

Beyond the pleasure of breastfeeding: Delving into the sexuality of lactating women

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ABSTRACT

Background and purpose: Exploration of sexuality during breastfeeding is scarce and often a silent aspect, leading to a lack of understanding. Breastfeeding is understood as part of a woman's sexual development, discovering and connecting with a new person through the breast on a physical, hormonal, and emotional level. Recent studies discuss the pleasure some mothers experience while breastfeeding. The aim of this study was to explore this dimension and investigate more specific aspects of women's sexuality during breastfeeding.

Methods: This was a qualitative study with a phenomenological approach. The sample was obtained from breastfeeding and parenting groups in different districts of Barcelona, Spain. A total of 32 women breastfeeding and meeting inclusion and exclusion criteria were contacted. Of them, a sample of 18 participants was recruited, and data collection was through private individual structured interviews, later analyzed using the Giorgi methodology.

Results: Virtually all women found breastfeeding pleasurable, and about half of the participants had experienced exciting sensations while nursing their newborns. Few had shared this experience before participating in this study.

Conclusions: Addressing sexuality during this stage is essential to comprehend women's experiences and create knowledge in this area. Sharing and informing contribute to the normalization and healthy experience of physiological processes within this field, sexuality during breastfeeding.

KEYWORDS

Breastfeeding, sexuality, eroticism, postpartum, pleasure.

Introduction

The transition to motherhood and breastfeeding is a vulnerable period in a woman's life cycle^[1], with likely changes in relational and sexual patterns that may affect the couple's relationship and sexual health^[2]. During breastfeeding, there are changes, including prolactin, estrogen, testosterone and oxytocin that lead to a decrease in desire and sexual arousal in most cases. Baby care and breastfeeding become priorities during the newborn's first stage of life, reducing the importance of partner sexuality for mothers^[3-7]. Women's self-image during the postpartum period, in some cases also significantly impacting their relationship with their partner, as the erotic image may be modified by the corporal transformation^[8], but not in all cases^[9].

Studies indicate that both men and women assign the breasts the sole function of breastfeeding during this stage^[10]. Historically and patriarchally, a boundary is defined between motherhood and sexuality, complicating the reconciliation of both roles and generating a dilemma between mother and women^[3,8,11]. However, breasts symbolize the breaking of this boundary, allowing us to understand motherhood in relation to sexuality^[12,13]. In fact, breastfeeding is a form of expression and demonstration of sexuality during the postpartum period^[8-13]. Therefore, depending on the interpretation and meaning attributed to it, the breast can represent a point of union or conflict between maternal and sexual functions^[10-14].

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Currently, addressing sexuality during breastfeeding is uncommon, mainly because the focus remains on the nourishing aspect and, notably, because it remains a taboo subject. Hence, this study aimed to explore this dimension and investigate more specific aspects of female sexuality during breastfeeding.

Methods

A cross-sectional qualitative study with a phenomenological approach was conducted, considering it the most suitable for this type of research. Descriptive phenomenological focus, as proposed by Husserl^[15], aims to explain the nature of things, the essence, and the truth of phenomena. This approach allows us to understand the subjectivity of human nature, exploring life perception through experiences, their meanings, and how they are defined in an individual's psychic life. The phenomenological method, within qualitative research, seeks to understand the

vital world of individuals and the focus is on the quality and depth of data rather than quantity.

A purposive or convenience sampling approach was used. Inclusion criteria included: breastfeeding for more than 6 weeks (exclusive or mixed), a positive view of breastfeeding, initiated sexual activity (coital or not), having a partner, and being over 18 years of age. Exclusion criteria included: current breastfeeding problems, a negative perception of breastfeeding, and language barriers.

Data collection

The sample was obtained from breastfeeding and parenting groups in different districts of Barcelona. Overall, 32 women were contacted, 6 women did not meet the requirements, of 26 women who expressed interest, 8 were uncontactable for the interview, leaving 18 who finally became recruited and were included between June and August 2023.

