

Breastfeeding, ‘tainted’ love, and femmephobia:

Containing the ‘dirty’ performances of embodied femininity

Abstract

In this conceptual analysis, we theorise breastfeeding as an embodied ‘dirty’ performance of femininity and draw on Hoskin’s (2019a) work on femme theory to propose that women who breastfeed in public, who do so for an ‘extended’ time, and who enjoy it are subject to femmephobic attacks. We integrate three streams of literature to unsettle the ‘taint’ of breastfeeding. We first theorise breastfeeding as an act of femininity where women perform gender trouble (Butler, 1999). We also draw on Douglas’ (1966) work on ‘dirt’ and Rivera’s (2015) work on emotional ‘dirty’ work to theorise that ‘taint’ is one way in which society stigmatises the phenomenon of breastfeeding. Specifically, we propose that embodied breastfeeding evokes ‘tainted’ emotions. We then draw on Schippers’ (2007) work on ‘containing’ pariah forms of femininity (lest they ‘contaminate’ patriarchy) by showing how femmephobic stigmatisation limits breastfeeding women’s corporeality and presence in shared spaces.

Keywords

Femininity, femme, femmephobia, breastfeeding, dirt, taint, embodiment.

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“As soon as I start nursing, the area clears. In some ways I am relieved to have the space, but in other ways I feel the repellent behaviour viscerally. I watch people walking by not looking over or quickly turning away. I wonder how long I am able to transgress the normative understandings of the body, and the proper place of the body within this setting. After I leave, is my practice still imprinted in this social space?”

(Mathews, 2018, p. 11).

Introduction

It has been argued that patriarchal femininity must be offered up to the heterosexual male gaze (Hoskin, 2019a), which serves to restrict the spatial mobility of women and their presence in the world (Fenster, 2005). (Public) breastfeeding is one such ‘space’ where we see the complexities of these expectations playing out. The World Health Organization (2020) recommends exclusive breastfeeding for the first six months of age and continued breastfeeding up to two years and beyond, and there are a growing number of laws that protect breastfeeding women (*e.g.*, the Equality Act 2010 in the United Kingdom (UK), the Fair Labor Standards Act in the United States (US), the Federal Sex Discrimination Act in Australia, the Working Hours Act in the Netherlands). However, despite the public health narrative around *abstract* breastfeeding having many benefits (NHS, 2020; UNICEF, 2019), society still perceives the *embodied* act of breastfeeding as disgusting and shameful. As such,

women who breastfeed in public, who do so for an ‘extended’ time¹, and who enjoy it are stigmatised (*e.g.*, Boyer, 2018; Dowling & Brown, 2013; Grant, 2016; Grant, Mannay, & Marzella, 2017; Mathews, 2018; Newman & Williamson, 2018; Tăut, 2017; Tomori, Palmquist, & Dowling, 2016). Indeed, KLM’s 2019 tweet presents breastfeeding as an activity that makes some people feel ‘uncomfortable’ and alludes to the possible ‘offense’ that might be caused:

Breastfeeding is permitted at KLM flights. However, to ensure that all our passengers of all backgrounds feel comfortable on board, we may request a mother to cover herself while breastfeeding, should other passengers be offended by this (KLM, Twitter feed, July 2019).

This, and many other similar incidents draw attention to the need to better understand the contradictions, espoused and felt, about breastfeeding, the stigmatisation surrounding it, and what this means for women who breastfeed. In this conceptual piece, our purpose is to unsettle the, so-called, ‘taint’ of breastfeeding and theorise breastfeeding as a stigmatised embodied performance of femininity.

To do so, we look to three streams of literature to unsettle taken for granted assumptions about breastfeeding. First, we draw on Butler’s (1999) work on gender performance to position breastfeeding as a performance of femininity, and on Hoskin’s (2017; 2019a) work on femme theory to propose that women who breastfeed in public, who do so for an ‘extended’ time, and who enjoy it are performing (femme) femininity. They are, therefore, subject to femmephobic attacks (Hoskin, 2017; 2019b) because they are performing gender trouble (Butler, 1999). We then turn to Douglas’ (1966) work on ‘dirt’ and Rivera’s (2015) work on emotional ‘dirty’ work to theorise that ‘taint’ is one way in which

¹ Breastfeeding beyond 12 months is considered ‘extended’ breastfeeding (Brockway & Venturato, 2016).

society stigmatises the phenomenon of breastfeeding. Specifically, we propose that embodied breastfeeding evokes ‘tainted’ emotions. Subsequently, we draw on Schippers' (2007) work on ‘containing’ pariah forms of femininity by showing how femmephobic stigmatisation limits breastfeeding women’s corporeality and presence in shared spaces.

In doing this, we want to acknowledge that our position is one of supporting parents in their feeding choices, whether that is to breastfeed, to pump, to formula-feed, to use donor milk, or to combine different feeding methods. We agree that the breast versus bottle ‘milk war’ (Neely, 2019) detracts from the real systemic issues that prevent women from genuine and authentic equal participation in the world.

The feminist conceptual analysis that we present in this paper is important because, as noted by Kahn, a critique of patriarchy “must advocate not only the *suppression* (that is, access to birth control and abortion) but also the *expression* of childbearing function, which includes pregnancy, childbirth, *and* lactation” (Stearns, 1999, p. 308). It is therefore important for critical femininities to explore the nuances of femininity and, in this paper, we discuss some patriarchal norms that lead to femmephobic stigmatisation of performing femininity via breastfeeding.

Femininity and femme theory

Gender essentialism is the view that masculine and feminine properties are intrinsic, innate, and fixed to bodies’ physiological characteristics (Mikkola, 2017). In contrast, Butler (1988) defined gender as something that we do via “stylised repetition of acts through time” (p.520). Her view (and we agree) is that gender is not a stable or intrinsic identity ‘fact’ but a historical idea – a cultural interpretation of one’s biological sex. Certain bodily gestures, certain movements, and specific styles of behaviour produce and re-produce what society

understands to mean as, so-called, masculine and feminine. It is the materialisation of these repetitive practices that enact, create, and re-create what society believes to be acceptable norms. Patriarchal femininity encompasses (socially agreed) normative ideals of what it means to be feminine. It is entrenched in the notion that femininity is performed for the male gaze and is a product always available for male consumption. Scripts of allowable and disallowed meanings, permeated in sociohistorical context, that femininity is about “servitude, objectification, and lacking agency” (Hoskin, 2019b, p.699), are inherited from previous generations, and compel, legitimise, and enforce gender performances (Butler, 1999).

Femme, originally used to refer to feminine lesbians, offers an alternative theoretical framework that repudiates hegemonic femininity norms and refuses to ‘cater to and appease’ patriarchal expectations (Hoskin, 2019a). Femme is about defiance; it is about challenging and renouncing the (socially constructed) idea that femininity is *for* men and that masculine right of access is woven in its very fabric. Femme theory has since evolved from its roots of describing feminine lesbians to encompassing a broader femme identity as femininity in-and-for-itself. It can, therefore, be applied to explore the broader complexities of femininity, such as breastfeeding. We thus contend that, if patriarchal femininity entails regulated performances of femininity for the male gaze and femme is femininity in-and-for-itself, then women who breastfeed in public, who do so for an ‘extended’ time, and who enjoy it are performing femme. In doing so, they are challenging and re-working norms of femininity that necessitate it as performed for the consumption of patriarchal society.

