

Motherhood and Social Media – What are the Benefits and Challenges?

Introduction

In an ever connected, and increasingly technology reliant world, the complex role of motherhood has been influenced, altered and challenged. Perceptions of maternal identity formation, relationships and both mental and physical well-being of mothers has been seen to influence mothers (1). Such influences have bigger, more disproportionate effects on at-risk groups such as- young, low income and minority ethnic mothers (1). This essay will unpack the changing notions of motherhood, how such portrayals of carefully curated social media posts can influence mothers and how such online spaces have sometimes carved a safe place for new mothers or sometimes become harmful and unsafe, and finally how health professionals can try and support their patients to access social media content that will be helpful to them.

Social media serving as a comparison tool

For mothers, parenting can be an exceptionally challenging time. Often, with motherhood comes the almost immediate abandonment of one's own priorities and life. Even within the current social context, particularly in western countries, where some women have more freedom to actively choose to have children, much of the social burden is felt by mothers. With the rise in social media platforms promoting certain depictions of motherhood and pushing forward the mother figure who is able to "have it all", mothers may feel more pressure than ever. Content curation is a core aspect of how 'mumfluencers' present themselves on social media. Generally, posts will depict a perfectly colour coordinated space, children in the latest trending outfits, brand new toys and promote a slow lifestyle. Not only does this fuel unrealistic expectations for mothers who are grappling with new born babies, it also boosts toxic comparison and endangers self esteem (1). This polished lifestyle is often a fantasy constructed by mothers who are also struggling, in the name of transparency for their followers these same mothers who promote such standards and lifestyles have often times let us see glimpses into their 'real' lives and told their following that they don't always live such a picture-perfect life. Whilst for some women, even though motherhood can be a choice, the pressure to conform to patriarchal ideals about typical motherhood behaviour still persists. Despite motherhood being viewed as a choice, the frame and foundations of the 'perfect' mother image is still deep rooted in patriarchy. The 'modern' mother who does it all: works a 9-5, puts her children to bed, cooks their dinner and wakes up early to prepare their lunches is a curated social media fantasy. There is also a clear class and race element to these picturesque portraits of home life. Mothers who work long hours, who are systematically underpaid, who don't have partners who share the house work cannot afford the quiet luxury of pastel nursery walls, wooden toys and organic fruits.

The effects of constantly being bombarded with idealised Instagram stories or carefully crafted tweet threads renders these women – who are the majority of women – inadequate. Social media is a fast-paced space which leaves no time for critical thought processing especially when as a new mother you are susceptible to comparing yourself and doubting your parenting approach. The relative anonymity of the comments section can serve as both a negative and positive aspect. One hand, the anonymity can enable "mommy shaming", especially on topics such as breastfeeding vs bottle feeding, co-sleeping and how mothers choose to navigate defining gender expression for their children (1). When people are permitted anonymity, the transmission of misinformation is also something to be wary of, with an ever-increasing concern for safety and privacy the relative anonymity can also become something dangerous (1). However, a key finding observed that anonymously 'lurking' (2) – the act of reading posts

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without interacting, grants mothers the opportunity to observe and learn at a degree of anonymity which caters to their needs and circumstances.

Seeking a community

(3) In 2019, an integrative study conducted by Gleeson et al. interrogated women's use of social media and looked into mothers' groups with relation to pregnancy, birth and parenting. They found that the main reason women engaged in these groups was to seek information. The sharing of the latest tips and advice was found to be an integral part in collating emotional support and gathering a community together. In the exploratory survey (2018), conducted by Baker and Yang, as part of the 2019 integrative study, 89% of participants indicated that their main purpose in accessing social media was to source advice about pregnancy and parenting. 83.9% of those surveyed named their "social media friends" to be a source of social support during motherhood (3). In a technologically connected world, we are becoming paradoxically even more disconnected from both one another's lives and the realities of our world. However, online communities can help tackle the isolating nature of parenting. Especially for physically isolated mothers, a strong sense of camaraderie can be evoked. Parents empathise with each other's needs and have been observed to collaborate around topics such as teething, toilet training and sleep issues (1). The endless flow of information can support new mothers who are in a constant deficit of experiences and being part of a community, which is accepting and non-judgemental can be pivotal.

