

Lived Experiences of First-Time Mothers during Their Breastfeeding Journey



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OBJECTIVE

Breastfeeding is vital for maternal and infant health, with the World Health Organization (WHO) recommending exclusive breastfeeding for the first six months to reduce infant morbidity and mortality¹. However, first-time mothers often encounter emotional and physical difficulties that lead to early weaning². In Pakistan, these challenges are intensified by sociocultural expectations, traditional feeding practices, and insufficient postnatal lactation support³. This study, conducted in the postnatal ward of Nishtar Hospital, Multan, explores the lived experiences of first-time mothers to understand their challenges, support systems, and coping strategies, in the context of Baby-Friendly Hospital Initiative (BFHI) guidelines¹.

STUDY DESIGN

A descriptive phenomenological design was employed to explore the lived experiences of first-time mothers⁴.

METHODOLOGY

Twelve first-time mothers breastfeeding for less than six months were recruited using purposive sampling to ensure relevance to the study's aims⁵. Data were collected through in-depth semi-structured interviews in Urdu. Colaizzi's seven-step method guided the analysis, with participant validation ensuring credibility⁶.

RESULTS

We have divided the results in 6 themes and sub themes

1- Emotional Challenges

- Feelings of Frustration and Inadequacy
- Anxiety / depression due to Social Expectations
- Self-Doubt and Emotional Withdrawal

2 - Physical Discomfort and Fatigue

- Nipple Pain and Breast Engorgement
- Perceived Low Milk Supply

3- Inconsistent Support Systems

- Informal Family Support
- Limited Professional Guidance

4- Cultural Influences and Conflicting Advice

- Pressure to Use Ghutti or Top Feed
- Confusion between Tradition and Medical Advice

5- Shifts in Maternal Identity and Confidence

- Boost in Self-Esteem with Success

6- Coping Strategies

- Practical Adjustments and Peer Learning

DISCUSSION

- Most participants (75%) described feelings of failure when unable to latch their baby properly or when the baby remained fussy despite feeding. Supported by Brockway et al. (2022)
- Half of the mothers (50%) reported emotional stress from perceived judgment by elders and peers, particularly regarding feeding frequency or technique.
- This aligns with findings from Bazzano et al. (2021), which emphasize social pressure during breastfeeding.
- 33% said difficulties made them question their competence as mothers.
- These findings support research by Neubauer et al. (2019), who state that emotional strain during breastfeeding.
- 83% of mothers mentioned physical strain, including nipple trauma, engorgement, and backache from prolonged feeding.
- Ali et al. (2020) and Haider et al. (2021) report similar somatic complaints among first-time mothers in Pakistan.
- 58% feared their milk was insufficient, despite reassurances from family or nurses.
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CONCLUSION

This study emphasizes the need for culturally responsive breastfeeding education, targeted lactation counseling, and structured postnatal care to bridge the gap between global standards and local realities.

Although the Baby-Friendly Hospital Initiative (BFHI) offers a globally endorsed framework to support breastfeeding through hospital practices, its inconsistent implementation within local hospital settings like Nishtar Hospital limits its effectiveness. So, the critical gap between policy and practice should be fulfilled.

To overcome the challenges, there is a need for breastfeeding education during antenatal and postnatal care, the strengthening with BFHI protocols and the empowerment of healthcare staff. By providing a more supportive breastfeeding environment will not only improve the breastfeeding outcomes but also contribute to the health by providing immediate contraception through exclusive breastfeeding and promotion of maternal and infant health and long-term public health gains in Pakistan.

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