

# Metaphors for Breastfeeding in Public: A Phenomenological Study<sup>1</sup>

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## Abstract

Breastfeeding is a fundamental human right, and every child should benefit from this right during the period recommended by international organizations. Due to its numerous health benefits, it is of paramount importance to provide women with the necessary environment to support, maintain, and facilitate breastfeeding. However, breastfeeding, particularly in public places, can face social limitations. In Turkey, literature on breastfeeding in public, which represents a distinct dimension of the breastfeeding experience, is limited. This study adopted a phenomenological design, which is a qualitative research method. Data were collected via an online form that included socio-demographic information and questions about breastfeeding. Participants were asked to complete the sentence: "Breastfeeding in public is like ..... because .....". The study sample consisted of 190 participants, 142 of whom (74.7%) completed the metaphor sentence. Data were analyzed through content analysis using MAXQDA version 20. The mean age of the participants was 34.78±9.68 years; 78.2% were women, 71.8% were married, and 88.7% held a bachelor's degree or higher. The metaphors generated by participants were categorized into 12 themes: "first aid-emergency," "physiological need," "natural activity," "torment," "right-strength," "sin," "sexuality," "social requirement-imperative," "being spied on," "social norms-taboo," "peace-happiness," and "intimacy." The wide range of metaphors reflects both supportive and opposing views on breastfeeding in public. These perspectives are thought to be shaped by sociocultural factors.

**Keywords:** Adults, breastfeeding, breast milk, metaphor, social norms

**JEL Code:** I, Y

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## Sosyal Alanda Emzirmeye İlişkin Metaforlar: Fenomenolojik Bir Çalışma

### Öz

Emzirme, temel bir insan hakkıdır ve her çocuğun, uluslararası kuruluşların önerdiği süre boyunca bu haktan yararlanması gerekmektedir. Emzirmenin sağladığı faydalar nedeniyle; kadınlara emzirmeyi destekleyecek, sürdürecekt ve kolaylaştıracak gerekli ortamın sağlanması büyük önem taşımaktadır. Ancak emzirme, özellikle kamusal alanlarda, çeşitli sosyal sınırlamalarla karşı karşıya kalabilmektedir. Türkiye’de, emzirmenin farklı bir boyutu olan sosyal alanda emzirmeye ilişkin literatür oldukça sınırlıdır. Bu çalışmanın amacı, sosyal alanda emzirmeye yönelik yetişkin bireylerin algılarının metaforlar aracılığı ile belirlenmesidir. Veriler, çevrim içi olarak uygulanan ve sosyodemografik bilgiler ile emzirmeye yönelik soruları içeren veri toplama formu ile elde edilmiştir. Katılımcılardan “*Sosyal alanda emzirmek ..... gibidir, çünkü .....*” cümlesini tamamlamaları istenmiştir. Araştırmaya 190 kişi katılmış; bunların 142’si (%74,7) metafor cümlesini tamamlamıştır. Veriler, MAXQDA 20 sürümü kullanılarak içerik analizi yöntemiyle değerlendirilmiştir. Katılımcıların yaş ortalaması 34,78±9,68’dir; %78,2’si kadın, %71,8’i evli ve %88,7’si lisans ve üzeri eğitim düzeyine sahiptir. Katılımcıların oluşturduğu metaforlar 12 tema altında toplanmıştır: “ilkyardım-acil durum”, “fizyolojik ihtiyaç”, “doğal bir eylem”, “eziyet”, “hak-güçlülük”, “günah”, “cinsellik”, “toplumsal gereklilik-zorunluluk”, “gözetlenme”, “toplumsal norm-tabu”, “huzur-mutluluk” ve “mahremiyet”. Katılımcıların sosyal alanda emzirmeye ilişkin ürettiği metaforlar oldukça çeşitlidir. Bu metaforlar, hem destekleyici hem de karşıt görüşleri yansıtmaktadır. Bu görüşlerin sosyokültürel faktörlerden etkilendiği düşünülmektedir.

**Anahtar Kelimeler:** Anne sütü, emzirme, metafor, sosyal normlar, yetişkinler

**JEL Kodu:** I, Y

## Introduction

Breastfeeding is a fundamental human right and every child should enjoy this right. Breastfeeding constitutes a critical intervention for reducing mortality among children under the age of five. It is estimated that optimal breastfeeding practices for infants aged 0–23 months could prevent approximately 820.000 deaths annually in this age group (World Health Organization, WHO, 2023). The World Health Assembly has set a target to increase the global rate of exclusive breastfeeding among infants aged 0–6 months to 50% by 2025. Nevertheless, current data on exclusive breastfeeding rates among infants aged 0–6 months indicate that only 48% of those in this age group are exclusively breastfed worldwide (UNICEF, 2023). In our country, the exclusive breastfeeding rate for infants aged 0–6 months is 41%. Breastfeeding rates in the world and in Turkey are not as targeted (Turkey Demographic and Health Survey, TDHS, 2018). Breastfeeding is recognized as a vital element in efforts to build a healthier, more prosperous, and sustainable world (World Alliance for Breastfeeding Action, WABA, 2016). As part of the Sustainable Development Goals, global initiatives aim to reduce maternal and infant mortality, eliminate preventable causes of death, and end malnutrition by 2030 (United Nations, 2025). While breastfeeding is often referred to as the "Key to Sustainable Development," various challenges can disrupt its continuity (WABA, 2016). One such challenge is breastfeeding in public (BFP).

Breastfeeding is a natural activity for living beings (Amir, 2014, p. 187). However, in low breastfeeding rates, restrictions according to time and place, especially BFP, play a vital role. In this context, BFP is gaining importance for mothers. While BFP is becoming more popular, mothers may refrain from performing it or it may restrict women's social life. Due to discomfort with the idea of BFP (Amir, 2014, p. 187; Aktaş Reyhan et al., 2024, p. 403), some women choose to stop or not to initiate breastfeeding (Scott et al., 2015, p. 78; Aktaş Reyhan et al., 2024, p. 403), while some others plan a shorter duration of breastfeeding (Stuebe and Bonuck, 2011) or use alternative methods such as nursing covers, feeding bottles, breast pumps, providing expressed milk, etc. (Amir, 2014, p. 187; Aktaş Reyhan et al., 2024, p. 403). Mothers' experiences with BFP are significantly shaped by societal perceptions, norms, and reactions, highlighting the critical role of public attitudes in supporting or hindering breastfeeding practices.

Public spaces refer to areas outside the home where individuals engage with one another, accessible to all segments of society, where diverse opinions are shared democratically, freedoms and rights are exercised, and events are witnessed and communicated with maximum transparency (Çalışkan, 2014, p. 44). Any situation in which an individual interacts with others may be considered a "public" situation (Yücel and Kaya, 2024, p. 46). Accordingly, public space can be described as the setting in which human relationships are constructed. The concept of BFP, in this context, refers to the act of breastfeeding a baby in public venues where interpersonal interactions take place. However, barriers to breastfeeding, especially in public spaces, may present themselves (Uludaşdemir and Peksoy Kaya, 2023, p. 25). In the study conducted by Güngör et al. (2022), women indicated that BFP is considered acceptable when it is accompanied by breast coverage and the provision of a private space. Therefore, these conditions for breastfeeding may limit mothers' ability to BFP (Güngör Satılmış et al., 2022, p. 733). These barriers can be classified into individual factors, sociocultural influences, and societal reactions, each contributing to the challenges faced by mothers in public settings (Uludaşdemir and Peksoy Kaya, 2023, p. 25).

In the postnatal period, the return of mothers to social life naturally leads to BFP. Babies' need to be fed every 2–3 hours and the necessity for breastfeeding mothers to continue their daily lives outside the home often forces mothers to breastfeed in public areas (Yücel and Kaya, 2024, p. 46). Among the biggest barriers to BFP are society's negative perceptions of breastfeeding, socio-cultural barriers, feelings of shame or discomfort, stigma, the sexualization of the breast, and inadequate environmental conditions (Hirani, 2021, p. 137; Grant et al., 2022, p. 1; Morris et al., 2016, p. 472; Hauck et al., 2020, p. 1). Studies show that the acceptance of BFP is low. Mothers rarely breastfeed in public areas such as restaurants, parks, and buses (Dündar et al., 2023, p. 267; Reyhan et al., 2024, p. 403). Negative breastfeeding experiences in public spaces can affect the decision to continue

breastfeeding for approximately half of mothers (Boyer, 2012, p. 556). Therefore, mothers who have negative views about BFP are less likely to breastfeed in public. These negative views even lead to early cessation of breastfeeding for mothers who have never breastfed in public spaces (Scoot et al., 2015, p. 78). This situation may also contribute to the spatial confinement of mothers, reinforcing the expectation that breastfeeding should occur only within private or hidden areas, thereby reflecting broader gendered norms regarding women's presence in public spaces. Some studies in the literature have also reported that there is a fear of breastfeeding among immigrants and low-income individuals (Groleau et al., 2013, p. 250; Groleau et al., 2006, p. 516). Additionally, the presence of breastfeeding fear in immigrant and low-income families suggests that challenges and negative perceptions related to breastfeeding may be more intense in these groups. These types of barriers could have a negative impact on the health of both mothers and babies. Research in this area indicates that societal norms need to be changed to make BFP spaces more acceptable and that mothers should be supported in order to continue their breastfeeding processes in a healthier way.

