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THE LACTATING BODY ON DISPLAY: COLLECTIVE RHETORIC AND RESISTANT DISCOURSE IN BREASTFEEDING ACTIVISM

by

AMY SAXON

Under the Direction of George Pullman

ABSTRACT

This thesis analyzes public "nurse-ins" and breastfeeding activism of the past decade, examining public breastfeeding demonstrations as an example of collective rhetoric in which the individual is empowered in its relation to the masses. The author discusses the potential of collective rhetoric to reintroduce feminist activism at a time dominated by postfeminist discourse. Staged nurse-ins force the public to confront realities of the maternal body; however, the self-proclaimed "lactivists" seldom discuss the inseparable sexuality of the breast and the underlying narrative of "natural" and "good" motherhood. Addressing Foucauldian discursive formations, the author acknowledges that even though the resistant discourse cannot exist outside of the dominant discourses that continue to act upon it, collective demonstrations nevertheless hold the power to disrupt public perception of the maternal body.

INDEX WORDS: Breastfeeding, Collective rhetoric, Performance rhetoric, Feminist theory, Maternal body

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by

AMY SAXON

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1 Collective Rhetoric

1.1 Introduction

In a discipline so firmly rooted in patriarchal tradition, feminist rhetorical critics have attempted to carve out space for the woman rhetor by challenging traditional readings of masculine texts or by "recovering" previously overlooked female rhetors; each method attempts to redefine the terms of "rhetoric" through the feminine experience (including a re-evaluation of conventional standards of "normal" and "quality" rhetoric). Mirroring the problems that have confronted feminism as a social movement, there are many challenges concerning the most authoritative/legitimate way to allow the female experience to be heard alongside centuries of masculine speech. Does the feminist critic attempt to affirm the rightful role of the woman rhetor from within the dominant discourse, or does she reject entirely the framework which denies or devalues the difference of the feminine experience and voice?

Karlyn Kohrs Campbell was among the first to suggest that an expansion of the parameters of "rhetoric" (namely the consideration of communicative acts other than speech as rhetorical) would open consideration of female work (written, oral, or otherwise) previously ignored. Though criticized for proposing a sort of female tokenism, for Campbell, the rhetoric of women's liberation involved a revision of the customary definitions of rhetorical process. It was no longer necessary for a single speaker to persuade an audience; indeed, audience coercion or acceptance might not occur to any great extent. Campbell also rejected the audience passivity inherent in the traditional model and favored instead "consciousness raising" through a communal sisterhood in which groups of women convene with no leading rhetor. Though the audience might not be persuaded in the traditional sense, the listeners are nevertheless affected

by the experience. Campbell explains: “All participate and are considered expert. The goal is to make the personal political: to create awareness (through shared experiences) that what were thought to be personal deficiencies and individual problems are common and shared, a result of their position as women” (79). Campbell identifies in this model heightened emphasis on the brutal honesty of personal experience. Campbell stated that “women have little, if any, publicly shared experience” (79). However, in recent years there have been numerous examples of women who have collectively taken a very personal female experience into a public space in order to make a political statement about the cultural stigmas that govern women’s bodies. Communal public breastfeeding activism is one visual realization of Campbell’s original feminist charge.

The favored mode of intellectual inquiry commonly privileges an internalized process, isolated and removed from the body. This study, acknowledging a need to expand the parameters of what is considered feminist rhetoric, follows the emergence of “lactivism” as a social movement and evaluates how it has influenced the perception of the maternal body. Examining public breastfeeding as an exclusively female rhetorical act allows us to consider the current state of feminism and feminist rhetoric (ideologically and publicly). This particular display is unique in that it presents an exclusively female collective narrative and also because its rhetorical efficacy lies in the body rather than in speech, the body displayed as a statement in opposition of erasure. In fact, in media accounts of these events, more space is devoted to consideration of the women’s presence (the location/business they have targeted, the specific space they occupy within this location, and the size of their group) than is devoted to relating the actual words spoken by group leaders. Though this might initially sound as though the rhetor’s voice is

silenced or that the message has given way to spectacle over substance, I believe the display effectively disrupts the cultural inclination to hide or cover the maternal body. We are able to analyze public breastfeeding displays both for the narratives of the protestors, the public audience, and the media, and also for the visual rhetoric at work. This analysis takes into account the efficacy of public breastfeeding as a collective rhetorical act with the potential to revitalize an activist mindset from within a postfeminist culture, but also considers the simultaneous negative possibilities of this display by examining the multiple discourses at work around and within the lactivist narrative (specifically the medicalization of motherhood and the rhetoric of "good" motherhood). I am critical of the fact that the "breast is best" narrative works in many ways to uphold an artificial naturalism and to draw the boundaries of appropriate motherhood; it is a narrative that frequently conflates the disciplined maternal body with morality. Nevertheless, I am hopeful that (despite the occasional exaltation of motherhood as the culmination of correct womanhood, characteristic in postfeminist culture) there remains within public breastfeeding potential for the body to resist discipline, and within collective rhetoric, the potential to reenergize feminist activism, for despite the fact that breastfeeding is a cultural symbol of good mothering, it is absolutely forbidden from entering the public sphere. Breastfeeding as a visual display confounds demarcations between the sexualized body and the nurturing body; and the effect is only more noticeable when it is a gathering of many bodies drawing national media attention.

Critics began examining breastfeeding and public breastfeeding in the mid- to late 1990s. Pam Carter (1995) in the U.K. and Linda Blum (1999) in the U.S. were the first to question the infallibility of breastfeeding, revealing breastfeeding as yet another tool in race and class

division, and suggesting that breastfeeding was perhaps a cultural marker shrouded in medical and moral language. Glenda Wall (2001) examined the breastfeeding literature from hospitals and La Leche League given to "educate" new mothers and found language that emphasized nature and a moral imperative. More recently, Joan B. Wolf (2011) questioned the science behind the "breast is best" approach, simultaneously criticizing the cultural tendency to avoid risk at all costs and the all-encompassing medical authority that assists risk-avoidance. Cindy Stearns (1999) coined the term "good maternal body" to articulate the measures that govern appropriate motherhood. These critics examine stigmas toward breastfeeding and the impossible cultural expectations placed on mothers. I would like to expound upon existing research by considering collective public breastfeeding as something distinct from breastfeeding generally, as an act that magnifies the inseparability of breasts and sexuality, an act that offers a telling snapshot of the current state of feminism as a social movement, a rhetorical display (exclusively feminine, both communal and personally embodied) that, by demanding acknowledgement, invites audience response.

1.2 Collective Rhetoric

In the early- to mid-'00s lactation activists, or lactivists, staged "nurse-ins" around the country from Applebee's restaurants to ABC's network headquarters in response to censorship of breastfeeding in certain public institutions. Growing protest from mothers and breastfeeding advocacy groups over common requests to "cover up" the breast or adjourn to the restroom, etc., prompted the public nurse-ins (Bartlett; Carpenter). These performances raised questions of women's rights, the sexualized female body in public, and "natural" or "good" motherhood, questions which draw attention to conflicting social messages concerning appropriate feminine

behavior. Alison Bartlett argues that a primary reason public breastfeeding is considered scandalous is due to the shifting parameters of the public versus private sphere in postmodernity. Staged nurse-ins are designed to protest public policy and cultural perception, but they also offer an example of feminist collective rhetoric. The persuasive efficacy of such displays of collective performance as a productive process has been shown by critics such as Gerard Hauser and Jerry Blitefield, who suggest that collective performance empowers at the individual level by promoting identification with the perceived power of the mass. Judith Butler has shown that "the feminist impulse [...] has often emerged in the recognition that my pain or my silence or my anger or my perception is finally not mine alone, and that it delimits me in a shared cultural situation which in turn enables and empowers me in certain unanticipated ways" (1990, 405) The performance of breastfeeding is not only a visual display, but also exemplifies Butler's consideration of the "performance" of gender, a series of acts one "does" that construct gender. Those who do not perform gender correctly, or who act out gender without discretion are punished. What more blatant expression of gender can there be than breastfeeding—a simultaneous intermingling of biological and cultural determinants? As Bartlett explains, considering breastfeeding as a performance rejects the naturalistic argument and allows women agency. Exposing the body that is at once both sexual and maternal (as I discuss in chapter 2, the two facets of the breast are inseparable) is a disruptive rejection of patriarchal conventions.

Collective rhetoric, therefore, strengthens at the individual level, but also anticipates audience awareness and response. A rhetoric that takes place from the locus of the body works on the symbolic level, without the need of an audience, but with the expectation of audience. Kevin Michael DeLuca has shown the rising use of body rhetoric in modern protests; many

protest groups use the body to attract media focus and draw attention to their cause. DeLuca argues that, although there are no pre-discursive bodies, bodies and images of bodies can carry an argument, and in fact are arguments. An unsettling notion for a discipline that focuses on traditional, rational language and speech, DeLuca's argument allows us to consider the effect a visual image has on an audience, and the influence the vulnerable body carries when exposed and on display. Expanding rhetorical study beyond the traditional framework also allows the entry of a feminist analysis. Though these protestors have little control over how the media will choose to frame their story, they do control how their bodies are seen: "Their bodies, then, become not merely flags to attract attention for the argument but the site and substance of the argument itself" (DeLuca 10). The body contains discursive capabilities; and visual consumption of the body (particularly the abject body as shown by Harold and DeLuca) triggers reaction in the observer.

