The impact of transnational migration on intergenerational transmission of knowledge and practice related to breast feeding

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Author(s)
McFadden, Alison; Atkin, Karl; Renfrew, Mary J

Aims

The aim of this study was to explore whether intergenerational knowledge and practice concerning breast feeding is affected by migration from Bangladesh to the UK.

Methodology

- This qualitative study used an ethnographic approach and purposive sampling
- The authors undertook focus groups and in-depth interviews to acquire data for a qualitative study.
- The 2 focus groups comprised 14 grandmothers who had migrated from Bangladesh to the UK; the in-depth interviews with 23 mothers of Bangladeshi origin who had breast fed at least one child in the UK within the last five years. The grandmothers and mothers were not related to each other.
- A bilingual researcher led the focus group discussions and 10 of the interviews in Sylheti
- The study took place in four localities in northern England in 2008. Two were based in West Yorkshire, in cities with significant ethnic communities and 2 in north east England with only small ethnic communities.

Key issues

Findings were structured by 4 analytical themes:

- the continuity of intergenerational transmission
- the disruption of female networks
- breast feeding as hidden practice
- negotiating family relationships and professional advice

The research found that the impact of migration on the transmission of knowledge was often complex, but the findings

concurred with other studies which emphasised how the maintenance of cultural traditions around breast feeding should be seen as important. The evidence indicates that the absence of such advice and guidance could compromise mothers' ability to breast feed, as mothers did not have the opportunity to observe breast feeding practices, and were more likely to turn to other options [for example: bottle feeding, formula milk].

Migration could have a disruptive effect on such traditions, which the authors suggested occurred through 3 intersecting factors:

- Firstly, migration often broke wider family support networks, particularly with female kin, leading to a loss of knowledge and the ability to dedicate time to breast feeding because other tasks could not be shared.
- Secondly, attitudes to breast feeding in the UK, which have historically seen breast feeding as a private activity, affected the level of discussion between generations. Where mothers did not have access to information from their mothers, or the wider community [often because migration had created a geographical separation] health professionals became the main source of information about breast feeding which could have a negative effect on the quality and type of knowledge passed on, in part because of variable levels of awareness and cultural competence among health workers.

- Finally, the study found that relationships between grandmothers and their daughters were constantly subject to renegotiation and that migration played a role in this.

Conclusions

A better understanding of the how migration affects the transmission of knowledge and advice from grandmothers to younger mothers could help health professionals facilitate better family support for breast feeding. However, they caution against seeing ideas about breast feeding as fixed in either countries of origin or destination. The authors conclude that a family centred approach would be more beneficial than one just focused on the mother.

It is recommended that health professionals in the UK take account of the significant impact of information that is passed on [particularly in relation to breast feeding experiences of grandmothers' in countries of origin] when working with new mothers, and that this information should be analysed in relation to practices in the UK.

Recommendations

The authors state that the issues raised merit further study to assess any wider implications for health policy and practice.

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Migrant Group

Non-EU migrants

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Extra Information

The findings are part of a larger qualitative study researching breast feeding among Bangladeshi women in the UK.

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