These challenges and barriers, which occur beyond the control of breastfeeding mothers, inherently create a public responsibility to provide the support that breastfeeding mothers need (Hauck et al., 2020, p. 1). After childbirth, mothers increasingly need to spend time outside the home due to social interactions and personal needs. These include taking children to medical appointments, caring for older children, visiting family or friends, and going to public places like parks, supermarkets, or restaurants (Scott et al., 2003, p. 274, 276). Such activities require being in public spaces, not just staying within the private sphere. As a result, for mothers who continue to breastfeed, breastfeeding in public becomes a practical necessity rather than simply a personal choice. However, mothers may face negative reactions to BFP (Scott et al., 2015, p. 78; Boyer, 2012, p. 559; Timurturkan, 2020, p. 24; Li, Fridinger and Grummer-Strawn, 2002, p. 227; Mulready-Ward and Hackett, 2014, p. 195). Buturović et al. (2017) point out that the support given to BFP is lower than the support given to breastfeeding in general. Importantly, this lack of support does not solely stem from others in public settings; mothers themselves may internalize similar negative attitudes. This internalization can be understood through the lens of gender norms and social expectations that regulate women's bodies and behaviors in public spaces (Sheehan et al., 2019, p. 1; Güngör Satılmış et al., 2022, p. 733). Feminist scholarship has long examined public breastfeeding and the sexualization of women's bodies (Mathews, 2018, p. 1266; Stearns, 1999, p. 308; Lane, 2013, p. 195). The literature emphasizes the influence of cultural norms and gendered discourses in shaping maternal perceptions and behaviors. In this context, attitudes toward breastfeeding in public should be critically addressed in future breastfeeding support policies from both individual and societal perspectives.

The most significant barrier to BFP is related to the socio-cultural structure. Whether it originates from the breastfeeding mother herself or from societal reactions, socio-cultural factors have a substantial impact on public breastfeeding. The existence of certain cultural rules regarding BFP affects the acceptability of BFP (Morris et al., 2016, p. 477). In many societies, BFP is not universally accepted. This is largely due to factors such as the internalized sense of shame associated with being observed while breastfeeding, the sexualization of the female breast, the conceptualization of the female body as a private or restricted entity, and the persistence of gender inequality (Morris et al., 2016, p. 472; Kaya et al., 2019, p. 595; Timurturkan, 2020, p. 23; Özdil et al., 2021, p. 255; Dündar et al., 2023, p. 267). Therefore, examining societal factors and public responses is of critical importance.

Although BFP is protected by law in some countries, the general public may not always be aware of this (Amir, 2014, p. 187). A study conducted in the United Kingdom reported that facilitating BFP is a matter of culture (Boyer, 2012, p. 559), and suggested that low breastfeeding rates in the UK may be partly due to barriers associated with BFP (Boyer, 2012, p. 33). Groleau et al. (2013) noted that poor French-Canadian women find themselves caught between the desire to be good mothers and the hyper-sexualization of breasts in Western societies. They also emphasized that these women often lack the power to overcome such barriers in public spaces, and that public environments need to be transformed in order to better support breastfeeding among low-income women (Groleau et al., 2013, p. 250). A comprehensive review evaluating the findings of 27 studies conducted in

Australia, Canada, China, Ghana, Ireland, Romania, Singapore, Sweden, New Zealand, Thailand, the United Kingdom and the United States presents an international perspective on the challenges women face when BFP. In addition to themes related to difficulties in women's public breastfeeding experiences—such as drawing attention, the sexualization of breasts, awareness of others' discomfort, and efforts to remain unseen—the study also identified themes that were constructive and supportive (Hauck et al., 2021, p. e217). Zhao et al. (2017) reported striking findings in a study conducted with adults in China. While 95% of participants believed that breastfeeding rooms should be available in public spaces, 86% stated that it is acceptable for mothers to breastfeed in such designated rooms. Additionally, 65% of participants found public breastfeeding generally acceptable, and approximately 90% expressed support for policies that promote BFP (Zhao et. al., 2017). Despite the existence of laws supporting BFP in Canada, Russell and Ali (2017) found that only one in four adults considered public breastfeeding to be acceptable. The study also revealed that support for public breastfeeding was particularly low among immigrants, individuals with lower levels of education, and those without children (Russell and Ali, 2017, p. 401). Another study conducted in the United States found that while 50.4% of adults did not support BFP, one in three adults reported feeling uncomfortable when women BFP (Mulready-Ward and Hackett, 2014, p. 195). The perception of breasts as sexual objects—shaped by their association with the female body and identity—can lead to feelings of discomfort and shame around public breastfeeding, which in turn may influence women's breastfeeding practices in society. Therefore, breastfeeding in defiance of social norms constitutes a barrier to women BFP. While the right to BFP is legally protected in many countries—particularly in developed countries—there remains a significant gap between formal legal recognition and everyday social support. From a feminist perspective, this disconnect highlights how legal frameworks alone are insufficient to challenge the deeply embedded cultural norms and gendered power relations that continue to stigmatize BFP. It is evident that legal rights alone are insufficient for social transformation.

Although breastfeeding is legally supported in Turkey, as in many developed countries, information regarding societal attitudes and reactions to public breastfeeding remains limited. This gap suggests that while legal frameworks may provide formal protection, they do not necessarily address the deeply ingrained cultural norms and societal perceptions that continue to influence women's experiences and acceptance of public breastfeeding. In many cases, these societal attitudes reflect broader issues of gender roles, the sexualization of the female body, and the marginalization of caregiving in public spaces. In Turkey, breast milk and breastfeeding policies are promoted and it is encouraged to improve the quantity and quality of maternal health services and comply with baby-friendly hospital criteria as part of the “Mother-friendly hospital program” (Ministry of Health, 2018). Despite national and international recommendations promoting exclusive breastfeeding for the first six months, the rate in Turkey remains at 41%, indicating the presence of ongoing structural, cultural, or informational barriers to sustained breastfeeding practices. Moreover, breastfeeding rates decline significantly after the sixth month (TDHS, 2018). Karaçam and Sağlık (2018) noted that breastfeeding problems may be associated with the mother's going back to work and lack of an appropriate environment for breastfeeding outside the home. In the study by Dündar et al. (2023), approximately half of the mothers reported experiencing feelings such as awkwardness, shame, and disapproval when seeing a woman BFP. One in three mothers stated that BFP is not considered normal (Dündar et al., 2023). Although individuals in society may regard motherhood and breastfeeding as sacred and valuable, they may, in certain situations, condemn breastfeeding or fail to provide adequate social support to mothers. In societies with similar social, cultural, and religious values, women who BFP within patriarchal structures may consequently adopt either a conformist attitude and behavior or embrace a more defiant stance in response to societal expectations (Özdil et al., 2021, p. 258). In Timurturkan's (2020) discourse analysis for breastfeeding, it was emphasized that mothers who considered BFP a natural right are urbanite, well-educated, and have a certain level of career. Various studies around the world have explored adults' perceptions and attitudes toward BFP (Groleau et al., 2013, p. 250; Hauck et al., 2021, p. e217; Zhao et. al., 2017; Russell and Ali, 2017, p. 401; Mulready-Ward and Hackett, 2014, p. 195). However, in Turkey, research addressing both adults' and mothers' perspectives remains limited (Timurturkan, 2020, p. 23; Kaya et al., 2019,

p. 595; Aktaş Reyhan et al., 2024, p. 403; Yücel and Kaya, 2024, p. 45; Özdil et al., 2021, p. 258; Dündar et al., 2023). This study focuses on examining adults' perceptions of BFP. Specifically, it aims to identify Turkish adults' perceptions of BFP through the use of metaphors.

Research Questions (RQ):

RQ-1: What are the adults' metaphors for BFP in Turkish society?

RQ-2: What are the common characteristics and categories of these metaphors used in terms of BFP?

## Method

### Study design and setting

This qualitative study was conducted in line with the "Standards for Reporting Qualitative Research" guidelines (O'Brien, Harris, Beckman, Reed and Cook, 2014, p. 1245). The study used a phenomenological pattern as a qualitative research method. Phenomenological pattern focuses on phenomena that we are aware of but lack an in-depth opinion. This pattern focuses on phenomena that are not completely stranger to individuals and provides a chance for exploring that phenomenon in depth (Yıldırım and Şimşek, 2013, p. 66). Metaphors explain a phenomenon by associating it with different subjects in different aspects. Thus, a new or complicated concept, phenomenon or condition is explained with a simpler one. Therefore, metaphor analysis is used in scientific research, particularly on new or complicated topics (Güneş and Fırat, 2016, p. 125). Thanks to the descriptive nature of metaphors, it is possible to offer rich content to reflect different perspectives of a concept, phenomenon or condition (Yıldırım and Şimşek, 2013, p. 66). Therefore, metaphors were used to determine the perceptions of Turkish society for BFP.

