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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

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- 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

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- 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

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- 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

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- 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

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- 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

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## 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

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## 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

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- 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

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- 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

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- 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?

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- 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

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*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

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- 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?

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- 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

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- 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

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- 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

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*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*