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Empowerment or regulation? Exploring the implications of women's perspectives on pumping and expressing breast milk

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Introduction

- Expressing and/or pumping breast milk seem to be common practices during early infant feeding:
 - in North America (see, Kelleher, 2006; Labiner-Wolfe, & Fein, 2008)
 - and Australia (see, Win, Binns, Zhao, Scott & Oddy, 2006).



Introduction

- Contradictory theorisation of expressing in the feminist literature:
 - A type of *regulation* (Dykes, 2005; 2006; Hausman, 2003)

But...

- Can be *empowering* - allow for greater paternal involvement and increased freedom (Dykes, 2006; Morse & Bottorff, 1992; Van Esterik, 1996)



Introduction

- Our recent analysis of experiences of expressing breast milk (Johnson et al., 2009)
 - First time mothers kept an audio diary and took part in a follow-up interview
 - Analysed from a feminist poststructuralist perspective (Gavey, 1989; Weedon, 1997):
 - identifying how the women drew on, negotiated and reworked discourses and practices and explored implications



Introduction

- Women accounted for the practice of expressing in ways which could be seen as empowering and disempowering:
 - A way of managing pain, feeding difficulties and inefficiencies of the body
 - To manage the realities of modern motherhood i.e. shared parenting, 'bonding' between the baby and others, feeding in public and returning to work
 - A way to negotiate some independence and manage the demands of breastfeeding



Introduction

- Aims today:
 - Present a case study
 - Highlight how some of the discursive constructions identified in our previous analysis were taken up and negotiated
 - Explore the implications for public health theory and practice



Participant

Case study: Yvonne

(one of 8 out of 33 who expressed/pumped extensively)

Phase one:

- Getting on well with breastfeeding:
 - *we haven't really had any problems*



Yvonne

Phase two

- Mainly pumping and feeding breast milk via a bottle
 - *The only reason that I've been doing that [pumping breast milk] is because I find that when baby's on the breast, he takes such a long time to feed. He can be on the breast for up to like an hour and a half, 2 hours*
(Phase 2 diary, day 1)



Yvonne

- The breastfeeding body contradicts notions of the perfect female body in western culture which is under control
- Breastfeeding bodies represent a challenging 'dynamic and changing corporeality' including being constantly available (Bartlett, 2003, p. 154)



Yvonne

- Started to experience pain from sore and cracked nipples because she felt her baby was not latching on properly
 - *... one Thursday and I was like, err, nearly in tears and I was basically saying there's no way that he can come back on my breasts because they were just so sore... I didn't want to give up breastfeeding, but I just thought I couldn't take the pain any more. So I decided that I'd express.*
(Phase 2 diary, day 1)



Yvonne

- Conveyed a sense of struggling to establish a feeding routine:
 - *I'm really persevering with this breastfeeding. This morning was a really good feed... But then he was awake from 1 o'clock, till half past 4, and I knew that was a bad thing because I knew that my milk would be coming in shortly. I got up just gone 6, and I had to come downstairs and express because I had so much milk in my breasts.*
(Phase 2 diary, day 5)
- By day 7 reported more confidence:
 - *'I'm not going to express, not like every day probably' and that she felt like 'the breastfeeding is finally starting to kick in'*

Outcomes?

- By phase two varied outcomes:
 - One had given up both pumping and breastfeeding
 - Some were exclusively breastfeeding
 - Some mixed feeding
 - Others were mainly pumping



Implications for public health

What role might expressing / pumping breast milk play in public health initiatives to promote breastfeeding which are women-centred?



Enabling women through promoting expressing/pumping

- Not just of relevance to return to work and feeding of pre-term infants
- Knowledge about expressing enables:
 - Management of pain, time constraints, confidence about adequacy of milk supply
 - Facilitation of shared parenting, management of public feeding
 - Navigation of contradictory cultural pressures on women re. infant feeding



Need for caution in promoting expressing/pumping?

- Does not support women in challenging these cultural pressures
 - Individual-level solutions to socio-cultural problems?
- By promoting a technical 'fix', do we undermine the relational aspects of breastfeeding?
 - Breastfeeding is not necessarily experienced as connectedness (e.g. Schmied & Barclay, 1999)
 - Feeding can be experienced as 'bonding' regardless of method
 - Depends *how* we incorporate the technical 'fix' of the pump into breastfeeding



Conclusions

- Expressing may be experienced as empowering by some women *because* it gives them additional control over their bodies
- Public health initiatives might usefully:
 - raise awareness of the practice
 - focus on solutions to breastfeeding problems rather than costs/benefits to babies and women



Conclusions

- However, social & cultural solutions are required for social & cultural problems, e.g:
 - Legislation re. public feeding & maternity leave
 - Flexibility in working practices
 - Promoting shared parenting for non-feeding tasks
 - Promoting wider understanding & cultural visibility of the techniques and challenges of breastfeeding

Conclusions

Expressing & pumping can be enabling for women but they can only be promoted as a 'choice' if they are no longer the only solution to wider pressures and dilemmas related to breastfeeding