We can see the evolution of expressive visual displays of rhetoric through the ancient development of demonstrative/epideictic oratory. Showing that Cicero did more than merge wisdom and eloquence, but also focused on uniting rhetoric with action, McKeon cites demonstration and display as the natural evolution of Cicero's advances: "Demonstrative rhetoric is designed to be productive of action as well as of words, that is, to arouse others to action and to accept a common opinion, to form groups that share that opinion, and to initiate participation in action based on that opinion" (20). In chapter four of *Institutes of Oratory*, Quintilian suggests that in all forms of oratory, part is devoted to the actual subject matter and part is devoted to display. Though Quintilian did stress pleasing one's audience as critical to effective oratory (an impossibility in many forms of visual rhetoric), he urged the rhetor to embody the argument in

his person. Hauser explains that the imitation of the rhetor is generated through a certain admiration or respect for the rhetor's actions rather than merely the force of his words: "Depictions of deeds extolled and condemned move us beyond abstractions. They teach us how to live our lives by bringing the scene before our mind's eye; they make us witnesses in our imaginations to acts that require our affirmation or condemnation for them to live in collective memory as concrete realities." (233). It is in the witnessed performance of deeds that public ideology is formed. The goal of rhetoric is still persuasion, but it is pragmatic, ideological persuasion. Hauser suggests that in dissident rhetoric, in order for the performance to be effective, the rhetorical act must draw attention to a disparity "between official authority and moral conviction" (235). In his study of the resistant prisoner's body, Hauser suggests the body can be a "contested rhetorical locus" that becomes "a public place: a contested place, a political place" (237, 241). When rhetorical performance involves the body on display, this identity-formation is also very personal.

Karlyn Kohrs Campbell suggests that consciousness-raising is one form of collective rhetoric in which multiple participants create the text and blur the lines between rhetor and audience. Herbert W. Simons defined collective rhetoric as "any and all persuasive messages issued by or in the name of an organization, organizational unit, or composite of organizations which work together to achieve common collectives" (182). However, collective rhetoric is about more than an explanation or description of collective identity; it is both a process of individual identity formation and an influence in the creation of new ideologies (Dubriwny; Hauser). In Dubriwny's expansion of Campbell's consciousness-raising, she emphasizes the role of personal experiences in shaping the collective voice (397). Part of the rhetorical force of the

body is its appeal at the personal level. When the rhetorical act exists on a physical level, specifically the intimate act of nursing, the personal nature of the performance is heightened, for the nursing mother exhibits a bodily experience incomprehensible to the dominant patriarchal culture. Furthermore, the fact that this is not an isolated display, but a collective force, confronts the authority of a dominant discourse that would relegate the wet realities of the female body to invisibility; an authoritative and disciplinary discourse that works to erase, silence, or ignore lactation cannot ignore this public display. The confrontative act empowers the individual (as I will examine in the activists' language in section 2.1). Blitefield suggests that "whenever some activist group rallies its numbers to meet in a public square, the demonstration itself manifests collective grievance in behalf of some cause and the values it purportedly serves [...so that] collective power in service to a cause and its corollary values is manifested, 'proven,' or 'demonstrated'" (255). The number of participants generates notice, which in turn engages the audience and activates dialogue. In other words, the visibility of the mass collective serves to demonstrate proof of the potential power and relevance of their position. McKeon suggests that demonstrations can hold a mirror to contemporary injustices, and can also serve "as methods of discovery, of bringing to attention neglected data"; but demonstrations are ultimately intended to change ideologies and inspire action based on this change (20). The visual affect of seeing groups unified in a cause is a re-evaluation of dominant ideology; in this case, it is a re-evaluation of subconscious censure of the female body. An organized public display signifies that the activists have gained power and the "defenders of the status quo" are losing power: "The action [of demonstrating/protesting] is proof of the group's capacity to challenge and disrupt established power relationships" (Prelli 21; Blitefield).

1.3 Motherhood in Postfeminist Discourse

The act of breastfeeding in public and the American cultural response to this act are indicative of the current state of feminism. The evolution of feminism as a social movement and the challenges feminists currently face as they continue to reevaluate equality in a modern era are mirrored in the changing terms of motherhood and discourses surrounding the maternal body. The postfeminist mindset that evolved in the 1990s suggested that modern (read: young) women are, in fact, already empowered and have attained equality, that much of the battle of the second wave era has been fought, won, and is over, and it is now necessary to free oneself from the harsh stricture and condemnation of the second wave (Braithwaite, Genz and Brabon, Renegar and Sowards). Consumer capitalism appropriated the fervor of the feminist movement, and essentially branded the "new" face of women's liberation. One could now buy empowerment and find liberation in consumerism. In an attempt to merge feminism with pop culture, sexuality, and individualism, the body was now an object for corporate consumption. Postfeminist discourse also pitted generations against each other—the sex kitten versus the cougar. Ironically, acting "like women" involved the formation of the deliberately playful "Girl Power" and "Grrrl" culture; a movement that began as a deliberate attempt to reclaim and empower the word "girl" was consumed by a commodity culture. This sexier, and far less-threatening branding of femininity had mass market appeal for a younger generation and took the form of the Spice Girls, Lara Croft, Buffy the Vampire Slayer, Carrie Bradshaw, Bridget Jones and countless others who in various fashion seamlessly embodied fierce sexuality, action-hero strength, and/or girlish innocence, but whose primary distinction was often power through overt sexuality or purchasing

power.[1] Fiona Giles contends that the decreased acceptance of breastfeeding is chronologically aligned with the fetishization of increased breast size (which ironically mimics the enlarged maternal breast) and the valuation of form over the life-giving function. An emphasis on high heels, short skirts, and other stereotypical (purchasable) accoutrements of femininity are common in this "lipstick liberation." Feminine power is refashioned into buying power, a postfeminist rhetoric of "choice" which offers the impression of agency, but no social progression, and a body-identity that is largely devoid of individuality (Stasia, S. Douglas, McRobbie). The "choice" most frequently put forth is one that plays to masculine sexual fantasies and traditional depictions of domesticity and motherhood. There is a "return" to femininity, a sense that we are "finally" able to act like women again, as we've always wanted to, as God intended. We find this manifested in an emphasis on "natural" femininity and motherhood. Susan Douglas calls this trend "enlightened sexism"—mass media simultaneously portrays strong, career-driven, outspoken women and sexualized bimbos, convincing us that the glass ceiling is no more and therefore the prevalence of sexist stereotypes or sexual objectification is really no longer offensive because we know better; we are in on the joke. However, the offer of guilt-free individualism proves false as the boundaries of acceptable feminine behavior become clear.

It is difficult to balance the line between individualizing the feminine experience to the point that it is apolitical and essentializing the feminine experience to the exclusion of minorities or other cultures. Lactivism emerged at a time when American feminism was fractured between "conservative and progressive feminists, second and third wave feminists, equity and gender

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[1] Note that all of these examples are white women. See Susan Willis for an in-depth consideration of how the black woman navigates pressures to transform oneself in a commodity culture. The pressure to "buy a new you" duplicitously promises that it is possible to rise above racism (996).

feminists, and radical and liberal feminists" (Renegar and Sowards 343).[2] Postfeminist ideology reminds us that although patriarchal discourse is pervasive, a shared goal or common "oppressor" is less identifiable than it might have been for previous generations. The fracturing of feminism as a social movement and the lack of a shared purpose among feminist thinkers contribute to a culture of women who largely lack political involvement.[3] Although breastfeeding rhetoric largely plays into the idea that there is a right and wrong way to perform motherhood, collective public breastfeeding redeems aspects of the modern feminist tradition by exhibiting political activism and agency within the dominant discourse and also in opposition to it. The collective performance of public breastfeeding marks an intersection between consciousness-raising recovery of the female body as text and an interrogation of the nature of identity and agency.

Despite the plurality and fragmentation inherent in modern feminism, there is something oddly unifying about the lactivist displays because the conflict and protest are embodied: through the lactivist protests, we see women with differing feminisms enact solidarity through mass performances intended to challenge social and bodily oppression. This performance reactivates "the personal is political" formula of the second wave, and from within the postfeminist ennoblement of motherhood, challenges traditional gender roles by refusing to be hidden. From Starbucks coffee-shops to Delta Airlines counters, women have organized mass demonstrations

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[2] For clarification of the occasionally blurred distinctions between what has been called "third wave feminism" and "postfeminism," see Braithewaite and Renegar & Sowards. I use the term "postfeminism" throughout and define "postfeminism" as an ideology that emphasizes consumer culture, individualism, and decries feminism as outdated.

[3] The number of women holding public office at the state and national levels continues to rise (though there are still considerably fewer women and minorities in power). However, in the general public, the spirit of activism that was present throughout second wave feminism has weakened. Scholars such as Angela McRobbie and Susan Douglas suggest that postfeminist culture privileges interiority, personal enrichment, and buying power at the expense of community involvement; emphasis on consumption potentially distracts women from sexist issues that still exist.

that command not only re-evaluation of the female body in public but also demand legislative action.[4] The visibility of collective rhetorical performances demands community recognition and response (Hauser; Blitefield).

General responses to individual nursing mothers fluctuate between disregard, mild disapproval, and outright disgust, but the responses of the authorities at the public establishments regularly fall into three categories: nursing women are asked to cover up the breast, to retreat to the bathroom, or to leave the public venue altogether. The body on display, in this case the exposed breast, serves as a "contested rhetorical locus" (Hauser 235). From this point of struggle, individual resistance is exercised through collective defiance. Hauser suggests that the body legitimizes this dissidence because of the "incontestable" nature of the nonverbal, so that "displays of bodily resistance are often the only but also the most effective means" of challenging social values (248). In this way, resistant bodies demonstrate agency. Nurse-ins are often staged in sites of consumption—recognizable national corporations (frequently restaurants) (Bartlett). The effect of the location is twofold: the threatened withdrawal of consumer support subliminally challenges capitalistic appropriation of the body, and the connection with food challenges the association of breast-milk as a dirty bodily fluid.[5]

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[4] In 1994, only five states had legislation regarding breastfeeding. By 2005, thirty-nine states had breastfeeding legislation, and by 2011, forty-five. Many of these new laws pertained to discrimination issues related to public breastfeeding or breastfeeding in the workplace. Most public breastfeeding laws protect women from charges of "indecent exposure"; however, not all such laws inhibit institutions that might ask a breastfeeding woman to leave. Furthermore, some states stipulate that mothers should use "discretion" (Vance). It was not until 2003 that Representative Carolyn Maloney famously introduced the Breastfeeding Promotion Act which protected breastfeeding on federal property (Marchant).

