dianne ([00:00:21](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=21.6)):

[inaudible] hi, welcome to the Badass Breastfeeding podcast. I'm Dianne, your lactation consultant.

abby ([00:00:25](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=25.43)):

and I'm Abby. The badass breastfeeder and today's episode is brought to you by Sheila Darling coaching. Sheila Darling is a social worker, certified hypnotherapist and mindfulness meditation teacher, who could be your start to a more peaceful life. And today's episode is also brought to you by original sprout. Original sprout carries, safe, effective, and pediatrician, tested shampoos, conditioners, styling, and body care products produced and packaged in California USA. And we'll hear more from our sponsors later, but these sponsors make this podcast possible. So if you could please head to badassbreastfeedingpodcast.com and check out our sponsor page. If you need anything, give them your business. If you can, while you're there, scroll down and enter your email address and you'll get episodes sent straight into your inbox. Um, and now Dianne has our review of the week.

dianne ([00:01:12](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=72.11)):

Yes. And our review of the week came from Gmail and it is from Shelby Lee. She said, I just had my first baby Riley Elizabeth, nine weeks ago. My mom breastfed me and my siblings, and I knew I wanted to do the same, but I live nine hours away. And everything has changed in the last 25 years. Also, my mother was 120 pounds soaking wet, and I'm 260. I had the hardest time at the hospital with finding a lactation consultant that encouraged me to feed my child, even with my large boobs. I had triple D's before baby. And now once I'm engorged they are huge. Everyone encouraged me to just switch to bottle feeding because I just didn't have the right body for breastfeeding. Everyone went to the cradle hold and I couldn't see my baby to make sure that 'A' she was latched, right. And 'B' she wasn't suffocating. Can we talk about techniques for plus size women who want to breastfeed? I'm so thankful for your podcast and have been binge listening while feeding and pumping on my way to work. I've had so many people tell me it's too hard and encouraged me to formula feed, even saying, I know you don't make a lot. Let the government feed your baby. First off, have you tried government cheese? I doubt the formula is much better. My biggest thing is to not let other people's comfort opinion and need for convenience, destroy what I am setting out to give my child, listening to your open canter and in your face responses has helped me find some confidence and guts to do what she needs. I was literally just at the ER with her, for medical issues and walked through the hospital, uncovered feeding my child because she was so ill and needed to eat. But we were being rushed to the x-ray room. A nurse asked me if I needed a room to wait in. I told her I didn't need a room due to her comfort level. My child was comfortable getting this done as fast as possible and eating along the way. I'm not afraid of my breasts. I'm not afraid to be a badass breastfeeder. Done with my rant. Thank you for being outspoken and having a path for us newbies. That is amazing. And I love it.

abby ([00:03:05](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=185.1)):

I love how I know it's again, a situation where you can't win. So people are like, you have small boobs. Can't breastfeed, so you don't have enough milk. Oh no. Wait, your boobs are too big to breastfeed.

dianne ([00:03:15](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=195.74)):

Yeah. Yeah. You have to have the perfect boobs. Abby, didn't you know that.

abby ([00:03:21](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=201.66)):

it's not sports illustrated.

dianne ([00:03:23](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=203.67)):

I know it's ridiculous, which is also dumb. But anyway, I know, Oh my God. I'm so glad that she is feeling the confidence because good for her. And I wish I'd read this during the episode for big boobs. I hope you listen to it. Shelby Lee was like, what a week ago?

abby ([00:03:41](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=221.881)):

Dianne meant to read it. She just forgot.

dianne ([00:03:43](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=223.741)):

I did. I need a secretary. I don't remember. I'm really bad about these things, but yes. I meant to read it for that one and I think it would have been perfect for that episode. So thank you so much for sending this in for letting us know your journey, send us your reviews, your stories, anything like that, podcast ideas. We'd love to hear. It can reach out to us at thebadassbreastfeedingpodcast@gmail.com or you can put it on iTunes and let's go with today.

abby ([00:04:18](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=258.66)):

Yes. Today we have Melissa Morns. She is here in person. You all probably remember the article that we talked about from nursing aversion at the beginning of the year, but today she's here and she's talking all about her research and, uh, let's get to it. Welcome to the badass breastfeeding podcast. Um, Melissa Morns, it is such a pleasure for you to be here. And thank you so much for taking time out of your day down under, I don't know if anybody re yes, everybody. I don't know if anybody realizes they won't realize, but you're in Australia.

Melissa ([00:04:53](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=293.49)):

Yes. Thank you for having me Brisbane, Australia.

abby ([00:05:01](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=301.02)):

That's really cool to us up here. Cause that's just seems very like exotic. Um, we, uh, are here talking about nursing aversion and we, you guys might remember that I, that we did an episode a few months ago where we talked about Melissa's research paper, that her and her colleagues published about nursing aversion. And it was, uh, the, the episode is linked uh, in the show notes of this episode. So you can head right there if you want to listen to that. It was a really fantastic paper that we talked about in detail, um, really about what nursing aversion is and what's, um, what people were reporting with their experiences. And I just remember reading it and it was just, I could just feel it in my body. I could just feel the whole paper and all the things that people were saying. It was just really very moving. So we appreciate, I appreciate your work so much. And maybe can you, do you want to start with maybe a little brief introduction about you, who you are, and then I think we're going to get into your story and how you really came to, to be really like a leading voice in the world of nursing aversion.

Melissa ([00:06:12](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=372.52)):

Yeah. So, um, right now I have a master's in public health and right now I'm doing a PhD on women or people who experienced feelings of aversion while breastfeeding, um, at the university of technology Sydney. And I have three supervisors. Um, one of my supervisors, Dr. Amy Steele has a PhD in public health. Um, another one Dr. Eric Macintyre has a PhD in psychology. And I have another supervisor from a different university, Western Sydney university, Dr. Elaine Burns, who has a PhD in midwifery. So we have that broad, um, skillset in the team.

abby ([00:06:56](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=416.23)):

That's excellent. That's very helpful in getting kind of a well-rounded, uh, perspective on this.

