

Using liminality to understand mothers' experiences of long-term breastfeeding: 'betwixt and between', and 'matter out of place'.

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Outline

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Context/background

- Breastmilk is the optimum nutrition source for babies.
- Important in improving public health and reducing inequalities; UK policy priority.
- WHO guidance
 - Exclusive bf for 6 months
 - Continue for 'up to two years of age or beyond' (WHO, 2003:7-8)
- UK bf initiation rates are high but decline rapidly - 34% still bf at 6 months, only 1% exclusively (McAndrew et al, 2012).
- Long-term breastfeeding is uncommon
 - Women who do this are considered unusual or odd
 - This work thinks about bf beyond 'usual' limits

Long-term breastfeeding

- Small amount of research, mostly from North America/Australia, some recently from the UK
- Focus on:
 - Difficulties carrying out socially unacceptable/stigmatised practice
 - Gradual withdrawal of support from 6-8 months
 - Increasing pressure/coercion to wean 12 months and beyond
 - Importance of La Leche League support
 - Secretive/hidden nature of the practice (concealed from health professionals and wider family)
 - Experience of emotional benefits – bonding, close relationships
 - How women make sense of what they do
 - The relationship between long-term bf and other parenting practices

Liminality - overview

- Related ideas – ‘betwixt and between’ (Turner, 1969) and ‘matter out of place’ (Douglas, 1966).
- Building on work on rites of passage – separation, transition and incorporation.
- In the liminal state existence is neither how it was before or how it will be afterwards.
 - ‘Neither here nor there’
- Culturally prescribed/shared rites of passage enable people to develop new identities.
- Liminal states can suggest danger/threat; social consequences of crossing boundaries
- ‘Matter out of place’ – ‘me’ and ‘not me’ products – taboo
- *Communitas* – shared space/way of living occupied by those in the liminal phase (also associated with structure and anti-structure).

Liminality and health

- Used to examine a range of health issues
 - Examples include: the sick role, refugees' status, living with chronic pain, cancer treatment, mental health issues
 - Unsettling nature of liminality/powerlessness
- Explicit links made about being between social identities...
 - Pregnant/not pregnant; fertile/infertile
- ...and to think about space and time
 - Madge and O'Connor 'a time out of time' (2005:84)
 - Warner and Gabe 'marginal spaces and unloved places' (2004:389)
- Has also has been used to think about women's health issues
 - cervical cancer screening (Forss et al., 2004), childbirth rituals (Hogan, 2008), fertility treatment (Allen, 2007) and premature birth (Taylor, 2008).

Liminality and breastfeeding

- Mahon-Daly and Andrews (2002)
 - Space and place in relation to contemporary experiences of bf.
 - Very well cited paper – findings often referred to but liminality not discussed in depth.
 - Breastfeeding in many communities is a ‘marginal and liminal activity, rarely seen and barely spoken about’ (Dykes, 2006:206).
- Breastfeeding and liminal experience discussed by Mahon-Daly and Andrews in three ways:
 - Post-natal period - not pregnant, not ‘normal’; lasts until women stop lactating and reintegrate.
 - Breastfeeding changes women for life – ‘reach new understandings of themselves and their bodies’ (2002:65).
 - Behavioural rituals in which women move in and out of places comfortable to breastfeed.

Study methods

- Qualitative design using micro-ethnographic methods
 - Participant observation
 - 3 groups, over 80 women
 - Bf new-borns to 4 year olds
 - Face-to-face interviews
 - 6 women
 - Bf 11 children, 18 months to 4.5 years
 - Online asynchronous interviews using email
 - 4 women
 - Bf 4 children, 14 months to 6.5 years
 - Thematic analysis
- Intention – to explore women’s experience of successfully breastfeeding their babies for over six months and whether this could be used to help more women to breastfeed for longer.

Findings - overview

- Findings concur with earlier studies
- Group of strong-willed, determined women, 'doing the right thing'
- Most 'always knew' they would bf, felt that it was 'natural'
- For most, long-term bf happened gradually; many found it 'shocking' before they bf long-term
- Links between long-term bf and other decisions about parenting and child-care
- Difficult consequences for many (personal well-being, relationships and paid employment)
- Some had support but for many it is isolating
- Breastfeeding in public

Discussion – liminality and long-term breastfeeding

- Most breastfeeding women experience integration fairly rapidly; the women in this study remained in a liminal state for some time.
- Experience continues to be different from both those who breastfed and stopped and those who never breastfed.
- Participants recognised that they were in a different place when other mothers were returning to ‘normal’.
- They talked about entering a phase from which an exit was not apparent.
 - It was hard to see how to move into another place.
- They talked about being apart from other mothers.
- Committed to a way of life without a clear end, a phase with no end

Discussion

- New understandings of themselves and new ways of communicating with others about their 'new world'
- Use of space when breastfeeding – where, who with and moving in and out of different spaces.
- How spaces are interpreted as both public and private.
- The use of strategies to bf in public.
- The use of support groups, 'like-minded people' as secure liminal spaces; shared sense of community (virtual as well as 'real').
- The recognition that life would never be the same again; building of new identities.

Discussion

- Findings support those of Mahon-Daly and Andrews.
- Breastfeeding can be seen as a time of transition between states – ‘both/either’, ‘not-quite-either’
- *Communitas* – inhabiting a common space, identifying with others, sense of belonging.
- Women feel themselves marked out as different, between social identities.
- ‘...at once no longer classified and not yet classified...’ (Mahdi et al., 1987)
- Societal expectations about liminal states – these women continue to breastfeed despite societal pressure to wean.

Discussion

- Liminal states can be unsettling
 - For others
 - For breastfeeding women
- ‘Matter out of place’
 - Breastmilk inappropriate in specific places
 - Feeding publicly ‘breaching a cultural taboo’ (Stewart-Knox et al, 2003:267)
 - Uncontained breastmilk interpreted as lack of control; continuing to breastfeed seen as lacking control
 - Older children (with teeth and speech) – culturally disturbing and inappropriate

Conclusions

- Breastfeeding women can be seen to be in a liminal space and place, some remain like this for extended periods.
- Some never reincorporate into society as they were before.
- Women who breastfeed long-term are 'betwixt and between' and their actions make their breastmilk and their bodies 'matter out of place'.
- Support helps women manage the cultural taboos. *Communitas* is a helpful concept to understand the role of support groups.
- Being in a liminal phase stigmatises these women and reinforces their status as people engaging in threatening behaviour – no apparent end.
- Confirms the need to make long-term breastfeeding more culturally acceptable – may encourage more women to breastfeed for longer.

Papers:

Dowling, S. and Pontin, D. (2015) 'Using liminality to understand mothers' experiences of long-term breastfeeding: 'Betwixt and between', and 'matter out of place'. *Health: An Interdisciplinary Journal for the Social Study of Health and Illness*. OnlineFirst publication: DOI: 10.1177/1363459315595846

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