

EXPLORING THE CHALLENGES EXPERIENCED BY FIRST TIME MUMS IN ILESÀ, OSUN STATE

BY

Ogunfolabi Olubanke Oyenun

C/O Department of Adult Education and Lifelong Learning

Obafemi Awolowo University, Ile Ife

bankeoyelami@gmail.com

Telephone Number: +2348138268482

Abstract

Taking care of babies for first-time mothers has always been a herculean task everywhere but most especially in Nigeria where infant mortality is said to be one of the highest in the world. This paper explores the challenges of first-time mothers after they put to bed. The study is a qualitative research with a focus on first-time mothers with babies between the ages of 1 month to 15 months at Wesley Guild Hospital in Ilesà. Data were collected using in-depth interview of forty-one respondents and analysed using NVivo. The results show that the challenges of first-time mothers can be broadly categorized into three; taking care of the baby, taking care oneself and information conflict between what is learnt from the medical practitioners and the first-time mother's environment. Result also shows that social care helps in solving some of these challenges. The study concludes that the challenges faced by first-time mothers are numerous and sometimes overwhelming. The study recommends that antenatal care should be more of practical than theory and that community health workers should schedule visits with first-time mothers to assist them with the challenges that they may have.

Keywords: first-time mothers, child care, antenatal clinic, post-natal care

Introduction

Motherhood is a daunting task that starts from the moment of conception of the baby until the death of the mother. It is a big task but it is most challenging from the moment of birth till the stage that the child is able to express their thoughts and emotions through words. The first year of a child's life is very difficult because it is left to the caretaker, usually the mother to decipher the meaning of each cry or the lack of it. This task can be pretty difficult and confusing since all the baby's feeling is mostly expressed through crying.

UNICEF (2018), posits that the first 28 days after the birth of a child is the most crucial period for a child's survival and the global burden of neonatal and infant mortality cannot be overemphasized as children face the highest risk of dying in their first month of life at an average global rate of 18 deaths per 1,000 live births in 2017. Comparatively, the probability of dying after the first month but before reaching age 1 was 12 and after age 1 but before age 5 was 10. In Nigeria, the picture is a little bit bleaker with one of world's highest infant mortality rate and about 60 in 1000 babies born in Nigeria die before their first birthday (World Bank, 2023). Consequently, the mother has to be on her toes at this point in her child's life, the knowledge base of the mother about the needs and wants of her baby has to be very high. This is because taking care of the child is the primary responsibility of the mother and the mother's wealth of knowledge and experience determines the quality of care that the baby will get (Qayyum, Mahnaz & Abida 2016).

In spite of the need to be able to effectively take care of her child, a first-time mum is still faced with many challenges after giving birth to her first child about what to do to ensure her child's wellbeing, the developmental milestones of the child, situations that require doctor's attention and those that do not and in addition to maternal health issues. It is in this regard that this study set to understand the challenges experienced by first time mothers in relation to maternal newborn and child health (MNCH).

Statement of Problem

A first-time mother should be adequately prepared for the task of taking care of her baby after being put to bed. A lot of first-time mothers find motherhood difficult and challenging (Mcleish, Harvey, Redshaw & Alderdice 2021). She mostly encounters challenges that she has been well educated about; with enough knowledge about the technical know-what and technical know-how on resolving these challenges. Many first-time mothers are inadequately prepared for the task of motherhood and are often faced with challenges that are difficult for them to cope with (Lynn 2005). First-time mums are usually befuddled on how to adequately take care of their babies immediately they are discharged from the hospital facing challenges that seems unsurmountable. The quality of care received during antenatal and post-natal visits is often immediately challenged as first-time mothers could not respond well to child care issues.

The inadequate knowledge on how to take care of infants has led to a lot of issues like self-medicating the infant, force-feeding of newborn babies, conducting enemas on babies in order to force the child to defecate and a whole lot of unwholesome practices due to inadequate knowledge. Sometimes these practices lead to sickness and in extreme cases the death of the child.

Although it is virtually impossible to teach a prospective mother all the things that she needs to know about her child but the task can be made easier for her when she is well educated on the things to expect after being put to bed. But in order to be educate new mothers appropriately, there is a need to know the challenges that first-time mothers face while nursing their babies; hence this study.

Purpose of the Study

The purpose of the study is to find out the challenges first time mothers experience after they give birth.

Research Questions

The following research question is generated from the purpose of the study:

- a) What are the challenges encountered by the first-time mum while taking care of her baby?