Melissa ([00:07:03](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=423.22)):

Yeah. Yeah. I feel really grateful. They're just the best, most awesome supervisors. So I really lucked out with those guys.

abby ([00:07:14](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=434.36)):

And, and so how did you, um, how did you get to, and so you're, uh, you're uh, uh, do, are you a doctoral candidate?

Melissa ([00:07:23](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=443.44)):

Yeah. Yeah. So I'm a doctoral candidate, um, in public health, that's my area, public health.

abby ([00:07:29](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=449.65)):

And you are focusing on, is, are you focusing on nursing aversion in your research?

Melissa ([00:07:37](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=457.27)):

Yeah, so that's actually a big question because, um, we know that there are, there is this, there are a negative experiences that some people have when they're breastfeeding. And we know about dysphoric milk, ejection reflex, and people like Kathy Kendall Tacket have done heaps of work on people with a history of assault and the effect that that can have when your breasts, you know, trying to breastfeed. Um, but then there's this other type of feelings of aversion. That's just not in the literature at all. And a lot of that is around the tandem breastfeeding and breastfeeding while you're pregnant, breastfeeding when your period returns. And, um, I, because there's really not very much out there at all. We're having to sort of cast the net. Well, we did have to cast the net pretty wide for that first paper. The one that you already did a podcast on, and we sort of grouped them all in there, but as we go forward with the research, I am planning on drilling down into those different types of aversion because they do really present differently and they, because they present differently and they coming from different causes, the way that we deal with those and the way that we give support to people who are experiencing that, it needs to be tailored for those different kinds of aversion. So that is something that we're trying to do right now. We're trying to drill down and just piece it apart. Like, what are these different types? And then what does that mean? And, um, the people that experienced that, like what are they doing to, to help and how are they getting through that? And can we recreate those things and teach other people to do those things? So, yeah, it's pretty big. It's a pretty massive, um, subject to delve into. And we are just at the beginning, we're at the beginning of it right now.

abby ([00:09:31](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=571.34)):

Yeah. It's fascinating for me to think. And I feel like I'm about to go on a tangent and maybe I shouldn't. Um, but it's fascinating for me to think about my own tandem nursing experience when I had Exley in 2014 and kind of posting about on Facebook. And that's when you got in touch with me, like through Facebook messenger and was like, Hey, I have this group. And I, you know, we were doing a lot of work on this. And so maybe we'll use this as a segue. Do how much what's your.... You have a story too, right? I mean, this is, this isn't your personal experiences has brought you here to this research. Is that right? Yeah,

Melissa ([00:10:10](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=610.17)):

Absolutely. So, um, so I actually have, I have four kids. I have a bigger kid and then three little, the three little ones. And so when I, and I have been very lucky to be able to have them all naturally and, um, am all about the co-sleeping and attachment parenting and all of that. So I was, and when I, I breastfed my first, um, my first one, who's now an adult. Um, it was really hot at first. It was really difficult. My first breastfeeding experience, I had like really bad nipple. Um, I don't know if this is too much information, but really bad nipple damage,

abby ([00:10:47](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=647.78)):

Not for this podcast, no such thing as too much information.

Melissa ([00:10:52](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=652.53)):

Oh, all right. Well, um, my partner now like thought that one of my nipples was deformed because part of, one of them came off when I was breastfeeding my first one and didn't grow back. Yeah. I know it was bad. It was like really full on. So yeah, for those of you out there who have permanent nipple damage, we see you,

abby ([00:11:14](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=674.99)):

And this was from what was the, what's the story behind that?

Melissa ([00:11:18](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=678.53)):

Just like really bad latch issues. I think maybe at the beginning, I don't know. But the home visit midwife, I had like bleeding and cracking for about six weeks, which they said was too long and they were, yeah. But, you know, I was so stubborn. I was determined, but anyway, I breastfed him till he was about 18 months old and fell pregnant again. And then the doctors told me then that I had to wean him because I was pregnant. And, um, you know, I was young and I just thought, I dunno, I guess this is what I have to do. So I weaned him, but then I, I miscarried, I lost that baby when, uh, about four months in, and by that stage, I'd already weaned my toddler at the time. So anyway, fast forward to me having, uh, the little three. And so when I had them close together and I was told when I was pregnant with the first one, my ten-year-old, um, to wean when I fell pregnant with my now eight year old, um, I was older and knew a bit better by then and was like, no, no, no, I don't have to do that. I know I don't have to wean. And so, um, I plan to tandem breastfeed. And so I breastfed all the way through my pregnancy. And, um, no one mentioned anything about aversion, no one, um, there was no, like, I didn't really see any talk of that. And then for me, the aversion kicked in after I started tandem breastfeeding and was particularly bad if I had them both on at the same time. And so, um, we also have, so we have the tandem we have the aversion support group, but we also have some tandem breastfeeding support groups. And we've got, um, regional tandem, breastfeeding support groups as well. And I went into the main tandem group and just said, is anybody else experiencing this? And, um, there were just a few, just a handful of other people who were having the same experience. And so we started the aversion group and there was like four or five of us. It was really small. And, um, and yeah, we just kind of muddled muddled our way through, but it was really difficult for me. Like I still talk about experiencing aversion is just one of the most difficult things I've ever experienced in my life. And, um, I think, you know, there's, there's feeling touched out and, you know, people talk about pain and I had that with my first one. I had a lot of breastfeeding pain with my first one and there's, there's being touched out and there's, um, you know, those other experiences, but this is not just being irritated. This is like, uh, the feeling of that, that type of vision is, well, we found from the interviews that we're doing, that women often use the word throw, let's throw the baby. Like it's a really primal, very strong, full body heebie-jeebies feeling that is, um, you know, with touched out, it's kind of your touched out and your that's kind of directed at the child, but with, uh, with this kind of tandem and pregnant aversion, it's within you, it's in your own body. And for me, that was the hardest part of it is that I felt like just not having control of the inside of my own body was the part that bothered me the most about it. Um, that loss of internal control. And yeah, we're finding that as well with the research that these, um, these stories sort of come up again and again, but, um, yeah, that group has grown a lot bigger now and we put a lot of files in the group to help people, um, sorry, what were you going to say?