[5] For example, if expressed breast-milk is accidentally fed to the wrong child in a daycare, the CDC suggests treating the issue as it would "accidental exposure to any other bodily fluids," considering "possible exposure to HIV or other infectious diseases"; despite the observation that "transmission of HIV from single breast-milk exposure has never been documented," breast-milk is still a potentially dangerous, disease-inflicting substance (CDC.gov). For additional discussion of breast-milk as a dirty bodily fluid, see Blum's *At the Breast: Ideologies of Breastfeeding and Motherhood in the Contemporary United States*.

Foucault argues that knowledge is created through discourse, suggesting that power formations and shifts in the dominant discourse are largely unrecognizable, and yet they work on an individual through subconsciously disciplining both the body and the mind. By establishing cultural standards of normativity, the dominant discourse is so internalized that eventually citizens form a process of self-discipline, or self-fashioning, that substantiates the established power. In other words, resistance does not exist outside of the structure of power relations. In the feminist context this implies that new patterns of "resistance" are still fashioned out of an androcentric discourse. Yet, Foucault's theory of governmentality suggests that this perception of resistance is really just the internalized assertion of the prevailing ideology. This would seem to imply that the sense of empowerment obtained through collective rhetoric is in fact false. While power is present everywhere and its shifts and manifestations are largely unrecognizable, resistance is still possible. For Foucault, resistance is only possible at the level of individual self-fashioning; however I would argue that if we are able to realize and acknowledge the ways in which the dominant discourse attempts to govern and discipline our resistance efforts, we will reclaim a measure of control. Power *is* recognizable. Resistance begins at the individual level, certainly, but in order to reach the day in which "feminist" truly is as antiquated a term as suffragette, we have to be aware that the game has changed. How do we embrace sexuality when the only example we have of sexuality is the objectification we find in the dominant culture? The answer does not lie in rejecting the material body altogether. It lies in reclaiming technology, reclaiming sexuality, and reclaiming the body.

2 The "Good Maternal Body"

2.1 The Nurse-in

Over the past decade, there have been numerous examples of businesses and restaurants asking nursing mothers to either cover up or leave, and consequent nurse-ins staged in protest. One mother nursing at a retail chain was told by the store manager "You can't do that here. Someone else might see it" (Marchant). Other notable examples include nurse-ins at Delta airlines, at ABC corporate headquarters (after *The View*'s Barbara Walters admitted distaste when sitting beside a nursing mother on a flight), and the famous nurse-ins at Starbucks and Applebee's just to name a few. I have chosen to highlight protests directed toward Target and Facebook, primarily because these recent examples have gained national attention (due to a growing awareness of this form of protest), and the consequent debate these protests generated has been substantial.

In an increasingly visual culture, the rhetorical influence of the images we interact with deserves additional scrutiny. We largely come to learn who we are, individually and within the larger culture, visually, constructing "self-image" through daily interaction with the literal images that surround us. Visual culture can also serve to create a collective identity, teaching us how to behave, what to value. A rhetorical analysis of the visual considers ideas that are not debated/argued verbally, but displayed visually. By its nature, the visual display assumes a degree of inarguable certainty; it exists—present before you. In more concrete terms, one does not argue about the merits of valuing the maternal body; rather the body's undeniable visual presence grants these claims legitimacy. Furthermore, Blitefield claims that public demonstrations show that "power is always for the taking" (256).

In November 2011, Texas mother Michelle Hickman reported poor treatment from Target employees when she attempted to nurse her infant in the store. Hickman reported the incident to a nursing support website and her story quickly generated a Facebook group with over 6,500 supporters. One month later, Hickman and others organized a monumental nurse-in to be held simultaneously at over one hundred Target stores nationwide. This was one of the largest simultaneous nurse-ins to date, and as such provides an excellent example of the language common to this type of protest. (It is worth noting that it is rare to see a male participating in this protest, though the act of breastfeeding is not a prerequisite to participation; and, despite the definitive essence of the nurse-in, many women will show up in solidarity only to hold a sign and not an infant. The protest itself is therefore a decidedly feminine narrative, though I will also consider the rhetoric that surrounds and responds to the protest.) The rhetoric of the "breast is best" camp is relatively unchanged from protest to protest. Women repeatedly say 1) "Would you eat your lunch in the bathroom?"; 2) "If you don't like it, don't watch"; and 3) "This is what they're there for." Each of these arguments draws from recurring narratives among breastfeeding advocates: that breastfeeding is a right and should be upheld by legislation in a democratic society; that breastfeeding promotes the *natural* role of breasts, eschewing the distorted sexual purpose; and that science has *proven* incomparable health benefits to mother and child, and to deny the ability to breastfeed in public space scorns the health and well-being of mother and child (Bartlett).

Many women report being asked by store/restaurant managers to nurse in the establishment's restroom rather than in the common area. The "would you eat your lunch in the bathroom?" argument addresses the perception that breast-milk is in some ways comparable to

bodily waste, and that breastfeeding is a dirty necessity that should be kept private. Comparing breast-milk to "lunch" challenges this notion and normalizes the process. This narrative also asks that infants be awarded a certain level of basic respect normally attributed to adults, revealing a rising cultural trend to value the needs of the child before the needs of the parent (Hausman; Wolf). One of Hickman's supporters, a lactation consultant, handed out pro-breastfeeding pamphlets at her local Target and told reporters, "Babies have to eat. This is not about modesty. This is about a basic human need, to be fed." Rarely does a mother vocalize her frustration to requests to nurse in the restroom based on her own admitted distaste for the suggestion; it is much more common for her to indicate that her infant would not enjoy the experience. Why should the infant be subjected to this treatment when the child just needs his lunch?

The "if you don't like it, you don't have to watch" argument implies a certain perversion on the part of the casual observer, a desire to "catch a peak." Challenging the notion that the display accosts unsuspecting passerby, this argument conveys an unnatural sexual gratification in anyone who might disapprove of the scene (and, implicitly, it is guilt over this perversion that causes the viewer to reject the image). Rather than "liking it" expressing an acceptance of the breast in this act or approval of the appropriate mother, stating "why are you watching?" insinuates inherent sexuality of the breast. This scenario implies a "pure" maternal archetype in a corrupt world. On the other hand, it also suggests that the woman is not responsible for the gaze of others, a deliberate reversal of a cultural mindset that claims women must anticipate and control (and will be held accountable for) the male gaze.[6]

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[6] A more extensive analysis of "the gaze" can be found in Foucault's *The Birth of the Clinic* and *Discipline and Punish*. A feminist critique of "the gaze"—a patriarchal gaze—was famously contextualized in Laura Mulvey's 1975 essay "Visual Pleasure and the Narrative Cinema."

The "this is what they're there for" narrative coincides in some ways with the previous argument in that it attempts to desexualize the breast and feign shock at the idea that anyone might view breasts sexually. This narrative, however, more strongly emphasizes the "natural" quality of breastfeeding. The suggestion that breasts have an intended purpose bound to motherhood carries with it troubling connotations of motherhood as a divine calling, moral obligation, or necessity for personal fulfillment. Suggesting that biology is synonymous with identity poses a problem. As Judith Butler has shown, "the return to biology as the ground of a specific feminine sexuality or meaning seems to defeat the feminist premise that biology is not destiny" (2006, 41). She continues: "naturalistic descriptions of the maternal body effectively reify motherhood and preclude an analysis of its cultural construction and variability" (2006, 109). It could be argued that breastfeeding is simply a reassertion of normative constructions of gender; but it is public display of the lactating body that confounds the constructions of female sexuality.

Of the three narratives I wish to discuss (rhetoric of the protesters, of the media, and audience response to the former two), the media narrative is the most varied. In the case of the Target protest, *USA Today* called the protest "a breastfeeding flashmob" (Winter). Comparing the nurse-in to a flashmob implies attention-grabbing antics that lack substance or logical explanation. *TIME* magazine said "If shopping at Target is part of your Wednesday morning plans, *here's hoping you're not squeamish* about public breast-feeding. Nursing mothers intend to to turn out en masse from Maine to Oregon to breast-feed their babies *while wandering through after-Christmas markdowns or sipping a latte in the in-house Starbucks*—it's a maternal twist on civil disobedience: the nurse-in" (emphasis added). The author simultaneously implies that

squeamishness is a natural and expected response and belittles the protesters as unserious, somewhat laughable, and likely as interested in shopping as anything more politically motivated. It is the caricature of a frivolous, white, upper-middle-class housewife, with a wink and a nudge to the reader. And yet, nurse-ins have traditionally taken place in the spaces commonly inhabited by middle-class white mothers—shopping centers, restaurants, coffee shops. The location of the nurse-in and the demographic of participants suggests that, in many ways, the nurse-in privileges commodity culture as much as it challenges sexual mores. Does the choice of venue perpetuate the stereotypes associated with the white, suburban "soccer mom"? Certainly. But what does it mean that she is being asked to cover up or hide in the very establishments where the postfeminist woman has been sold the cultural promise that she may purchase liberation and value? Does the nurse-in performance hold the potential to reclaim this space, or is it dangerous to reclaim space associated with stereotypical domesticity?

The *TIME* article continues "Michelle Hickman, who says she was *asked repeatedly* on the evening of November 29 to relocate to a fitting room after she'd *plopped down* on the floor in the women's clothing department to discreetly nurse her 5-month-old son..." (emphasis added). Unfortunately, the journalist, Bonnie Rochman, *TIME*'s resident parenting writer, seems to echo the official response of the Target corporation: when Hickman called Target's corporate headquarters she reports being told by guest relations, "Just because it's a woman's legal right to nurse a baby in public doesn't mean she should walk around the store *flaunting it*" (emphasis added). Rochman wrote a follow-up article two days later: "Boobs and babes took center stage Wednesday morning as nursing mothers held 'nurse-ins' at Target stores across the country to assert their right to breast-feed their children in public." Although Rochman's previous article

notes that "there's no getting around America's complicated relationship with breast-feeding," in this article we see the catchy, sexualized phrase "boobs and babes," using "babes" instead of "babies," and in proximity to "boobs," to insinuate a sexualized, pornographic display. She continues: "The protesters, *so to speak*, were an unlikely bunch: smiling, *middle-class mommies* toting their equally smiley babies[...] Despite a few dirty looks (and a few dirty comments, including one on Facebook that urged women who feel the urge to bare their breasts to pose for *Playboy*), the atmosphere was practically festive" (emphasis added). Throughout these representations of the event we see some of the most common interpretations of motherhood (echoed later in public response on message boards): the childish title "mommy" suggests a lack of seriousness or competence in the role; "plopped down" suggests laziness and an expectation for others to accommodate simply because she is a mother.

