was qualitatively coded. Results: Thirty-five participants completed diaries and were included in analyses. The overarching theme was Seeking sustainability and validation. Mothers felt overwhelmed, anxious, and frustrated with the intensity and unpredictability of breastfeeding and inconsistent professional breastfeeding support. The ability to exclusively breastfeed was seen as a bellwether of maternal competence. Breastfeeding progress was primarily measured through external feedback (e.g., weight checks) and managed through strict adherence to provider feeding plans. As breastfeeding problems and intensity abated, women exhibited optimism and assumed greater independence in feeding decisions. Discussion: The primiparous breastfeeding experience is fraught with internally imposed and externally reinforced pressure to produce and persevere despite inadequate breastfeeding support infrastructure. J Pediatr Health Care. (2017) ■■, ■■-■■.

KEY WORDS

Breastfeeding, mobile applications, primiparity, qualitative research

INTRODUCTION

Although more than 80% of U.S. mothers begin breastfeeding, rates of breastfeeding continuation and exclusivity remain low and fall short of Healthy People 2020 goals. Among children born in 2013, 72% were breastfeeding at all and 50% were exclusively

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breastfeeding at 2 months of age. By 3 months, these figures fell to 67% and 44%, respectively. Disparities in breastfeeding rates exist in terms of maternal race, age, education, income, geographic location, and parity (Centers for Disease Control and Prevention, 2016).

Primiparous women experience high rates of in-hospital formula use and breastfeeding problems and have lower rates of breastfeeding continuation and exclusivity than multiparous women (Centers for Disease Control and Prevention, 2016; Chantry, Dewey, Peerson, Wagner, & Nommsen-Rivers, 2014; Wagner, Chantry, Dewey, & Nommsen-Rivers, 2013). One explanation for this disparity is that first-time mothers are likely to exhibit lower breastfeeding self-efficacy with limited prior breastfeeding exposures (Chantry et al., 2014). In addition, changes in breast architecture and hormonal response with prior pregnancies may contribute to a more rapid onset and greater volume of copious milk production after delivery in multiparous compared with primiparous women (Dewey, Nommsen-Rivers, Heinig, & Cohen, 2003; Neville & Morton, 2001; Wambach & Watson Genna, 2016). The narratives underlying the onset, progression, and trajectory of issues affecting the primiparous breastfeeding experience have not been previously examined among U.S. women.

**METHODS**

**Design**

In this study, we tracked breastfeeding behaviors and thoughts of primiparous women through 8 weeks postpartum via an infant feeding mobile application (app), Baby Connect. Permission to use the app for research purposes was granted by the app developers. Funding sources for development and/or maintenance of the app are not disclosed on the app’s Website; however, no advertisements from formula companies or other businesses that could potentially affect mothers’ feeding behaviors are visible to app users. The purpose of the study was to inform timing and content of a breastfeeding support intervention. Methods, reliability, and breastfeeding pattern data were previously published (Demirci & Bogen, 2017a; Demirci & Bogen, 2017b) and are summarized briefly below. This article describes the qualitative content of women’s app diary entries related to their breastfeeding experiences from birth through 8 weeks.

**Sample and Setting**

Between October 2014 and August 2015, we approached, screened, and enrolled a convenience sample of 61 primiparous women during postpartum hospitalization at a regional obstetric hospital in the Northeastern United States. Women were eligible if they were at least 18 years old; English-speaking; had no other children; gave birth to a healthy, singleton infant; owned a smartphone; intended to breastfeed exclusively for at least 2 months; and had no conditions expected to adversely affect breastfeeding or milk supply.

**Data Collection**

At study entry, we collected data on maternal demographics, medical and perinatal history, breastfeeding intentions, prior breastfeeding education or exposures, and infant and maternal hospital course via questionnaires and electronic medical record abstraction. At enrollment, we also helped women download and initially use the app on their smartphones or mobile devices. Women were instructed to immediately begin documenting feeding and milk expression in the app as close as possible to the time that it occurred. We also asked participants to free-text their breastfeeding thoughts and experiences (e.g., problems, successes, unexpected events) daily or at least once per week using the app diary. Women sent us their app data daily or weekly through 8 weeks via an e-mail summary and share feature (HTML format). E-mailed app data were sent, received, and stored in accordance with our institutional review board–approved protocol to protect patient confidentiality.

Women were contacted by phone at 2 and 8 weeks postpartum to confirm feeding status and complete additional questionnaires pertaining to feeding and mood. During these follow-up calls, we also encouraged mothers to begin, continue, or resume logging app diary entries about their breastfeeding experiences.

**Analysis**

We used SPSS to compile summary statistics on sample characteristics. Diary entries were abstracted into Atlas TI version 7.5.19 (Atlas TI, Berlin, Germany) and grouped by postpartum week. Three authors (J.D., N.M., and E.C.) read through each weekly transcript and independently coded entries line by line for explicit content (e.g., problems) and implicit meaning (e.g., metaphors, similes) pertaining to breastfeeding experience. Given the unique medium of an electronic diary, we made particular note of narrative structure in codes and memos, including ordering and titling of entries. Emergent themes and patterns in the data were included in memos during the coding process. The coding team, plus author S.C., met regularly to discuss coding decisions and emergence of common themes. Based on these meetings, J.D selectively coded each weekly transcript, with N.C. and E.C. reviewing. Codes were grouped into categories and interwoven with memos in an iterative process. Multiple techniques were used by the study team to assist in coding and analytic decisions, including constant comparison, questioning, the flip-flop technique, seeking negative cases, examining personal biases, drawing upon personal experiences, diagramming, and summarizing (Corbin & Strauss, 2008). The final analysis represents the shared interpretation among all members of the study team.
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