Basic demographic data were collected at the time of the interview (Table 1). Semi-structured interviews were conducted to gain an understanding of the lived experience of breastfeeding from the perspectives of Spanish women, so that we can design appropriate interventions and provide relevant support throughout their lives (Table 2). The interview schedule was developed to elicit participant knowledge and to gain an in-depth understanding of their perceptions around breastfeeding and experiences with sexuality. All interviews were conducted by MZ and recorded using a digital recorder. Data collection was finalized due to data saturation and time constraints.

Analysis

The anonymized recordings were transcribed. The Giorgi analytical method was employed, involving the development of themes and subthemes, forming groups of meaning that show the significance of experiencing or living certain phenomena.

Table 1 Sociodemographic, gynecological-obstetric, and sexuality characteristics of women included in this.

Sociodemographic, gynecological-obstetric, and sexuality data					
Nationality	Spanish	Germany	Moroccan	Italian	Colombian
	n=11	n=2	n=1	n=2	n=2
Age	30-34 years		35-39 years		40-44 years
	n=5		n=10		n=3
Number of children	1			2	
	n=11			n=7	
Sexual orientation	Heterosexual		Homosexual		Bisexual
	n=16		n=1		n=1
Education level	University education				
	n=18				
Religious affiliation	No			Yes	
	n=15			n=3	
Breastfeeding duration	1-3 months		4-6 months		7 months or more
	n=1		n=8		n=9
Breastfeeding issues	No			Yes	
	n=9			n=9	
Length of relationship with your partner	1-3 ages	4-6 ages	7-9 ages	10 ages or more	
	n=3	n=6	n=3	n=6	
Relationship satisfaction on a scale of 1 to 10	<5	5-6	7-8	9-10	
	n=2	n=1	n=4	n=11	
Time from childbirth to resumption of sexual activity (weeks)	<6	6-12	13-19	20 or more	
	n=3	n=12	n=3	n=6	
Sexual satisfaction on a scale of 1 to 10	<5	5-6	7-8	9-10	
	n=5	n=3	n=7	n=3	

The reflexive thematic analysis occurred in four phases and was undertaken jointly by the members of the research team (MZ & CCB) [16]. Codes were then identified within the transcripts independently by both authors and the summary was reviewed by all of co-authors to ensure that it was a true reflection of the data collected [17]. We have deliberately quantified some responses in order to show the differences in the way women at different motherhood and breastfeeding stages responded, all illustrated with participants' testimonies for a comprehensive understanding of experiences.

Results

Breastfeeding and pleasure sensations

During the interviews, participants were asked about whether they find breastfeeding pleasurable, and it can be asserted, except for two cases, that all describe the experience as such or very close and similar to pleasure. Different reasons explained and associated this sensation, and in many cases, several factors converged to make women feel this way in their emotional, physical, or psychological sphere.

"(...) I like it when he sucks, that little thing when the milk comes up is cool, I like the sensation. When he sucks the nipple, it's often pleasurable, but it's not a sexual pleasure, or I don't associate the word sex in my head; it's a maternal pleasure."

"I feel my body temperature a lot with his temperature, it's a total contact of his face with my chest (...). Feeling his breath, his touch. Then there's a visual aspect (...) So it makes you feel powerful, beautiful to know that a life is growing thanks to my milk. In that sense, it's very pleasurable. It's both physical and psychological, probably half and half."

"Pleasurable in the sense, that it fills you emotionally, and physically, it's pleasurable due to the release. I don't directly associate it with sexuality."

"It gives you a high, it's hard to explain, it's internal. Or like those butterflies when you fall in love."

Breastfeeding as sexual pleasure

Considering the participants' responses regarding pleasure, there was variability in thinking about whether it is related to sexuality or not. While many make it clear that it falls outside this realm, more than a third experience excitement or similar sensations. Therefore, attempts were made to investigate in these cases whether breastfeeding could evoke an arousing response.