abby ([00:14:52](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=892.88)):

No, that is such an interesting perspective that I haven't, I haven't exactly heard before you, I haven't heard somebody put it that way before that it's, you know, that it's in, it's like this out of control thing it's inside of you and it's working against you because you know, there's also, what's inside of you is like breast milk, you know, when your like desire to, to nurture your child. And then you have this exact opposite out of control desire in your body. And it's like these two completely conflicting things happening within you. Absolutely. And for a lot of that, it's so completely demoralizing

Melissa ([00:15:34](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=934.62)):

Yeah. And for a lot of the tandem the moms that experience aversion you know, these are people that have breastfed for a while. Like they're breastfeeding a toddler they've breastfed through all kinds of breastfeeding difficulties and overcome those difficulties. Or many of them are attachment parent parents, you know, they're sleeping with the baby tucked under their arm and have been for years. And, um, for parents with that kind of perspective to then get aversion like for me, when I experienced aversion and there was just that tiny little group, um, and the only thing that I had ever found on it or that I could find was Hillary had a little bit in her book, Hillary Flower adventures in tandem breastfeeding. She's expanded that now with their second edition, she's got some more stuff in there about aversion and, um, it's awesome. It's an awesome book. Um, but yeah, that was, that was the only thing that I had found. And that's what gave me the impetus to start that little first group was that little bit in Hilary's original, um, book. And, um, and at the time it was just chaotic for me. Like I wasn't able to continue nursing my toddler. Um, it was just like chaos. She's a really sensitive little person as well. And, you know, she would be crying and I was crying. My partner was back at work and I was home alone. And, um, it was really, really hard. It was a really difficult season and the way that we ended up, um, like going through that was, I started pumping for her and I had never pumped before I started pumping breast milk for her. So my newborn wasn't getting any pumped milk, just my toddler. And, um, we, we were giving her that night time so that her, so that her dad could sort of be with her in the evening. And, you know, we used to just read stories to her until she passed out, basically to just get through that, staying up a bit later. But we were like, Oh, well, this is what's going to have to happen for now. And during the day I would pop her and my little guy in a pram in like a double pram and cause she used to love going for walks. And so I would pop them in a pram and I'd give her these little icees.

abby ([00:17:47](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1067.141)):

that's stroller for all the Americans.

Melissa ([00:17:50](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1070.52)):

And I would give her an icee, which she loved and off we'd go. And I would just walk until she fell asleep for that day nap, the shop that had Ben and Jerry's because that was one of my coping mechanisms. I had so much Ben and Jerry's. Um, and, and yeah, that's just how we got through it, but like you'll, your stuff on boundaries Abby is so awesome. Like I shared your, um, that boundaries podcast in the aversion group last week. And I kind of wish I'd really known that then. Like, I wish I'd had that advice and I was going through it because I think me too. Yeah. That's why we do it. Hey, this is why we do this stuff so that other people can have that, that the things that we really need at the time, but also, um, like health professionals. I mean, a lot of people, there are a lot of people that, um, don't find the group or they don't, you know, they Google it, they don't really find, or they don't even Google it. They just go to their GP, they go to their GP and they say, I'm having this experience. And, um, that's really my, with the research. That's where I'm trying to hit with the research. I'm trying to get lactation consultants, midwives, GP'S, just health professionals. So that people that go that's their first port of call, um, to go and talk to their, you know, their lactation consultant or midwife, they will have heard of it because like, I work with a lot of midwives now and still now it's amazing how few people have heard of this. And whenever I speak about this to a group of lactation consultants and midwives, they're fascinated. Like they want to know they want to help. Um, but it's just until it's in the literature. And I mean, I'll, you know, I'll continue to try to talk at like, you know, health, professional seminars and stuff, and try to keep getting the word out. And there is actually another researcher I don't, you might not have heard of her yet. Abby, her name's Charlie Middleton and she's in Scotland and she's just starting up doing research a PhD on this as well. So thank goodness. There are more people getting on board and yeah. Um, I think her focus is a little bit more on DMER. I think that's where she sort of came to it. Um, but that's awesome. It's so great that, yeah, that it's,

abby ([00:20:11](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1211.27)):

I know we need so many people on this and I think here in the United States, we have, we have, you know, the, the practitioners here, you know, they don't hear about it and they're just like, well just wean, you know, if it's that bad and you're not enjoying it, then just wean. That's always, the answer is just, we'd just use formula. It's no big deal. And it's, and it's, it's not a big deal in that. If that's what you need to do and that's what you want to do, then definitely do that. But it is a big deal in this, in the sense that that's not what people want. That's not what I want. I don't, that's not what you wanted. You know, people want, that's the problem there in lies, the problem, right? Is that you want to continue nursing. You want to continue with this relationship. And, and it's like, there's this invisible force working against you that you don't know its name. You don't know what it wants. You know, you don't know, you don't know what's happening, but then people just in the, and you're like, I need help with this. I need help. And people are like, well, just wean. I don't know. That's not a thing. It's not a thing. It's just, it's just because it's a toddler and your toddler is supposed to just not be nursing anymore. That's just a sign. It's a sign. This is what, this is what they say. It's a sign that it's time for you to stop nursing. Yeah.

Melissa ([00:21:29](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1289.64)):

Yeah. And people hear it from our partners and they hear it from their family and friends. It's not just doctors. Like people hear that it's ubiquitous. They go into breastfeeding support groups and hear that. And you know, you can't just say that to a mom who sleeps with her baby tucked in her armpit and you can do those little eyes want to breastfeed. Like you can't just say, just stop. It just doesn't. It just shows a lack of understanding of what's actually going on there.

abby ([00:21:57](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1317.84)):

Well, it does. And it's yeah. And it's this idea that breastfeeding's disposable. Right. Because we wouldn't say that about anything else, anything else that is problematic in that, that we're struggling with. It's like, okay, you know, here's what we're going to do. Here's our intervention, you know, we're like, we'd love in her. It's been Americas. We love interventions. Like, let's get all the interventions going here, but with breastfeeding and you know, this kind of thing, it's just like, it's disposable, whatever, you know, just, just wean. It's no big deal. And it's just, it's so frustrating because you know, there, there is no, and there's, and there's no motivation, you know, to, to learn about it. And it's just like, well, it's just all these women who are complaining about how hard it is. And so if it's so hard, then why don't they just stop?