### Study participants

Based on the nature of qualitative research, each phenomenon or condition reoccurs every time and is redesigned by individuals. Everything involves that condition, individual or group at that moment. There is not a universal order in the universe; there is chaos instead (Sönmez and Alacapınar, 2014, p. 72). The sample of this study consisted of adults using social media (Facebook, Instagram, WhatsApp, etc.). The use of online qualitative surveys through social media tools provides various benefits for both researchers and participants. These benefits can be conceptual and design-related. Online qualitative surveys also enable easy access to a broad geographic population. However, they may also carry the risk of excluding individuals with limited literacy (Braun et al., 2020, p. 643). The research link was shared as a status update on social media platforms. The purpose of the study was explained on the first page of the online data collection tool. Additionally, the study link was sent via messages to adults using social media tools. Participants were recruited using the "snowball" sampling procedure, which is among the non-probability sampling methods. Adults who are literate and over the age of 18 were included in the study. As population and sample cannot be determined in qualitative research (Sönmez and Alacapınar, 2014, p. 141), sample is chosen based on data saturation (Fusch and Ness, 2015, p. 1408). Online data collection link was shared with 190 participants until a wide range of metaphors was reached. Of these participants, 142 completed the metaphor sentence.

## Data collection

Data were collected using a data collection form developed by the researchers. The form consisted of two sections. The first section included demographic and background information such as age, gender, occupation, marital status, place of residence, parental status, and obstetric history (for female participants with pregnancy and childbirth experience). The second section included a metaphor completion prompt: “*Breastfeeding in public is like ..... because .....* ”. In the online survey form, an open-ended response line was provided for participants to complete this metaphor. These metaphorical expressions formed the qualitative data and the primary source of the phenomenological component of the study.

The metaphorical sentence completion form developed by the researchers was designed as a two-part open-ended question in accordance with the relevant literature (Korkut & Keskin, 2016; Saban, 2008). In the first part of the sentence, adult participants were asked to describe what BFP resembled to them by filling in the blank (“*Breastfeeding in public is like .....* ”). In the second part, they were asked to explain why they associated BFP with the concept they had stated in the first part (“*because .....* ”). Completing the second part was crucial for identifying the underlying meaning and content of the metaphor. Before starting to fill out the form, participants were provided with a definition of the concept of metaphor. They were informed of the importance of explaining both what they likened public breastfeeding to and why they made that comparison. Specifically, they were instructed to clarify the rationale behind the metaphor they produced.

In metaphor analysis, the two-part sentence structure (i.e., metaphor + justification) is a widely accepted and validated approach in the literature (Saban, 2008; Korkut & Keskin, 2016; Bahadır-Yilmaz, 2024; Durmuş et al., 2025). The first part reveals the participant’s associative image, while the second part provides the rationale behind that image. This structure offers sufficient depth for analyzing both the surface meaning and the underlying conceptual framework of the metaphor. As the aim of the study was to understand public perceptions of BFP through metaphorical thinking, this focused and analyzable structure was preferred over longer narratives or general open-ended questions. This structure also enabled the researchers to follow a systematic analytical process, facilitating the identification of meaningful categories.

## Conduct of the study

Data were collected between April and June 2021. In light of the COVID-19 pandemic, online data collection was chosen to minimize the risk of physical contact and transmission. The data collection form was created using Google Forms and was disseminated via various social media platforms to reach adult participants. Participants were informed about the purpose and significance of the study. Consent was obtained through an electronic checkbox indicating voluntary participation (“I agree to take part in the study.”). Since the study was conducted online, the exact duration for completing the form is not known. However, some participants reported that they needed approximately 15–30 minutes to complete the metaphor statement. Therefore, the data collection process varied in duration among participants.

## Data analysis

Qualitative data were analyzed through MAXQDA software version 2020. The content analysis method was used to analyze obtained data in line with the qualitative research pattern. Evaluation of the metaphors was made in three stages. Metaphors were analyzed following the steps of Metaphor Analysis Based on the “Metaphor Identification Procedure (MIP)” of the Pragglejaz Group (2007). In addition, descriptive analyses were conducted using IBM SPSS Statistics version 22.0 (IBM Corp., Armonk, NY, USA). Descriptive statistics in Table 1 are presented as number (percentage) and mean (standard deviation).

### Stage 1- Determining the metaphors

The metaphors related to BFP were first imported into Microsoft Office Excel 2016, and a list was created for initial examination. Two researchers read all responses and metaphors for overall meaning integrity. Participants who left the metaphor expressions and justifications incomplete, or failed to relate their justifications to the metaphor, were excluded from the study. This was done to ensure the inclusion of only complete and meaningful metaphorical expressions that could be analyzed in relation to the study's themes.

### Stage 2- Grouping the metaphors

Each metaphorical expression was carefully examined to determine whether it included a metaphorical meaning, as defined by MIP. After initial identification, metaphors were assigned codes and entered into MAXQDA 20 for detailed qualitative analysis. A metaphor list was created by examining the relationships between semantically and conceptually similar metaphors. Subsequently, the metaphors were grouped into 12 thematic categories. These included both themes and subthemes, developed inductively by identifying recurring patterns across the data and interpreting the metaphors' underlying cognitive and cultural meanings. Themes and subthemes were reviewed and refined using a two-case model by gender, allowing for a comparative and context-sensitive interpretation of metaphor use. Specific data points resembling similar metaphoric reasoning were clustered to form a coherent thematic structure.

### Stage 3- Ensuring validity and reliability

To enhance the reliability and validity of the study, the researchers collaborated throughout the analysis process. Two researchers independently coded the data to ensure that personal biases did not influence the categorization of metaphors. Once the initial coding was completed, the similarities and differences between the metaphors were examined and refined by the researchers in collaboration. Additionally, a third researcher, not involved in the coding and analysis, independently reviewed the themes and subthemes. This third researcher assessed the consistency and relevance of the identified themes without reference to the raw data, ensuring that the categories were developed objectively. For reliability, the formula proposed by Miles and Huberman (1994) was applied:  $\text{Reliability} = \text{consensus} / (\text{consensus} + \text{disagreement})$ . According to this formula, a reliability coefficient of 0.90 or higher is considered acceptable. In this study, the reliability was calculated as 93% ( $134/134+10$ ), indicating a high level of agreement among the researchers.



## Ethical consideration

Permission was obtained from the Ethics Committee of a state university prior to data collection (Approval No: 64, Date: 16.04.2021). The principles of the Declaration of Helsinki in 2008 were followed during this study. Participation in the study was voluntary. Participants were informed about the aim, scope, and confidentiality of the research prior to giving consent. An informed consent statement was provided at the beginning of the online survey, and participants could only proceed after selecting the option “I agree to take part in the study.” To ensure confidentiality and anonymity, no personally identifying information was collected. Participants were referred to using anonymized codes. Participants were coded sequentially based on their order in the dataset (Participant 1 [P1], Participant 2 [P2], Participant 3 [P3], ... Participant 142 [P142]). When presenting sample quotations, concise demographic information was included to provide context—for example: *Woman, 20 years old, married, with a child (P67)*. Only the researchers involved in the study had access to the data collected via Google Forms. The data were stored securely and used exclusively for academic purposes.

## Results And Discussion

Breastfeeding is a fundamental act of care and a natural part of life (Amir, 2014, p. 187). However, it is not always easy to perform this action (Amir, 2014, p. 187; Zhao, Ouyang, and Redding, 2017, p. 316; Yucel and Kaya, 2024, p. 45; Aktaş Reyhan et al., 2024, p. 403). BFP is important for performing this natural act (Amir, 2014, p. 187). Decisions regarding infant feeding are deeply intertwined with a woman’s social and cultural context. Despite the numerous benefits of breastfeeding for both mothers and infants, and the existence of policies and legal frameworks aimed at protecting and promoting it, BFP remains a controversial issue (Sheehan et al., 2019, p. 1). Breastfeeding not only empowers women but also contributes to gender equality. It necessitates a rethinking of key issues such as the gendered division of labor, the reconciliation of women’s reproductive lives, and the role of physiological processes in shaping gender ideologies. Therefore, breastfeeding emerges as a feminist issue, a human rights concern, and a matter central to women’s lives (Van Esterik, 1994). Consequently, BFP is often perceived as a contested practice shaped by social boundaries and norms (Sheehan et al., 2019, p. 8). In this study, adults’ perceptions of BFP were analyzed through various metaphors and systematically categorized into overarching themes and subthemes. The findings reveal noteworthy insights into adults’ attitudes toward public breastfeeding. These themes reflect the diverse ways in which public breastfeeding is understood and interpreted by adults.

