

## Experience of Breastfeeding And Exclusive Breastfeeding For Women With Physical Disabilities: Scoping Review

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### ABSTRACT

The study aims to investigate the scientific evidence concerning breastfeeding and exclusive breastfeeding experiences among women with physical disabilities. Exclusive breastfeeding entails providing only breast milk to infants from birth to 6 months old, excluding any other food or drinks except medications and vitamins. However, breastfeeding is not halted after exclusive breastfeeding; it continues until the child is two years old. Utilising the scoping review method, the research employed the Population, Concept, and Context (PCC) framework. Six articles meeting the inclusion criteria were identified from a pool of 1,553 articles from PubMed, ScienceDirect, Wiley, and Research Rabbit databases. These articles shed light on the challenges, experiences, barriers, and support systems related to breastfeeding and childcare encountered by women with physical disabilities. The research on breastfeeding experiences among women with physical disabilities reveals both facilitators and barriers. Facilitators include adaptations, peer support, and necessary equipment, while barriers encompass insufficient support, health considerations, and milk production and latching challenges. These findings underscore the importance of tailored support and access to information for women with physical disabilities who aim to breastfeed effectively. Implementing such support mechanisms can contribute to improving breastfeeding rates among this demographic, thus promoting the health and well-being of both mothers and infants while addressing societal attitudes toward disability issues.

**Keywords:** Breastfeeding, Exclusive Breastfeeding, Women with Physical Disabilities

### INTRODUCTION

Breast milk (ASI) is a source with a balanced composition for the baby's growth and development needs. Apart from that, breast milk is also the primary source of life, so it is sought that babies only drink breast milk without any other additions such as formula milk, tea water, honey, and water and without complementary foods, often referred to as exclusive breastfeeding (Habibah, 2022). Exclusive breastfeeding involves providing infants with only breast milk, excluding any other foods and drinks, except for medications and vitamins from birth up to 6 months old. However, this does not imply that breastfeeding

ceases after the exclusive breastfeeding period; instead, it continues to be given to infants until they reach two years of age (Roesli U, 2013).

According to the World Health Organization (WHO), global exclusive breastfeeding rates for infants aged 0-6 months stood at approximately 44% from 2015 to 2020 (Vaz et al., 2021). This falls short of the global target of 50% coverage for exclusive breastfeeding. In Indonesia, the indicator for infants under six months receiving exclusive breastfeeding reached 67.96%, meeting the national target 2022. Aceh had the lowest achievement among Indonesian provinces, while DI Yogyakarta had the highest (Muliadi et al., 2023).

Disability has changed according to the development of knowledge in society, especially Indonesia, ranging from people with disabilities, people with disabilities, people with disabilities, someone with disabilities, someone with disabilities, and extraordinary children to become a term for special needs and disabilities. Disability stands for Differently abled people or people with different abilities, which appeared in 1998 (Aziz & Safrudin, 2014). These different abilities can affect the activities of people with disabilities due to the shortcomings of the individual. Disability is the loss or limitation of individuals in participating in daily activities in society, not only due to physical or psychological disorders but also due to social obstacles that contribute.

People with physical disabilities experience decreased mobility or endurance, which affects the muscular, respiratory, or nervous systems and disturbances in activities. Physical disabilities can consist of paraplegia, cerebral palsy (CP), and dwarfism. Paraplegia is the loss of ability in the lower limbs, such as the legs and hips. This is usually due to genetic factors and the spinal cord (OT & Das, n.d.). Cerebral palsy (CP), usually caused by brain damage if it develops before or after birth, is a disorder that occurs in the nerve networks and brain that control movement, learning speed, feelings, and thinking abilities (Patel et al., 2020). Dwarfism is when a person experiences abnormal bone growth caused by genetic or medical factors. People with disabilities are also called people with disabilities (UN Convention on the Rights of Persons with Disabilities) (Pritchard, 2020).

People with disabilities constitute the largest minority group in the world. More than one billion people, or equivalent to 15% of the world's population, live with some form of disability, of which 190 million (3.8%) are aged 15 years and over, and the prevalence of disability is higher in developing countries (Organization, 2020). Data from the Central Statistics Agency (BPS) as of August 2021 recorded that the proportion of women with disabilities in Indonesia of working age was more significant (9.32 million or 55%) than men of working age (7.62 million or 45%). Of this figure, only 7.04 million people with disabilities work, and the rest are openly unemployed. There are fewer women with disabilities entering the workforce, 3.1 million people or 42.7%, while men are 57.3% or around 4.29 million people.