Role of influencers

A major drawback of how social media affects mothers, is the uniquely privileged position that influencer figures occupy. If they have grown an eager and loyal following, it becomes easy to subconsciously affect the emotions, thoughts and behaviours of their followers. What makes mothers particularly vulnerable to falling into such behaviour patterns is the isolation that motherhood brings (3). When an influencer following reaches certain numbers, they begin advertising products and receiving sponsorship deals, allowing them to situate themselves onto a pedestal and make use of the authority and loyalty their following grants them. In this way, they can take on the expert or mentor role to other women. Consequently, this behaviour can have potentially significant implications for their audiences physical and psychological wellbeing (3). In a systematic review which sought to uncover the impact of social media influencers on pregnancy, birth and early parenting experiences, it was found that most of the 'support' which arose did so with regards to commenters providing supportive comments to those who expressed the same views (4). Although it was to varying degrees of significance, the separate studies also identified that when the commenter expressed a viewpoint that opposed the one of the influencer or disagreed with another commenter, responses towards that person were less likely to be supportive, far more polarised and combative discourse was observed (5). The Whitehead study (2015) focused on infant loss, the sharing of such a traumatic experience in the context of pregnancy and motherhood was identified as being immensely therapeutic for both influencers and followers, hostile interactions were not noted (6). However, the posts and blogs examined in this study were those from US evangelical Christian communities, therefore consistent results cannot be assumed from other religious communities or secular populations. This is just one example which is very telling on the fact that this topic around motherhood, technology and social media is one which requires more research in order to reach valid conclusions.

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Polarising views on breastfeeding

Breastfeeding is becoming an ever-polarising topic, with both professionals and mothers alike discussing the benefits and challenges of bottle feeding vs breastfeeding. Breastfeeding rates have considerably decreased, especially in countries with high and increasing wealth (7). After such rates, interventions such as the WHO international Code of Marketing of Breastmilk Substitutes (1981) and the Innocenti Declaration on Breastfeeding (1990) helped turn the tide. A key takeaway from the study conducted (7) was that efforts to remove existing barriers to breastfeeding with the utilisation of proven community-based and family interventions has a significant impact on lowering deaths amongst children and mothers. Benefits in low-income settings include reductions in diarrhoea, respiratory infections and mortality. In high-income settings, breastfeeding protects against otitis media, type 1 diabetes and it is likely to improve IQ by 2-3 percentage points (7). The overwhelmingly positive evidence, which is supported by evidence suggests that breastfeeding benefits both the child and mother. Breastfeeding can reduce the risk of conditions such as breast cancer, ovarian cancer, osteoporosis, cardiovascular disease and obesity as listed by the NHS website (8). Although it is a divisive topic on social media, the evidence is clear. In order to both optimise and support mothers it is vital to understand where most of the information and advice they seek comes from. Post Covid-19 and the new rise in technology, social media has become a hub of information including for breastfeeding news (8). It is significant for healthcare professionals to be aware of such social changes and communicate with parents in an open manner.

Despite high levels of intention and motivation mothers have to breastfeed, the UK is seeing some of the lowest breastfeeding rates in the world (9). Clearly there is a failure to support women who want to meet their breastfeeding goals, not meeting such goals can have both long and short term detrimental effects, with psychosocial health burdens spreading across generations (10). A huge benefit of social media has been that due to the pandemic, with the decrease in face-to-face initiatives and support groups, mothers became increasingly reliant on online spaces. The Covid-19 pandemic also had significant implications on funding, even now three years on, mothers are still turning to online support despite evidence showing that peer support is most effective when delivered side by side with professional support across a combination of settings: community support groups, medical settings, online groups and social settings (11). Mothers' need for support and communication has been heightened even more due to the Covid-19 pandemic. With the effects of loneliness, physical separation and loss having long term and detrimental effects. New parents are already at a higher risk of becoming isolated, during the pandemic they could no longer rely on physical connections and the pandemic prevented the development of new connections (12). However, as the provision of online breastfeeding support has become more widespread, accessibility has improved, and mothers have been reporting benefits of such online spaces (13). Interactivity and personalisation have been found to be two key factors which are vital to successful internet-based interventions (14).