Melissa ([00:22:44](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1364.76)):

And, you know, something that's come through in the interviews is that the people that were able to continue, or at least in their breastfeeding journey, in a way that they felt okay with, um, for themselves and, and really importantly for their, their little one, like if they feel okay with how it ended or they were able to continue and, and, and have it end when they felt like they were ready all day, little one was ready. Um, it's psychologically so much better for the, for the mother, for the parent. If they're able to just find an ending to that in a way that they felt like they were in some way in control of, um, even if they still look back on aversion and say, it's one of the worst things that they've ever experienced, even if they say that, just if they can come away with a narrative with a story about how it ended, how the weaning happened, or how it ended, it just has this impact. And it's not just something I'm writing into an article right now that I'm about to publish. But, um, there is so much focus on with breastfeeding, from the health community about getting breastfeeding right. It's about latch. It's about supply. It's about all of these things. And there isn't a lot of focus on breastfeeding, actually being a relationship. It's a relationship. It's a relationship between, um, the mother and the infant or the, the parent and the infant. And, um, and that's a complex thing it's complicated. And it's a two way thing as well. The parent gets a lot from breastfeeding as well. And we don't talk about that. Like we don't, it's not something that we that's just commonly in the narrative about breastfeeding. It's all about what's the baby getting from it. And I actually said a curiosity. I went into one of the groups the other day and I said, I'm not one of our groups just to a different group. And just said, Hey, what do you think the parent gets out of breastfeeding when they breastfeed? And a lot of people were like all lower cancer rates and, um, a lot of those physical things. And I was like, what about the emotional part? Like, and some, and then some started saying nurturing and love. And it's just, it's, it's really intriguing to me philosophically that we haven't really looked into this properly. That it's, uh, it's so complex breastfeeding. It's not just about supply and latch. It's not just about nutrients for the baby. There's so much more going on there. And it's a relationship that, yeah.

abby ([00:25:18](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1518.55)):

Yeah. And that's what we always say. It's so much more than food, right? Breast milk breastfeeding is so much more than food because it's not just you're right. It's so we focus on, well, if you know, if it doesn't work out, it's no big deal. You just switched the breast milk for formula. Okay. But that's not what it's really, that's not everything it's about, you know, there is, anyway, everything you were just saying, there's so much more going on and they have actually, we don't take into consideration. Yeah.

Melissa ([00:25:45](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1545.43)):

Sorry. And they have actually done research around when people who want to breastfeed have to stop before they're ready. It called that causes, um, high levels of anxiety and depression and, you know, poor mental health outcomes. So we know that for those that want to breastfeed and can't this, it's not, yeah. We know that. And we also know that those that are trying to breastfeed and having problems, not just aversion, but problems in general, don't feel like they're getting enough support. Right.

abby ([00:26:15](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1575.16)):

Right. Yeah. And we'll be right back with Melissa Morns and talking about nursing aversion. After a word from our sponsors. Today's episode is sponsored by Sheila Darling coaching. The transition to Parenthood can be intense. Feelings of anxiety. Depression are actually quite common. Your feelings should not be ignored. You deserve space where you can process this transition and all of the emotional and psychological changes that come with it. You may hear people telling you to just enjoy it, or it all goes by so fast. These statements are dismissive of the changes we go through. When we have a new baby transitioning to a new family member, isn't always the peaceful journey we see on TV. Sheila Darling coaching can be that professional support person that Dianne and I are always saying, there is no shame in getting. Sheila Darling is a social worker, certified hypnotherapist and mindfulness meditation teacher. And could be your start to a more peaceful life head to Sheiladarling.com to schedule your consultation today and mentioned the badass breastfeeding podcast. When you're scheduling that consultation and receive 10% off a coaching package Today's Episode is also brought to you by Original Sprout. Original sprout carries safe, effective, and pediatrician tested shampoos, conditioners, styling, body care products produced in packaged in California, USA, their hair and body, their hair and body baby wash is made with gentle moisturizing ingredients, such as organic calendula and refreshing Rosemary extract. Rosemary helps stimulate scalp circulation and calm cradle cap and eczema. The hair and body baby wash is ideal for babies, children, and adults alike. All of original sprouts products are Parabon and phalate free vegan, and cruelty-free they're Proprietary formulas contain nourishing extracts from fruits, vegetables, and flowers that the whole family can enjoy. They are not just for babies anymore. Check out the entire line at originalsprout.com and use code badass for 25% off of your order. All these sponsors and their codes can be found in our show notes. Under this episode on badassbreastfeedingpodcast.com. Our show notes also include further information about things we talk about in this episode and at badassbreastfeedingpodcast.com. You'll also find our breastfeeding resources, all of our other episodes and information about scheduling your very own one-on-one online lactation consultation with Dianne. And this week, shout out, goes to voices 4 birth justice. We are moms and advocates United for birth justice in the black and Brown communities. Um, you can find them on Instagram at voices 4 birth justice, and you can find them also at their website voices4birthjustice.org, where you can find all kinds of information about, um, you know, babies in the black and Brown communities that are being born too small and too soon. Um, and I hope we all know now that this is linked to the racist systems in this country, and these are advocates, um, to fight for equality in birth justice. And you can find on their website, amazing stories, birth stories, um, and a, um, A gallery of their storytellers and check them out voices 4 birth justice. So it's voices, and then the number four birth justice on Instagram. And now we will head back to our conversation with Melissa Morns. So you were talking about, you're talking about the different types like kind of getting down the different types of aversion. And so the different types, like when you say different types, do you, are you, do you, do you mean like the, the DMER the dysphoric milk ejection reflex, the, um, people who have suffered like sexual trauma kind of having that as its own group, because they share those, that experience, which is their negative experiences, breastfeeding are directly related to that. Yeah.