Our application of femme theory to breastfeeding opens a further avenue of sensemaking via the lens of femmephobia, which Hoskin (2019b) defines succinctly as the “fear of the feminine” (p. 687). Women who do not follow the scripted and expected patriarchal femininity social norms, who perform what Butler (1999) calls gender trouble, are

punished – they are stigmatised and marginalised. Femmephobia, therefore, maintains the devalued position of patriarchal femininity and, equally, patriarchal femininity is regulated via femmephobia. In our argument, we demonstrate how femmephobia contains performances of femininity psychologically (via ‘tainted’ emotions) and physically (by regulating women’s embodiment in shared spaces). First, we position breastfeeding as a performance of femininity, and breastfeeding in public, for an ‘extended’ time, and with enjoyment as ‘dirty’ (femme) femininity.

Breastfeeding as performing femininity

Bartlett (2000) ponders, “for what other reason could I sit in a theatre with one breast ‘exposed’, unless performing maternity?” (p. 117). Although both men and women have breasts, nipples, and milk ducts, breastfeeding is almost exclusively seen as a feminine activity and is generally practiced as “an activity corporeally restricted to women”² (Bartlett, 2000, p. 179). If we apply the idea of gender performativity to breastfeeding, then we can see how breastfeeding might be considered a feminine gendered act that is materialised through the regular performance of (culturally and historically situated) norms. Breastfeeding is an especially interesting performance because it is a continuous activity that involves the participation of another (the baby); it is also a visual performance because it is often

² Not all women breastfeed, and it is not only cis-gender women who breastfeed; non-binary and trans* persons can also breastfeed or chestfeed. Yet, studies exploring the phenomenon of chestfeeding are extremely limited (e.g., Riggs, 2013) – even those coming from a medical ‘lactation’ perspective (e.g., García-Acosta, Juan-Valdivia, Fernández-Martínez, Lorenzo-Rocha, & Castro-Peraza, 2020; Jaslar, 2018). We, therefore, urgently call for researchers to explore the phenomenon of chestfeeding and, simultaneously, acknowledge that what we discuss in this paper focuses primarily on the experiences of cis-gender women. Recently, there has also been an interest in cis-gender men breastfeeding. For example the tech firm Dentsu developed a Father’s Nursing Assistant (Marcoux, 2019) that can be worn to allow men to breastfeed and Marie-Claire Springham won the Meaning Centred Design Awards’ (2018, p.1) Grand Title Trophy for her chestfeeding device that “deserves particular attention because it challenges the fundamental meanings of male and female, father and mother, parent and child”.

performed in front of others (Stearns, 1999). Women who breastfeed in public are thus engaged in a public performance (Stearns, 2013) – of femininity.

The lived experience of breastfeeding is also very obviously an embodied act (Newman & Williamson, 2018). It is “more than the physical and mechanical process of lactation” (Shaw, 2004, p. 105). The embodied *intimate* act of breastfeeding is almost always about much more than simply nourishment for “when a baby suckles at the breast, it is also about attachment, comfort and love” (Bueskens, 2015, p. 3). Indeed, breastfeeding has been described as being “embraced in love” (Faircloth, 2011, p. 294). The act of breastfeeding today, in the West is, however, a troublesome performance. Breasts are hypersexualised (Young, 2003) as a sort of ‘mass fetish’ for male stimulation (Palmer, 1993). Outwardly, lactating breasts might appear even more arousing to some because of their increased size and breastfeeding in public has been construed as analogous to ‘indecent exposure’ (Bresnahan et al., 2019). Patriarchal femininity expects that breasts, especially arousing breasts, are displayed for the male gaze, and indeed, studies show that an appreciation for larger breasts is associated with sexist attitudes (Swami & Tovée, 2013). Also, breastfeeding involves sucking – a “gesture full of sexuality” (Tăut, 2017, p. 819). As described by Laplanche (1976):

Parallel with feeding there is a stimulation of lips and tongue by the nipple and the flow of warm milk. The stimulation is initially modelled on the function, so that between the two, it is at first barely possible to distinguish a difference (Laplanche, 1976, as cited in Grosz, 1994, p. 54).

Sexuality has long been seen as the “totalising feature of women’s personhood” (Bay-Cheng, Bruns, & Maguin, 2018, p. 700). Indeed, women’s value has historically been dependent on how her sexual availability is presented. Women are either virgins or sluts, compliant or pariahs (Darwin, 2017; Schippers, 2007); victims, worthy of chivalrous

protection, or vamps, who “knowingly use notions of femininity” to exploit vulnerable men (Schemenauer, 2012, p. 91). Such dichotomous ideologies are one way in which patriarchy is reinforced and sustained. They restrict women’s agency and confine their identities to one of two rigid norms: good and chaste, or bad and sexual (Bareket, Kahalon, Shnabel, & Glick, 2018).

The conflict between the (good) maternal feminine body and the (bad) sexual feminine body becomes more obvious when breastfeeding is done in public (Stearn, 2013). If the ‘proper’ (patriarchal feminine) performance of the breast is to sexually entice and excite men (Bartlett, 2005), then women who breastfeed in public, who do so for an ‘extended’ time, or who enjoy it, are performing femme (femininity in-and-for-itself) and gender trouble (refusing to perform their gender correctly). Breastfeeding in public is thus perceived to be a strategic decision made by calculating ‘bad and sexual’ women, exhibitionist flashers, who “unnecessarily” expose their (sexual) breasts to men (Bresnahan et al., 2019; Tăut, 2017, p. 819). Applying the same lens that ‘permissible’ femininity is performed for the male gaze, then enjoying breastfeeding, especially with non-sexual breasts, is ‘non-permissible’.

Clearly, women negotiate gendered expectations by breastfeeding (Mathews, 2018). They simultaneously perform patriarchal femininity (by engaging with the expression of motherhood), gender trouble (by breastfeeding in public, for an ‘extended’ time, or by enjoying it), and femme (by refusing the masculine right of access infused in notions of patriarchal femininity). Breast ‘performances’ that, therefore, fall outside of the patriarchal femininity remit are subject to femmephobic attacks. One manifestation of femmephobia is the propagation of the misogynistic idea that women and their bodies are ‘dirty’ and that feminine fluids (*e.g.*, menstrual blood, lochia, breastmilk) produced by the feminine body are expected to be “contained and controlled” (Battersby, 2007, p. 102). Another manifestation of femmephobia is the physical restriction of women’s equal participation in shared spaces. We

first turn to the work of Douglas (1966) and Rivera (2015) to further conceptualise breastfeeding as a performance which evokes ‘tainted’ emotions.