Significance of maintaining good mental health during and after pregnancy

The most common morbidity in the perinatal period is identified to be mental health disorders, with 10% of childbearing women being affected during pregnancy and 13% of women after birth (15). 23% of women who died in the postnatal period lived with mental health disorders and suicide is now the second leading cause of maternal death in the UK. Taking these statistics into consideration when discussing the benefits and challenges that come with a heightened social media use is crucial. Maintaining good mental health can have a wide range of benefits,

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from improving child behaviour, emotional and cognitive wellbeing to preventing low preterm birth and poor maternal-infant interactions (17). Whilst there is an abundance of benefits to social media and technology, uncontrolled usage which prompts the spread of misinformation and toxic comparisons can harm both users and influencers. Integrating sessions on how to use social media effectively might be something that is worth considering adding into parent-baby sessions and even can be a topic which primary health providers discuss with expecting parents. Rather than setting the unrealistic expectation that parents should never seek advice on social media, directing parents to informative ways on managing their time on social media and using it effectively can be incredibly beneficial and promote regulated usage.

Presence of Doctor – Mother influencers on social media

A fascinating overlap is the doctor – mother influencer, doctors who share parts of their lives and experiences of being a working mother and a healthcare professional are now increasing. Dr. Sulthana (18) is a GP who shares tips on work-life balance, Down syndrome awareness and South Asian health awareness. Her reels (short videos shared via Instagram) provide snippets and insight into her life. Her medical education allows for balanced and medically correct content. Dr Sayyada Mawij (19) is another content creator with a following of nearly twelve thousand people. She is a GP, Aid worker, TEDx speaker and is on the expert board for the app ‘Flo’ which is a period tracking app. She has multiple posts on conditions such as: skin cancer, measles, cervical cancer ovarian cancer and maternal mental health. For some mothers who don’t see themselves being ethnically or religiously represented in their own GP surgeries or hospitals, turning to social media to find doctors like Dr Sulthana and Dr Sayyada may not only restore their faith and trust in the profession but also it is a very safe way to access information. Dr Tara A Davda (20) is another GP who also shares her life on Instagram, with a following of nearly fourteen thousand, undoubtedly her influence reaches far and wide. She shares the realities of motherhood and advices on maternal health and support. She is also committed to promoting and improving health through education. Instead of advising that mothers turn completely away from seeking supportive communities and advice from social media, encouraging them to follow doctors or other healthcare professionals who can provide correct advice would be much more constructive, and in turn prove to be a huge benefit of social media. Additionally, the rise in online information, sharing on social media and online community building will positively impact disabled mothers, in particular those who prefer to or find it difficult to regularly leave their houses for in-person support groups. Whilst accessibility for in-person support groups should absolutely be improved, having another option available to disabled mothers can benefit them.

Conclusion

It is evident that social media can serve as a constructive, supportive and informative place yet the lines can quickly blur. Constructive criticism can turn into toxic comparison and misinformation can fester. When used with care and awareness, social media has a huge potential to become a safe space for mothers seeking a community. In a post Covid-19 era, it is not unnatural to turn to technology for to combat loneliness. As healthcare professionals, we can encourage parents to utilise social media, alter their following in line with their personal needs and with the rise in Doctor – Parent content creators this can be made easier. Openly discussing social media usage with primary healthcare providers such as GPs can also guide new mothers. The benefits and challenges of social media use can oftentimes merge, as multiple factors are at play it is crucial to provide mothers with sufficient support during as they embark on their journey into motherhood.