Upon receiving national attention Target's official response changed, though the preference to keep breastfeeding hidden to the fitting room is still emphasized: "We want everyone to feel comfortable shopping at Target. Guests who choose to breastfeed in public areas of the store are welcome to do so without being made to feel uncomfortable. Additionally, we support the use of fitting rooms for women who wish to breastfeed their babies, even if others are waiting to use the fitting rooms."

One local news channel suggested that perhaps this store was unfairly targeted considering Hickman was not asked to stop breastfeeding, but only to move to the fitting room. The question was raised as to whether her general location within the store (sitting in an aisle) was rude and prompted the employee response. *ABC News* offered a slightly more sympathetic story: "Last month at a Webster, Texas, Target store, Hickman began nursing her *fussy, hungry*

infant son in the store's women's clothing section. Hickman, 35, said that *eight* Target employees eventually *surrounded her* and two asked her to move to a fitting room to finish nursing. The other employees, she said, rolled their eyes at her and *gave her dirty looks*. Hickman said she *tried explaining* that Texas law allowed her to breastfeed in public, *but the employees wouldn't listen*" (emphasis added).

The public response may be varied, but there is always some sort of response elicited, and it is rarely lukewarm. In order to measure more than the reports of "disgusted looks," I have chosen to use comments posted on message boards in response to articles on the news media websites noted above. Behind the comfortable anonymity of a computer, comments were anything but mild. Both men and women, mothers and non-mothers, all feel qualified to speak out. Once more, we see supporters (though these tend to be significantly fewer in number on online boards—both for these specific articles and more generally) fall back on the appropriateness of what is natural and nature's intended/divine purpose in creating the breast. Antagonists expressed four impressions (or some combination): 1) disgust, 2) laziness or bad mothering, 3) attention-seeking, 4) or in some cases just a general eye-rolling and "don't you have anything better to do?" attitude.

Some comments in the "disgust" category are unflinching in their interpretations of public decency and typically compare breastfeeding to intercourse, masturbation, or urination/ defecation. One anonymous poster said: "This is vile. I mean, really? How disgusting. Can't these women use bottles when out in public?" "Beatrice" posted: "Making Love is also a beautiful thing….but not for out in the public at Target!" [sic] "Cheesencrackers" said, "I breastfed my daughter, but I never pulled my breast out in public to do so. You people can call it

natural, but other people's rights are just as relevant as yours, and I feel it's my right not to have to explain to my eight-year-old why a baby is sucking on a breast. If you can cover it for no one else to see then fine, but if you can't then take your lazy butt to a room. One poster said 'if you don't like it, don't look!' My question to you is, should men be free to run around masturbating? That's also 'natural,' and you could easily 'not look.' It's called tact, people. Try it out sometime! [sic]" The need to protect men, husbands and sons, from this display appears frequently, along with the implication that males are incapable of seeing breasts as anything but sexual.

Comments referring to laziness include "Cheryl," who stated: "Really, just go home and feed your babies. Geez, women used to have class and not want to put their boobs out in public. And don't tell me how it is natural because then we can talk about bowel movements and how natural they are yet we don't do it in public. Why, because there are some things that are better done in private. Now I do believe if a mother has to nurse her baby she can find a discrete place to do so and should not be hassled but this is just ridiculous for all of these women to come together and have a boobie fest. There certainly must be better ways to spend your days mommies" [sic]. Similarly, "Charlotte" said, "Is your car REALLY too far to walk if you want to breast feed or change your child? Really? How about this: keep the child at home if you can't take it to the store without needing to feed it." "Ted Tampabay" said, "Good gawd, is it really that hard to go into a dressing room to breastfeed your baby?" Consistent with this theme is the accusation of poor mothering skills: "Wow, this is really pathetic. So they dragged their babies out into the cold to breastfeed just to prove their point? Were the babies even hungry at the time? (You gotta wonder if they made sure to skip a meal to make sure the baby would be hungry for the event). So glad to see the needs of the child come first... these are some great moms!!!"

“Tina” states: “she was sitting on the floor of a target. right after christmas, the stores are packed…get your ass up and move to a better location. she is attention seeking, she will get a lawyer. she will want money. she will claim damage to herself and her child. ATTENTION AND MONEY SEEKING!!!!” [sic]

Others suggested that these women derived sexual pleasure from the attention. “Nurse Angie” focuses disapproval specifically on the lactating breast: “Yea, I think most woman out there breast feeding in public with no effort to cover or find a place in private are just exorbitionists getting there thrill on. There’s no need to pull out a big swollen lactating breast in public unless you plan on feeding the neigborhood, know what I mean!” [sic] “Steve” suggested the act was for masculine sexual pleasure: “I’m just waiting for mothers with twins to stage a nurse in. It would be more pruriently interesting.” People consistently felt that women were responsible for controlling the gaze. “Whatthewhat” said, “Really? I’m a mom and I find it unacceptable to have to watch you breast feed your baby while I’m trying to shop or eat or get a cup of coffee. I think breast feeding is a natural and healthy thing but keep it private. There are people out there who would love to gawk at you and not in a good way. It is your right to breast feed but it is my right not to have to be exposed to it! There are places designated for you to do this.”

Though the intensity of disapproval ranged from “common sense” public decency to accusations of lewd/sexual behavior, message board respondents continually suggest that nurse-ins take place for selfish, personal gratification. “Ellen” said, “If they need to feed their baby, ok, but so much of the “breastfeeding rights” is so “in-your-face” and angry, it makes it hard for me to sympathize with them.” To be fair, there is an occasional comment in support of the protesters;

they tend to come from mothers who say some variation of "you just don't understand how hard it is"; and these comments are much more common on sites that focus on issues related to motherhood or that openly promote breastfeeding and/or public breastfeeding. On general "news" sites that allow public forum response, comments are considerably more harsh.

Another protest that sparked national attention was the recent Facebook nurse-in. Throughout 2011, Facebook began receiving complaints when women discovered that breastfeeding photos they had posted had been removed from their Facebook pages, marked as obscene/sexual content. In some instances, their accounts were temporarily frozen. Users were blocked for a period of three days. The Facebook announcement stated: "If you continue to abuse Facebook's features, your account could be permanently disabled." In early 2012, protesters organized a nurse-in at Facebook's corporate headquarters and various international offices (on a slightly smaller scale than Hickman's Target protest in terms of numbers, but one that received global attention as women worldwide shared similar stories). In reply, Facebook issued the following statement: "The vast majority of breastfeeding photos are compliant with our Statement of Rights and Responsibilities and Facebook takes no action on such content. However, photos which contain a fully exposed breast, do violate our terms and may be removed if they are reported to us. These policies are based on the same standards that apply to television and print media. It is important to note that photos upon which we act are almost exclusively brought to our attention by other users who complain about them being shared on Facebook" (*Huffington Post*).

What percentage of breast dictates impropriety? The exposure of the nipple is often the boundary line drawn in discussions of "decency." In this case, though, it is important to note that

in *most* instances, breastfeeding photos were brought to Facebook's attention based on other users flagging them as "inappropriate"; a small hyperlink present at the bottom of every photo allows users to monitor offensive material. Many Facebook users choose to limit profile visibility to only those included within their approved "friend" list. However, even if this is not the case, it is somewhat unlikely that strangers stumbled upon breastfeeding photos accidentally. One can then assume that those flagging such images as obscene are "friends" with the woman posting the photo. Even assuming a distant relationship—an acquaintance, former schoolmate or colleague, perhaps a distant relative—there is still a certain familiarity with the mother in the photograph. This is quite different from encountering a stranger breastfeeding in a restaurant or business. Though Facebook never reveals the identity of the offended party to the user, this is not anonymous derision. The Facebook nurse-in was organized by Canadian mother Emma Kwasnica, who told journalists, "You don't want the wrath of mothers." With the perceived power of the masses behind her, Kwasnica (like Hickman) fearlessly exhibits a willingness to speak to power, to take on the presumably greater power of a multi-billion dollar corporation, and introduces an unexpected claim that mothers are fierce opponents when wronged. Kwasnica's protest was duplicated in countries around the world.

2.2 Sexuality of the Breast, Hidden and Exposed

Breastfeeding is viewed publicly as appropriately sacrificial for the good or "natural" mother, but this contention hinges on the desexualization of the maternal body as part of the sacrificial nature of motherhood. Foucault suggests that power formations which construct normativity and regulate the body are always at work within and around us, making "pure" identity formation a difficult task, so that (according to Foucault) the construction of "self"

remains fixed within the dominant power structure. Perhaps this is why lactivists expend so much effort persuading public opinion and mothers themselves that it is wrong to consider the breast, when locked in the act of breastfeeding, as sexual (Wall).

A discussion of sexualized motherhood forces recognition of the cultural depiction of the appropriate female body. There is considerable pressure to maintain appropriate weight (attractiveness) throughout and following pregnancy. Indeed, many breastfeeding advocates promote nursing as the best way to "lose baby weight." How does the new mother feel about her morphing body composition pre- and post-birth? As the mother undergoes a major psychological and life adjustment, her body simultaneously changes. Pregnancy ironically signals the end of sexual desirability by publicizing a body that can no longer feign chastity. Breastfeeding then changes the body once more; the breast itself changes shape, carrying the imprint of motherhood. Recent trends to compromise this change, to blur the disparate ends of this spectrum, include encouragement to regain the pre-pregnancy body, to "get back" what was "lost." Steps to achieve this include the emergence of the "mommy makeover." The mommy makeover is not described in the same light as other plastic surgery. Rather, in a clear response to the hyper-femininity of postfeminist discourse, it is introduced as just another appropriate step to take (the best of both worlds—the sexually desirable body and motherhood), a clear suggestion that sexuality (wrapped up entirely in the physical) can be maintained post-birth, though maintained only through a tummy tuck and breast lift, restructuring the maternal form to something more traditionally palatable.