Breastfeeding as ‘dirty’ and ‘tainted’

Stigmatisation is a socially and culturally constituted process in which a person is labelled as different or deviant, and then devalued, leading to status loss and discrimination (Link & Phelan, 2014; Pescosolido & Martin, 2015). It is one of the means by which society ‘punishes’ people who contest gender scripts (Butler, 1999). Women who perform patriarchal femininity ‘wrong’ by breastfeeding in public, for an ‘extended’ time, or by enjoying it are called deviants (Velding, 2017), inconsiderate nonconformists (Bresnahan et al., 2019), pariahs (Schippers, 2007), shameless hags (Sundén & Paasonen, 2018), and even paedophiles (Newman & Williamson, 2018), for so unabashedly performing unscripted/improv (femme) femininity. Today, in the West, women who breastfeed in public, for an ‘extended’ period of time, or who enjoy it, are stigmatised through negative attributions, labelling, objectification and depersonalization, moral criticism, and non-verbal sanctioning behaviours (Breshnahan et al., 2019).

Stigmatisation reproduces social inequalities and is perpetuated by hegemony and the exercise of power (Scambler & Paoli, 2008). Women are bombarded from a very young age with the (false) norm that they need to discipline, regulate, and even mutilate their bodies to conform to hegemonic standards of femininity. In this context, they need to be able-bodied, youthful, slim, light-skinned, smooth, hairless, and sweet smelling ...lest they be ‘gross’ (Fahs, 2017), and much of this is ‘policed’ by other women (Berbary, 2012; Mavin & Grandy, 2015). Others have shown how women’s bodies are perceived as ‘leaky’ and dangerous (Longhurt, 2004), as bodies that ‘get in the way’ of rational masculine order

(Boyer, 2012b). Breastmilk is seen to be especially ‘dirty’; it is perceived as similar to pus (Battersby, 2007), as unhygienic (Tăut, 2017), pollution even (Dowling & Pontin, 2017). As described by a participant in Mahon-Daly and Andrews’ (2002) study on the breastfeeding experiences of women in the UK, “I felt really dirty if I had leaked, I feel that everyone is looking at it [the stain] and thinking that I’m unclean” (p. 59).

Given how women’s bodies during pregnancy are perceived to be ‘labouring’ bodies (Draper, 2003), how women’s work is taken for granted as unpaid labour (Beneria, 2001), and how motherhood and body work can translate into maternal body work (Gatrell, 2013), we turn to Rivera’s (2015) research on emotional ‘dirty’ work to propose that embodied breastfeeding evokes tainted emotions. Although Rivera’s research is normally applied to paid employment, we feel it can also be applied in this context because breastfeeding is a form of maternal labour (Stearn, 2013); it forms part of women’s unseen and unpaid labour in the home³. Douglas (1966) defines dirt as matter out of order, matter ‘out of place’. Something is socially perceived to be ‘dirty’ because it is out of its normatively agreed position – it threatens our social norms by being somewhere it should not be. Breastfeeding is especially construed as ‘tainted’ if the practice is enjoyed by the mother. Blum (1999) notes that some might perceive breastfeeding as akin to adultery, and in Tăut’s (2017) study of how narratives of public breastfeeding on Romanian discussion forums are constructed, one post read as follows: “It is just the mothers’ way of clinging to the baby story, to her convenience and *to her personal pleasure*” (p. 821, emphasis added). Breastfeeding is especially ‘tainted’ if the child is no longer an infant. For example, in Gribble’s (2008) study on attitudes towards long-term breastfeeding among Australian mothers, participants reported previously holding negative attitudes towards extended breastfeeding, with one participant stating, “I found the idea of feeding older children gross and tasteless and a bit off” (p. 7). Additionally,

³ According to the New York Post, being a mother is the equivalent of working 2.5 jobs (Welch, 2018.)

breastfeeding a boy, particularly one that is no longer an infant, is highly ‘tainted’, as exemplified by one participant’s description of her mother-in-law’s reaction to extended breastfeeding in Tomori and colleagues’ (2016) article on breastfeeding women’s experiences in the US and the UK: “...ooh ooh, breastfeeding a boy, it’s a bit odd, isn’t it?” (p. 182).

Rivera (2015) proposes a four-part conceptualisation of ‘taint’ that evokes objectionable, inappropriate, excessive, or vulnerable emotions. We extend her work to the context of breastfeeding, and theorise that such emotional performances, by breastfeeding women and the public, are socially constructed and feed off each other. For example, in Boyer’s (2018) study on breastfeeding in public in the UK, one participant conveyed, “I don’t think others are comfortable with it, which made me feel uncomfortable” (p. 46). Similarly, in Tomori et al.’s (2016) study, a participant explained, “I feel less comfortable about it, and it is because of potential reactions” (p. 182). Evidently, uncomfortable and out of place emotions are triggered in both the breastfeeding women and those ‘observing’ breastfeeding, thereby tainting the act and stigmatising those who perform it.

The first category of ‘dirty’ emotion in Rivera’s conceptualisation is objectionable emotions. Objectionable emotions are emotions that are “viewed as negative or not preferred” (Rivera, 2015, p. 219). Although many women may enjoy breastfeeding, they can also feel ashamed (Thomson, Ebisch-burton, & Flacking, 2015), embarrassed, and self-conscious (Boyer, 2018) when doing so in public. In Boyer’s (2018) study, one participant reported that, “people were really shocked by the fact that you’re breastfeeding in public...I found it really stressful, really embarrassing, really horrible” (p. 46). Similarly, people observing a women breastfeed feel objectionable emotions like disgust, particularly when the child is no longer an infant, as exemplified by a participant in Gribble’s (2008) study: “I must admit that I used to think that it was a bit sick to see someone breastfeed a child who could walk and talk and ask for breastmilk” (p. 7). In fact, disgust and dread are two emotions often connected to

women's bodies (Chrisler, 2011; Fahs, 2017). They lead to moral judgements about cleanliness and 'goodness', resulting in prejudice, othering, and stigmatisation.

The second category of emotions is inappropriate emotions. These occur when the "display is deemed as not matching the event or circumstance" (Rivera, 2015, p. 219). A sense of inappropriateness is especially salient in 'extended' breastfeeding; it was described by a participant in Newman and Williamson's (2018) study on the experiences of white women breastfeeding beyond six months in the UK, as "that's when you tend you get more dirty looks the older your child gets so if they can walk like that's really a no-no, if they can ask for it that's also a bit of a stigma" (p. 243). Significant agency on the part of the child, as manifested in verbal requests to remove clothing, is considered fundamentally inappropriate (Stearns, 2011; 2013). For these reasons, some mothers teach their children code words for breastfeeding so that they may engage in the 'shameful' practice of 'extended' breastfeeding while appearing to, as Goffman (1963) calls it, 'pass' in public. Inappropriate emotions are also representative of how people feel about breastfeeding in public in general. In Grant's (2016) analyses of online comments relating to a protest supporting women's right to breastfeed in public on a UK news site, examples included: "I and many don't want to see you flashing your bits around while we're shopping" (p. 57) and "Can't bare women like these, all me, me, me"(p. 58).