Melissa ([00:30:32](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1832.67)):

And then, and then, yeah, and then, so there's also, um, uh, people in the non binary and trans community also experience, um, chest feeding aversion, which we haven't looked at yet, but my, you know, there could be things there to do with body dysphoria or like the, you know, that could be another whole other, um, area to be researched. Um, we're also, we haven't looked at all our people with sensory issues. Um, that's another thing that could be considered. Um, we are taking a look now at tandem breastfeeding, breastfeeding while pregnant and breastfeeding, or when, uh, your period returns so that the hormone, um, type of aversion and also that tandem and pregnant, um, aversion. And the thing that we're finding is that, and I'm sure there's probably more types out there that we haven't thought of or will uncovered yet. Um, but we are finding that they present differently. So the way that, um, the person experiences these things is different. So like with women, with a history or people with a history of assault, um, and those that experienced dysphoric milk ejection reflex that will have that experience straightaway from the first time they breastfeed with every child.

abby ([00:32:03](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1923.18)):

Oh, that makes sense. Oh yeah. Yeah.

abby ([00:32:05](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1925.43)):

Whereas tandem breastfeeding aversion comes on often after the people that experienced that experienced that often after they've had a previously really good breastfeeding experience. Yeah. Just out of nowhere. So, um, and there are other differences, there are the differences between the different types of aversion. And so, um, yeah, it's like to, to just piece out what's actually going on on there and uncover the underlying causes will help us to be more specific about recommendations and support and what we tell health professionals. Um, yeah, the, the recommendations will be different depending on the type of aversion. So, um, I really think your boundaries, your stuff on boundaries, I think is important for anyone that breastfeeds, not just people that have that's it's, that's just so key.

abby ([00:33:06](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=1986.85)):

I think that's true. I mean, that's, that's the biggest, that was the biggest thing for me to be able to make it through was, you know, to see, and even if you're not experiencing, that's what you said, even if you're not experiencing this, you know, just being able to have some control over it really just gives you control, you know? Cause everything feels so out of control, especially when you start feeling, you know, aversions or whatever, when you're breastfeeding and then toddler toddlers are just like, they don't care. They have no boundaries. Yeah. And so that's what, and I also think it's so great that like, that's another way of teaching them boundaries. It's like, you're getting boundaries out of it, but you're also teaching them, you know, how to respect people's boundaries, which they, you know, they don't get right away, but it's a foundation. Yeah.

Melissa ([00:33:57](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2037.64)):

Yeah. And that tandem breastfeeding thing after they've had to deal with the milk supply going down through pregnancy and when they get all that milk, it's like Christmas for them. It's like breastmilk christmas.

abby ([00:34:08](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2048.86)):

Yeah. They're like, what do you mean? This is like, it's finally here. Of course I can have free and open access to it. Yeah. Um, but I would like to know. So you're talking about how, how, you know, being able to, to isolate these types of aversion will help kind of figure out what's going on there and make recommendations. But, so, okay. So I know it's early, but do you have any leads? Like, is there any idea right now, what is happening? How is it happening? What is happening? What was happening to me? What was happening inside my body that like was, so how does that happen? That's such an extreme reaction and feeling to something. Do we have any idea of like, what is going on? I mean, I know I have, you know, I hear about hormones, you know, which is, makes sense. Yeah.

Melissa ([00:35:04](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2104.15)):

Yeah. So, um, okay. So with DMER, they think that that is something to do with dopamine, although that needs more research, um, with people that have a history of abuse and obviously it's the history of abuse that's triggering those association and those feelings, um, with tandem and pregnant aversion, we're not sure, but there is a theory out there that it could possibly be. There could be an instinct kicking in there somewhere. And when you speak to people that have experienced that type of aversion, they describe it in that way, the people that I've interviewed, um, I've done in-depth interviews with a bunch of tandem, um, people who experienced that kind of a version and they, they talk about it as in this way. That sounds primal. So we also need to investigate that further. So, um, yeah, I'm, I am looking into that a bit more, the evolutionary psychology behind that evolutionary biology, um, aspects of that type of aversion, but we're still, yeah. Like you, like you just mentioned, we're still sort of at the beginning of that journey and which other types of I left out.

abby ([00:36:21](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2181.83)):

Um, Oh, well I think you covered it. I mean, you've covered all the ones that we talked about today. Um, and that's so interesting to me that these, that these types have such different origins or causes. Um, and yet the feeling is so similar, you know, I know with DMER, it's like, it's, that's different. It's from, you know, in, you were saying with the history of sexual assault, it's from, you know, from the get-go. And so the onset is maybe different, but when we're explaining, you know, this extreme feeling, it's very similar, is it not?

Melissa ([00:36:58](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2218.39)):

And that it's a negative feeling and sensation while you're breastfeeding. Um, I, I just remembered the other type that I left out there, we kind of know about it and that's when people get it around the time of ovulation and menstruation. And we think that that has something to do with your Prolactin is a hormone that just has an effect on your entire body, but it has an effect through the hypothalamus hypothalamus, pituitary prolactin axis. So that's another thing that we also need to investigate. Um, sorry, what, what was the last thing that you said? And I was going to answer that as well,

abby ([00:37:38](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2258.45)):

The causes the causes, and if it

Melissa ([00:37:42](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2262.8)):

Feels similar, if the different types

abby ([00:37:44](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2264.81)):

Oh yeah, right, right. The feelings of similar.

Melissa ([00:37:47](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2267.21)):

Yeah. Um, so from what we can, um, see from the way that people talk about it in the research that we're doing, is it, it feels kind of different. So depending on the type that you're getting, so people that experienced DMER, they talk about it in this very black cloud comes over your head and they feel depressed. They use the word homesick in, uh, in the pit of your stomach and then it passes, it lifts after the letdown reflex. Um, those who have a history of childhood sexual assault talk about triggered trauma memories. So they started having flashbacks, they have dissociation. Um, and so yeah, they, they have that experience, um, people with tandem to use the word throw a lot that would throw comes up over and over again.

abby ([00:38:42](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2322.87)):

No, I don't mean to laugh. It's not funny, but I know what it feels like, that particular thing I know exactly how that feels yeah.

