MEDDOCS Open Access Publisher

ISSN 2641-6522

Annals of Obstetrics and Gynecology

Open Access | Mini-Review

Breastfeeding and A History of Childhood Sexual Abuse

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Received: Oct 07, 2026

Accepted: Oct 16, 2026

Published Online: Oct 23, 2026

Journal: Annals of Obstetrics and Gynecology

Publisher: MedDocs Publishers LLC

Online edition: http://meddocsonline.org/

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Breastfeeding is promoted by all healthcare professionals and has already been shown to benefit both mother and baby [1]. However, some women are reluctant to breastfeed. In this opinion piece, we examine the possibility of the mother having a history of trauma.

Unfortunately, sexual abuse suffered during childhood is common and affects almost 13 percent of the world's population [2]. Such abuse can have long-term consequences [3], particularly in terms of reproductive health [4,5].

Breastfeeding amongst survivors of child sexual abuse can be disrupted by several factors: post-traumatic stress disorder, cognitive distortions, emotional distress, an impaired sense of self, avoidance, interpersonal difficulties, and health problems [6].

Furthermore, when comparing women with and without a history of sexual abuse, it is evident that those who have survived abuse statistically experience more complications whilst breastfeeding: more cases of mastitis and more pain. In a 2017 study, 20 per cent of women reported that breastfeeding was a trigger for memories of CSA. Furthermore, 58 per cent of women who had experienced CSA reported dissociation whilst breastfeeding [7].

Still on the subject of violence, it is worth noting that, statistically, victims of childhood sexual abuse are at greater risk of experiencing domestic violence [8]. Furthermore, women who are victims of domestic violence are more than 50 per cent as likely to stop breastfeeding prematurely, before their baby is six months old [9,10].

If we are to provide better support for women who have been victims of abuse and to support them during the postnatal period and whilst breastfeeding, we need to talk to them about it, identify them and meet their specific needs [11].

References

1. Breastfeeding challenges: ACOG Committee Opinion, Number 820. Obstet Gynecol. 2021; 137: e42-e53.
2. Stoltenborgh M, Van IJzendoorn MH, Euser EM, Bakermans-Kranenburg MJ. A global perspective on child sexual abuse: meta-analysis of prevalence around the world. Child Maltreat. 2011; 16: 79-101.
3. Hailes HP, Yu R, Danese A, Fazel S. Long-term outcomes of childhood sexual abuse: an umbrella review. Lancet Psychiatry. 2019; 6: 830-839.
4. Leeners B, Richter-Appelt H, Imthurn B, Rath W. Influence of childhood sexual abuse on pregnancy, delivery, and the early postpartum period in adult women. J Psychosom Res. 2006; 61: 139-151.

Cite this article: Thomas P, William U. Breastfeeding and A History of Childhood Sexual Abuse. Ann Obstet Gynecol. 2026; 9(2): 1075.

5. Jina R, Thomas LS. Health consequences of sexual violence against women. Best Pract Res Clin Obstet Gynaecol. 2013; 27: 15-26.

6. Kendall-Tackett K. Breastfeeding and the sexual abuse survivor. J Hum Lact. 1998; 14: 125-130.

7. Elfgen C, Hagenbuch N, Görres G, Block E, Leeners B. Breastfeeding in women having experienced childhood sexual abuse. J Hum Lact. 2017; 33: 119-127.

8. Li S, Zhao F, Yu G. Childhood maltreatment and intimate partner violence victimization: a meta-analysis. Child Abuse Negl. 2019; 88: 212-224.

9. Hasselmann MH, Lindsay AC, Surkan PJ, Vianna GVDB, Werneck GL. Intimate partner violence and early interruption of exclusive breastfeeding in the first three months of life. Cad Saude Publica. 2016; 32: e00017816.

10. Kjerulff Madsen F, Holm-Larsen CE, Wu C, Rogathi J, Manongi R, Mushi D, et al. Intimate partner violence and subsequent premature termination of exclusive breastfeeding: a cohort study. PLoS One. 2019; 14: e0217479.

11. Sobel L, O'Rourke-Suchoff D, Holland E, Remis K, Resnick K, Perkins R, et al. Pregnancy and childbirth after sexual trauma: patient perspectives and care preferences. Obstet Gynecol. 2018; 132: 1461-1468.