### Some socio-demographic characteristics of the participants

The mean age of the participants was  $34.78 \pm 9.68$  years. Of the participants, 78.2% were women, 69.0% were employed, 71.8% were married, 59.2% had moderate (equal) income-expenditure perception, and 88.7% had a bachelor’s degree and above. 78.2% of the participants lived in a city/metropolitan city. 67.6% of the participants had at least one child. 78.4% of the women ( $n = 87$ ) had pregnancy and birth experience (Table 1).

Table 1

The Participants' Descriptive Characteristics for Breastfeeding in Public (n=142)

Characteristics	M±SD	
Age (year)	34.78±9.68	
<b>Gender</b>	<b>n</b>	<b>%</b>
Female	111	78.2
Male	31	21.8
<b>Profession</b>		
Working	99	69.0
Housewife	17	12.0
Student-Other	27	19.0
<b>Level of education</b>		
High school and below	16	11.3
University and above	126	88.7
<b>Marital status</b>		
Married	102	71.8
Single	40	28.2
<b>Family type</b>		
Nuclear	126	88.7
Extended	16	11.3
<b>Income status perception</b>		
Equal income and expenses	84	59.2
Income more than expenses	30	21.1
Income less than expenses	28	19.7
<b>Where they live</b>		
City/metropolis	111	78.2
District/Town/Village	31	21.8
<b>Having child</b>		
Yes	96	67.6
No	46	32.4
<b>History of pregnancy*</b>		
Yes	87	78.4
No	24	21.6

M: Mean, SD: Standard deviation. \*Women included.

## Participants' metaphors on breastfeeding in public

In the study, adults expressed their perceptions of BFP through various metaphors, which were grouped under 12 main themes. These themes reflect the diverse ways in which BFP is conceptualized by the participants. These themes reflect diverse conceptualizations of BFP shaped by social life, cultural values, beliefs, norms, and rights. This diversity illustrates how societal perceptions of BFP intersect with gender norms, privacy, morality, and culture. Some themes were supportive/positive, while others were negative/restrictive. These themes were categorized as (i) First aid-emergency, (ii) Physiological need, (iii) Natural activity, (iv) Torment, (v) Right-strength, (vi) Sin, (vii) Sexuality, (viii) Social necessity-imperative, (ix) Being spied on, (x) Social norms-taboo, (xi) Peace-happiness and (xii) Intimacy (Table 2).

In our study, metaphors related to BFP were categorized into two main groups: negative/restrictive and supportive/positive. The themes reflecting restrictive perceptions of BFP included “first aid-emergency”, “torment”, “sin”, “sexuality”, “being spied on” and “intimacy”. Conversely, themes reflecting supportive views encompassed “physiological need”, “natural activity”, “right-strength”, “social requirement-imperative” and “peace-happiness”. The theme of “social norms/taboo” incorporated metaphors that both supported and restricted BFP, reflecting its complex and ambivalent nature within social discourse. In line with our results, Timurturkan (2020) stated that the comments made for pictures of women who were BFP on social media were diverse and while some comments were encouraging/appreciative, some others were “judgy/condemnatory”. These comments also indicated the pressure of patriarchal societies on a woman's body (Timurturkan, 2020, p. 1). In the study conducted by Dündar et al. (2023), approximately 49.4% of mothers reported that they could only breastfeed in designated breastfeeding rooms. The majority of participants (88.1%) expressed the belief that the breast should be covered while BFP. Additionally, two-thirds of the women (65.2%) indicated that they would feel uncomfortable witnessing a child being breastfed without a cover. Furthermore, 56.5% of the participants reported that they would feel ashamed if seen while BFP (Dündar et al., 2023, p. 267). Although breastfeeding is a natural act, the societal expectation of concealing the female body can lead women to feel shame and a need to cover themselves with a breastfeeding apron during the act of breastfeeding (Özdil et al., 2021, p. 255). Many factors can affect these two main themes that make it easier and harder for women to BFP. As a result of the interaction of these factors, women develop certain behaviors towards BFP. In order to improve breastfeeding, there is a need for important strategic interventions that encourage BFP and positively develop the perception of it (Yücel and Kaya, 2024, p. 49). Limiting appropriate spaces for breastfeeding to designated breastfeeding rooms may lead to the isolation of women from society in order to breastfeed. It also reinforces the belief that breastfeeding is not appropriate in public spaces (Amir, 2014; Owens et al., 2016, p. 430). As a result, gender inequality continues to deepen.

Table 2

## Metaphors Related to Breastfeeding in Public (n=142)

Themes	Subthemes *	n	%	Metaphors
First aid-Emergency	Urgency Test Falling Fire	30	20.6	Being rained on/getting wet in the rain (3); Test (2); First aid (1); Bomb (1); Baby having febrile convulsions (1); Being in the middle of a highway (1); Being in the middle of a desert (1); Emergency (1); Thief (1); Getting lost in a desert (1); Crisis (1); Need for a bathroom (1); Riding a gondola (1); Staying in the dark (1); Getting dehydrated in the middle of a desert (1); Being the last passenger on a bus (1); Being a fish out of the water (1); Being in a jungle (1); Being airless (1); Life buoy (1); Takeoff (1); Falling into a pit (1); Falling in the snow (1); Falling from the sky (1); Low test score (1); Being in the middle of a fire (1); Fire brigade (1)
Physiological need-Need	Eating Breathing Drinking water Vital necessity	21	14.8	Eating (5); Breathing (4); Drinking water (3); Feeding (3); Adults' eating (2); Drug (1); Sleeping (1); Sheep suckling lambs (1); Eating in open air (1)
Natural activity	Natural situation Natural Instinctive behavior	13	8.9	Normal (2); Communing with nature (2); Baby (1); Natural process (1); Acting on instinct (1); Natural impulse (1); Natural situation (1); Natural activity (1); Running (1); Something humane (1); Drinking coffee out (1)
Torment	Difficulty-stress Torture Nightmare	12	8.2	Challenging (3); Nightmare (2); Suffering (2); Torment (1); Torture (1); Stress (1); Trouble (1); An ostrich burying its head in the sand (1)
Right-Strength	Strength Mother's right Social right	11	7.5	Social right (2); Mother identity of a woman (1); Mother's right (1); Mother's and baby's right (1); Natural and political right (1); Power (1); Power of love (1); Courage (1); Self-confidence (1); Exemplary behavior (1)
Sin	Judging-Shaming Shamelessness Dirtiness	10	6.9	Shameful (4); Absurd (1); Unscrupulous (1); Disrespectful (1); Mud (1); Fault (1); Standing trial (1)
Sexuality	Nudeness Sex	10	6.9	Getting naked (3); Nudeness (2); Sex (2); Feeling naked (1); Walking out naked (1); Getting undressed (1)
Social requirement-Imperative	A must	10	6.9	Requirement (3); Imperative (2); Obligation (1); Road to go (1); Vital need (1); Surfacing real troubles (1); Important (1)
Being spied on	Feeling uncomfortable-being watched Play on stage Feeling out of place	9	6.2	Stage (2); Standing in the middle of the crowd (2); Movie (1); Binoculars (1); Feeling as if doing something wrong (1); Looking bad (1); Feeling as if being from another planet (1)
Social norms-Taboo	Breaking taboos Norm Forbidden	9	6.2	Traffic light (1); Impossible (1); Show-off (1); Drinking water during the month of Ramadan (1); Realizing a dream (1); Underground literature (1); Freedom (1); Inevitable end (1); Doing something wrong (1)

Peace-Happiness	Relief	6	4.1	Breeze (1); Peace (1); Walking out of a dark room (1); Camping in a forest (1); Rainbow (1); An oasis in a desert (1)
Intimacy	Privacy Disappearance	4	2.7	Sharing our confidential matters (1); Intimacy (1); Doing something forbidden in secret (1); Diving (1)

*\*Two people stated multiple metaphors in the metaphor statement.*

## Negative/restrictive metaphors on breastfeeding in public

The negative or restrictive metaphors identified in the study reveal the social and psychological barriers associated with BFP. These metaphors often reflect stigmatizing or discomfoting perceptions. For instance, the “first aid/emergency” or “tortment” metaphor suggests that breastfeeding in public is only acceptable in extreme or urgent situations, thereby limiting its normalization in everyday contexts. Similarly, metaphors such as “sin” or “sexuality” reflect a moralistic or sexualized framing of the breastfeeding body, which may contribute to feelings of shame or impropriety. The “being spied on” metaphor evokes a sense of surveillance or public scrutiny, emphasizing the discomfort some individuals feel when breastfeeding is performed outside the private sphere. Collectively, these metaphors reflect deep-rooted social norms and cultural taboos that serve to restrict the visibility and acceptability of breastfeeding in public spaces.