Melissa ([00:38:48](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2328.36)):

So, um, yeah, so I mean, it's, they're, they're similar in that it's an, you know, it's a negative experience that you're having while you're attempting to breastfeed, but when you start to sort of piece it out, they feel different. The, the way that they present is different, the underlying cause is different. And so we probably need a nuanced approach to the way that we, um, support these populations from a healthcare perspective, you know?

abby ([00:39:21](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2361.93)):

Right, right. And I know specifically for this episode or for, you know, what I talk about cause we do have, you know, we talk about, um, the dysphoric milk ejection reflex. We talk about that kind of separately as its own, you know, kind of as, as its own thing, I've actually never really put that under the umbrella of nursing aversion. Um, just I think maybe because there's more written about it, it kind of has its own title.

Melissa ([00:39:51](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2391.07)):

They've got their own Wikipedia page like

abby ([00:39:55](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2395.56)):

That, man. That's when, you know, you made it, uh, yeah. They, so, yeah. So I kind of take them out of that now. I mean, my heart goes out to everyone experiencing that, but I mean, for this particular conversation, um, for me, my understanding of what most people associate when they're talking about nursing aversion is when it sets in on, on, um, pregnancy and through the tandem nursing and, um, maybe like around ovulation and things like that. Yeah,

Melissa ([00:40:27](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2427.24)):

Absolutely. And that's how I came to the research and what my, my research proposal was just that. Um, but then when we went and had a look at me publishing that first, um, meta ethnography about what's out there right now, there was so little out there that, um, my supervisors just said, look, we've got to kind of start at the beginning here. We need to just say that, you know, people that are breastfeeding, uh, having these, uh, having negative sensations when they're they're breastfeeding and they want to breastfeed, they're able to breastfeed. So you know, the latch and despite all that stuff's working, but they're having these negative sensations and feelings that are coming up. And yeah. And so, yeah, my heart is really in researching, going down that, um, that tandem and pregnant, um, and hormone going down that pathway of that aversion that I experienced personally and that, you know, that's what brought me to it. But, um, just for the point of getting the word out there in the literature, we're having to kind of cast it a bit wide. So, um, so we've published the Meta ethnography, I've done interviews, I've done a bunch of in-depth interviews and I'm writing up articles right now from those that just talk about the experience and how it feels and the effects that it, that this experience has on, um, the relationship between the parent and the infant and the relationship between the person experiencing aversion and family members and just themselves, their relationship with themselves. Um, their idea of like parenting and breastfeeding and yeah, it's, it's kind of, it's it's complex. Um, and it has, it does have a big effect. It's not just about that relationship with the breastfeeding, um, child. It also, this also impacts on relationships with partners and, um, yeah. And then, so we also have a survey that's live at the moment and that survey information combined with the interviews will give us a mixed methods, um, and analysis that that will help us to piece out those different types and write specifically to those different types of negative experiences that people have when they're breastfeeding and, um, you know, going forward, I'm hoping to run a trial. Um, we found that from the main, um, nursing aversion group that I wrote a little, because my undergrad degree is naturopathic. I'm a naturopath with a master's in public health nutrition. So years ago I wrote, um, a file in one of the groups just saying, these are different things that you can take for nutrition that help people for their mental health and just general wellbeing, but specifically for mental health. And I thought, you know, that can't hurt. That's only gonna help. So, um, I just put a couple of recommendations in that file that I knew were safe for people that were pregnant or breastfeeding. And we just found from the group anecdotally that a lot of people felt like magnesium seemed to really help them. It was just one of the things on the list of like five things. I still actually think people should try to take all of those things. But, um, from the group, yeah, from the group, people really started saying that they noticed if they stopped taking the magnesium, they would, that's the one that they could feel. And it's just kind of growing, uh, like, like a life of its own, the magnesium thing. Now I see it all over the place. People saying, if you're having, um, breastfeeding negative breastfeeding issues, try taking magnesium. So I really like to run a trial on that after I finished this, um, hopefully I'll have this wrapped up by the end of this year and then maybe run a trial on magnesium and like, let's find out, you know, what type of magnesium and what's the dose and who's it helping. Um, and see if we can move forward with that. I'd also like to further investigate that evolutionary psychology stuff, evolutionary biology stuff, and look into that whole instinct thing, because it is, um, there, of course there are hormones and you are neuro-endocrine chemicals that happen underneath these experiences. And so these are things that we can measure. We can test those things. So, um, yeah. Did I, I did. I got really nerdy then. Didn't I did I try?

abby ([00:45:08](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2708.24)):

No, I'm eating it up. I love it. This is great. No, I want to hear more. I mean, so I'm thinking like the, so you mentioned the survey can people can we'll, we'll put the link to that and if you're experiencing nursing aversion Oh yeah, yeah. Join the, join the study to get, cause that will help

Melissa ([00:45:25](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2725.4)):

To get ethics approval. Um, it's a bit tricky to run a survey. It was considered, um, like a higher risk ethically, a higher risk survey because people are talking about stuff that's quiet, you know, that can be a bit emotional. And so on every page of the survey at the bottom, we have numbers that people can contact if they feel like it stirs stuff up for them in Australia, we have the Australian breastfeeding association who have a 24 seven hotline that you can call that is manned by, um, mums or parents, breastfeeding parents and volunteers. And it's an amazing service. And that is so awesome. It's so awesome. They get government funding as they should.

abby ([00:46:09](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2769.89)):

Can we get the international number for that? So they're amazing. We might need to be calling another country.