Methodology

The study is purely qualitative with focus on first-time mothers. The population comprised all consenting first-time nursing mothers in Ilesa. Using purposive sampling, Wesley Guild Hospital was selected because it is a teaching hospital. The researcher approached the Physician In Charge of Wesley Guild Hospital and explained the purpose of the research. She was told that mothers visit the post-natal clinic three times a week for immunization purposes and some first- time mothers will be present there. She was given the permission to go ahead with the research. The first-time mothers who attended antenatal and post-natal clinics with babies aged between 1 month to 15 months at Wesley Guild Hospital, Ilesa, Osun State were approached and the researcher explained to them that the questions asked is for academic purposes and that their personal details will not be revealed. In-depth interviews were

conducted for first-time mothers who brought their babies for immunization at the facility. A total of 70 first-time mothers were approached and 53 consented to be interviewed but the usable interviews were 41 because the rest of the interviews were cut short or never took place at all when the mothers had to attend to their babies or when the babies refused to be consoled after immunization.

The sample size is dependent on the availability of first-time mothers at the post-natal clinics where the babies were immunized. The researcher visited the post-natal clinics three times a week for the period of a month. Data were analysed using NVivo.

Results

It seems that each first-time mother learning experience is different but there are some challenges that are similar while they take steps into motherhood. Findings are presented along three broad lines; challenges on taking care of the newly born baby, challenges on taking care of self and adjusting to motherhood, challenges about sorting through conflicting information to decide the best route to take care of a baby.

Challenges on Taking Care of Newly born Babies

Bathing the Baby

One of the main challenges encountered by first time mums after putting to bed is how to take care of the newly born infant in spite of the lessons they may have learnt at antenatal care. 63.4% of first-time mothers reported that they have challenges in bathing their new born infants after being discharged from the hospital. A 31-year-old mother of a 6-month baby girl said

“... bathing her was also difficult for me, her body was slimy, when I have to hold her, she will move. Those were the challenges I had to face so I had to watch my mum while she was doing all these things”

Another 28-year-old mum with a 15-week-old baby said *“I was actually taught how to bath a baby at antenatal but you know experience is actually better than theory. I always look at my grandma while bathing him.*

Most of the first-time mother admitted that they were taught the theory of how to bath a newly born infant during antenatal care but it was never practicalized. Subsequently, they still have

challenges when they gave birth to their baby and have to sought for help from more experienced relative to do the job until they are more comfortable with the task.

Breastfeeding the Baby

In addition to bathing the baby, another challenge that first-time mum face when taking care of the baby is how to breastfeed the baby. 65.9% of the first-time mothers reported that they have problems with breastfeeding their babies. This is similar to the research by Kronborg, Harder & Hall (2015) who reported that the feelings of first-time mothers while breastfeeding their babies is related to deep frustration, insecurity, pain, insecurity and pleasure.

“A 38-year-old mum with a 6-week-old baby has this to say about breastfeeding: *“I did not lactate immediately, I lactated maybe a week after but I put his mouth there and he keeps sucking. I was not really able to position his mouth easily for breastfeeding but nobody taught me you know that but I will look at the convinency of the baby too while breastfeeding and if it is not convenient for him, I change to another position until I got it...”*

A 28-year-old mum said that;

“...I had this very small nipples and is not coming out. It is very flat with the breast so I had to be pulling the nipple so that it can come out. I actually started lactating at 7/8 months before I even put to bed.”

A 30-year-old mother of twins said this about taking care of her babies after she put to bed;

“I had no idea of how to position them correctly to breastfeed them until my mother taught me, no idea on how to bath my babies until I was taught by my mum, she taught me how to clean my babies’ navel with spirit. I have no challenges that were unsurmountable but I just needed someone to show me how to do most things... I had problems with lactation after I put to bed so my babies were on baby formula food for a while.”

A 27-year-old mum with a 2-month baby has this to say; *“I didn’t know how to position the baby while breastfeeding, my mother-in-law had to teach me that ... Breastfeeding was painful when she was sucking like sometimes...”*

A 23-year-old mum of a 6-week baby attributed one of her greatest challenges after being put to bed as breastfeeding her baby. In her words *“When I first put to bed breastfeeding was very*

tasking and it was very difficult. I had flat nipples after I put to bed and the milk supply was not that much. He was taking food but he was not taking much food so the nurses said that it seems that my baby prefers breast to food so I had to give him the breast like that though it was painful.”