The themes that restrict or make BFP difficult were consistent with social norms, sociocultural structure, beliefs and characteristics of a patriarchal social structure. Negative reactions of others can play a role in the experience of BFP (Boyer, 2018, p. 39). Discomfort with BFP makes it difficult to continue BFP (Wolf, 2008, p. 1). Clifford and McIntyre (2008) stated that employers and society are aware of the benefits of breastfeeding, however, they do not provide enough support for BFP. Boyer (2018) stated that breasts constitute a form of sexual capital with a role to play in maintaining forms of identity and bio-power and thus, women had difficulties in BFP. Another difficulty was that breast milk, which has similar characteristics to bodily fluids such as urine and sweat, drew attention to anxiety and restlessness about itself (Boyer, 2018, p. 36). In their review of 27 publications covering 12 countries, Hauck et al. (2021) categorized the challenges of women for BFP as sexualization of breasts, awareness of others’ discomfort, drawing attention, and efforts not to be seen. Groleau et al. (2013) stated that the ‘good mother’ imperative in the context of poverty and the hypersexualization of breasts acted as major deterrents to BFP. These factors may cause strong taboos for BFP. The visibility of women in public spaces is crucial for achieving gender equality. However, the male-dominated nature of public spaces complicates women's access to and participation in these areas. In order to ensure women’s presence in public spaces, gender roles must be reconsidered (Hançer, 2018). From a feminist perspective, public discomfort with breastfeeding reveals the persistent gendered division between public and private spheres.

## Metaphors of first aid-emergency

The participants explained this theme with metaphors of (i) Urgency, (ii) Test, (iii) Falling, and (iv) Fire. These metaphors offered powerful imagery for an experience like BFP, which challenges the boundaries of body, time, and space. These metaphors strongly reflected BFP. Participants described BFP as an act that must be done immediately or without delay.

*“Breastfeeding in public is like being rained on because it requires opening an umbrella urgently.” (Woman, 20 years old, single, P60)*

*“Breastfeeding in public is like falling from the sky because it is required to open a parachute urgently.” (Man, 23 years old, single, P102)*

## Metaphors of torment

The metaphor of “torment” was grouped into ((i) Difficulty-stress, (ii) Torture, and (iii) Nightmare, reflecting the challenges participants associated with BFP. Participants had focused on the metaphor of ‘torment’ to highlight the difficulties that might be experienced during BFP. These metaphors powerfully illustrated how participants perceived the challenges of BFP and how they experienced the pressure of societal judgments. Notably, these metaphors were provided by women, and their interpretations carry particular weight given their lived experiences with both gendered expectations and, for some, motherhood. These insights also demonstrate how BFP remains anchored in stigmatized perceptions, regardless of whether women have experienced motherhood or not.

The literature supports these findings, highlighting that negative opinions of third parties often limit opportunities for BFP (Mulready-Ward & Hackett, 2014, p. 195). Some mothers struggling with BFP viewed bottle-feeding as a way to avoid these challenges. Negative reactions from family and society influenced decisions on breastfeeding duration and often contributed to early cessation (Boyer, 2018, p. 37). Concerns about breastfeeding in front of others particularly affect women with low self-confidence or those who perceive BFP as socially unacceptable (Scott et al., 2015, p. 78; Stuebe and Bonuck, 2011, p. 413). Canbulut and Kapıcı (2025) emphasize the lack of adequate public spaces where mothers and children aged 0–3 can spend time together. Women reported a lack of shared spaces meeting both their needs and their children’s, striving to claim reasonable areas while fulfilling their maternal roles (Canbulut and Kapıcı, 2025, p. 116). This theme also reinforces that public spaces are not neutral and are structured according to gender.

*“Breastfeeding in public is like an ostrich burying its head in the sand because it is still considered disgraceful.” (Woman, 31 years old, married, has a child, P19)*

*“Breastfeeding in public is like torment because everyone stares at you as if you are doing something abnormal.” (Woman, 23 years old, single, P72)*

## Metaphors of sin

The participants explained this theme with metaphors of (i) Judging-Shaming, (ii) Shamelessness, and (iii) Dirtiness. These metaphors emphasized the social stigma and judgment that participants associated with BFP.

*“Breastfeeding in public is like mud because you feel dirty.” (Woman, 30 years old, single, P1)*

*“Breastfeeding in public is like standing trial because everybody judges your manners.” (Woman, 27 years old, married, has a child, P85)*

## Metaphors of sexuality

The participants explained this theme with metaphors of nudeness and sex. In these metaphors, BFP was often viewed through the perspective of sexuality and privacy.

*“Breastfeeding in public is like watching a couple making love because society thinks it should be performed hidden and in private.” (Woman, 31 years old, married, has a child, P5)*

*“Breastfeeding in public is like getting naked in the cold because it requires covering yourself.” (Man, 45 years old, married, has a child, P100)*

## Metaphors of being spied on

The participants explained this theme with metaphors of (i) Feeling uncomfortable-Being watched, (ii) Play on stage, and (iii) Feeling out of place. These metaphors demonstrated the discomfort and sense of being watched that participants associate with BFP.

*“Breastfeeding in public is like binoculars because it is as if everybody is trying to spy on me.” (Woman, 30 years old, married, has a child, P47).*

*“Breastfeeding in public is like everybody watching you like a movie scene because you should switch to the commercial break right away.” (Woman, 35 years old, married, has a child, P111)*

## Metaphors of intimacy

These metaphors demonstrated how participants associated BFP with a need for intimacy and privacy. The participants explained this theme with metaphors of (i) Privacy and (ii) Disappearance.

*“Breastfeeding in public is like diving because a snorkel is required to stay underwater safely and comfortably just like privacy is required for safe and comfortable breastfeeding.” (Woman, 30 years old, single, P10)*

*“Breastfeeding in public is like sharing our confidential matters because breastfeeding with confidence and no stress is the real form of breastfeeding.” (Woman, 51 years old, married, has a child, P22)*

## Supportive/positive metaphors on breastfeeding in public

The supportive or positive metaphors identified in the study offer valuable insights into more affirming and empowering perceptions of BFP. These metaphors highlight how BFP can be normalized, and legitimized within certain social and cultural frameworks. The metaphor of “physiological need” frames breastfeeding as a basic and essential human function, detaching it from moral judgment and emphasizing its biological significance. “Natural activity” reinforces this view by situating breastfeeding as an instinctive and organic process, aligning it with broader notions of maternal care and child development. The “right/empowerment” metaphor underscores the agency of breastfeeding individuals, suggesting that BFP is not merely a private act but a public right deserving of recognition and protection. The “social necessity/imperative” metaphor reflects a broader societal responsibility to support breastfeeding practices for the collective well-being of mothers, children, and communities. Finally, “peace/happiness” metaphor evokes the emotional and relational benefits of breastfeeding, portraying it as a moment of calm, connection, and mutual comfort. Together, these metaphors contribute to a discourse that normalizes and validates breastfeeding in public, challenging restrictive norms and promoting inclusive attitudes.

Breastfeeding is one of the fundamental human rights (UNICEF, 2006). Breastfeeding is supported and recommended by many international and national organizations such as the WHO, UNICEF, the Ministry of Health, and civil society organizations (UNICEF, 2006; WHO, 2023); however, it is still regarded as a practice that should be carried out in private. The coding of the female breast as a sexualized space and the perception of motherhood as a multifaceted phenomenon with moral and social dimensions continue to render the visibility of BFP a subject of controversy, caught between the sacred/taboo dichotomy (Timurtürkan, 2020, p. 22). Restriction/limitation or support of BFP is also a dilemma. Tăut (2017) explained this dilemma of mothers with the opinion that breastfeeding is legally encouraged; however, it is not common. In their integrative review, Hauck et al. (2021) focused on a society that is supporting and reassuring for BFP and strategies to eliminate difficulties. They also stated that BFP should be supported, research should be made on women's needs for BFP, and this research should be considered by organizations and governments that support breastfeeding. Challenges and supporting approaches confirm an "international commonality" that women encounter during BFP (Hauck et al., 2021, p. e217). Actually this predicament concerning BFP is a common international problem. This highlights the urgent need for a shift from merely promoting breastfeeding to creating inclusive, supportive public environments that respect women's autonomy.

### Metaphors of physiological need

The participants explained this theme with metaphors of (i) Eating, (ii) Breathing, (iii) Drinking water, and (iv) Vital necessity. Participants conceptualized BFP as a basic human necessity through these metaphors.

*"Breastfeeding in public is like eating in the open air because babies should be able to eat in the open air as well."* (Man, 23 years old, single, P62)

*"Breastfeeding in public is like drinking water because it is the most natural thing."* (Woman, 44 years old, married, has a child, P75)

### Metaphors of natural activity

The participants explained this theme with metaphors of (i) Natural situation, (ii) Natural, and (iii) Instinctive behavior. These metaphors reflected how participants perceived BFP as a natural and instinctive act grounded in the mother–infant bond. By likening it to biologically driven behaviors, they emphasized its legitimacy and timelessness, independent of social contexts.