Melissa ([00:46:16](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2776.13)):

Yeah. They're so amazing. They supporting the research actually they've shared it in Australia. They've shared the survey about which I felt honored that they were getting behind this research. That's awesome as well. Um, so yeah, it's just for Aussies right now, but we are going, Oh, it is. Yeah. Yeah. And people who are currently experiencing aversion because we have validated instruments in that survey that only work. If it's for an experience you're having right now, they don't the tools in the survey don't work if you're thinking about it retrospectively. But, um, once we get this, this is sort of preliminary stuff. Once we get this one out the way it lays the groundwork, then for us to do bigger international studies and include, right. Um, yeah. Just include more people. So

abby ([00:47:06](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2826.65)):

Well in the international community will certainly benefit from the research itself, you know, the findings and whatever you write up.

Melissa ([00:47:14](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2834.66)):

Yeah. I tried really hard to do the international study actually. And my supervisors were like, no,

abby ([00:47:22](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2842.82)):

Yeah. One step at a time. Yeah. What, um, but the Facebook group is for everyone. Absolutely. And we've got some great, fantastic group. Yes. And so, yeah, we'll put the link. The link is in the show notes for that too, if you want to join that group and the, yeah. So tell us about the files in there that people can access.

Melissa ([00:47:43](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2863.38)):

Yeah. So, um, you you've been linking to that group for a while. Abby, you did a couple of blog posts in like 2014 and linked to the group. And I think back then, I think w you know, we didn't have a huge amount of people in the group, and I think a lot of people found us through your blogs. So, yeah. That's awesome. Um, and I mean, there is a lot more information, just general information out there now, um, for people like your blog posts, I think was really good. Like even back then, like you were saying, um, stay hydrated and look after it's just those self-care tips I think are really important as well. Um, your stuff on boundaries is really important. Um, but yeah, the files in the group adjust like that old nutrition file, um, and then there's tips for, and in the tandem breastfeeding group as well. We've got I've I wrote one that is just called what I wish I knew when I started tandem breastfeeding. And it just talks about like the total of breastfeeding, more than the newborn and setting boundaries. And, um, there are some personal stories in aversion group, which I think can be really helpful because a lot of people, when they first joined the group, just feel so much guilt and shame and so alone. And then just to go and read some other people, some stories about how they navigated their way through it. And, um, a lot of people end up having a happy ending. I think that's something that I really like to try to say to people is that if you can find a way to just find an end to that relate to that breastfeeding relationship that you can live with, that isn't going to cause you too much guilt and shame going forward. That's so important. It's so important putting energy into that, just trying to find an end to it that yeah, that's okay for you. And that you think is okay for your little one. Like that. It's just so important.

abby ([00:49:42](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=2982.17)):

I think that's true. And I, and I, that was one of the things that stood out, you know, from that paper that we talked about, you know, a few months ago was that, yeah, that was the, that was that people didn't regret it. You know, people didn't regret it. They were happy that they made it that far and that they were able to find these ways to, you know, to have that happy ending. And I know that's how it was for me too. I mean, I don't, I look back at that time is so difficult, but, you know, I pushed through until I felt like, okay, well actually I'm pushed through until they just decided to stop. Um, and so, you know, but with, you know, a lot of work around, you know, especially the boundaries, which allowed me to get that far and allowed me to, to, to let them self wean, which is what I wanted. And so the, so a lot of work went into it in order to reach that goal. But then that was the thing that I, you know, that I could live with. I want it, you know, you go, when you think, well, I'm just going to, you know, they're just gonna nurse all the time. I'm just gonna, you know, it's fine. We'll just nurse all the time. And then you get to the, when you're experiencing nursing aversion, that's just not possible. You can't, you know, it's just this, your body's just telling, you no, and so trying to, trying to, it's like trying to negotiate with your body, like, okay, can you handle, you know, twice a day and at bedtime, you know, you're sure you're going through this whole negotiation process of like, what can, what can we handle, um, in order to get to that place that everyone can live with.

Melissa ([00:51:18](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3078.91)):

Yeah. And then, yeah, that internal conflict is brutal. Yeah. My last one, my youngest, I breastfed him till he was done on his own. He was four and a half. And, um, co-slept with him and just had this really like no drama, breastfeeding relationship to just finish it off on. And, um, it was so nice. It was so just joyous to have that as the last, just for me as my last experience, just to have that and have him wean when he was ready and, um, yeah, that was really healing for me to have that at the end. And I think that's another, um, yeah, a key difference between some of the different types of aversion is that like, I didn't experience any at all with that, that last one. So, and a lot of tandem, that's really interesting. A lot of tandem, um, parents say that, yeah.

abby ([00:52:23](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3143.47)):

They say that they then they'll have other, they'll have another one in the experience. No aversion.

Melissa ([00:52:28](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3148.92)):

Some people get it around their period, but I was really lucky. I didn't personally, I didn't have that. So yeah. I just really lucked out with that last one and was able to just have that really healing experience. That's something else that, um, people with a history of childhood sexual assault say they are able to continue that just to see their body in that really positive way and that their body was used in this amazing way to nurture their baby. And it's fair. It can be very healing.

abby ([00:53:06](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3186.4)):

Absolutely. I actually have an admin at the badass breastfeeder who has a history of sexual assault and she's written a lot of guest blog posts about that. And she does write about that. She writes about how, you know, it was kind of just coming to terms with her body and how, you know, through this relationship with her children, how she was able to kind of take ownership of her body again and feel empowered in that way. And it's, I mean, what an incredible thing to go through, you know?

Melissa ([00:53:36](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3216.68)):

Yeah, absolutely

abby ([00:53:38](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3218.66)):

Fascinating. Um, and I can see, you know, I can see how that would, how that would work that way. I don't have any experience with that, but she does share that and we can send some mentioning it with that in the show notes too. I think that's helpful for everyone to check out on. Yeah.