Challenges with Taking Care of Self

Lochia (Post-Partum Bleeding)

Another main challenge of a first-time mum is the issue of taking care of themselves as a new mum. There are a lot of changes in the body coupled with the pains and aches of childbirth and taking care of an infant. One of the notable challenges that comes with childbirth is lochia and 46.3% of first-time mothers that were interviewed complained about the duration of time that they bled after childbirth showing a gap in their knowledge because bleeding for that period of time after childbirth is totally normal. A 23-year-old mother of a 10-week-old baby said;

“I bled for almost a month after I put to bed but it wasn’t that often. I might bleed for a week; it will stop then come back. I was worried because since I delivered through CS, I thought that I won’t bleed but my mum said that since I was on labor before I went for CS that it is normal for me to bleed.”

Another 23-year-old mum of a 7-week-old baby said;

“I bled nonstop for about a month after I gave birth, I told my sister-in-law who assisted me with childcare and she told me to take drinks that has high percentage of alcohol. I bought regal dry gin and this pushed out the blood for a while before it finally stopped.”

Systematic review carried out by Fletcher, Grotegut, & James (2012) revealed that the average duration of postpartum blood loss for women range from 24 to 36 days.

There is also the issue of not getting the needed response from the nurses when the question relating to lochia is asked. A 27-year-old mum with a 5-month-old baby said; *“The bleeding after birth also gave me problems, it stopped after 10 days and then after 20 days it came again for 3 days. My mum told me that it was menstruation but since then it has not come again. So, I feel that it is still the blood from childbirth. I complained to the nurses when I came for clinic and they said that I probably had sex with my husband and I said no, so I thought that it is*

because that I took cold things early that is what caused it.” Although there is no literature that has proven that cold drinks cause bleeding for a new mum but that is the comfort that the new mum gave herself when she could not get any other explanation for the return of the lochia. A study carried out by World Health Organisation Task Force (1999) determined that lochia usually stops and then starts again at least once in breast-feeding women, before it is completely finished and the study also revealed that lochia that lasts for 40 days postpartum cannot be viewed as rare.

Sore Nipples

In addition, there is also the issue of the pain of sore nipples while breastfeeding the baby. 31.7% of the first-time mothers interviewed complained that one of the main challenges that they have after putting to bed is sore nipples. A 23-year-old mum with a 6-week-old baby talked extensively about her sore nipples after putting to bed. She said;

“... The nipple became sore, then cracked at a point blood started coming out but they said that I should keep on giving him, that it is the only thing that will stop the pain that if I should stop the pain will increase. At a point the breast became very heavy and hard as if there is something there, so I persisted and tried to bear the pain. Around the 3rd week the pain started getting better and now it is gone. Also, I had the problem of position him very well so I think that contributed to the pain but now I am better still learning though”

A common theme among the first-time mothers with sore nipples is that they all said that they were advised to continue breastfeeding regardless of the pain both by medical practitioners and by more experienced mothers that the pain will eventually subside and it did. A 32 years old mum with a 9 1/2-month-old baby said;

“...I had sore nipples for quite some time but it stopped after a while. My mum said that I should keep breastfeeding her and after a while it will stop and it did.”

“A 27-year-old mum with a 5-month-old baby said almost the same thing. In her words;

Then I had painful nipples while breastfeeding. I was told by my mum to keep feeding him that it is normal and we were already told at antenatal clinic that it is his mouth that will heal the wound.”

Sleeplessness, Pain and Tiredness

More so, a major problem that affected almost all the first-time mum is sleeplessness, pain and tiredness due to the rigors of childbirth and taking care of the baby. 65.9% of the first-time mothers talked about this despite the fact that they admitted having a more experienced mother with them for at least 2 weeks after being discharged from the hospital. A 35-year-old mum of a 6-week baby has this to say;

“Just normal baby stress you know, waking up in the night to breastfeed. Not sleeping the way you want to sleep and I gave birth through CS so there are after pains and at some point I had infection which was very painful, sharp pain at the side. I came back to the hospital and my gynecologist saw me and gave me drugs so I started feeling better almost immediately. It was just the after pain, it was excruciating; different types of pain. There was this day that I had this pain on my shoulder and I was like how can shoulder be paining me? It was excruciating and I started feeling it towards my chest and it was painful but I thank God I was still in the hospital by then so they administered some drugs and it became better”

A 31-year-old mum with a 6-month-old baby said;

“When I gave birth to her it was a very difficult time for me because I have to change my sleep pattern, I wasn't sleeping the way I should I have to travel back to meet my mum so that I could sleep...My mum was with me for less than a month, she didn't really stay long because she wanted me to learn fast because I also had a sister who just gave birth so she had to go down there to assist ...I have to travel back to meet my mum and I stayed there for over 3 months because I just couldn't cope dealing with house chores and her at the same time. I have sisters to help me when I travelled back to my mum. There, I kept sleeping, I slept for over 3 days.”