It is undeniable that the primary, if not the sole, issue at opposition with public breastfeeding specifically, or open dialogue about breastfeeding more generally, is the undeniable

sexuality of the breast. Repeatedly, women cite a fear that their son or husband might glimpse a breast that he had no intention of seeing. These women express a genuine concern to protect their male family members from the sight of female breasts (Hausman). Although men may respond to a nurse-in with distaste and discomfort, largely associated with an inability to view the breast as asexual, women are the ones vocalizing a fear of other women corrupting their men; they see themselves as guardians of morality (for men appear unable to subdue their instinctual lust for the breast). The idea that mothers have a responsibility to civilize and to uphold ethics within the community ironically mirrors one of the primary tenants of La Leche League (Badinter). There exist attempts to dichotomize the breast—with maternity as the marker between sexuality and functionality. The history of "Karen Carter" serves as a fitting example of this. Carter called a new-mother helpline and asked whether it was normal to feel aroused from breastfeeding. The helpline promptly phoned Social Services and the child (a one-year-old daughter) was removed from Carter's care on charges of abuse and sexual misconduct. Although the case brought against Carter was dropped a few months later, Carter's parents were given custody of her child (Stearns). In this example, "the construction of the good maternal body as being at all costs not sexual is taken very seriously by both the culture and the law" (Stearns 309). However, Carter is not the first to have expressed an unwelcome and surprising stimulation from nursing. Despite our culture's best attempts to deny this as a possibility, the sensuality of the physical act of breastfeeding remains. Though not all mothers describe the experience as enjoyable, or even tolerable, many women experience physical pleasure and emotional satisfaction from breastfeeding that is uncomfortably similar to sexual interaction, a response for which they feel enormous guilt and are quick to silence (Bartlett; Stearns).

It is precisely the indivisible sexual (both socially constructed and physically inherent) nature of the breast that causes so much confusion and discomfort when exposed in public in an act that mimics a sex act. And it is precisely this discomfort and sexual undertone that makes the act of breastfeeding in public a deliberate performance in resistance that demands demystification and de-pathologization, which, as Bartlett notes, "is surely an example of women contesting those binary divisions on an everyday basis, of claiming public space in which to leak, spill and overflow with a baby hungry to suck it up, to ingest what comes out of our bodies" (118). In her analysis of the 2004 "Nurse at Starbucks" campaign, Carpenter claims that "nurse-ins not only trouble the archaic notion of the breastfeeding mother as an iconic symbol of subservient, home-bound domesticity, but they create a public forum as a conduit for social transformation" (350). This public display presents a break in the larger hegemonic construction, a point at which not only resistance, but ideological change is possible. It is useless to suggest that breasts are not really sexual. Rather, Carpenter suggests that the nurse-ins refuse to dichotomize the sexuality and maternity and instead force the public to confront fears of the exposed female body, forcing acknowledgement of the breast—and the mother—as both maternal and sexual. The lactivist nurse-ins re-appropriate the image of the breastfeeding mother and redefine "modesty."

Until quite recently, motherhood signaled the end of girlhood. Postfeminist discourse changed this. Under the postfeminist conflation of 1) hyper-sexuality and corporate consumption as sources of power, and 2) motherhood as the culmination of appropriate femininity, the "`yummy mummy" trend emerges. The term yummy mummy refers to sexually attractive, modern, stylish, (usually young, though not always) mothers. The term also applies to

breastfeeding mothers. In this way, the mother is delectable and desirable to both her infant and her mate. Although it is projected as a playful promotion of breastfeeding and a purport that style and individuality are not discarded post-birth, the sexualized implication of this term is undeniable. For the yummy mummy, feminine power is both sexual and purchasable, and motherhood does not signal the end of desirability. British physician and critic Pamela Douglas claims that in a Judeo-Christian culture in which the only visual representation of the breastfeeding woman is the ever-chaste Virgin Mother, the appearance of the yummy mummy is a welcome intrusion: "'Yummy' promises pleasures of flesh, moistness, edibility. A 'yummy' Mummy is not an ordinary, boring, invisible type of mother; nor is she asexual, like the Virgin Mary. She is informal and intimate, a 'mummy' not a 'mother': the two words 'yummy' and 'mummy' rhyme in a pleasing, bouncy way, telling us that the Yummy Mummy is casual, energetic, and cute" (128). Motherhood didn't need to be frumpy; it could be fun. The yummy mummy branding of motherhood proved to be an effective continuation of postfeminist girl culture, suggesting that fun and desirability was possible even in maternity, provided mothers weren't taken too seriously.

The pregnant body—let alone the lactating body—had been largely invisible up to this point. Part of this newfound "celebration" of sexy or "cute" motherhood evolved into a fascination with the celebrity "baby bump"—a desirable accessory to attain coverage in weekly magazines. There were few visual representations of pregnancy in pop culture in previous decades. This changed in 1991 when Annie Leibovitz's photo of a glamorous, naked, and very pregnant Demi Moore graced the cover of *Vanity Fair*. The image drew immediate media attention because it was the first of its kind. The visibility of a naked pregnant woman forced

recognition and interrogated the role of the maternal body in public. Tyler observes that since that time, it has become almost a right of passage (or perhaps necessary publicity inducer) for celebrities to take naked photographs during their pregnancy (and since that time other nude pregnant celebrities have been featured on other magazine covers in virtually identical poses). The Demi Moore image was the first projection of a famous body on display during pregnancy. Rather than a body to be hidden, the Moore image celebrates and sensualizes the maternal body (though its depiction as such was certainly met with considerable controversy over questions of "decency"). Despite the ethereal, artistic quality of this image (lighting and askance gaze suggest other-worldly intuition in the mother, a modern madonna), people still responded with general revulsion and suspicion.

In a fascinating study on terror management and human fear of mortality, Goldenberg et al. asked people to examine magazine covers of a nude and pregnant Demi Moore alongside a nude and non-pregnant Demi Moore. Despite the fact that the pregnant photo was less revealing (a side view with the breasts covered by an arm versus a full-frontal view with the body covered in body paint), subjects responded more negatively to the pregnant photo. These results were in keeping with the the public response to these images at the time; taken a year later, the frontal, painted nude cover received less social criticism. Nevertheless, the pregnant Demi photo prompted many imitations by other celebrities and popularized the idea of photographing advanced pregnancy. Goldenberg et al. suggest that the displeasure at the sight of an exposed pregnant body stems from a human discomfort at the visible reminder of our similarity to animals and the association with mortality that entails.

Although the Goldenberg et al. studies show that pregnancy is marked by suspicion of the woman's competency and likability, scholars such as Lauren Rosewarne suggest that true disgust is only exhibited in response to lactation: "While the glowing and booby erotics of pregnancy are evidenced in imagery like a pregnant, bikini-clad Britney Spears sucking on a lollipop on the cover of Britain's *Q* magazine in 2006, actor Lisa Rinna posing while pregnant in *Playboy* in 1998, or shots of pregnant and naked celebrities on magazine covers, it is the lactation that provides the true perversion associated with motherhood" (60). Cox et al. conducted a similar study on the lactating body, suggesting that distaste is the result of a discomfort for the corporeality of the flesh—the reminder of weakness and mortality that we associate with "creatureliness." Women are only desirable to the extent that they are able to conceal the realities of the body—the scent, sweat, hair of the body is masked or removed; the skin, covered by makeup; the milk and the blood, ever-hidden and never to be mentioned. These steps to control and subdue the body are considered merely proper self-maintenance. Much research has been done on "sanitary napkins" and tampons and the rhetoric of "clean" and "fresh" (Goldenberg 214). However, menstruation dictates a product that corporations can market to women which necessitates a certain dialogue (albeit a coded one). Are there fewer products to sell to breastfeeding mothers, or do nipple cream and breast-pumps not merit the same commercial expenditure? In our commercial-driven culture, there is a notable absence from the public conversation.

But how might the dramatic and confrontational nature of breastfeeding performance change when the display is a photograph? Obviously, despite initial outrage over the Moore photograph, the image served to normalize the visibility of the pregnant body. If, as Rosewarne

suggests, the lactating breast is more disruptive than the pregnant body, what influence might a similar celebrity cover photo hold in changing social expectations. And how might a visual depiction of solitary breastfeeding differ from collective breastfeeding? The protest aspect is absent when the action takes place in the private space; yet this is still a traditionally private action on public display, inviting public response. The ideological implications, therefore, are worth further consideration.

In 2008, actress Angelina Jolie appeared on the cover of *W* magazine above the prominent title "Exclusive: Brad Pitt's Private Photos of Angelina Jolie." The title suggests an intimate, "exclusive," voyeuristic peak into a secret life. The black and white photograph of the famous actress, taken by her husband, features a casual, relaxed Jolie breastfeeding one of the couple's newborn twins. Softly smiling, with natural hair and minimal or no makeup, Jolie gazes into the camera (at husband, Brad Pitt). Her child is noticeably absent from the image, a leg or pillow blocking the infant's body, with only a tiny hand (strategically placed over the nipple) to alert the reader to what is actually taking place. The cover proclaims that this is the "Art Issue," and the photograph certainly has a compelling artistic appeal, but a deeper examination of this image will shed light on the interplay of discourses at work.

The Jolie photograph projects motherhood as natural and appropriate, characteristic of the postfeminist ideal. She is the picture of contentment, fulfillment. Framed through (we are told) her husband's gaze, we sense the marital approval and accomplishment. The photo is simultaneously accessible, in that it is a recognizable and identifiable experience, and inaccessible, in its artistic construction and intimate/private nature. Jolie has already established herself as a spokesperson for global philanthropic issues. However, in this image, we see a more

subtle promotion of the dominant discourse surrounding breastfeeding and the maternal body. Her tacit endorsement of hegemonic ideology legitimizes her position. She gazes into the camera and casually invites the onlooker to share her contentment. Hariman and Lucaites note that photographs may be said to function as performance in the way that they "captivate audiences" (31). Whereas previously, fans in online forums described Jolie in strong or sex-symbol terms, responses to the *W* cover are noticeably different: She's "so sweet, so happy"; she looks "natural" and "content." Performance is interactive and demands engagement and response from the audience/viewer.