*"Breastfeeding in public is like an instinctive behavior because the bond between the baby and mother is so strong and meaningful that it is beyond time and space."* (Woman, 41 years old, married, has a child, P16)

*"Breastfeeding in public is like a natural process because it is needed by every baby and everybody goes through babyhood."* (Woman, 21 years old, single, P71)



## Metaphors of right-strength

The participants explained this theme with metaphors of (i) Strength, (ii) Mother's right, and (iii) Social right, demonstrating how they perceived BFP as a rights-based action and advocated for it within the context of social equality. They emphasized that BFP is not only a maternal right but also a social and political necessity. In some countries, the right to BFP has been legally recognized and adopted by lawmakers (Amir, 2014, p. 187). In Zhao et al. (2017) study, more than 90% of respondents approved of policies supporting BFP. Tăut (2017) grouped narratives into three themes in the narrative analysis exploring the construction of BFP. While “public restraint of breastfeeding as an acknowledgment of the cultural status-quo” and “permission within boundaries” themes restrict BFP, the “breastfeeding as a human right” theme supports it. Those arguing that breastfeeding is no more than exercising a fundamental right and breast as a primary maternal symbol were more in favor of BFP (Tăut, 2017, p. 815). Despite breastfeeding's recognition as a fundamental human right, the lack of social acceptance for BFP reveals a contradiction between legal rights and lived realities.

“Breastfeeding in public is like a social right because every baby should be able to be nourished whenever they need.” (Man, 31 years old, married, has a child (P116)

“Breastfeeding in public is a natural and political right of women and babies because this is the nature of babies and it is wrong to suppress or restrict it for social reasons. Policies must be modified to encourage breastfeeding in public.” (Woman, 31 years old, married, has a child, P142)

## Metaphors of social requirement-imperative

The participants focused on the challenges of BFP for gaining acknowledgment by society in this theme. These metaphors depicted BFP as a social necessity or obligation, emphasizing the vital role it plays in meeting the baby's nutritional needs.

“Breastfeeding in public is like obligation because a baby should not be deprived of this precious nutrition under any circumstances.” (Woman, 48 years old, married, has a child, P44)

“Breastfeeding in public is like compulsion because otherwise baby famishes.” (Man, 20 years old, single, P61)

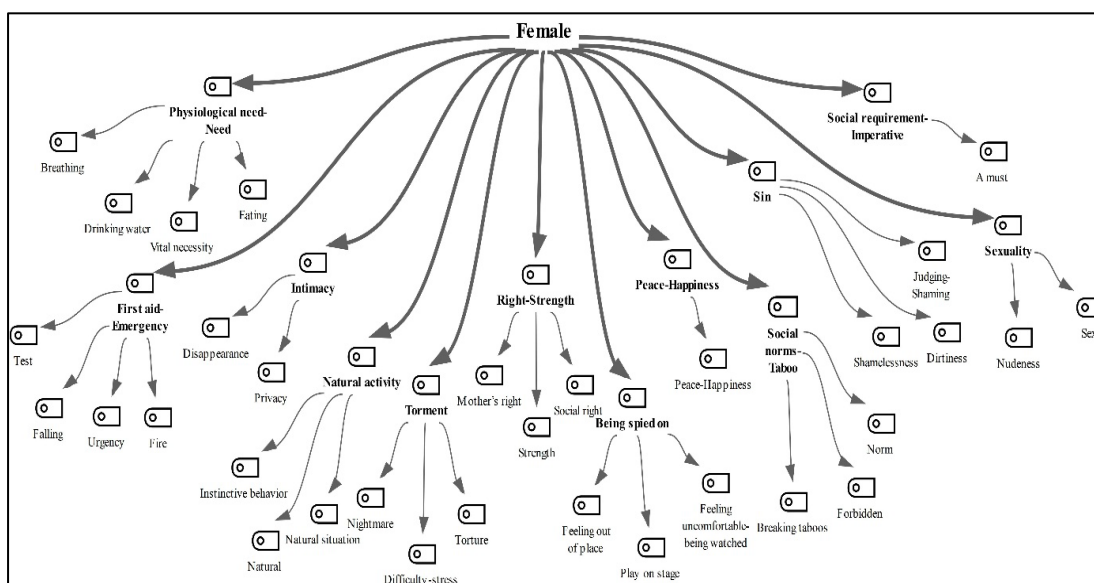


Figure 1. Distribution of themes and subthemes for breastfeeding in public by female (n=111)

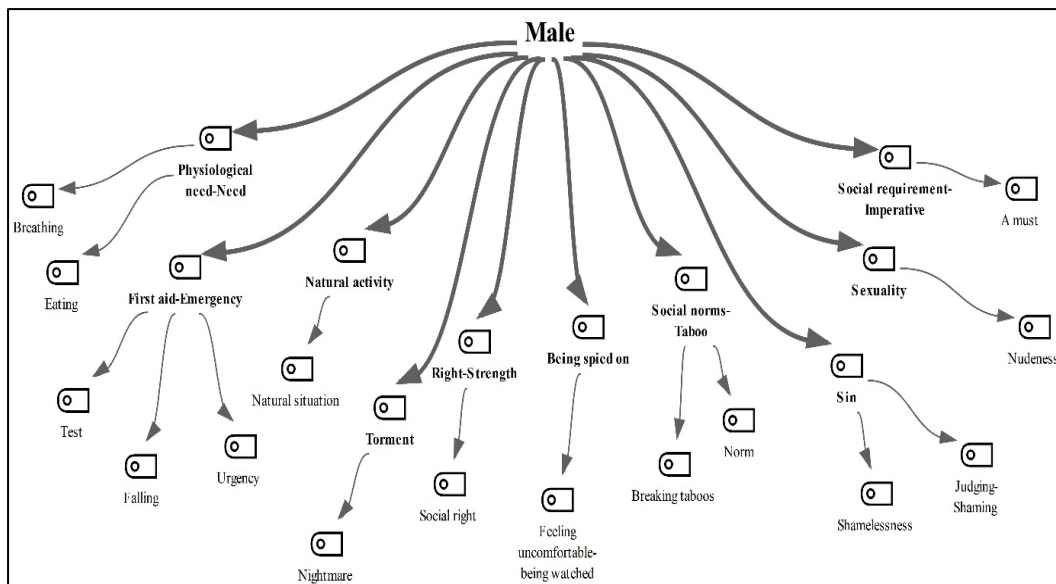


Figure 2. Distribution of themes and subthemes for breastfeeding in public by male (n=31)

## Metaphors of peace-happiness

The participants explained the “peace-happiness” theme with the relief metaphor. These metaphors emphasized how participants perceived BFP as a source of relief and happiness.

*“Breastfeeding in public is like a breeze because it refreshes.” (Woman, 35 years old, married, has a child, P6)*

*“Breastfeeding in public is like a rainbow because a beautiful scene appears when the sun rises after a rain.” (Woman, 44 years old, married, has a child, P113)*

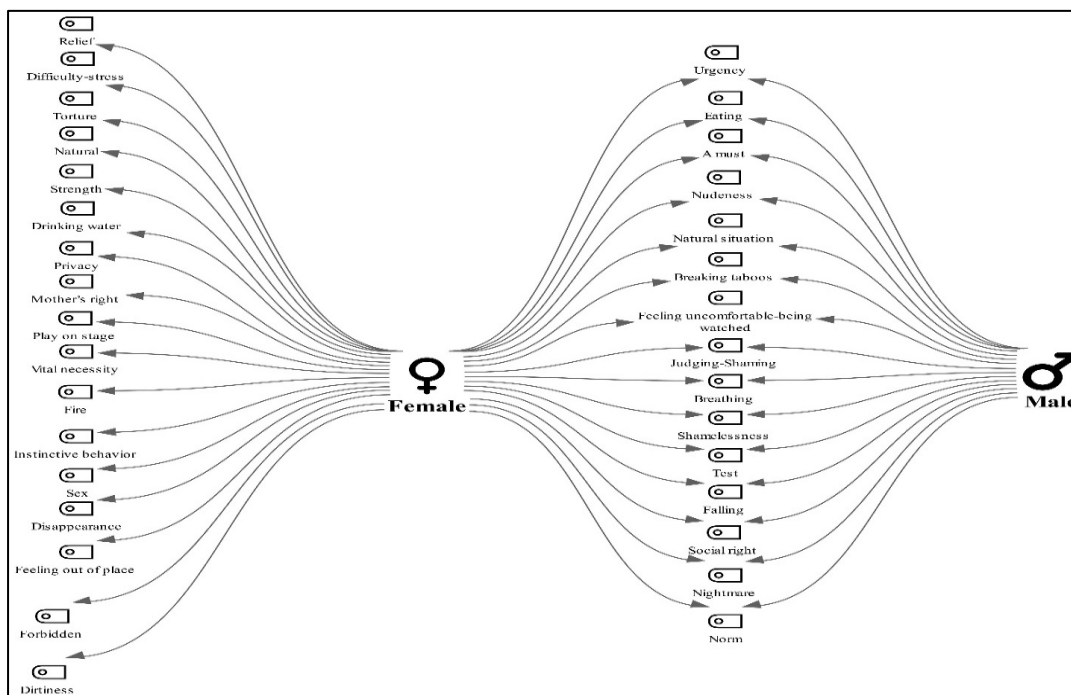


Figure 3. Distribution of subthemes for breastfeeding in public by genders (n=142)

## **An ambivalent category on breastfeeding in public: metaphors of social norms-taboo**

The participants explained this theme with metaphors of (i) Breaking taboos, (ii) Norm, and (iii) Forbidden. These metaphors emphasized how participants perceive breastfeeding in public as an act that challenges social taboos and norms. While some participants reproduced dominant cultural discourses that rendered BFP inappropriate, others invoked metaphors that directly challenged such discourses. For instance, metaphors portraying BFP as an act of defiance reflected participants' conscious efforts to confront restrictive social norms. This theme sheds light on the BFP's controversial status within contemporary public life. Breastfeeding challenges the masculine hegemony of the public sphere by making care, a traditionally private act, visible.

