

Common Concerns and Anxieties

In our study mothers expressed a number of pre-return anxieties / concerns. Many reported that the reality was not as bad as expected. In this information guide we cover some of these concerns/ anxieties and how mothers managed these.

My child will not take a bottle

“Probably our main concern was that he wouldn't take the bottle. Is he going to get the dairy? Is he going to get the nutrients that you make?”

This was one of the most commonly reported concerns. Your expressed milk can be given in a cup or mixed with solid food. From 6+ months you might find your child can drink your milk in an open cup or sippy cup, or a cup with a weighted straw, but they are likely to take more volume if they drink from a bottle. Some mothers mentioned that introducing a cup worked:

“It was a struggle as my son would not take a bottle. We tried so many different bottles and ways to get him to accept it. I left the house, I would use the bottle teat in my bra, different temperatures etc. I was so happy when I discovered open cup feeding and it worked. I was so relieved that he would be ok when I wasn't there.”

Some mothers mentioned their child would accept a bottle when offered by someone other than them and they (the mother) were not close by. Others mentioned that their child wouldn't drink their milk in their childcare setting and the child adapted and managed fine without milk, making up for it when reunited:

“In the end my kid adapted. Both of them, they didn't even want the milk. The people in the nursery were saying they are not drinking their milk. They were fine eating their normal food”

“She didn't tend to have much to drink when at nursery, even though I supplied breastmilk for months on end. She basically kind of cluster feed when she got home.”

Will my child get enough to drink / nutrition?

If providing expressed milk for your baby is challenging (for instance you are struggling to express enough, or your baby is reluctant to use a bottle), you might ask your childcare provider to focus on offering solid food to your child, if your child is over 6 months. Children should be offered sips of tap water with meals. If your baby is reluctant to drink, it might help to offer foods such as watermelon, tomato, cucumber and soup, which provide fluid.

When dealing with a “fussy eater” many families are advised to reduce/stop breastfeeding in order to encourage the baby to accept more solids. Reducing breastfeeding in this situation might take away a valuable source of nutrients. Beware that there is no evidence that reducing milk feeds will increase solid intake. In this situation, it might also be helpful to

know that as you produce less, breastmilk is more concentrated and the ingredients alter to best suit your baby's age and stage^{1,2}.

Mothers also often wonder how do they know if their child is getting enough nutrients? Indicators may relate to poor weight gain, constipation, an unsettled child. **If you have any concerns speak to your health visitor or GP.**

Will my child be able to nap without me?

"My concerns were how are nursery going to get them to sleep and you know, will they cope without milk during the day? How will they get them to sleep as one of the biggest things because they were both fed to sleep babies."

A common concern for those whose children were fed to sleep was whether the childcare provider would be able to get the child to sleep. However, many reported that this was not a problem, and whilst the child would not nap without being fed to sleep at home they would nap independently at their childcare provision!

Will my child be able to cope without me?

In general mothers were concerned that their child would be upset without them and were worried how they would cope, but again mothers reported the child adapted well. Many children are very adaptable and quickly get used to different schedules and habits on different days. Families often report that their children will nap independently and eat all their vegetables at childcare but not at home! Some mothers even reported that the child ate and slept better at day care than at home.

Breastfeeding offers more than just physical nourishment—it's a comforting ritual that strengthens the emotional bond between you and your child. Therefore mothers in the study talked about how breastfeeding was a way to reconnect with their child and the child adapted to the new schedule.

Will I be able to express enough, will it impact my milk supply?

"I was really concerned about my milk drying. Because obviously I wouldn't have the baby all the time with me."

"I was worried about the potential impact on my supply because you don't know obviously how much we're producing when we're feeding compared to how much we're expressing."

Issues relating to milk supply were a common worry. Both in terms of whether they would be able to express enough, and secondly whether return to paid work would impact their milk supply. A related concern was whether returning to work and changes to milk supply would lead to the end of their feeding journey before they were ready.

"I was very, very anxious about returning. I didn't want my breastfeeding journey to end. I didn't want anything to scupper my chances of having that end and yes, I was very anxious"

"I was really worried about how I'd manage with work and whether my feeding journey would stop as well. I was really concerned as I had worked so hard at it for eight months and I wasn't ready to give up at that time."

Some mothers in our study reported that return to work did lead to their child weaning earlier than expected, however, plenty reported it did not.

"I thought that returning to work would end our breastfeeding journey quickly, especially with the long night shifts and juggling sleep. But surprisingly, we're still going, and he's doing fine. I was also worried that he'd struggle with bedtime when I wasn't there, but my husband handles it well, and he settles down without any issues. "

If you are concerned about your milk supply you may need to increase expressions or add more feeds when you are together which may include night feeds. See below for concerns relating to reverse cycling/increased night feeds. If your child takes your expressed milk in a bottle you may find paced bottle feeding may help your child take more milk.

How do I reduce the risk of becoming engorged / getting mastitis?

"And I didn't want to get mastitis and stuff, so I had a lot of worries about just generally how we were going to cope going forward."

Mothers often worry about engorgement (when breasts become full) and mastitis (inflammation of breast tissue). Related to these concerns was the fear of leaking:

"I did feel anxious about leaking through my clothes as well. So just being very conscious of my body and making sure that was in tune with my body, making sure that I knew if something wasn't right, you know, to go and sort it out."

You can reduce the risk of getting engorged by ensuring you do not go too long between feeds / expressions and relieving the pressure if you start to feel uncomfortably full. As discussed in Mother Guide 4, your employer does have a duty of care to your health and physical and mental wellbeing, and why it is important they discuss with you what you need.

It is worth noting that advice on mastitis changes with La leche League³ providing useful advice and signs to look out for in relation to mastitis.

Night Feeds and Coping with Fatigue

"I'm wondering whether when I go back, whether he'll start like reverse feeding and wanting more at night again. So, we'll wait and see whether that happens."

Having to breastfeed at night whilst returning to paid work is a big concern for lots of parents who, understandably, worry about being exhausted. But feeding at the breast frequently (including at night) when you are with your child reduces the amount of milk expression sessions you might need when separated.

Parents are often surprised to understand that babies don't need more and more milk as they grow, in fact after six months when they start eating solid food, they need a little less breastmilk. A baby who feeds just once or twice in the night can intake a considerable proportion of their milk-needs then, reducing pressure to express during the day.

“Despite the social pressure for your baby to sleep through the night as young as possible, for most mothers it is easier to keep long-term milk production stable if they continue to breastfeed at night”. - Nancy Mohrbacher IBCLC⁴

Night feeds are normal⁵. A Norwegian study⁶, based on 55,831 reports from mothers, found 69% (27%) of children at 6 (18) months woke at least once during the night, with 20% (3%) waking 3+ times. In a UK study⁵ of 715 mothers with infants aged 6-12 months, 79% reported their child woke at least once a night, with no difference between those given breastmilk and formula milk.

Understandably mothers often worry about how they will cope with night feeds. Some families find lying down breastfeeding to be a helpful way to get more rest, and some find co-sleeping works for them. For evidence-based information about normal infant sleep behaviours see the Baby Sleep Info Source (BASIS) website⁷, and for information on safer sleeping see the Lullaby Trust⁸.

References

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