It is meaningful that the subject in this image should be Angelina Jolie as I find her transformation fairly representative of the postfeminist ideal. A beautiful, talented, sexy, a celebrated humanitarian and award-winning actress who only "had it all" once she became a mother. There is a certain strength associated with her public persona. But was this woman too tough? At various points in her life she wore a vial of blood around her neck, challenged sexual norms (openly discussed sexual encounters, kissed her brother on the mouth in front of cameras, had a brief same-sex relationship), displayed multiple tattoos, and in general became associated with a certain butt-kicking, action heroine persona.[7] And yet, the moment she enters motherhood (like crossing a border into acceptable social discourse) Jolie traded her darker, unpredictable, and exotic image for maternal goddess: soft, ultra-feminine, and most importantly—recognizable. Not one of her thirteen known tattoos is visible in the *W* breastfeeding cover. She had adopted multiple children before the time of this photo, but it is only after biological motherhood within a committed, heterosexual relationship that she becomes known as a "real"

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[7] See Stephanie Genz and Susan J. Douglas for detailed evaluations of the sexualized "butt-kicking superhero" so prominent in the 1990s.

mother. Perhaps coincidentally, her celebrity simultaneously reached superstar status. Jolie is now considered in terms of her role as mother before her role as actress and humanitarian, perhaps due to a postfeminist discourse that suggests motherhood is the pinnacle of womanly success. In the image of Jolie breastfeeding, she not only invites the public to consider her as a mother, but to judge her parenting skills. Her decision to be shown breastfeeding proclaims: "Look! I've chosen correctly." She is a "good mother." The audience in turn must question whether they might say the same of their own parenting. There can be no quiet observer; Jolie's direct gaze demands a response in the viewer.

Other celebrity mothers were captured in paparazzi photos breastfeeding in public long before the Jolie cover-shot, and A-list actresses like Gwyneth Paltrow, Kate Hudson, and Kate Beckinsale have talked openly about breastfeeding in public; yet there is still the impression that perhaps these images were captured against the woman's will, or at the very least, without her awareness; thus, the understanding that this is still a private act which requires a voyeuristic long-range camera to capture is reinforced.

Jolie is working within multiple discourses, the discourse which casts the breastfeeding mother as natural and appropriate and motherhood itself as the culmination of femininity, and the discourse which projects the lactating breast into public space in a silent performance of resistance. Women (and more specifically mothers) are actively moving into the public space. The shifting parameters of public/private spaces and the mother's shifting role/position within this framework causes confusion and disruption. Bartlett suggests viewing each individual act of breastfeeding as a performance. This approach rejects the discourse that would advance breastfeeding as "natural." It also suggests that breastfeeding is a different experience between

women and even between the same woman at different times. In this way, Bartlett attempts to restore agency to the woman; this allows her to read in individual performances a challenge of the dominant discourse (113).

But "what might happen if we allowed the idea of lactation to drift loose from the idea of maternity?" (Giles 307) Few people know that it is possible to induce lactation—in both men and women—entirely free from pregnancy or childbirth. Lactation is induced for various reasons. Some adoptive mothers wish to experience the "connection" with the child commonly associated with breastfeeding. Adult suckling for sexual pleasure resists the sexual/maternal dichotomy, and even resists nursing as an exclusively female practice, and rather exploits the taboo for sexual enjoyment. This little-known subculture offers fascinating examples of the guilt, shame, and pleasure that are seldom considered in connection with nursing. In renegotiating expectations and exploring the reality of boundaries that are rarely clearly defined, one begins to question whether nursing is a perverse act—whether the act suddenly becomes sexual perversion after a certain age, or whether the act itself, regardless of who is giving and who is receiving, regardless of whether the intention is to feed, to comfort, or to arouse, is inherently sexual. Could induced lactation have the potential to shift the balance of power in the male/female binary? Could men potentially nurture (if not nourish) infants by bringing the child to the male breast?

Unlike much contemporary pornography, lactation pornography places the woman as the agent of the action. Is lactation pornography a perversion of motherhood, or does it take what is hidden, disgusting, or asexual and re-appropriate it as a pleasurable experience for both men and women? Scholar Fiona Giles suggests that, although bodily fluids "cause anxiety if they appear in an unregulated fashion within our culture," adult nursing "makes use of and takes charge of

women's seepage, and celebrates it. It transforms what is a feared and hidden rupture of containment that merely underlines feminine disorder and permeability[...] It transforms what might otherwise be viewed as disability or impairment—that is, negatively imagined, uncontrolled seepage—into a powerful, erotically charged, voluntary behavior" (306; 322). Induced lactation blurs the lines between maternal and sexual, between male and female; it is *induced*, a celebration of *deliberate*, intentional lactation, a demonstration of agency over the body and rejection of traditionally defined roles.

2.3 Examining the Lactivist Narrative

I have argued that public breastfeeding as collective rhetorical display can work to unify feminist rhetoric, but it must also be acknowledged that although the nurse-in uses the body as a site of commonality, and the maternal body bridges class and racial differences to a certain extent, the maternal body is not identifiable for all women, specifically women who choose not to or are unable to have children. Even for women who are mothers, discourses surrounding breastfeeding frequently conflate opposing or conflicting demands on appropriate maternal behavior. Consider, for example, the frustration an adoptive mother might experience. Koerber suggests that it is in this mixture of messages that disciplinary power exists. Power structures are internalized by society and manifested through the pursuit of socially constructed versions of normativity. These influences can serve to reinforce traditional patriarchal constructions of gender and appropriate motherhood. In particular, a heteronormative agenda is emphasized in the maternal body on display, potentially excluding lesbian feminists.[8] Although the experience of

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[8] Although reproductive technology makes biological children a possibility for many lesbians, the process can be very painful and prohibitively expensive. And yet, "women's demand for these reproductive technologies has in essence increased the cultural value of having one's own child, thus reaffirming the reproductive function of women" (Lay et al. 16). For a thorough evaluation of the potentially harmful language in fertilization, in which women's bodies are portrayed as dysfunctional and guilty, see Shanner and Lay et al.

motherhood is certainly an essential commonality among many women, the pro-breastfeeding narrative can also exclude certain cultural or economic groups. Women living at or below the poverty level, women without college degrees, unmarried women, and black women (more than other ethnic minorities) are statistically less likely to breastfeed (Child Trends Databank).

Foucault suggests that power structures are internalized by society and manifested through the pursuit of socially constructed versions of "normativity." In *History of Sexuality*, he offers a theory of "bio-power," the claim that power presents supposed "truths" about the body that then have a regulatory effect. These influences can serve to reinforce traditional patriarchal constructions of gender and appropriate motherhood. In particular, a heteronormative agenda is emphasized. Much of lactivist rhetoric promotes breastfeeding as synonymous with nature and a foregone conclusion to appropriate mothering. Glenda Wall's 2001 analysis of educational material directed toward mothers, healthcare providers, and the general public, found that much of this literature promotes a construction of breastfeeding in relation to nature and morality (often a combination of the two); Wall's study attempts to dismantle a constructed authority that new mothers rarely challenge. Information is both distributed and consumed in an ongoing exchange between physicians and lactation consultants/lactivists. Throughout this material there is a certain reverence and moral authority for what is "natural." Pamphlets promote breast-milk as nature's "perfect food" (Wall 596). One female member of the American Academy of Pediatrics claimed that a mother "needs every drop of that precious golden fluid for her baby" (Lepore). Images in pro-breastfeeding literature and instructional videos depict comfortable mothers and content children. These scenes are often framed with an outdoor scene as backdrop, linking the act with nature (McCaughey). The fusion of woman and nature in visual

representation is hardly new, and the mixed imagery of feminity/sexuality/fertility presents woman/nature as a passive object to be gazed upon for pleasure or to be possessed.[9] Cloaking the act within a "mother earth bearing fruit" frame minimizes problems common to breastfeeding and emphasizes a sense of convenience, purity, and tranquility. Does this unrealistic portrayal set women up for failure? Carpenter has noted that "part of the problematic rhetoric associated with nursing is the notion that it is a 'natural act' versus a means to provide 'natural' (from nature, from the body) nourishment" (356). However, if only 31% of babies are still breast-fed by nine months of age, promoting breastfeeding as the "natural" choice is not only false, but suggests that those who *choose* not to breastfeed are unnatural—namely black women, teen mothers, and lower-income women (Child Trends Databank; CDC). Breastfeeding is clearly not an instinctual or natural desire. It is largely cultural, and a decision that is more frequently arrived at by middle- to upper-middle-class white women.[10]

Educational literature also suggests that breastfeeding is an act of appropriate parenting because it will influence the psychological development and social well-being of the child, stimulating brain activity and affecting the child's future attachment to the nursing parent (Wall; J.B. Wolf). It is the moral responsibility of the mother to nurture her child. Consequently,

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[9] Diane S. Hope explores the differing visual representations in advertising—of a masculine environment (to be explored/conquered) and a feminine environment (exotic/fertile)—and suggests that our current consumption of and disconnection with nature allows us to trust those iconic representations of gender/nature now more than ever.

[10] This is an interesting reversal from previous centuries when wealthier, privileged mothers employed wet nurses. However, during the nineteenth century, "a growing middle-class consciousness deterred most of these mothers from turning to lower-class women to feed their babies" (J.B. Wolf 1). See Andrea Kaston Tange's examination of the ways in which the parameters of vulgarity, modesty, and femininity were molded in Victorian advertising that taught a growing middle class what it should desire, essentially *creating* "the proper middle-class domestic desires in a reader who may have no experience with how to live in a middle-class house" (279).

inability to breastfeed often results in feelings of guilt and inadequacy.[11] This guilt is bound up in an ideological construction of motherhood as a sacrificial calling. As one mother states: "Adult biases should never trump *a baby's right* and access to nutrition" (Marchant; emphasis added). The inadequacy and frustration new mothers may experience are rarely explored. Instead the benefits to the mother are "confounded with the interests of the infant and based on the assumption that mothers will gain satisfaction from doing what is best for their babies," or that the intimacy of the act itself will be personally enriching (Wall 601). Breastfeeding is said to build an intimacy between mother and child that is not duplicable by other means. A breastfeeding mother is physically bound to the child, required to provide nourishment, to sustain life, quite literally giving part of herself. The bottle-feeding mother maintains a degree of physical separation and is not the exclusive provider of sustenance. Images associating breastfeeding with nature further enforce the duality of female/nature/body versus male/ technology/mind. But does the use of the breast pump in modern infant feeding free the woman to return to work without the encumbrance of children, or does technological intervention introduce separation into this exclusive physical bonding? Because breastfeeding is itself so thoroughly embodied, and because Americans attempt to view the workplace as an arena devoted to the mind, the transition back to the workforce can be quite challenging for a woman who is still lactating and must (if breastfeeding) find a private space to express milk (typically a bathroom) (McCaughey; Davidson and Langan; Blum 1993). Many states lack legislation that would protect a woman's job should she require the ability to express at work (Marchant).