*"Breastfeeding in public is like drinking water without fasting in a Muslim country during the month of Ramadan because it requires hiding." (Woman, 32 years old, married, has a child, P28)*

*"Breastfeeding in public is like 'underground literature' shouting as 'I am free' to break the chains of language because it does not or cannot gain acceptance as long as invisible social walls and unbreakable taboos of society exist while it manifests the facts of life and existence plainly without hesitation." (Man, 29 years old, single, P93)*

## **Gender-based categorization of metaphors on breastfeeding in public**

The categorization of metaphors by gender is crucial for analyzing the influence of gender on these perceptions, offering a deeper understanding of how gender roles shape the attitudes towards public breastfeeding. Themes and subthemes categorized by gender are included in Figure 1-3. While the men and women in our study had common views, the women produced metaphors at very diverse levels. In our study, the themes and sub-themes related to the metaphors of breastfeeding in the social field were more common in women than in men. The women had various opinions that supported and restricted BFP. Buturović et al. (2017) emphasized in his study that mothers who supported breastfeeding did not support BFP, and the same trend was found in the general population. In Mulready-Ward and Hackett's (2014) population-based study, it was found that one out of every two respondents was not supportive of public breastfeeding. Additionally, this study reports that lack of support for breastfeeding in public is higher among individuals aged 65 and older, Asians, and those with a high school education or less. An inverse relationship between education level and lack of support is emphasized, highlighting that compared to university graduates, individuals with a high school education or less and those with some college education show lower support for breastfeeding in public. However, there were no significant differences by gender variable (Mulready-Ward ve Hackett, 2014, p. 195). Zhao et al. (2017) emphasized that 47% of Chinese adults felt ashamed of seeing women who breastfeed in public. Boyer (2018) stated that BFP is uncommon in even affluent neighborhoods in the United Kingdom. Contrary to breastfeeding attitudes and knowledge of women who were breastfeeding, perceived social norms had a stronger influence on especially BFP (Scott et al., 2003, p. 276). Thus, the work of making BFP easier is ultimately a matter of cultural change (Boyer, 2012, p. 559). Therefore, facilitating BFP is not solely a personal or maternal responsibility, but a collective cultural task that requires broader societal engagement and transformation.

## Strength and limitations of the study

This study is among the few conducted in Turkey that explores adult perspectives on BFP. The concept of BFP was explained through metaphors due to the fact that awareness of Turkish society on this matter has increased in recent years. However, the study has several limitations. The most significant limitation was that data collection took place during the COVID-19 pandemic and relied on participants who use social media. One of the limitations of this study is that the metaphorical pattern was confined to a fixed structure consisting of only two sentences “*Breastfeeding in public is like ..... because .....* ”). This restriction may have limited participants' ability to express more nuanced and multidimensional perspectives on the concept of BFP. Future research is recommended to adopt more flexible metaphor formats to allow for deeper and more comprehensive expressions. Additionally, male participants and individuals with lower educational levels were underrepresented in the sample. Therefore, the findings cannot be generalized to the broader adult population.

## Conclusion

This study revealed that adults conceptualize BFP in a multi-dimensional manner through various metaphors, reflecting both supportive and restrictive perceptions. While some participants viewed BFP as a natural and fundamental aspect of maternal and child well-being, others associated it with discomfort, shame, or moral concern—demonstrating how sociocultural norms and gendered expectations continue to shape public attitudes. Notably, the idea that BFP is intrinsic to the act of breastfeeding and should be normalized in line with the advancement of public rights was more prevalent among female participants.

Beyond individual attitudes, the findings point to deeper structural issues related to gendered space and social inequality. The challenges women face in breastfeeding publicly are intertwined with broader questions of gender and the visibility of caregiving in public spaces. The inability of mothers to comfortably breastfeed in public highlights how urban environments remain shaped by male-dominated norms, which often disregard the caregiving needs of women and children. While breastfeeding has traditionally been confined to the private sphere, its presence in public space disrupts normative expectations regarding women's bodies and roles. In this context, BFP becomes a symbolic act—where control over women's bodies and behaviors is negotiated and, at times, resisted. The marginalization of BFP reveals the persistent division between public and private life, and the ongoing influence of patriarchal structures that confine reproductive roles to domestic settings. Prior experience and knowledge about breastfeeding greatly influence people's perceptions and attitudes toward it; therefore, comprehensive breastfeeding education is crucial. Such education should not merely reflect the traditional approach that focuses solely on promoting breastfeeding, but must also be accompanied by policies that actively support and normalize BFP, with the aim of empowering women. Addressing the challenges surrounding BFP is not only a matter of maternal and child health but also one of gender equality and social justice. Creating inclusive public spaces that support caregiving and empower women requires a rethinking of gender roles and a commitment to structural change.

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## Genişletilmiş Özet

### Amaç

Emzirme temel bir insan hakkıdır. Her çocuk emzirme süresince uluslararası örgütlerce önerilen bu haktan yararlanmalıdır. Emzirmenin sağladığı faydalar nedeniyle; desteklenmesi, sürdürülmesi ve kolaylaştırılması için gerekli ortamın sağlanması önemlidir. Bununla birlikte Dünyada ve Türkiye'de emzirme oranları hedeflenen

düzeyde değildir. Düşük emzirme oranlarında, özellikle sosyal alanda emzirme başta olmak üzere zaman ve mekâna göre kısıtlamalar hayati bir rol oynamaktadır. Günümüzde sosyal alanda emzirme popüler hale gelirken, anneler bu eylemi gerçekleştirmekten çekinebilmekte veya sosyal yaşam sınırlanabilmektedir. Sosyal alanda emzirme fikrinden rahatsızlık duydukları için bazı kadınlar emzirmeye başlamamayı ve emzirmeyi bırakmayı tercih edebilmektedir. Bununla birlikte bazı kadınlarda emzirme süresini kısa tutabilmekte veya alternatif çözümler aramaktadır. Ülkemizde emzirmenin farklı bir boyutu olan sosyal alanda emzirme ile ilgili literatür bilgisi sınırlıdır. Bu çalışmada, sosyal alanda emzirmeye yönelik yetişkin bireylerin algılarının metaforlar aracılığı ile belirlenmesi amaçlanmıştır.

## Tasarım ve yöntem

Çalışma, nitel araştırma yöntemlerinden fenomenolojik desen kullanılarak tasarlanmıştır. Fenomenolojik desen, farkında olduğumuz ancak derinlemesine bir görüşe sahip olmadığımız olgulara odaklanmaktadır. Bu desen, bireylere tamamen yabancı olmayan olguların derinlemesine keşfetmedilmesini sağlamaktadır. Metaforlar, betimleyici doğası aracılığı ile bir kavram, olgu veya durumun farklı bakış açılarını yansıtarak zengin içerikler sunabilmektedir. Metafor analizi bilimsel araştırmalarda, özellikle yeni veya karmaşık konularda kullanılmaktadır. Bu nedenle çalışmamızda metaphor analizi Türk toplumunda kamusal alanda emzirmeye yönelik algıları belirlemek için kullanılmıştır. Bu çalışmanın örneklemini çeşitli sosyal medya platformlarını (Facebook, Instagram, WhatsApp vb.) kullanan yetişkinler oluşturmuştur. Çalışma verileri Nisan 2021 ile Haziran 2021 tarihleri arasında toplanmıştır. Çalışmaya okuryazar ve 18 yaş üstü yetişkinler dahil edilmiştir. Örneklem sayısı veri doygunluğuna göre belirlenmiştir. Geniş bir metafor yelpazesine ulaşılması hedeflenmiş olup çevrim içi araştırma linki bağlantısı 190 katılımcıya iletilmiştir. Katılımcılara çalışmanın önemi ve amacı hakkında bilgi verilmiştir. Katılımcılardan çalışmaya başlamadan önce “çalışmaya katılmayı kabul ediyorum.” kutusunu işaretlemeleri istenmiştir. Veriler, sosyodemografik özellikler ve emzirme hakkında bilgileri içeren, çevrim içi veri toplama formu kullanılarak toplanmıştır. Katılımcılardan “*Sosyal alanda emzirme ..... gibidir, çünkü .....*” cümlesini tamamlamaları istenmiştir. Bu katılımcılardan 142’si (%74,7) metafor cümlesini tamamlamıştır.