A 25-year-old mum with a 15-month baby recalls her experience during the first few weeks after she put to bed. She said;

“I have tears and it was really painful and it was frustrating and at night the baby will be crying and I won't be able to sleep and my mummy will back her and petting her.”

Information Conflict

Another interesting challenge that some of the first-time mothers has to face is information conflict on how to take care of their babies. 46.3% of first-time mothers reported this. These conflicts come from trying to resolve the best way of taking care of babies; whether to adhere to medical advice or to take to the advice from their mums, friends and put into use the child care practices around their environment or their past knowledge and experiences. There are situations where friends and family of the first-time mother will advise her to give the baby something other than breastmilk in contrast to the WHO's recommendation that babies should be given breastmilk exclusively in the first 6 months of life. A 27-year-old first time mother with a 5-month-old baby has this to say about exclusively breastfeeding her baby;

"...this is the 5th month that I am nursing him and everybody will shout on me that he is supposed to have taken water or something but then he is very healthy and he is having quality food. So I can say that I took to the nurses' knowledge and it has been fine."

A 26-year-old mother of a 9-month-old baby has this to say about the conflict she experienced taking care of her baby;

"I was told also not to apply heat on the navel but to use just spirit. I was also told not to put anything on the awuje (fontanelle) but I did not comply to that instruction. My mother-in-law told me that it is normal to put something on it. This is her first grandchild and she insisted on putting oil on it. "

A 27-year-old mum talks about the conflict she has been battling with when it comes to taking care of her 14 weeks baby;

"...like now there is this thing in front of his head and they say it should close about 6 weeks and then they give another 6 weeks (this is medically and not about the myths) that the thing must close yet I can feel that it is not closed very well. In the hospital they told us not to put anything but after 12 weeks the thing is not closing so I have to accept what they are saying at home and putting oil and yet there are still no changes. So, I am thinking that maybe it is because that he is not chubby very well."

A 29-year-old mum with a 9-month-old baby talked about the conflict she had with childcare and how it was resolved;

“My mum stayed for close to 2 months and the same with my mum in law. When I first put to bed, I told my mum in law not to rub cream on his body but she insisted that she must and she did. My baby reacted to the cream... I had to bring him to the hospital. When I was there, I signaled to the nurse and whispered to the nurse to educate my mum in law that those olden days practices were not necessary. The nurse educated her so she did not try any of those things on my baby again though she will always complain that she was supposed to use lantern on his navel but she never tried it.”

Information conflicts for first time mothers are however not limited to rubbing oil on the head of the baby and using body cream but it goes far more to giving advice on the herbal mixtures to use for babies to cure all sorts of ailments. According to the American Academy of Pediatrics (2011) children have developed seizures and infections from herbal teas and remedies, lead poisoning and mercury poisoning from traditional remedies, and liver damage from dietary supplements. Therefore, a lot of caution should be taken if there is ever any need to give babies herbs. A 23-year-old mum of a 7-week baby admitted to using herbs for her baby. In her words;

“I have given my baby water and herbal mixture for oka”

A 31-year-old mum of a 9-month baby said this about the need to herbs (agbo) for her baby

“...so when he had colic and the grandmas were saying that we should use something for the baby so that the colic can go, immediately I realized, I took him to the hospital and some things were explained to me because I didn't know anything about colic. I knew but those times when they used agbo for the baby. Here, I was enlightened not to use anything and I followed the instruction which helped the baby”

A 27-year-old mum of a 5-month baby said;

“A friend who is a nursing mother recommended red acalypha and I used it but I was told to give him the extract from the flower to drink but I couldn't and his father doesn't agree with him.”

Additional findings reveal that nearly all the first-time mother (97.6%) received some form of social care mostly from a relative who is an experienced mother. Paradoxically, while information conflict occurs from the various advice from caretakers who stay with the new

mothers after giving birth, it is these caretakers that give social care and hands-on experience to the first-time mothers. It is important to note that all the first-time mothers interviewed (with the exception of one) said that a more experienced caretaker stayed with them immediately after they were discharged from the hospital for varying period of time. The experienced care taker can be the grandmother of the baby or a great aunt. The period of stay can be from 2 weeks to over 3 months depending on how busy the caretaker is. The main duty of the caretaker is to give the first-time mother hands-on teaching on how to take care of a new infant. These teachings include but are not limited to how to bath the baby, how to position the baby appropriately for breastfeeding, decipher the meaning of each baby cry, how to carry a new infant and so on. The teachings of the caretaker most often also involve the prescription of both home and herbal remedies to cure the disease(s) the infant is suffering from. Sometimes, it may further extend to giving drugs to the infants because the caretakers feel that they are qualified to give because of experience but not qualification. These pieces of advice sometimes put the first-time mother in a state of confusion especially when what the caretaker recommends is different from the recommendations of the health practitioners. A 23-year-old mum with a 7 weeks old baby has this to say about social care