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[11] Many mothers report fearing that they lack the quantity of milk necessary to provide adequate nourishment. Medical professionals suggest that this anxiety is likely to reduce milk production even more. Thus, we find a cycle of medical authority defining bodily capabilities and deficiencies. The subliminal blame and responsibility is ever-present.

Indeed, our culture largely valorizes autonomous identity, an impossibility for the nursing mother who is bound either to her child or to the pump; furthermore, workplaces tend to treat motherhood (pregnancy and postpartum) as a medical condition, treated by offices in much the same way as an extended illness or disability (Hausman 2004, 2007). It would be much simpler for a woman who chooses to maintain her career to switch to formula feeding. Blum suggests that reliance on technology like breast-pumps disembodies (and consequently devalues) the mother. Hausman calls this the "industrialization" of infant feeding. Rather than suggesting the potential for fathers and other family members to bond with the child through bottle-feeding, the lactivist narrative criticizes the physical separation from the child. Due to the challenges involved in breastfeeding, it is largely impossible to separate the act from "technological intervention" entirely, but nevertheless, the very acknowledgment of this can free women from the naturalistic narrative; furthermore, public breastfeeding works to disrupt the construction of "natural" motherhood by framing the act as a personal freedom, a conscious decision rather than an inevitability (McCaughey; Carpenter).

3 Disciplinary Discourses

3.1 The Medicalization of Motherhood

The assumed superiority of "natural" denies interference of or reliance on either technology or scientific authority, when in fact breastfeeding relies heavily on both of these. New mothers do not instinctively know how to breastfeed; nor is breastfeeding in any way easier because it is "natural." Similarly, we must carefully avoid an overemphasis on the term "choice" as well. McCaughey points out the false frame of choice in infant feeding, despite the fact that the medical community, public health advertising, and even formula companies all put forth the

superiority of mother's milk. Although formula companies donate numerous samples to the new mother departing the hospital, doctors and nurses (and even formula labels) convey only one correct choice for women as they leave the hospital. Our perception of nature is often dictated by theological or scientific authority. Just as women rely on "expert knowledge" to dictate that "breast is best," they rely on lactation consultants to teach them how to breastfeed, breast-pumps to express milk when the baby is unable to feed, and physicians to judge their success at breastfeeding based on an examination of the infant. If the mother is "*unable* to produce milk," to provide the child with sufficient nourishment, the doctor usually advises "supplementing" the child's diet with formula. In this way, the mother intuits that she is lacking.

Foucault states in *Discipline and Punish*, "Where there is power, there is resistance, and yet, or rather consequently, this resistance is never in a position of exteriority in relation to power." In fact, the existence of power structures "depends on a multiplicity of points of resistance [...] present everywhere in the power network" (95). We may then begin to understand hegemony not in terms of a singular, governing power structure, but rather a pervasive discursive formation which permeates "groups or individuals in a definitive way, inflaming certain points of the body, certain moments in life, certain types of behavior" (96).

Potential hazards of breastfeeding as performative display extend beyond exclusionary concerns. Even as motherhood and feminine power are celebrated, the breastfeeding performance is inevitably bound to other discursive authorities influencing power. The breasts historically belonged to the field of science, to anatomy. Around the turn of the last century pediatricians began to emerge as a distinct medical specialty. At this time, pediatricians promoted bottle-feeding and blamed infant illnesses or even death on the mother's inability or

unwillingness to follow medical direction. The well-documented professional dissatisfaction of many pediatricians led to an increasing medicalization of childhood experiences and maladies; this also marked the beginning of discussion of the fetus as a separate patient (J.B. Wolf, Apple). It suddenly seemed necessary to *rely* on medical knowledge, rather than on midwives, female family members, or personal instinct. Joan Wolf observes: "It is the only moment in the child's life cycle that requires surveillance of both the mother's and the baby's bodies, and as such, it is especially fraught with social meaning" (9). In 2007, the Transportation Security Administration disposed of a woman's supply of expressed milk before allowing her through airport security, prompting lactivist petitions that led the T.S.A. to reclassify breast-milk as "liquid medication" (Lepore). Breast-milk's emergence as a "medicine" justifies its increased "scientific" research. Since the 1990s U.S. government health campaigns have rejected the claims that dominated most of the 20th century concerning the superiority of formula feeding and began to champion a "breast is best" approach. This public policy has evolved into a discourse that evokes the "good maternal body" (Stearns).

3.2 The Citizen's Duty

In 2011, the Surgeon General issued a "Call to Action to Support Breastfeeding," which suggested that most mothers have a strong desire to breastfeed, but despite personal desire, many barriers prevent women from ever starting to breastfeed or from breastfeeding beyond the postpartum phase. Introducing the "Call to Action" is a message from the Secretary of the U.S. Department of Health and Human Services, Kathleen Sebelius, which begins:

> As one of the *most universal and natural facets of motherhood*, the ability to breastfeed is a *great gift*. Breastfeeding helps mothers and babies bond, and it is *vitally important* to

> mothers' and infants' health. For much of the last century, America's mothers were given poor advice and were discouraged from breastfeeding, to the point that breastfeeding became an unusual *choice* in this country. However, in recent decades, as mothers, their families, and health professionals have realized the importance of breastfeeding, the *desire of mothers to breastfeed has soared*. More and more mothers are breastfeeding every year. In fact, three-quarters of all newborns in America now begin their lives breastfeeding, and breastfeeding has regained *its rightful place in our nation* as *the norm—the way most mothers feed* their newborns. (surgeongeneral.gov; emphasis added)

This introduction does not acknowledge that the desire to nurse may not be present in some mothers; rather, it suggests, in familiarly patriotic overtones, that despite the shadowy ignorance of the past, we are ready to face a bright and well-informed future in which the true and natural desire of women to breastfeed is satisfied by community approval. The message does not acknowledge disparities in breastfeeding among minority groups or income level; nor does it consider the length of time post-birth that mothers continue to breastfeed (so as not to diminish the impression that *everyone* is doing this). Breastfeeding is a "great gift," not only from the mother to her child, but from the woman to her country, something to be personally cherished. Sebelius continues, stating that infant feeding is a personal decision; however, "because of the ramifications of her decision on her baby's health as well as her own, every mother in our nation deserves information, guidance, and support with this decision from her family and friends, the community where she lives, the health professionals on whom she relies, and her employer." A mother is clearly not equipped to handle this decision on her own. In fact, if left alone, she might choose incorrectly, explicitly destroying both her own and her child's health and implicitly

disrupting the well-being of "our nation." Just about every one in the new mother's life is called upon to "support" her toward correct decision-making.

The Surgeon General's message similarly states that most women *want* to breastfeed, but "by six months postpartum, more than half of mothers *have given up*" (emphasis added). The directive offers advice to hospitals, doctors, and nurses, and suggests the best ways in which the healthcare community can direct "appropriate" nursing practices. The "call to action" places the actual *action* into the hands of medical authority and community leaders. What is the mother called to do personally? She is asked to discuss her decision with supportive family members and to consult medical authority. The Surgeon General provides a laundry list of potential health problems children might contract if they are denied mother's milk, ailments as varied as eczema, obesity, ear infections, and diarrhea. Also outlined are psychosocial, economic, and environmental incentives to breastfeed. The message invokes patriotism and a sense of community responsibility, and is ultimately a rallying call, a moral imperative to provide these poor women with the support they so desperately need so that they will complete the task they long to do, are morally bound to do, but are unable to do on their own: "Rarely are we given the chance to make such a profound and lasting difference in the lives of so many. I am confident that this *Call to Action* will spark countless imaginative, effective, and mutually supportive endeavors that improve support for breastfeeding mothers and children in our nation." The Surgeon General is broadcasting the message that breastfeeding in some combination with formula feeding is unfortunately inadequate; exclusive breastfeeding is preferred, and using medical authority to "educate" mothers on the superiority of breast-milk is the best method to achieve this end.