Çalışma sonuçlarında katılımcıların tanımlayıcı özelliklerinin analizi IBM SPSS v. 22.0 kullanılarak gerçekleştirilmiştir. Katılımcıların sosyo-demografik özellikleri için “sayı (yüzde)” ve “ortalama (standart sapma)” kullanılmıştır. Nitel veriler içerik analizine göre kategorize edilirken, MAXQDA yazılımı v. 20 kullanılmıştır. Elde edilen veriler nitel araştırma örüntüsüne uygun olarak içerik analizi yöntemi kullanılarak analiz edilmiştir. Metaforların değerlendirilmesi üç aşamada gerçekleştirilmiştir. Birinci aşamada sosyal alanda emzirmeye yönelik metaforlar belirlenmiş olup ilgili metaforlar Microsoft Office Excel 2016’ya aktarılmıştır. Eksik veya metafor içermeyen cevaplar çıkarılarak veriler MAXQDA yazılımına aktarılmıştır. İkinci aşamada metaforlar gruplandırılmıştır. Her metaforik ifade, metaforun kaynağı ve konusu açısından incelenerek kodlanmıştır. Temalar ve alt temalar gruplandırılmıştır. Temalar ve alt temalar cinsiyete göre tek vaka ve iki vaka modeli kullanılarak değerlendirilmiştir. Üçüncü aşamada geçerlilik ve güvenilirlik için öncelikle iki araştırmacı verileri ayrı ayrı kodlamıştır. Kodlama ve analizde yer almayan diğer bir araştırmacı oluşturulan temaları ve alt temaları gözden geçirmiştir. Daha sonra metaforlar arasındaki benzerlik ve farklılıklar araştırmacılar tarafından incelenmiş ve son hali verilmiştir. Miles ve Huberman (1994) tarafından geliştirilen formül araştırmanın güvenilirliği için kullanılmıştır. Bu çalışmanın güvenilirliği %93 olarak hesaplanmıştır.



## Bulgular

Katılımcıların yaş ortalaması  $34,78 \pm 9,68$ 'dir. Katılımcıların %78,2'si kadın, %69,0'u çalışmakta, %71,8'i evli, %88,7'si ise lisans ve üzeri düzeyde eğitime sahiptir. Katılımcıların %78,2'si şehir/metropolde yaşamaktadır. Katılımcıların %67,6'sının en az bir çocuğu vardır. Kadınların %78,4'ünün gebelik ve doğum deneyimi bulunmaktadır. Katılımcıların sosyal alanda emzirmeye ilişkin metaforları 12 tema altında toplanmıştır. Katılımcılar metaforlarında halka açık yerde emzirmeyi "ilkyardım-acil durum", "fizyolojik ihtiyaç", "doğal bir eylem", "eziyet", "hak-güçlülük", "günah", "cinsellik", "toplumsal gereklilik-zorunluluk", "gözetlenme", "toplumsal kural-tabu", "huzur-mutluluk" ve "mahremiyet" ile ilişkilendirmiştir. "İlkyardım-acil durum" temasını katılımcılar (n= 30); (i) Aciliyet, (ii) Sınav, (iii) Düşmek, ve (iv) Yangın metaforları ile açıklamıştır. "Fizyolojik ihtiyaç" teması (n= 21); (i) Yemek yemek, (ii) Nefes almak, (iii) Su içmek ve (v) Yaşamsal ihtiyaç metaforları ile açıklanmıştır. "Doğal bir eylem" temasını katılımcılar (n= 13); (i) Olağan durum, (ii) Doğallık ve (iii) İçgüdüsel davranış metaforları ile ifade etmiştir. Katılımcılar "eziyet" temasında (n= 12) sosyal alanda emzirme eyleminde yaşanabilecek zorluklara odaklanmış olup bu tema (i) Zorluk-stres, (ii) Zulüm ve (iii) Kâbus metaforları ile açıklanmıştır. "Hak-güçlülük" temasında katılımcıların metaforları (n= 11); (i) Güç, (ii) Anne hakkı ve (iii) Sosyal hak olarak kategorize edilmiştir. "Günah" temasını katılımcılar (n= 10); (i) Yargılama-ayıplama, (ii) Edepsizlik ve (iii) Kirlilik metaforları ile açıklamıştır. "Cinsellik" temasını katılımcılar (n= 10); çıplaklık ve seks metaforları ile ifade etmiştir. "Toplumsal gereklilik-zorunluluk" teması katılımcılar tarafından (n= 10) sosyal alanda emzirmenin toplum tarafından kabul görmesindeki zorunluluklara odaklanmıştır. "Gözetlenme" metaforu (n= 9); (i) Rahatsız olma-izlenme, (ii) Sahnede oyun ve (iii) Yabancı hissetme metaforlarıyla açıklanmıştır. "Toplumsal kural-tabu" temasını katılımcılar (n= 9); (i) Tabu yıkmak, (ii) Kural ve (iii) Yasak metaforları ile açıklamıştır. "Huzur-mutluluk" teması (n= 6) katılımcılar tarafından rahatlama metaforu ile açıklanmıştır. "Mahremiyet" teması (n= 4) ise katılımcılar tarafından gizlilik ve gözden kaybolma metaforları ile açıklanmıştır.

## Sınırlılıklar

Çalışmanın birkaç sınırlılığı bulunmaktadır. En önemli sınırlılık, çalışmanın COVID-19 pandemisinde enfeksiyonun bulaşma riski açısından sosyal medya kullanan bireylerle yürütülmesidir. Aynı zamanda çalışmada metaforik desenin iki cümle ile oluşturulması diğer bir sınırlılıktır. Bu sınırlılık kamusal alanda emzirme kavramının çok boyutlu anlamlar üretmesini kısıtlamış olabilir. Diğer sınırlılıklar arasında; erkek katılımcıların ve düşük eğitim düzeyine sahip katılımcıların çalışmaya sınırlı düzeyde katılmasıdır. Bu nedenle, çalışma sonuçlarını sosyo-kültürel açıdan tüm yetişkinlere genellemek mümkün değildir.

## Öneriler (teorik, uygulama ve sosyal)

Sosyal alanda emzirme çalışmamızda yetişkinler tarafından çok boyutlu bir şekilde ele alınmıştır. Yetişkinlerin sosyal alanda emzirmeye ilişkin geliştirdiği metaforlar çeşitlilik göstermektedir. Metaforlarda, sosyal alanda emzirmeyi destekleyen kavramlarla birlikte, sınırlayıcı ve karşıt görüşler de dikkat çekmektedir. Bu görüşleri sosyokültürel faktörlerin şekillendirdiği düşünülmektedir. Ek olarak, çalışmamızda erkek katılımcıların ve düşük eğitim düzeyine sahip katılımcıların katılımı sınırlı düzeyde olmuştur. Bu grupların planlanan çalışmalarda katılımının artırılması önerilmektedir.

## Özgün değer

Bu çalışma, yetişkinlerin sosyal alanda emzirme hakkındaki görüşlerini incelemek için ülkemizde yapılmış sınırlı çalışmalardan biridir. Emzirmenin sürdürülmesi uluslararası ve ulusal politikalarla önerilmesine ve desteklenmesine rağmen özellikle zamana ve mekâna bağlı kısıtlamalar emzirmenin kesintisiz sürdürülmesinde dikkat çekmektedir. Çalışmamızda da sosyal alanda emzirme davranışına yönelik yetişkinlerin algılarının destekleyici olduğu kadar, kısıtlayıcı ve sınırlayıcı olduğu da ön plana çıkmaktadır. Sosyal alanda emzirme davranışı açısından metaforik ifadeler sosyal yaşam, kültürel yapı, inançlar, sosyal normlar ve haklar üzerine odaklanmaktadır. Sosyal alanda emzirmenin doğasında olduğu ve kamusal hakların iyileştirilmesine yönelik görüşleri kadın katılımcılar arasında daha yaygın olduğu belirlenmiştir. Bununla birlikte kadınlar arasında da destekleyici ve kısıtlayıcı görüşler vardır. Sosyal alanda emzirmeyi kısıtlayıcı ve baskılayıcı görüşler sosyal normlar, kültürel yapı, inançlar ve ataerkil bir toplumsal yapının özellikleriyle tutarlıdır. Bu faktörler sosyal alanda emzirmeyi sınırlayıcı tabulara neden olabilir. Bu nedenle emzirme politikalarına ve emzirme farkındalığına yönelik gebelere/annelere kamu ve özel kurumlarca veya emzirme danışmanları tarafından verilen emzirme eğitimleri kamusal alanda emzirmeyi destekleyen politikalar açısından yapılandırılmalıdır.