The third category is excessive emotions. These are experienced when the display is deemed as "too much or too little emotion related to the work" (Rivera, 2015, p. 219). Excessive emotions can be seen in comments such as, "[emphasis in original quote] This kind of fanatical self-righteousness is what annoys me the most about those who are pro-breast feeding... And breast feeding is a CHOICE so stop pushing it down everybody's throats" and, "Regardless of if its feeding or whatever the FACT is to breast feed in public you are exposing a breast in public which is not acceptable, facts are facts regardless of your feeble

attempt to justify it...” (Grant, 2016, p. 57/58). In this context, women who chose to exercise their right to breastfeed in public are labelled “breastfeeding mafia”, “holier than thou breastfeeding brigade”, and “lunatic breastfeeding lefty exhibitionists” who are breastfeeding in public for “cheap points and thrills” (Grant, 2016, p. 56) and to “cause a stir and fire people up” (Bresnahan et al., 2019, p. 4). Indeed, campaigns such as #FreeTheFreed, virtual lactivism (Boon & Pentney, 2015), and nurse-ins (Boyer, 2011) are often perceived very negatively. In Tăut, (2017), pro-breastfeeding campaigns were described on Romanian discussion forums as: “aggressive campaigns, with breasts all over to show” that are “rather ridiculous, inhibitory and ineffective” (p. 820). Similarly, in Grant’s (2016) study, online comments regarding publicly breastfeeding mothers included, “this bunch are prating around town trying to ‘make a point’!” (Grant, 2016, p. 57).

Finally, in Rivera’s (2015) conceptualisation, there are vulnerable emotions, and these result from situations where the person “must admit shortcomings or feel discomfort related to the emotion” (Rivera, 2015, p. 219). Breastfeeding mothers often report feeling vulnerable when breastfeeding, as described by a participant in Thompson et al. (2015), who said, “I think it is underestimated how vulnerable you feel” (p. 12). The vulnerability is especially the case when trying to find a place to breastfeed, as exemplified by the following participant quote in Newman and Williamson’s (2018) study: “Being at an 80th birthday party when it came to breastfeeding I thought ‘oh I better take myself away’” (p. 13). Similarly, a participant in Thomson et al. (2015) stated, “I was more concerned with people looking and thinking why is she doing that in public she shouldn’t be here, she should be doing that somewhere behind doors, inside in privacy” (p. 39).

Clearly, (public) breastfeeding places women in a vulnerable position. While it can be argued such women ‘do gender well’ (Grandy and Mavin, 2013) in alignment with exaggerated expressions of femininity, simultaneously, they evoke disgust and perform

gender trouble (Butler, 1988). Women are left in a precarious position: They are doing motherhood well in the sense that they are offering the benefits of breastfeeding to their baby. However, at the same time, they experience, and are on the receiving end of, contradictory ‘tainted’ emotions, and thus are doing ‘dirty’ femininity. As an embodied act, the performance also blurs the intimate and the public (Smyth, 2008).

We now look to further extend our conceptualization of breastfeeding as a stigmatised embodied act, and argue that stigmatising the ‘space’ of breastfeeding is one way through which patriarchy ‘contains’ femme or ‘dirty’ femininity via femmephobia.

Femmephobia as ‘containing’ femininity

Here, we lean on social geography to extend our understanding of breastfeeding because the lived experience of breastfeeding is an embodied act (Newman & Williamson, 2018), which requires negotiating physical space (Grant, 2016). We draw on Schippers' (2007) theorising on containing pariah forms of femininity by showing that femmephobic stigmatisation ‘contains’ breastfeeding women’s equal participation in the world by restricting their corporeality (*e.g.*, hiding away their ‘dirty’ breasts) and limiting their presence in shared spaces (while performing their ‘tainted’ activity). Schippers (2007) theorises that undesirable forms of femininity – pariah femininities (such as femme) – are contained and managed in society to prevent them from unsettling patriarchal norms of femininity. We see many similarities between Schipper’s (2007) work on containment and Butler’s (1988) early work on strict punishments, whereby those who deviate from socially mandated performances are stigmatised. We also note how Hoskin’s (2019a) work on femmephobia helps to elucidate Stone and Gorga’s (2014) containment practices whereby silence is used to exclude lesbian identities, and Tăut's (2017) notion of permission within

boundaries whereby the “when, where, how and for how long” (p. 820) of breastfeeding is normatively governed. Indeed, femmephobic policing¹ (Hoskin, 2017a) and surveillance (Grant et al., 2017) is often used to prevent breastfeeding in public, as well as ‘extended’ breastfeeding, forcing mothers to wean by a socially acceptable age (or conceal their ‘taint’).

According to Phelan, Link, and Dovidio (2008), stigmatisation has three functions: to keep people *down* through domination or exploitation, to keep people *in* through norm enforcement, and to keep people *out* as a form of disease avoidance. These are echoed in hegemonic patriarchal scripts of breastfeeding; women are told to cover up, to breastfeed discreetly, to do so in predefined private spaces, and for an approved time only (*e.g.*, Bresnahan et al., 2019; Grant, 2016; Newman & Williamson, 2018; Tăut, 2017). It is not entirely surprising as the feminine form is expected to be small and contained – to take up as little space as possible, to appear powerless (Bartky, 2015), and many women internalize this norm (Tăut, 2017). However, breastfeeding breasts “take up space. They [breasts] stick out further than ever before” (Bartlett, 2000, p. 180). Women thus feel that they are breaching this norm when they take up more space in the world than patriarchal femininity permits. The shame is described well by a participant in Gatrell’s (2013) study with mothers in the UK: “I felt really anxious and ashamed of my body, of the visibility of that. I really stood out and then towards the end you know, being the heavily pregnant body in that space was really embarrassing, really shameful” (p. 622). Women who aggressively “whipped out” “[emphasis in original quote] the WHOLE DANG THING” for “all and sundry” to see (Jane & Lazard, 2012, p. 21) are seen as being blatantly provocative (Tăut, 2017). Women therefore self-regulate; the ‘leaky and ‘dirty’ female body is disciplined and controlled to meet the patriarchal norms of modesty (Gatrell, 2013), which is reflected in the following online comment to public breastfeeding in Grant’s (2016) study: “Why can’t you use a muslin or shawl when breastfeeding in a public space?” (p. 58). Indeed, Tăut (2017) notes

how covering is about discretion, about “making sure that public eye remains unoffended and unchallenged by a potentially sexually loaded image” (p. 821).

To protect their modesty, perform the ‘permissible’ scripted femininity, and ‘do gender well’ (Mavin and Grandy, 2013), women engage in “a ritual of positioning themselves” (Mahon-Daly & Andrews, 2002, p. 70). The two main body parts that women frequently feel compelled to hide are the nipple and the stomach (Newman & Williamson, 2018). Exposure is limited by carefully positioning the baby’s head and wearing breastfeeding-friendly clothes, as described by one woman in Mahon-Daly and Andrews (2001): “I usually wear something I can lift up so I don’t show everything” (p. 70). However, this does not seem to be sufficient; in Zhang et al.’s (2018) qualitative study of Chinese women’s experience with breastfeeding, one participant reported, “Even if I use a nursing cloth to cover, people still know what I’m doing” (p. 267). The specific quote really highlights the height of shame and embarrassment that is associated with breastfeeding. Even when the nipple is covered, others still know the hidden ‘dirty’ act that is taking place. What is it about the nipple, we ask? We certainly live “in a world of billboards covered in tits” (McNich as cited in Bueskens, 2015, p.1), so why do women feel compelled to cover up while breastfeeding? We contend that it is because patriarchal femininity is inseparable from the idea of masculine right of access (Hoskin, 2019b). It is supposed to be performed for and ‘offered up’ to the heterosexual male gaze (Hoskin, 2019b), always available and always accessible. When it comes to breastfeeding, the idea of masculine right of access applies as well, even in the West. For example, in Prussia, husbands were the ‘arbiters’ of the amount of time that wives were allowed to breastfeed (Smith, 2019). As one participant in Hoskin (2019b) explains, “Mr. Man owns the public domain, and when [she’s] in it he gets to say what’s on his mind” (p. 8). Accordingly, if girls and women are hypersexualised and taught to perform their selfhood for male consumption (Ringrose, Tolman, & Ragonese, 2019), then women who use their (non-sexual) breasts for an activity that excludes male gratification are

out of place and norm defiant. The same can be seen in lesbian stereotypes where ‘butch’ lesbians are especially vilified (Geiger, Harwood, & Hummert, 2006) but lesbian porn remains highly consumable (see PornHub views).

