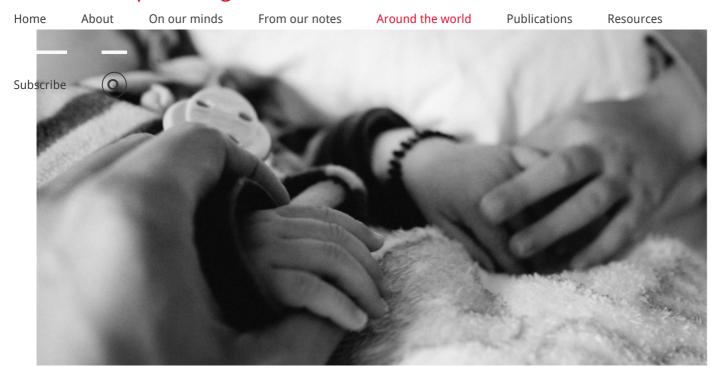
(iviedlated) parenting Wars. A new munis account





Natural birth, breastfeeding, dummies – the debates and online discussions can be vicious, keyboard warriors lashing out from the safety of their anonymity – but what's a new mum to do? Ranjana Das, a new mum herself, finds out first hand. Ranjana is a lecturer at the University of Leicester researching media audiences, and the mediation of childbirth. [Header image credit: R. Sarlie, CC BY-ND 2.0]

In February 2015, when my pregnancy test showed a clear positive, I started lurking on various pregnancy and parenting forums, trying to

make sense of what was on the minds of those in the same boat, news stories around pregnancy and early parenting years caught my eye, and the evidence base around pregnancy health, infant feeding, weaning and 'safe' sleeping soon became my go-to every time I had a free minute. (As an aside, a recent news story warns pregnant mums about eating potatoes, and as I write this, a celebrity promoting breastfeeding creates an uproar!)

Natural birth

What I have been meeting since my son's birth, however, is far from a uniform chorus of parents supporting each other, with debates and wars beginning with pregnancy itself. Guidelines vary by country, safe and unsafe lists are different across cultures, and even the advice on alcohol leads to heated discussions. Then comes the birth. The natural birth movement (led to a huge extent by Sheila Kitzinger) meant a great shift in attitudes towards birth in the UK – women were freed of the stirrups and encouraged to believe that their bodies were sufficient. But as I followed this conversation as it stood in 2015 I realised that its contemporary versions often led to the conclusion among many that any woman who chooses/needs medical intervention in birth has either failed or opted for an easy way out.

I found myself bowing out of a Facebook group on Hypnobirthing after a woman who had planned a candle-lit home pool birth and was learning to walk again following birth trauma was berated on how she had failed to birth naturally. While I gave birth naturally (and it could easily have gone the other way) I have since met countless mothers who, when asked about their births, whisper that

they had to have a Caesarean/epidural/instruments because (insert reason), or that they "couldn't do it" with hot water and towels alone. Here is a far less emotive discussion along these lines than some others available online, but it shows just how individual each woman's birth is. My new project (funded by the British Academy), titled 'Birth Stories', looks at some of these emotional struggles and judgements around pregnancy and birth.

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Breastfeeding

Once the baby arrives, mothers lie awake at night battling ambitions ("I will breastfeed for two years") and realities (parts of my body are sore and shredded), seeking advice online through the night. Here is the official advice on infant feeding and here is the real heartache of people seeking support for 'failing'. The evidence-based verdict is clear – breastmilk as a nutritional product has live antibodies in it that formula milk does not. But consider the mother's physical and emotional health, other children needing attention, problems she encounters, the absence or presence of qualified lactation support, the degree of support at home, the anatomical features of the baby's mouth – and the list goes on.

As I see it, there are two clear groups of worried mums. First, bottle-feeding mums who often feel judged for not doing 'their best'; and second, breastfeeding mums whose babies are leaner, and who feel judged because of what is incorrectly perceived to be 'slow weight gain'. Public health bodies use the evidence base to promote breastfeeding, but real, on-the-ground support in the UK is often misleading or difficult to access. The evidence used by emotive, stringent breastfeeding supporters becomes evident on online discussions. On the other hand, the evidence base can also be misreported, with selective stories highlighted by certain news media damaging the public image of breastfeeding by treating, for example, extended or longer-term feeding as something to be derided. None of this helps anybody.

Using dummies, and other useful advice

The British Dental Association gives clear advice on dummies. Shall I give my screaming baby a dummy at 4am when every bit of planning and prep I had done asks me not to? Shall I make a judgmental remark about a mother of a toddler with a dummy? Shall I try baby-led weaning, or traditional weaning? There is, in all likelihood, an online debate about this! Is it okay to push my baby around in a pram? To use disposable nappies? Or is a baby sling and terry nappies the best thing to do? Safe sleep guidelines are clear (see the Lullaby Trust). And yet, my home country cosleeps without batting an eyelid – it works really well for night-time feeding. But would you take a risk when the official advice makes it clear that this is not best practice? Or would you have the confidence to see what works best for you, in your own home?

There is evidence-led, official advice and some active public health promotion for some of these issues and (sometimes uneven) support. But for most, it is a case of figuring out the balance between what works best for your baby, yourself, your family, and for your own expectations of yourself. When advice is sought informally, often at odd hours of the night, online, and anonymously, there is the chance that you will find kindred souls, also waking through the night. Equally possible, however, is the chance of meeting keyboard warriors, perhaps armed with accurate evidence, but with little tact, and probably far less compassion. In this age of mediated parenting, this is not what we need.

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