"It's something I experienced with Ona. (...) I was sexually aroused twice, limited like this, not with this one. It was like a high, like when you're in foreplay with your partner."

"Generally, no, but it may be that sometimes, in a certain type of suction, it sucks the nipple in a way that vibrates down there, like on a sexual level."

"More on a physical level, there have been times when it has even aroused me. Like a tingling in the body. Not many times, not every time, but more than one, yes."

"In terms of whether it gives me sexual pleasure, it did in the first weeks. Excitement perhaps because for my brain, the fact that my nipples were touched was only to arouse me. If, for example, I was breastfeeding, and Marc came and kissed me or something, it made me a little horny."

"(...) It wasn't an excitement with him, but at a genital level, the fact that he is sucking the nipples does give a bit of a surge of energy (...)."

"Sometimes, not always, I feel a connection between the pubis and the breast when breastfeeding, I feel it, and yes, it's pleasurable, but not to reach an orgasm (...)."

"Sometimes, I feel like a cramp, but not arousal. Yes, some cramp that I say: hey, this. I think it's vaginal, in the genital area, yes. A small discharge."

Reflections

For those women who have experienced arousal or similar sexual or genital sensations, it has mostly led to reflection on what happened.

"I haven't given it more importance because I had already heard another mom talk about this."

"Completely normalized, calm, really. I read in a book by Carlos González 'Un regalo para toda la vida' about this. It helped me a lot, honestly, because I didn't know, and I normalized it thanks to this too."

"Sometimes unconsciously, my head has been like, I shouldn't feel this, but then I said, well, you feel what you feel. We have barriers here, but no one can tell you what you can feel."

"(...) I didn't stop breastfeeding. Simply the surprise that I'm getting hot. I thought: I don't know if this is very normal, if it's not normal."

"I thought I was mentally ill, like what does this mean, but I didn't obsess over it."

"I felt weird because I kept it to myself. I don't know, I felt bad for feeling sexual pleasure."

Shearing the experiences

Of these women, less than half have wanted to share their experience with more people; the rest say they have only mentioned it in this interview. Those who have expressed it have done so with their partners or in trusted circles where the topic has been discussed openly, and they have felt identified when sharing similar experiences with more people.

"Yes, with my husband. He was like, you're crazy, what are you doing!"

"I think it has come up in some of these breastfeeding or parenting groups, and other mothers have experienced it too, so we've talked about it, that it's normal. In fact, these groups serve for things like this. In that sense, it's good to see that you're not the only one it happens to."

"I didn't mention it to anyone. This is the first time, not even with my partner or anyone."

"One day, I talked about it with a colleague, and she said it's normal, it happens to all of us. It's just that we women tend not to talk about it because we're embarrassed, but it's much more common than we think, and it happens to many."

Discussion

Breastfeeding is a way of engaging sexually, not genitally, similar to giving birth; it is a sexual act within a non-phallogocentric sexuality, forming part of a woman's sexual cycle [18]. It

Table 2 Interview questions.

- What is breastfeeding to you and what does it imply? Share your experience (if you have breastfed other children, please compare).
- Has breastfeeding influenced the relationship with your partner? Do you think it has changed your sexual sphere and intimacy as a couple?
- How do you feel about the changes in your breasts compared to before pregnancy, and how does your partner experience these changes?
- Have you noticed an increase or decrease in breast sensitivity during breastfeeding?
- Do you find breastfeeding pleasurable? Have you ever felt aroused while breastfeeding, and how do you feel about it? Have you discussed it with anyone?
- Before pregnancy, did you enjoy or find stimulation of your breasts arousing? Did you incorporate it into your sexual activities?
- Now that you are breastfeeding, have you stimulated your breasts in any way during intimate moments, and how did it make you feel?
- Has there been milk ejection during intimate moments? What was your reaction?
- Has your partner tried to suck milk directly from the breast, and how did both of you feel about it? Have you discussed this with anyone?
- How do you emotionally experience the sensations that breastfeeding brings during this lactation stage, whether with your child or partner?