Women are aware of the conflicted pressures to expose sexual breasts and hide non-sexual breasts. In Jane and Lazard’s (2012) discursive analysis of internet discussions on breastfeeding, one discussion board post included was, “I’m pretty damn sure than whenever I breastfed in public then I was baring a lot less than a lot of the girls wandering round wearing their normal summer clothes...” (p. 22). Similarly, Grant (2016) reported the following online quote: “Apparently boobs are only allowed to be on show if they are on the 3rd page of a newspaper or some grotty lads mag, but a bit of side boob with no nipple on show is deemed unacceptable” (p. 56). However, despite comments like these, many women still feel the need to physically evict themselves from shared spaces to breastfeed. In Mahon-Daly and Andrews’s (2001) study, a participant said, “I had people to dinner last weekend, and fed her upstairs out of the way” (p. 70).

It is interesting to note how, often, those who oppose breastfeeding in public propose toilets as a more suitable alternative, suggesting that breastfeeding has more in common with ‘dirty’ defecation than with ‘clean’ eating. Indeed, Tăut (2017) notes how even the mere notion that a breast is filled with milk in public evokes feelings of disgust, particularly when present in places where edible products are purchased or consumed (*e.g.*, grocery stores and restaurants). Breastfeeding is a physiological process that involves the excretion of body fluids and, usually, because these sort of processes (urination, defecation) are perceived to be disgusting, they are deemed as things that should occur in private (Tăut, 2017), as reflected in an exemplary quote from a discussion forum reported in Tăut (2017): “we don’t pass gas around other people” (p. 819). Exposing a breast in public is then equivalent to urinating or defecating in public, as described in Bresnahan et al. (2019), who conducted thematic analyses

of public breastfeeding stigma manifest in online comments. One such comment was, “Next time, I’ll whip it out and pee on the side walk in front of you. Just remember it’s a perfectly naturally act. If you don’t like, don’t look” (p. 5). Others appear to also equate breastfeeding with being sick, as exemplified by the following online post included in Jane and Lazards’s (2012) study: “Restaurants and other similar public places should have a small area for those who have taken sick, fallen unconscious or for bfeeding [breastfeeding]” (p. 24). Clearly, devaluation of breastfeeding is demonstrated through the suggestion that these spaces are appropriate spaces for feeding a child.

The apparent best place for ‘good’ women, who adhere to patriarchal femininity standards, to breastfeed, is a specially designated feeding room. The issue of feeding rooms is quite nuanced. Research shows that most women *do* prefer to breastfeed in such designated spaces (Britton, 2000) and appreciate the seclusion, as reflected by one participant in Boyer’s (2012) study, who said, “it was good to be able to go somewhere separate” (p. 557). Indeed, an absence of feeding rooms, especially in the workplace, is often cited as a barrier and a challenge to returning to work (Desmond & Meaney, 2016; Zhang et al., 2018). At the same time, many women report that rooms allocated to feeding or expressing milk are poorly maintained or inadequate⁴. Participants in Boyer’s (2012) study had much to say about this. One said, “the air conditioning was never working, and, like, you just used to sit there and sweat in there in the plastic seats, and it was always horrible” (p. 557). Another claimed that the rooms “can be smelly and cramped or (have) chairs with arms unsuitable for feeding” (p. 557). Additionally, by removing themselves from shared public spaces and going into these secluded areas, women felt “cut off from what’s going on” (Boyer, 2012, p. 557). Similar comments were made by participants in Mahon-Daly and Andrews (2002) study, namely that,

⁴ See Melk in de meterkast photo project: <http://www.floorfortunati.nl/portfolio/photos/melk-in-de-meterkast/>

“there was a feeling of isolation” (p. 70) and in Bartlett (2000), where a participant said she felt, “insulted, being locked away out of sight” (p. 181).

Women also engage in strategic planning to ensure they do not take up space with their breastfeeding by timing their outings so that they only leave the home between feeds (Stearns, 1999), which seriously restricts the amount of time that breastfeeding women can spend outside of the home and participate in the world. As described by a participant in Tăut (2017), “If you breastfeed on demand as all big organisations like WHO, UNICEF etc. recommend, you can avoid breastfeeding in public if only you seclude yourself with the baby at home permanently” (p. 821). In this context, only hegemonic feminine bodies ascribed to patriarchal (Western) standards are considered permissible in public; “the mother’s body remains both abject and perverse – disruptive, indiscreet and lacking class” (Bueskens, 2015, p. 5).

Conclusion

*“Breasts are a source of food but
they are beautiful in their standing symbol of femininity” (Tăut, 2017, p. 822).*

In this paper, we theorise how (public and/or extended) breastfeeding can be understood as a stigmatised embodied act of femininity. In doing this, we looked to four streams of literature to provocatively position breastfeeding in this way. We looked to the work of Butler (1999) to theorise that women who breastfeed in public, who do so for an ‘extended’ time, and who enjoy it are performing gender trouble. We looked at the work of Hoskin (2017, 2019a) on femme theory to position breastfeeding as femme and, therefore, subject to psychological and physical femmephobic containment. We also looked to the work of Douglas (1966) and Rivera (2015) to theorise breastfeeding as (unpaid) work that evokes disgust - objectionable, inappropriate, excessive, or vulnerable emotions. Finally, we drew from Schippers (2007) on

containing pariah femininity to theorise how shaming (public) breastfeeding serves to restrict women's corporeality and spatial presence. We contend that if we view breastfeeding as a (femme) performance subject to femmephobic attacks, and as 'dirty' femininity work that evokes 'tainted' emotions (for breastfeeding women and the public), then we are in better position to understand why and how breastfeeding women, particularly those who do so in public, those who choose to breastfeed for an 'extended' period of time, and those who enjoy the practice of breastfeeding, are subject to stigmatisation.

Indeed, our conceptual contribution here is framed, and thereby limited, by a Western view of (public) breastfeeding. We acknowledge that, in our theorising, we draw on Western views of patriarchal hegemonic femininity (Hoskin, 2017b) and that, by doing so, we are engaging in a discourse that simultaneously privileges and marginalises. Patriarchal hegemonic femininity can be defined as "gender performances [...] which act, within a particular context, to uphold a gender binary and maintain traditional social relations between genders" (Paechter, 2018, p. 124). Hegemonic femininity ideals legitimise the dominant as masculine, and subordinate that which is feminine as inferior, as 'other' (Schippers, 2007). Yet, we agree that hegemonic femininity also reinforces "white heteropatriarchal cisgender standards of able-bodied normativity" (Hoskin & Taylor, 2019, p. 3) and are mindful that there are many intersectional nuances in femininity, such as disability (Malacrida, 2009), race (Cooley, Winslow, Vojt, Shein, & Ho, 2018), faith (Ferber, 2012), and gender expression (Hoskin, 2017b).

