

## New study sheds light on breastfeeding challenge

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One in five women experience feelings of aversion during breastfeeding, according to a new Australian study, suggesting the phenomenon is more prevalent than previously recognized.



The World Health Organization recommends exclusive breastfeeding for the first six months due to the numerous health benefits it offers both mothers and babies. However, Australian statistics reveal about 30% of women discontinue breastfeeding within the first four months.

The study, titled "The Prevalence of Breastfeeding Aversion Response in Australia: A National Cross-Sectional Survey," published in *Maternal and Child Nutrition*, surveyed more than 5,500 Australian women currently breastfeeding.

The study also found that more than 95% of the women surveyed encountered additional breastfeeding challenges such as sore nipples, insufficient or excessive milk supply, and poor latch.

Lead author Melissa Morns from the University of Technology Sydney (UTS) said a better understanding and awareness of the "Breastfeeding Aversion Response" could help support mothers to continue to breastfeed.

She describes the experience as encompassing feelings of irritability, anxiety, or anger during nursing, despite a mother's desire to breastfeed. Some women describe it as "visceral and overwhelming."

"Many <u>new parents</u> begin the breastfeeding journey unaware that they may encounter barriers that require breastfeeding knowledge and perseverance to overcome," Morns said.

"There can also be guilt, shame or <u>social stigma</u> around discussing feelings of aversion, which can stop mothers from seeking support. Consequently, many women with this breastfeeding challenge suffer alone and in isolation," she said.

Morns is completing a Ph.D. on the topic at the UTS School of Public



Health, spurred in part by her own personal experience, and the lack of information available. She has also established an online support group.

"The experience of breastfeeding aversion is unexpected and difficult for mothers. If support is not available, it can have detrimental effects on maternal identity, mother-child bonds, and intimate family relationships," she said.

Morns' research identified potential triggers for breastfeeding aversion, including menstruation, breastfeeding during pregnancy, and breastfeeding two infants concurrently. The experience was also more common with the first child.

Some strategies that may help include meditation, positive self-talk, personal distraction, setting boundaries with older nurslings, and seeking professional help if needed. The support of a partner can also play a crucial role.

Morns highlighted the need for improved public health strategies and maternal health interventions to support and encourage breastfeeding, particularly for those experiencing complex challenges like aversion.

"My hope is that general practitioners, midwives and lactation consultants can gain a deeper understanding of the scale and nature of this phenomenon, so that when they see someone in their clinic who is experiencing it, they can offer timely and tailored support," she said.

Most of the women in the study rated their overall breastfeeding experience as positive, despite the challenges. This suggests that with good quality support it's possible to find strategies to overcome difficulties such as <u>aversion</u> and sustain <u>breastfeeding</u>.

More information: Melissa A. Morns et al, The prevalence of



breastfeeding aversion response in Australia: A national cross-sectional survey, *Maternal & Child Nutrition* (2023). DOI: 10.1111/mcn.13536

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