represents the desire for physical closeness, caresses, and daily bonding with a specific body. When a woman breastfeeds, the baby becomes the object of her love. Breastfeeding exposes the mother's sexuality: she uses a part of her body culturally associated with sensuality. Both the mother's breasts and the baby's mouth are erogenous body parts, and there is also a flood of oxytocin, the hormone of love and pleasure for excellence^[13]. This bonds mothers emotionally and physically with their babies as if they were hormonally in love. During breastfeeding, most of their affection needs are met through nursing and caring for their offspring. Hormonally, libido decreases to post-menopausal levels, deterring the desire for affection or pleasure in sexual-genital relationships with an adult partner^[19]. The desire, as perceived towards the partner, does not appear for weeks or months, and sexuality shifts, in part, from the adult partner to the baby^[20]. This shift is described by Rodrigáñez-Bustos^[18] as a subversive sexuality oriented towards the baby, where women can normally experience pleasure while breastfeeding and share these moments directly with the child, possibly even experiencing orgasms.

Some women find the erection of the nipples and the pleasure sensation caused by the sucking of the baby as erotic^[4,20]. However, most mothers feel shame and guilt if they are not informed about it, leading to its invisibility, and some may stop breastfeeding^[14]. Even before the 1990s, some authors discussed a rarely mentioned phenomenon: breastfeeding is very sensual, and some mothers may feel aroused while feeding their infants, which is considered a normal occurrence. This parallels with breastfeeding and orgasm: uterine contractions, nipple erection, arousal sensations, and milk release^[21], as already stated in Masters and Johnson's studies.

One of the significant findings of this study is that almost all women find breastfeeding pleasurable, affirmed in various articles or books, such as that of Odent^[22]. More uniquely, more than a third of the participants have experienced exciting sensations at some point during breastfeeding, data rarely cited in the entire bibliographic review that has been carried out^[18,21]. Our data is in agreement with the social need to understand that sexuality goes beyond genitality, and its connection with breasts during breastfeeding transcends that boundary, although reflected in many participants' testimonies, most do not fully grasp this concept^[8,19]. Sexuality is also understood as a way of relating, creating sentimental bonds and experiencing various sensations.

In this sense, the breastfeeding stage can be understood as part of a woman's sexual development, a discovery of all these forms of sexuality with a new person and the breast, a symbol and source of eroticism, as the root of this discovery, bathed in a sea of hormones orchestrating this relationship^[11,19]. Always within the context of this study, starting from the positive experience of breastfeeding, the decision to breastfeed and actually doing so generally empowers women. The results of the present study show a perspective of breastfeeding that is often overlooked, and after listening to the testimonies, it confirms the need for women to share their experiences. There is still much progress to be made in breaking down barriers to normalize the natural processes of women's sexuality and life, but by giving them a voice and listening, we can provide knowledge, support, and resources to strengthen them in vulnerable and transformative stages, such as motherhood and breastfeeding^[2,20,23].