The research exploring the intersection of culture and breastfeeding is scant (see Street & Lewallen, 2013 and Zhang, Jin, Vereijken, Stahl, & Jiang, 2018 for exceptions) and we see our analysis as a springboard for future research. We propose that viewing breastfeeding as a biological act that involves exposing the breast, can also carry with it "undertones of social and racial hierarchies" (Tăut, 2017, p. 819), as exemplified by the following post reported in Tăut

(2017): “Only the gypsies and primitive women breastfeed in public [...] Only in Africa you see this fashion” (p. 819). Indeed, in Romania, breast-covered white Western women have traditionally occupied the highest level in the ethnic and social ladder whereas bare-breasted dark Non-Western women have occupied the lowest echelons. Similarly, research by Gallegos, Vicca, and Streiner (2015) has explored the ways in which African women who had immigrated to Australia conformed to Western cultural norms. The women, who had breastfed openly and for a long period of time in their home countries, felt that breastfeeding in public in Australia was considered shameful and thus covered up and stopped sooner than they would have. One participant said, “The way other people were looking, it’s like because she’s African, that’s why she’s doing that . . . Just the look they give you” (Gallegos et al., 2015, p. 731). Clearly, infant feeding practices can be associated with colonialism and with what is deemed ‘modern’ and reflective of economic status and power (Joseph, Brodribb, & Liamputtong, 2018). Just as stigma is socially, historically, and culturally context specific and changes over time, so is the position and enactment of breastfeeding. Indeed, Paechter (2018) notes that, “Conceptions of masculinity and femininity change over time and place as interactions and resistances require constant local negotiation and rejustification” (p.123). Future research should explore further, conceptually and empirically, the contextual and local consideration of our conceptual framing of breastfeeding as a ‘dirty’ embodied act of femininity.

We conclude that negotiating space and social norms of where and how women should breastfeed not only governs their bodies in space but also contains and restricts their access to shared spaces. Femmephobia, therefore, regulates femininity not only via psychological containment (*i.e.*, ‘dirt’ and ‘taint’) but also via physical space. As such, standards of patriarchal femininity control and dictate women’s spatial mobility and presence in the world (Fenster, 2005). Despite this, we note how women “simultaneously acknowledge, as well as reject or recalibrate” (Mavin and Grandy, 2016, p. 1108) feminine scripts by performing gender

trouble via breastfeeding in public, for an ‘extended’ time, or by enjoying it – most notably through lactivism but also, simply, by just existing with breasts. Our hope is that in conceptualising breastfeeding as a ‘dirty’ embodied performance of femininity, albeit in a provocative way, we begin to unsettle taken for granted assumptions that reinforce hegemonic notions of femininity and heterosexuality, which serve to restrict women’s ways of being. Our position is not one intended to ‘judge’ the choices that women make regarding breastfeeding (or not breastfeeding), but rather to critique patriarchal norms which inform how women can do and undo gender.

References

- Bareket, O., Kahalon, R., Shnabel, N., & Glick, P. (2018). The madonna-whore dichotomy: Men who perceive women's nurturance and sexuality as mutually exclusive endorse patriarchy and show lower relationship satisfaction. *Sex Roles, 79*(9–10), 519–532. <https://doi.org/10.1007/s11199-018-0895-7>
- Bartky, S. (2015). *Femininity and Domination: Studies in the Phenomenology of Oppression*. London: Routledge.
- Bartlett, A. (2000). Thinking through breasts: Writing maternity. *Feminist Theory, 1*(2), 173–188. <https://doi.org/10.1177/14647000022229146>
- Bartlett, A. (2005). *Breastwork: Rethinking breastfeeding*. University of New South Wales.
- Battersby, S. (2007). Breastfeeding as dirty work in the UK. In M. Kirkham (Ed.), *Exploring the Dirty Side of Women's Health*. London: Routledge.
- Bay-Cheng, L. Y., Bruns, A. E., & Maguin, E. (2018). Agents, virgins, sluts, and losers: The sexual typecasting of young heterosexual women. *Sex Roles, 79*(11–12), 699–714. <https://doi.org/10.1007/s11199-018-0907-7>
- Beneria, L. (2001). The enduring debate over unpaid labour. In M. Loutfi (Ed.), *What is equality and how do we get there? Women, Gender, and Work*. Geneva: International Labour Office.
- Berbary, L. A. (2012). “Don't be a whore, that's not ladylike”: Discursive discipline and sorority women's gendered subjectivity. *Qualitative Inquiry, 18*(7), 606–625. <https://doi.org/10.1177/1077800412450150>
- Boon, S., & Pentney, B. (2015). Virtual lactivism: Breastfeeding selfies and the performance of motherhood. *International Journal of Communication, 9*(1), 1759–1772.
- Boyer, K. (2011). “The way to break the taboo is to do the taboo thing” breastfeeding in public and citizen-activism in the UK. *Health and Place, 17*(2), 430–437.

<https://doi.org/10.1016/j.healthplace.2010.06.013>

Boyer, K. (2012). Affect, corporeality and the limits of belonging: Breastfeeding in public in the contemporary UK. *Health and Place*, 18(3), 552–560.

<https://doi.org/10.1016/j.healthplace.2012.01.010>

Boyer, K. (2018). The emotional resonances of breastfeeding in public: the role of strangers in breastfeeding practice. *Emotion, Space and Society*, 26(1), 33–40.

<https://doi.org/10.1016/j.healthplace.2010.06.013>

Bresnahan, M., Zhu, Y., Zhuang, J., & Yan, X. (2019). “He wants a refund because I’m breastfeeding my baby”: A thematic analysis of maternal stigma for breastfeeding in public. *Stigma and Health*. Advance online publication.

<https://doi.org/10.1037/sah0000208>

Britton, C. (2000). *Women’s experiences of early and long-term breastfeeding in the UK* (Durham University). Retrieved from <http://theses.dur.ac.uk/1228/>

Brockway, M., & Venturato, L. (2016). Breastfeeding beyond infancy: a concept analysis. *Journal of Advanced Nursing*, 72(9), 2003–2015. <https://doi.org/10.1111/jan.13000>

Bueskens, P. (2015). Breastfeeding "in public": A personal and political memoir
Breastfeeding at the Bathhouse. Retrieved July 24, 2019, from Mothers at the margins: Stories of challenge, resistance and love website: http://petrabueskens.com/wp-content/uploads/2014/03/Breastfeeding-in-public_A-personal-and-political-memoir2.pdf

Butler, J. (1988). Acts and Gender Performative: An Essay in Phenomenology Constitution: and Feminist Theory. *Theatre Journal*, 40(4), 519–531. DOI: 10.2307/3207893

Butler, J. (1999). *Gender Trouble: Feminism and the Subversion of Identity*. Retrieved from <http://optics.nuigalway.ie/people/eugenie/Thesis ED.pdf>