Based on the results of the study (Acheampong et al., 2020), In Ghana, mothers facing physical limitations perceive breastfeeding as challenging and costly due to issues such as sleep disorders, limb dysfunction, and the necessity for breastfeeding mothers to maintain a balanced and nutritious diet. Participants expressed experiencing prejudice and discrimination in various aspects of their daily lives. The challenges encountered by mothers with physical disabilities highlight the need for a shift in societal attitudes toward disability issues in Ghana.

The study by Powell (Powell et al., 2018) on breastfeeding among women with physical disabilities in the United States identified four key facilitators and five common barriers to breastfeeding. Facilitators included adaptations and necessary equipment, utilisation of breast pumps, receiving physical assistance from others, and peer support. Conversely, barriers encompassed insufficient support, health considerations related to disabilities, limited access to information, challenges in milk production, and difficulties with latching. These findings underscore the necessity for enhanced support and access to information for women with physical disabilities who aspire to breastfeed effectively.

According to the study by (Andrews et al., 2020) on breastfeeding experiences among disabled women, four key themes emerged. These included challenges in communication with lactation consultants, issues concerning milk supply and attachment, significant pressure to breastfeed, and positive interactions with healthcare providers. The research offers novel insights into the breastfeeding experiences of women with disabilities. These results underscore the importance of providing enhanced support for decision-making regarding breastfeeding among women with disabilities, as well as improving access to clinical resources that are supportive of disability-related needs.

Given the mentioned phenomenon, there is a need to narrow down topics to focus specifically on the experiences of breastfeeding and exclusive breastfeeding among women with physical disabilities. This study aims to examine scientific evidence concerning the experiences of exclusive breastfeeding and breastfeeding among women with physical disabilities, incorporating relevant evidence from each identified article.

## **RESEARCHED METHODS**

The research method used in this review is Scoping Review, a systematic design used to review the scope of the methodology, interpret evidence-based findings, and map out the concepts and type of research underlying the research. The steps undertaken in this review include several stages. First, researchers identified research questions guided by questions about breastfeeding experiences and exclusive breastfeeding in women with physical disabilities. Then, researchers develop a review focus and search strategy using the Population, Concept, Context (PCC) format, which leads to identifying key concepts and developing appropriate search terms. The second stage involves identifying relevant studies by determining the database, inclusion criteria, and keywords. Researchers use a variety of databases and specific inclusion criteria to identify relevant research articles.

The third step involves article selection by checking duplication, filtering titles and abstracts, and reading the research article in full. This study uses the Prisma Flow Chart to provide an overview of scientific article search protocols and conduct quality assessments to improve writing quality. After article selection, the Data Charting stage is completed by compiling data in tables that include information about the title, researchers, year, country, goals, methods, participants, and results of each relevant research article. Lastly, the study assessed the quality of articles using tools from the Joanna Briggs Institute (JBI) for qualitative and quantitative research studies by establishing value criteria for each question related to research methodology. Researchers then categorise the total value of articles based on certain limitations to determine the quality of the articles reviewed. Thus, this study uses a systematic and comprehensive approach to answer the research questions.

## **RESULTS AND DISCUSSION**

### **Breastfeeding Facilities**

#### **Breastfeeding adaptations and aids**

Women with physical disabilities do not have the physical strength to hold their babies long enough to breastfeed and cannot find a suitable position. Women with physical disabilities choose to use breast pumps that they can do independently or with physical assistance (Powell et al., 2018). Women with physical disabilities talk about breastfeeding while lying down. Pillows are commonly used in breastfeeding individuals to position the baby (Warkentin et al., 2021).

#### **Physical Help From Others**

Women with physical disabilities say it is essential to receive physical assistance in breastfeeding from others, especially partners and family members. Physical assistance includes positioning the mother and baby; sometimes, the helpful individual has to hold the baby while the mother is breastfeeding (Powell et al., 2018). Women with physical disabilities receive help from others or their partners. Aids include physically positioning the baby into the mother's arms, sometimes more general aids such as putting a pillow on, and sometimes adding an extra pillow underneath the baby (Warkentin et al., 2021).

#### **Peer Support**

Women with physical disabilities find value in receiving breastfeeding information from peers, particularly those who share similar disabilities. They gather such information by participating in annual conferences for individuals with disabilities. The significance lies in the ability to directly communicate with others with similar disabilities, allowing for the exchange of advice on adaptation and positioning during breastfeeding (Powell et al., 2018).