References

1. Duro-Gómez J, Franco Jiménez A, González Jiménez C, Duro Gómez L, Castelo-Branco C. Current lifestyle and exclusive breastfeeding: an impossible balance? *J Obstet Gynaecol.* 2022;42(2):198-201.
2. Szöllösi K, Szabó L. The Association Between Infant Feeding Methods and Female Sexual Dysfunctions. *Breastfeed Med.* 2021;16(1):93-99.
3. Acele EÖ, Karaçam Z. Sexual problems in women during the first postpartum year and related conditions. *J Clin Nurs.* 2012;21(7-8):929-937.
4. Ortiz González M, Garcia Mani S, Colldeforns Vidal M. Estudio del interés sexual, la excitación y la percepción de las relaciones de pareja en mujeres primíparas lactantes en relación con las no lactantes. *Matronas Prof.* 2010;11(2):45-52.
5. Dixon M, Booth N, Powell R. Sex and relationships following childbirth: a first report from general practice of 131 couples. *Br J Gen Pract.* 2000;50(452):223-224.
6. Fuchs A, Czech I, Dulaska A, Drosdzol-Cop A. The impact of motherhood on sexuality. *Ginekol Pol.* 2021;92(1):1-6.
7. Grussu P, Vicini B, Quattraro RM. Sexuality in the perinatal period: A systematic review of reviews and recommendations for practice. *Sex Reprod Healthc.* 2021;30:100668.
8. López Puerto AL, Gutierrez Cardozo PA, Campos Neira MD, Calderón Espejo CV. Sexualidad, erotismo y amor en el embarazo y postparto. Universidad Católica de Colombia. 2020. Available at: <https://repository.ucatolica.edu.co/server/api/core/bitstreams/e5401c16-37e9-4dc3-8fa3-86ab05b0b424/content>
9. Hipp LE, Kane Low L, van Anders SM. Exploring women's postpartum sexuality: social, psychological, relational, and birth-related contextual factors. *J Sex Med.* 2012;9(9):2330-41.

10. Florencio A, Van der Sand IC, Cabral FB, Colomé IC, Girardon-Perlini NM. Sexuality and breastfeeding: concepts and approaches of primary health care nurses. *Rev Esc Enferm USP*. 2012;46(6):1321-1327.
11. De Sa Vieira Abuchain E, Aparecida Silva I. Vivenciando la lactancia y la sexualidad en la maternidad: dividiéndose entre ser madre y mujer. *Cienc Cuid. Saúde*. 2006;5(2):220-228.
12. Gamboa Solís FM. La subversión del pecho femenino como objeto paradigmático del amor sacrificial: entre la sexualidad y la maternidad. *Uaricha Rev Psicol*. 2011;8(16):12-24.
13. Perlman L. Breastfeeding and Female Sexuality. *Psychoanal Rev*. 2019;106(2):131-148.
14. Rodriguez-Garcia R, Frazier L. Cultural paradoxes relating to sexuality and breastfeeding. *J Hum Lact*. 1995;11(2):111-115.
15. Fuster Guillen DE. Investigación cualitativa: Método fenomenológico hermenéutico. *Propós Represent*. 2019;7(1):201-229.
16. Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol* 2006;3(2):77-101.
17. Liamputtong P. *Qualitative research methods*. 4th Ed. South Melbourne, Victoria. Oxford University Press. 2013.
18. Rodríguez Bustos C, Cachafeiro Viñambres A. La represión del deseo materno y la génesis del estado de sumisión inconsciente. Tercera Edición. Ediciones Crimentales S.L. Murcia. 2007.
19. Massó Guijarro E. Deseo Lactante: Sexualidad y política en el lactivismo contemporáneo. *Rev Antropol Experimental* 2013;13(31):515-529.
20. Riordan JM, Rapp ET. Pleasure and purpose: the sensuousness of breastfeeding. *JOGN Nurs*. 1980;9(2):109-112.
21. Polomeno V. Sex and Breastfeeding: An Educational Perspective. *J Perinat Educ*. 1999;8(1):29.
22. Odent M. El bebé es un mamífero. Editorial OB STARE. Tenerife. 2007.
23. Matthies LM, Wallwiener M, Sohn C, Reck C, Müller M, Wallwiener S. The influence of partnership quality and breastfeeding on postpartum female sexual function. *Arch Gynecol Obstet*. 2019;299(1):69-77.

Conflict of interest statement

The authors declare having no conflicts of interest.

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Ethical aspects

The study protocol was reviewed and approved by the Ethics Committee of the Hospital Clinic of Barcelona (register number HCB/2023/0650, and it was performed in accordance with the Helsinki II Declaration and the ICH Guidelines for Good Clinical Practice. All women were informed about the study and the interventions that would be performed, and signed informed consent was obtained from all of them at the time of inclusion.