Chrisler, J. C. (2011). Leaks, lumps, and lines: Stigma and women’s bodies. *Psychology of Women Quarterly*, 35(2), 202–214. <https://doi.org/10.1177/0361684310397698>

- Cooley, E., Winslow, H., Vojt, A., Shein, J., & Ho, J. (2018). Bias at the intersection of identity: Conflicting social stereotypes of gender and race augment the perceived femininity and interpersonal warmth of smiling Black women. *Journal of Experimental Social Psychology*, 74(September 2017), 43–49.
<https://doi.org/10.1016/j.jesp.2017.08.007>
- Darwin, H. (2017). The pariah femininity hierarchy: comparing white women’s body hair and fat stigmas in the United States. *Gender, Place & Culture*, 24(1), 135–146.
<https://doi.org/10.1080/0966369X.2016.1276889>
- Desmond, D., & Meaney, S. (2016). A qualitative study investigating the barriers to returning to work for breastfeeding mothers in Ireland. *International Breastfeeding Journal*, 11(1), 1–9. <https://doi.org/10.1186/s13006-016-0075-8>
- Douglas, M. (1966). *Purity and Danger: An Analysis of the Concepts of Pollution and Taboo*. London & New York: Routledge & Keagan Paul
<https://doi.org/10.1525/aa.1968.70.2.02a00530>
- Dowling, S., & Brown, A. (2013). An exploration of the experiences of mothers who breastfeed long-term: What are the issues and why does it matter? *Breastfeeding Medicine*, 8(1), 45–52. <https://doi.org/10.1089/bfm.2012.0057>
- Dowling, S., & Pontin, D. (2017). Using liminality to understand mothers’ experiences of long-term breastfeeding: ‘Betwixt and between’, and ‘matter out of place.’ *Health (United Kingdom)*, 21(1), 57–75. <https://doi.org/10.1177/1363459315595846>
- Draper, J. (2003). Blurring, moving and broken boundaries: Men’s encounters with the pregnant body. *Sociology of Health and Illness*, 25(7), 743–767.
<https://doi.org/10.1046/j.1467-9566.2003.00368.x>
- Fahs, B. (2017). The dreaded body: disgust and the production of “appropriate” femininity. *Journal of Gender Studies*, 26(2), 184–196.

<https://doi.org/10.1080/09589236.2015.1095081>

Faircloth, C. (2011). “It feels right in my heart”: Affective accountability in narratives of attachment. *Sociological Review*, 59(2), 283–302. <https://doi.org/10.1111/j.1467-954X.2011.02004.x>

<https://doi.org/10.1111/j.1467-954X.2011.02004.x>

Fenster, T. (2005). The right to the gendered city: Different formations of belonging in everyday life. *Journal of Gender Studies*, 14(3), 217–231.

<https://doi.org/10.1080/09589230500264109>

Ferber, A. L. (2012). The culture of privilege: Color-blindness, postfeminism, and Christonormativity. *Journal of Social Issues*, 68(1), 63–77.

<https://doi.org/10.1111/j.1540-4560.2011.01736.x>

Gatrell, C. (2013). Maternal body work: How mothers negotiate pregnancy and new motherhood at work. *Human Relations*, 66(5), 621–644.

<https://doi.org/10.1177/0018726712467380>

Geiger, W., Harwood, J., & Hummert, M. (2006). College students’ multiple stereotypes of lesbians: A cognitive perspective. *Journal of Homosexuality*, 51(3), 225–247.

<https://doi.org/10.1300/J082v51n03>

Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity*. New York: Simon & Schuster.

Grant, A. (2016). “I...don’t want to see you flashing your bits around”: Exhibitionism, othering and good motherhood in perceptions of public breastfeeding. *Geoforum*, 71,

52–61. <https://doi.org/10.1016/j.geoforum.2016.03.004>

Grant, A., Mannay, D., & Marzella, R. (2017). “People try and police your behaviour”: The impact of surveillance on mothers and grandmothers’ perceptions and experiences of infant feeding. *Families, Relationships and Societies*, 7(3), 431–447.

<https://doi.org/10.1332/204674317x14888886530223>

- Gribble, K. D. (2008). Long-term breastfeeding; changing attitudes and overcoming challenges. *Breastfeeding Review : Professional Publication of the Nursing Mothers' Association of Australia*, 16(1), 5–15.
- Grosz, E. (1994). *Volatile Bodies: Toward a Corporeal Feminism*. Bloomington: Indiana University Press.
- Hoskin, R. A. (2017a). Femme interventions and the proper feminist subject: Critical approaches to decolonizing western feminist pedagogies. *Cogent Social Sciences*, 3(1), 1–16. <https://doi.org/10.1080/23311886.2016.1276819>
- Hoskin, R. A. (2017b). Femme theory: Refocusing the intersectional lens. *Atlantis*, 38(1), 95–109.
- Hoskin, R. A. (2019a). Can femme be theory? Exploring the epistemological and methodological possibilities of femme. *Journal of Lesbian Studies*, <https://doi.org/10.1080/10894160.2019.1702288>
- Hoskin, R. A. (2019b). Femmephobia: The role of anti-femininity and gender policing in LGBTQ+ people's experiences of discrimination. *Sex Roles*, 81 (11-12), 686–703. <https://doi.org/10.1007/s11199-019-01021-3>
- Hoskin, R. A., & Taylor, A. (2019). Femme resistance: the fem(me)inine art of failure. *Psychology and Sexuality*, 00(00), 1–20. <https://doi.org/10.1080/19419899.2019.1615538>
- Jane, C., & Lazard, L. (2012). “Please don't put the whole dang thing out there!": A discursive analysis of internet discussions around infant feeding. *Psychology & Health*, 27(8), 1–32.
- Link, B., & Phelan, J. (2014). Stigma power. *Social Science and Medicine*, 103(February), 24–32. <https://doi.org/10.1016/j.socscimed.2013.07.035.Stigma>
- Longhurt, R. (2004). *Bodies: Exploring Fluid Boundaries*. London: Routledge.

- Mahon-Daly, P., & Andrews, G. J. (2002). Liminality and breastfeeding: Women negotiating space and two bodies. *Health and Place*, 8(2), 61–76. [https://doi.org/10.1016/S1353-8292\(01\)00026-0](https://doi.org/10.1016/S1353-8292(01)00026-0)
- Malacrida, C. (2009). Performing motherhood in a disablist world: Dilemmas of motherhood, femininity and disability. *International Journal of Qualitative Studies in Education*, 22(January 2015), 99–117. <https://doi.org/10.1080/09518390802581927>
- Marcoux, H. (2019). Breastfeeding dads are possible with these new devices. Retrieved July 22, 2019, from Motherly website: <https://www.mother.ly/Our-Partners/10-pictures-on-the-first-day-of-school>
- Mathews, V. (2018). Réaménager le corps qui allaite au sein dans les lieux publics urbains. *Social and Cultural Geography*, 9365, 1–19. <https://doi.org/10.1080/14649365.2018.1433867>
- Mavin, S., & Grandy, G. (2013). Doing gender well and differently in dirty work. *Gender, Work & Organization*, 20(3), 232–251. DOI: 10.1111/j.1468-0432.2011.00567.x).
- Mavin, S., & Grandy, G. (2015). A theory of abject appearance: Women elite leaders' intra-gender 'management' of bodies and appearance. *Human Relations*, 69(5), 1095–1120. <https://doi.org/10.1177/0018726715609107>
- Meaning Centred Design Awards. (2018). Meaning Centred Design Awards. Retrieved July 22, 2019, from <https://www.meaningcentreddesignawards.com/>
- Neely, E. (2019). Context is best – a reflection on last week's breast vs bottle uproar. Retrieved July 16, 2019, from Sciblogs website: <https://sciblogs.co.nz/guestwork/2019/03/11/context-is-best-a-reflection-on-last-weeks-breast-vs-bottle-uproar/>
- Newman, K. L., & Williamson, I. R. (2018). Why aren't you stopping now?!' Exploring accounts of white women breastfeeding beyond six months in the East of England.