### **Inhibitions in Breastfeeding**

#### **Lack of Support**

Women with physical disabilities recognise the absence of support as a barrier to breastfeeding, both in the immediate and prolonged sense. They face challenges in collaborating with lactation consultants or accessing their services. Women feel that lactation consultants lack understanding of their needs and fail to propose strategies for adapting breastfeeding techniques to accommodate their physical limitations (Powell et al., 2018). Additionally, blind women express difficulties in learning to breastfeed. In such cases, blind women should be guided by lactation consultants to teach them to communicate location and direction effectively.

Disabled women expressed feeling extremely anxious when they encountered difficulties in breastfeeding, fearing that this might lead hospital staff to question their ability to care for their babies (Andrews et al., 2021). Additionally, women with disabilities reported not exclusively breastfeeding due to various reasons such as financial constraints to enhance their nutritional intake, previous cesarean sections, pressure from some medical personnel, and ineffective communication strategies, among others. The primary source of support for these women came from their mothers and grandmothers (Buor et al., 2021)

#### **Limited information**

Breastfeeding women highlight the lack of information regarding breastfeeding and disability as a significant obstacle. One woman expressed frustration due to receiving information primarily tailored for non-disabled women, which did not address her specific needs. Women with disabilities expect others to have a better understanding of their requirements and advocate for more accessible and relevant breastfeeding information explicitly targeted toward women with disabilities (Powell et al., 2018)

#### **Difficulties with milk supply**

Women with physical disabilities discuss difficulties associated with breastfeeding supply. They experience delays initiating breastfeeding due to finding the appropriate breastfeeding technique. This delay is believed to contribute to their inability to produce adequate amounts of milk (Powell et al., 2018). Additionally, women with physical disabilities express that the breast milk supply is insufficient to sustain breastfeeding. Despite their desire to breastfeed, many women cannot continue breastfeeding for an extended period (Andrews et al., 2021).

#### **Difficulty in breastfeeding**

Breastfeeding women have difficulty latching. However, attachment is a challenge for many women. Women with physical disabilities often feel irritated because of their limitations, namely problems in positioning (Powell et al., 2018).

#### **Breastfeeding Experience**

##### **The Decision To Breastfeed Or Vice Versa**

Women with physical disabilities opt to breastfeed influenced by various factors. Their mothers influence some, while others are inspired by their admiration for breastfeeding women. Additionally, some decide to breastfeed based on advice from nurses and their personal beliefs regarding breastfeeding. Women express that their affection towards their children, the natural properties of breast milk, and the belief that breast milk is a divine creation influence their decision to breastfeed. Breastfeeding elicits emotions, including joy, love, anger, and pain for some women. It is viewed as a bond of love between mother and child (Acheampong et al., 2020)

#### **Challenges Related To Childcare**

##### **Mobility**

Women with physical disabilities employ various methods of mobility in their daily lives. Some may crawl while carrying their babies, others sit in wheelchairs with their babies on their laps, and some use crutches and callipers to move around. When babies cry at night, some women may need to crawl on the floor to reach their babies and breastfeed them (Acheampong et al., 2020).

##### **Prejudice**

Women with physical disabilities experience feelings of judgment from the broader society, starting from the antenatal period through becoming mothers. They perceive that many individuals believe they are unfit for motherhood due to their physical limitations. There is a prevailing notion that women with physical disabilities are unable to fulfil the responsibilities of competent motherhood (Acheampong et al., 2020).

##### **Discrimination**

Women with physical disabilities recount instances where they perceive discrimination, often stemming from the belief among some individuals that physical disabilities are contagious. They report feeling discriminated against in various encounters with different people, with some experiencing emotional distress to the point of crying (Acheampong et al., 2020). However, there are limitations to this study. Firstly, the search is restricted to English, potentially introducing bias in each article. Additionally, the search is limited to the years 2018-2023, which may restrict the breadth of the search. Furthermore, including various research methods in the scoping review yields diverse results, albeit potentially less significant.

## CONCLUSION

In summary, breastfeeding and infant care offer a source of hope for women with physical disabilities despite encountering numerous challenges in fulfilling their maternal roles. These women experience a range of breastfeeding facilities, barriers, experiences, and childcare-related challenges. Enhancing breastfeeding support for women with physical disabilities necessitates a deeper understanding of their needs and experiences. With healthcare providers gaining better insight into breastfeeding among this demographic and increased access to lactation consultations, physical assistance, and community support, more women with physical disabilities can successfully breastfeed.

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