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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).
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)
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.