“My mother-in-law stayed for a month and sister-in-law for two weeks. My mother-in-law told me that painful breastfeeding is normal and she also said that it is the mouth of the baby that will heal it so she said that I should constantly breastfeed the baby regardless of the pain. She had to teach me how to position the baby in a comfortable way. My sister-in-law bathed the baby until after the naming ceremony before she started instructing me on the way to do it. I told her about my nonstop bleeding and she told me to take drinks that has high percentage of alcohol. I bought regal dry gin and this pushed out the blood for a while before it finally stopped.”

A 27-year-old woman with a 5-month-old baby said this;

“My mother-in-law and my mum came. My mother-in-law stayed for 40 days and after she left my mum came and stayed till the baby was 3 months and then my mother-in-law came back and she left just last week. My mother-in-law taught me how to bath him... mum in law took care of his navel till it fell off and she backed him constantly that the heat will make it to go.”

Conclusion

In order for a first-time mother to care adequately for her baby, there is the need for her to be able to understand the needs of her child and this can only be done through education and experience. The education should be done mostly by health care practitioners. This is because it is obvious that the challenges of a first-time mother are numerous and sometimes overwhelming. These challenges however can be made more manageable if the education at the antenatal clinics is presented in a way that is more understandable to the first-time mothers.

Recommendations

For first time mothers to be able to apply what is taught at the antenatal clinics, the teachings should be less of theory and more of practical. Salient points should be repeated with a lot of emphasis so that it will stick to the memories of the mothers and reduce the information conflict that they experience when the advice from the health practitioners and the social care givers are not the same. In addition, community health workers should schedule and visit first-time mothers on a regular basis so as to know the challenges being encountered and teach them the best way to resolve these issues.

References

- Abdulqayyum, C., Syeda, M. H., & Abida, Z., (2016). A study of mother's knowledge about childcare and care practices in Lahore, Pakistan. *Bulletin of Education and Research*, 37 (2), 1-9
- Fletcher, S., Grotegut, C., James, A., (2012). Lochia patterns among normal women: A systematic review. *Journal of Women's Health*, 21, 1290-1294.
- Fox, R., McMullen, S. & Newburn, M., (2015). UK women's experiences of breastfeeding and additional breastfeeding support: A qualitative study of Baby Café services. *BMC pregnancy childbirth*, 15(147), <https://doi.org/10.1186/s12884-015-0581-5>
- Kronborg H., Harder I., & Hall E.O.C., (2015). First time mothers' experiences of breastfeeding their newborn. *Sexual & Reproductive Healthcare*, 6(2), 82-87. <http://doi.org/10.1016/j.srhc.2014.08.004>
- Lynn G., (2005). Lack of preparedness experiences of first-time mothers. *The American Journal of Maternal/Child Nursing*, 30(4), 251-255. https://journals.lww.com/mcnjournal/abstract/2005/07000/lackofpreparedness_experiences_of_first_time.9.aspx
- Mcleish J., Harvey M., Redshaw M., & Alderdice F., (2021). A qualitative study of first time mothers' experiences of postnatal social support from health professionals in England. *Women and Birth*, 34 (5), e451-e460. <https://doi.org/10.1016/j.wombi.2020.10.012>

- Nigeria: Maternal Death Rate in Nigeria Maybe Worse Than We Imagined. (2019) The Guardian <https://allafrica.com/stories/201904040035.html>
- The American Academy of Pediatrics (2011). Don't Give Herbal Supplements to Infants. <https://www.poison.org/articles/2011-oct/dont-give-herbal-supplements-to-infants>
- UNICEF (2018). Neonatal mortality. <https://data.unicef.org/topic/child-survival/neonatal-mortality/>
- World Health Organization Task Force on Methods for The Natural Regulation of Fertility (1999).
- The World Health Organization multinational study of breast-feeding and lactational amenorrhea; postpartum bleeding and lochia in breast-feeding women. *Fertility and Sterility*, 72(3), 441-447. [https://www.fertstert.org/article/S0015-0282\(99\)00273-3/pdf](https://www.fertstert.org/article/S0015-0282(99)00273-3/pdf)
- World Bank (2023). Mortality rate, infant (per 1000 livebirths). <https://data.worldbank.org/indicator/SP.DYN.IMRT.IN>