But isn't this what we wanted? We, as a progressive community, as feminists, as mothers. Wasn't this the intended result of the nurse-in? To demand acknowledgement, to request support, to "educate" the public on the value of breastfeeding, or even just to normalize a scene that still leaves many feeling squeamish? What is the danger in allowing motherhood to become institutionalized to this extent? Throughout the birthing and postpartum periods, there is a heavy reliance on medical authority to explain one's own bodily changes and then translate the body's messages. Joan Wolf suggests that we live in a risk-averse culture that encourages mothers to shelter their children from any possible harm: "In a risk culture, all manner of experts encourage individuals to assume personal responsibility for their health by subjecting themselves to assorted mechanisms of external and self surveillance" (17). Wall suggests a historical shift in the psychology of motherhood after World War II, so that mothers were "made more responsible not only for children's physical well-being but also for their emotional and psychological development" (601). Women are thus simultaneously called on to rely on expert authority over personal judgement and are personally responsible for any malady that should befall a child. As a result of expert reliance and personal responsibility, we can only arrive at an understanding of our own bodies based upon expert knowledge and social learning (McCaughey, P. Douglas, J.B. Wolf). There are layers of discourse that surround bodily understanding—medical wisdom, midwife/lactation consultant wisdom, and general "folk wisdom" from female family members; this influence can subsequently result in "a serious distrust in [women's] own experiences and interpretations of their bodies" (McCaughey 90). Perhaps it is this distrust that can offer an explanation for lower nursing numbers among lower-income and black mothers: women who

have been suggested to be "irresponsible and untrustworthy" may be less likely to rely upon the same medical authority which condemns them (McCaughey, Hausman 2007).[12]

Whereas the Surgeon General's "Call to Action" lays out clear and logical "facts" and offers authoritative advice for those who will guide the new mother in the right path, public service announcements directed toward the mother herself use shock and guilt to push the importance of breastfeeding. In 2003 and 2004, the Ad Council responded to pressure from infant formula companies to reduce the shock value of pro-breastfeeding ads and reduced what it considered the more overt "shock value." The ads that remained, though, were unequivocal. For example, in plain black billboards with white print, reminiscent of the "God Speaks" campaign, the Ad Council projects its unequivocal tag-line "Babies were born to be breastfed" (Nudd). Government-sponsored commercials showed cute pregnant women engaging in log-rolling contests or riding mechanical bulls with a voiceover stating: "You wouldn't risk your baby's health before it's born. Why start after? Babies were born to be breastfed." The ads listed diseases presumed to be more common among formula-fed babies such as diabetes and leukemia, though few studies are able to show exactly *how* breast-milk works to prevent illness. Formula lobbyists suggested that the diseases were presented without actual data and intended to frighten parents unnecessarily. The ad release was postponed and officials eventually removed references to diabetes and leukemia, citing questionable validity (Fisher). Certain medical professionals involved in research on behalf of the Ad Council and breastfeeding advocacy groups cried corporate malfeasance, putting babies lives in danger for profit. One pediatrician

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[12] In a 1999 study, Linda Blum suggested that black women have deliberately rejected breastfeeding as a means of resistance, a way to discard the stereotypes that have defined their bodies and dictated the parameters of appropriate behavior for so long: "To assert autonomy from these oppressive readings, and to resist increased external monitoring by and vulnerability to state health and social service authorities, most of the mothers reject dominant prescriptions to breastfeed" (179).

said, “We’re talking about people making money on the heads of newborn babies” (Ross and Rackmill). It is precisely this passionately inflated, divergent, and confusing rhetoric at the intersection of governmental authority, medical authority, and corporate control, that envelops the contested female body and dictates appropriate use of the body.

A milder, or perhaps more playful, version of shock-value the public health initiative is found in 2010’s “Whip ’em Out!” campaign, in which a variety of celebrities such as Kelly Rutherford, Ali Landry, Lisa Loeb, Constance Marie, and Ana Gasteyer as well as “real moms” offer a montage of attention-grabbing slang for breasts: “funbags, boulders, bazongas, cans, melons, jugs, rack, knockers,” etc. These mothers then proceed to tell the camera that they understand breastfeeding can be hard; it can be painful; it can be confusing. One woman says, “Yeah, it’s hard, but going to the gym is hard,” suggesting that a strong woman has the self-discipline to “just do it.” In this ad we find a battery of messages assaulting the new mother, including an appeal to physical attractiveness (“It’ll make you skinnier.”), an appeal to “good” motherhood (“It’s the best thing for your baby.” “The bond that you’re going to create with your child is magical and lasting.”), the suggestion that one will have little trouble breastfeeding if one tries hard enough because it is the natural “job” of the breast (“It’s so easy.” “As soon as you get over that hump it is the most magical, wonderful, lovely, natural thing in the world.”). The ad concludes: “Breastfeeding—it’s what your knockers are for.” In ads such as these we discover that women are confronted with an ideological entreaty from both the medical and governmental discursive powers (speaking through other women who “understand” and have “been there” but were strong enough to make the right/rewarding decision).

In research supporting the critical health benefits of breast-milk, both government and lactivist authorities applaud "authoritative medical research" and simultaneously project a capitalist imperative. In response to the 2006 American Association of Pediatrics guidelines, one La Leche League manager reported her excitement, adding "The annual healthcare costs saved by breastfeeding are stated at 3.6 billion a year" (Romans). This is echoed in the 2010 "Whip 'em Out!" campaign, although in four years the figure has dramatically increased: "Did you know that by breastfeeding, your knockers could save the U.S. 13 billion dollars per year in healthcare costs?" Although the various ads promote the health benefits associated with breast-milk, there is an obvious underlying appeal to civic duty and personal responsibility—both patriotism and maternal obligation.

Additionally, although these ads champion a "whenever/wherever" approach to breastfeeding, an actual breast is never revealed. Even in a campaign to "go ahead and whip 'em out," there are no depictions of breasts or breastfeeding mothers. On the contrary, literature issued to new mothers (both in hospitals and through La Leche League) will offer suggestions for discretion when nursing in public, including multiple examples of how best to cover up the breast; such pamphlets also suggest that it is the mother's relative confidence or discomfort with breastfeeding in public that will determine the ease of transition and comfort level of others (Wall). This implies personal responsibility for the comfort of others, and would seem to suggest that a woman is most comfortable and confident when covering the breast. The dominant discourse demands breastfeeding as exemplary of "good" motherhood, but demands that the act be hidden, so that discretion is ultimately synonymous with invisibility. Though pamphlets issued by lactation consultants and breastfeeding advocates such as La Leche League offer a

slightly different approach in tone from public service announcements, both literature with either "official" medical authority or moral authority (implicit in the "sisterhood" rhetoric advanced by La Leche League) can be shown teaching women how to manage and subdue their bodies in the public sphere.

4 Conclusion: The Resistant Body

Given scare tactics and appeals to social responsibility and moral duty, the passion that drives lactivists to protest is no surprise. But despite insistent initiatives to promote breastfeeding, there remain little to no visual representations of breastfeeding within an incredibly visual culture. Occurrences of actual breastfeeding, in media representations or in real-life encounters of nursing mothers, are met with discomfort, and often open hostility. It is this absence of visibility that renders the valorization of breastfeeding at the expense of the mother, in public service announcements and La Leche League educational material, somewhat ineffectual; it is only in the visual, personal encounter with the embodied act that we begin to break down fears and to construct a new narrative. Breastfeeding "transgress[es] the boundaries of both the good maternal body and woman-as-(hetero)sexual object" (Stearns 309). Even as she works within a culture that defines her social worth and value as a "good" mother based on her willingness and ability to provide breast-milk, she yet exhibits agency over her own body by rejecting cultural insistence on hiding the act.

Considering the simultaneous pressure to perform appropriate motherhood by nursing and to exhibit appropriate femininity by hiding the sexualized body, it becomes increasingly obvious that this is not really a question of breast versus bottle, but a question of female embodiment, women's bodies in the public sphere, and the body's potential for resistance from

within this discourse. One cannot accept the full Foucauldian implications of power relations because the recognition of discursive formations is itself empowering; and though resistance cannot exist beyond the influence of an overarching heteronormative, patriarchal voice, the realization of this influence and the effort to resist it is liberating. Hauser's discussion of the rhetorical power of the body in pain shows that agency is possible in the resisting body, even a body that would seem suppressed by the dominant power; resisting bodies "may be active creators of new power relations that sustain individuals in their confrontation with systems of power" (250). The public exposure of the breast rejects the dominant discourse that would equate morality with modesty, and consequently with bodily erasure. Stearns claims that breastfeeding is "a visual performance of mothering with the maternal body at center stage" (309). Breastfeeding can also empower the contested body. Some women experience empowerment in lactation itself, not merely in the display, and describe a sense of secret power in the life-giving formula she body can provide. (As we have seen, describing breast-milk as a cure-all infant elixir springs from both medical discourse—that seeks to study, categorize, and control motherhood—and the discourse of breastfeeding activist groups like La Leche League that glorifies infant feeding without consideration of the woman's desires.) Putting the contested maternal body into public space, therefore, holds the double bind of presenting a woman who feels empowerment in nurturance—and, by her presence in the public space, demands a liberation from the social contract that calls her to anticipate/control the gaze and exhibit "feminine" modesty by hiding the body—but also stages nurturance as an act of appropriate motherhood to the exclusion of maternal sexuality, because, as we've seen in the case of Karen Carter, to admit any sexuality in coexistence with motherhood is dangerous and will be disciplined.

Amy Koerber has written extensively of the "disciplinary rhetorics of breastfeeding." She suggests that nursing mothers "can disrupt disciplinary power even without escaping its grip" (95). Koerber contends that nursing mothers might move from mainstream medical discourse to the counter-discourse of La Leche League, but the moment of potential resistance occurs when the mother attempts to breastfeed in public for the first time outside of the protective acceptance/safety of a La Leche League group meeting. I would argue, however, that another disciplinary gaze, the authoritative patriarchal narrative that codes the mother's body as asexual *and* breasts as sexualized, reinforces shame in individual public exposure, and the isolated breastfeeding display fosters little empowerment. Rather, it is in the purposeful collective display that breastfeeding mothers find agency. It is a visual shock to see a group of nursing women, a disruption of public space. One simply never sees exposed breasts in public, let alone in mass. Despite relevant concerns about lactivism's potential to reaffirm certain disciplinary rhetorics by redirecting the shame to women who cannot or are unable to nurse, a primary goal of lactivism is exposing the public to this scene. It is precisely this effort toward mass visibility that is both empowering and rhetorically effective; the powerful have been made spectators, an audience that must acknowledge the position and demands of the activists (Blitefield). Likewise, to be hidden is to be devalued (Stearns). Deliberate visibility confounds traditional notions of motherhood which dictate the asexual and apolitical maternal body as natural and "good."

Within the plurality of feminist methodology, a collective rhetorical display can work as a counterpublic to change dominant ideological constructions (Bizzell). The collective body re-articulates parameters of appropriate feminine behavior. The power of connecting with a

community allows women to invent a new way to be heard. In this way, public breastfeeding as a form of activism may be considered an example of "doing feminism," a convergence and reconciliation between the activism of the second wave and the re-appropriation of traditional gender roles in the postfeminist tradition. By presenting the maternal, lactating body in public space, the nurse-in shatters persistent images of domesticity that bind motherhood to the home. Mothers are making the personal political.

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