Melissa ([00:53:55](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3235.58)):

Yeah. I think that's helpful. I think this is all I want to put all of this in the aversion group. I think it's okay.

abby ([00:54:02](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3242.39)):

Yeah, totally. What do, what else, what have you heard else that people, cause you're saying these, you know, people talk a lot about magnesium. Is there anything else that people really say like, this is really key now because for me it was like the more tired I was the worse it was, but like, you know, it's kind of like, you know, when somebody tells you, well, make sure you're getting enough sleep. It's just like, I just feel like punching those people. I'm like, yeah. Like, like I, like I'm choosing to not get enough sleep with my new baby.

Melissa ([00:54:33](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3273.23)):

And a lot of people kind of like, you

abby ([00:54:34](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3274.88)):

Don't have control. Yeah. Like I don't, you know, people have very little control over that, especially, you know, with kids. So what else do people say, have people said anything else like that, have you heard from talking to so many people, things that work for them?

Melissa ([00:54:51](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3291.35)):

Um, Oh yeah. A lot of people in the moment, like just to get through the actual sensation, talk about distracting themselves with whatever they can use. So, um, looking at their phone, watching the TV, talking to somebody, one of the participants that I interviewed actually said, it really helped just having someone else in the room, just having a conversation with someone, it was distracting enough. Um, so yeah, the distraction thing is pretty big distraction boundaries looking after yourself, um, support is really key. And however you find that it's so fundamentally important. Um, so some people are lucky enough to have a partner that's really helpful, but that's not always the case. And quite a few of my, um, the people that I interviewed said that their partner didn't understand and, you know, in a sense was sort of compounding the

abby ([00:55:51](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3351.5)):

Exactly. They can totally make it worse

Melissa ([00:55:52](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3352.94)):

Yeah. So, um, but finding that support in any way that you can, even that peer to peer online support, just knowing that there's somebody else out there that's having a similar experience because a lot of people, there is a lot of self-blame we've I've had people come talk about in the interviews, talk about how they were angry. They would, they would be in the moment angry at themselves for having that experience. And um, like I just want to say to everybody that's experienced this, that it's not your fault. It's not your fault, you know, it's, we don't know exactly what causes it yet, but it's not your fault. And, um, it's not just in your head. Yes. It's not in your head.

abby ([00:56:37](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3397.83)):

It's just not something that you're making up. But yeah, this is a real thing.

Melissa ([00:56:43](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3403.11)):

Yeah. A hundred percent

abby ([00:56:44](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3404.34)):

Just because we don't know about it yet. And we don't have all the language and the research around it yet doesn't mean that it's not real, you know, it's just that energy and resources haven't been put into it. And so we need to put it in there to give a name to it and all of that, but it's not in your head. One of the, and so much of this as toll, you know, we're, we're always told that things are in our head or we're making it up and that kind of stuff always pisses me off.

Melissa ([00:57:08](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3428.34)):

Yeah, yeah. Yeah. Because it's not, it's not right. Like one of the participants told me, she was telling me all about how she was going through postnatal depression at the time and getting counseling when she got her aversion and the person that was counseling her said to her, how do you know that this isn't just postnatal depression? And she said, because it's only when I'm breastfeeding my toddler. And then it stops. I don't feel that all the time it's specifically when I'm breastfeeding my toddler and then it stops. Whereas the depression was all day every day. So yeah.

abby ([00:57:45](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3465.15)):

Yeah. We know, we know the difference. We know what's going on with ourselves and you know, to what's going on with you and, you know, don't let people tell you that it's, that it's not, not real. Yeah. So This has been such a good conversation. Thank you so much. When, what, uh, so I've asked you questions and we've kind of, you know, I've asked you as many questions is, is as you know, my personal experience or whatever can go, but is there anything that I missed? Like, is there anything, you know, from doing the research and from, you know, talking to so many people, are you starting to hear things? Are you starting to learn things that maybe, you know, are kind of new to the conversation or Does that make sense? Totally. Does that question make any sense at all?

Melissa ([00:58:35](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3515.01)):

Totally. It totally makes sense. I'm just trying to think. I knew you were going to ask me that actually, because I have listened to your podcast and you do that. You do at the end, you have saying to people, what would you just say if yeah. Um, um, I think,

abby ([00:58:53](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3533.91)):

Well then it always makes me feel good when they stumble a little, because I'm like, Oh,

Melissa ([00:59:05](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3545.01)):

Um, yeah, yeah, no, really. Um, just what I was saying before, just that, um, just that, you know, if I could like, just speak directly to people that are experiencing aversion right now, just to know that it's just not your fault and you can find a way out of it. That is going to be okay. You can find a way out, that'll be okay for you. It'll be okay for your little one. Um, there are ways of navigating your way through it and you feel like you're in this tunnel with no end, but there is light at the end of the tunnel. You just might not be able to see it right now, but just hang in there, hang in there because like all really difficult things this too shall pass and you will get out the other side of it. And, um, yeah, that's, that's pretty much all I would say

abby ([00:59:59](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3599.05)):

That's fantastic. And everything that we talked about and referenced in this episode, you can find in the show notes at badassbreastfeedingpodcast.com. So I know we talked a lot about a lot about a lot of things and it's like, well, what about the group? And what about the survey? I'm an Australian, you know, just go to the show notes and you can find all of that. Right. They're linked right there. You can, and you can, um, you know, you can find it all. We won't leave you hanging well, Melissa, I can't thank you enough for taking time out of your day. Um,

Melissa ([01:00:32](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3632.47)):

It was so cool to chat with you Abby I've been a fan forever, so

abby ([01:00:37](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3637.3)):

Yeah. Well, and please come back and let us know, you know, as you're unfolding all this research and all the things that you find we would love to be, you know, on the cutting edge of that. We'd love to be the first ones to know breaking news.

abby ([01:00:57](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3657.4)):

Thank you so much. Thanks

Melissa ([01:00:58](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3658.87)):

So much. Thank you, Abby.

Speaker 1 ([01:01:13](https://www.temi.com/editor/t/d3Lgs3kJg3t12twakZmGU4xRPhObSwAwdyoO7mCuGGPE51SWUhAXaMu-zrbJUZOite8a5zwYTJ7ckM9cWEe-oBa59Z4?loadFrom=DocumentDeeplink&ts=3673.72)):

[inaudible].