- Appetite*, 129(May), 228–235. <https://doi.org/10.1016/j.appet.2018.06.018>
- NHS. (2020). Benefits of breastfeeding. Retrieved April 7, 2020, from <https://www.nhs.uk/conditions/pregnancy-and-baby/benefits-breastfeeding/>
- Paechter, C. (2018). Rethinking the possibilities for hegemonic femininity: Exploring a Gramscian framework. *Women's Studies International Forum*, 68(March), 121–128. <https://doi.org/10.1016/j.wsif.2018.03.005>
- Pescosolido, B., & Martin, J. (2015). The stigma complex. *Annual Review of Sociology*, 41(August), 87–116. <https://doi.org/10.1126/science.1249098.Sleep>
- Phelan, J. C., Link, B. G., & Dovidio, J. F. (2008). Stigma and prejudice: One animal or two? *Social Science and Medicine*, 67(3), 358–367. <https://doi.org/10.1016/j.socscimed.2008.03.022>
- Ringrose, J., Tolman, D., & Ragonese, M. (2019). Hot right now: Diverse girls navigating technologies of racialized sexy femininity. *Feminism and Psychology*, 29(1), 76–95. <https://doi.org/10.1177/0959353518806324>
- Rivera, K. (2015). Emotional taint: Making sense of emotional dirty work at the U.S. border patrol. In *Management Communication Quarterly*, 29(2) 199-228. <https://doi.org/10.1177/0893318914554090>
- Scambler, G., & Paoli, F. (2008). Health work, female sex workers and HIV/AIDS: Global and local dimensions of stigma and deviance as barriers to effective interventions. *Social Science and Medicine*, 66(8), 1848–1862. <https://doi.org/10.1016/j.socscimed.2008.01.002>
- Schemenauer, E. (2012). Victims and vamps, madonnas and whores: The construction of female drug couriers and the practices of the US security state. *International Feminist Journal of Politics*, 14(1), 83–102. <https://doi.org/10.1080/14616742.2011.631277>
- Schippers, M. (2007). Recovering the feminine other: Masculinity, femininity, and gender

- hegemony. *Theory and Society*, 36(1), 85–102. <https://doi.org/10.1007/s11186-007-9022-4>
- Shaw, R. (2004). Performing breastfeeding: embodiment, ethics and the maternal subject. *Feminist Review*, (78), 99-116. Retrieved from <https://liverpool.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=edsjsr&AN=edsjsr.3874408&site=eds-live&scope=site>
- Smyth, L. (2008). Gendered spaces and intimate citizenship: The case of breastfeeding. *European Journal of Women's Studies*, 15(2), 83–99. <https://doi.org/10.1177/1350506808090305>
- Stearns, C. (1999). Breastfeeding and the good maternal body. *Gender & Society*, 13(3), 308–325.
- Stearns, C. (2011). Cautionary tales about extended breastfeeding and weaning. *Healthcare for Women International*, 32(6), 538–554. doi: 10.1080/07399332.2010.540051
- Stearns, C. (2013). The embodied practices of breastfeeding: Implications for research and policy. *Journal of Women, Politics & Policy*, 34(4), 359–370. <https://doi.org/10.1080/1554477X.2013.835680>
- Stone, A. L., & Gorga, A. (2014). Containing pariah femininities: Lesbians in the sorority rush process. *Sexualities*, 17(3), 348–364. <https://doi.org/10.1177/1363460713516336>
- Street, D. J., & Lewallen, L. P. (2013). The influence of culture on breast-feeding decisions by African American and white women. *Journal of Perinatal and Neonatal Nursing*, 27(1), 43–51. <https://doi.org/10.1097/JPN.0b013e31827e57e7>
- Sundén, J., & Paasonen, S. (2018). Shameless hags and tolerance whores: Feminist resistance and the affective circuits of online hate. *Feminist Media Studies*, 18(4), 643–656. <https://doi.org/10.1080/14680777.2018.1447427>
- Swami, V., & Tovée, M. J. (2013). Men's oppressive beliefs predict their breast size

- preferences in women. *Archives of Sexual Behavior*, 42(7), 1199–1207.
<https://doi.org/10.1007/s10508-013-0081-5>
- Tăut, D. (2017). Breastfeeding (Un)Covered: Narratives of Public Breastfeeding on Romanian Discussion Forums. *International Journal of Behavioral Medicine*, 24(6), 815–826. <https://doi.org/10.1007/s12529-017-9687-7>
- Thomson, G., Ebisch-Burton, K., & Flacking, R. (2015). Shame if you do – shame if you don't: Women's experiences of infant feeding. *Maternal & Child Nutrition*, 11(1), 33–46. <https://doi.org/10.1111/mcn.12148>
- Tomori, C., Palmquist, A. E. L., & Dowling, S. (2016). Contested moral landscapes: Negotiating breastfeeding stigma in breastmilk sharing, nighttime breastfeeding, and long-term breastfeeding in the U.S. and the U.K. *Social Science and Medicine*, 168, 178–185. <https://doi.org/10.1016/j.socscimed.2016.09.014>
- UNICEF (2019). Benefits of breastfeeding. Retrieved July 22, 2019, from <https://www.unicef.org.uk/babyfriendly/about/benefits-of-breastfeeding/>
- Velding, V. (2017). Depicting Femininity. *Youth & Society*, 49(4), 505–527.
<https://doi.org/10.1177/0044118x14542575>
- Welch. (2018). Being a mom is the equivalent of 2.5 full-time jobs. Retrieved July 23, 2019, from New York Post website: <https://nypost.com/2018/03/17/being-a-mom-is-the-equivalent-of-2-5-full-time-jobs/>
- World Health Organization (2020). Promoting proper feeding for infants and young children. Retrieved April 7, 2020, from <https://www.who.int/nutrition/topics/infantfeeding/en/>
- Young, I. (2003). Breast experience: The look and the feeling. In R. Weitz (Ed.), *The Politics of Women's Bodies: Sexuality, Appearance, and Behavior*. New York: Oxford University Press.
- Zhang, Y., Jin, Y., Vereijken, C., Stahl, B., & Jiang, H. (2018). Breastfeeding experience,

challenges and service demands among Chinese mothers: A qualitative study in two cities. *Appetite*, 128(138), 263–270. <https://doi.org/10.1016/j.appet.2018.06.027>