

Anecdotal Theory, Morality and Inappropriate Breastfeeding

It may appear, on first view, that breastfeeding and the law have very little to do with one another. Nor has it been primarily concerned to document factors, such as increased labour-force participation and the need to return to work soon after childbirth, as contributing to the decrease in breastfeeding rates. Even where no legislation exists to regulate or delimit infant feeding practices, the law finds a way to put breastfeeding in its place. A recent incident in the state parliament of Victoria in Australia, 2003, where a female Member of Parliament (MP) was removed for breastfeeding her eleven-day-old infant, illustrates my point.¹ On this particular occasion, the female MP's maternal breastfeeding body was viewed as contravening the limits of autonomous, unitary political citizenship, and her baby was deemed "a stranger" in the house. This body of feminist work focuses on the ways in which breastfeeding has been talked about in the infant feeding literature, with a view to analysing the discursive and institutional construction of breastfeeding as a set of practices (Carter, 1995; Ryan, 1998). Here, the legitimate legal-political model of self is clearly determined by its autonomy and separateness from the bodies of others, rather than as a mode of embodied being that acts and exists in relation to others.

Since the mid to late 1990s, feminist scholars have become increasingly interested in the disruptive ambiguities the activity of breastfeeding elicits, especially vis-à-vis publicly held conceptions of appropriate moral conduct and the law. This article is intended as a contribution to this on-going discussion, and will focus on practices of breastfeeding and lactation where the intersection with morality and the law appear to be most pronounced. A central topic of discussion will be the controversial practice of cross-nursing, where women breastfeed other women's infants, with or without their consent.

Unlike much of the breastfeeding advocacy work that has been published in the last couple of decades, expressly feminist research on the subject of infant feeding does not engage with the topic from a health promotion perspective in the first instance. It has not been primarily concerned to document factors, such as increased labour-force participation and the need to return to work soon after childbirth, as contributing to the decrease in breastfeeding rates either. While the importance and urgency of the latter needs to be acknowledged and addressed, and valuable research in this area is being undertaken (Galtry, 1997, 2002, 2003; Galtry and Annandale, 2003), the feminist work on breastfeeding to which I am referring is more concerned to interrogate the meanings that infant feeding has for women (and men) in their daily lives. It has also identified as a key area of interest, the social, cultural, and ethical relationships that impact on the lives of breastfeeding women and the ways in which discourses surrounding breastfeeding promotion and support contribute to the production and creation of certain sorts of maternal subjects (Lupton, 2000; Murphy, 1999; Stearns, 1999). In this respect, it often focuses on the ways in which breastfeeding has been talked about in the infant feeding literature, with a view to analysing discursive and institutional construction (Carter, 1995; Ryan, 1998).

Although it is still the case that breastfeeding, as a subject area, receives less attention in the feminist literature than pregnancy, childbirth, and body image, there is growing evidence of a shift to studies researching infant feeding in the lives of women. This work seeks to address the absence of breastfeeding as a subject within existing theoretical frameworks, as well as interrogate the symbolic significance of lactation and its invisibility in contemporary western cultures. While some of this research emphasises semiotics and/or discourse analysis (Carter, 1995; Hausman, 2003), there is also an interest in phenomenological approaches (Giles, 2003; Schmied and Lupton, 2001) that focus on the ordinary lived experiences of breastfeeding women. Not only have scholars begun to undertake in-depth qualitative research that seeks to represent women's actual voices and stories, they have also trail-blazed a unique cultural studies approach to breastfeeding and lactation analysis. As Fiona Giles points out in *Fresh Milk: The Secret Life of Breasts*: "the details of how we fit breastfeeding into our lives, or decide that it doesn't fit, are not well known. And the meaning of breastfeeding—as opposed to its nutritional content—is rarely discussed outside mothers' groups and pediatricians waiting rooms" (2003: xii). Giles goes on to say that "there is much more breastmilk in our lives, in our bodies, and in our cultural imaginary, than we realize" (2003: xv).

The stories in *Fresh Milk* certainly testify to a rich, underground oral history of lactation. For feminist scholars, the beauty of such stories is that they are empirically saturated, real-life events that occur as part of the drama of women's everyday lives. While some of these accounts are unusual because their circumstances are extreme, such as the efforts of women to induce lactation for the purposes of adoptive mothering, others, such as establishing

post-partum infant feeding are ordinary by contrast. What link these breastfeeding accounts are their anecdotal quality, and the way in which they have been overlooked as illustrations of contemporary ethical life in the pursuit of ostensibly more universal examples of moral agency that would better serve the purposes of grand theorising. However, just because breastfeeding reproduces human life at the level of the mundane and quotidian, this does not mean it simply repeats it, or that it is beyond insight or reflection. Indeed, as Jane Gallop (2002) argues, there is value in writing that recounts an anecdote from everyday life and then attempts “to ‘read’ that account for the theoretical insights it afforded.” Although, says Gallop, we might assume that “‘anecdote’ and ‘theory’ carry diametrically opposed connotations: humorous vs. serious, short vs. grand, trivial vs. overarching, specific vs. general” (2), Gallop’s position is that “anecdotal theory would cut through these oppositions in order to produce theory with a better sense of humor, theorizing which honors the uncanny details of lived experience” (2). If the uncanny details of infant feeding experiences were once overlooked by academics and such stories left untold, due to the belief that there was nothing spectacular or particular noteworthy about the everyday world to which they belong, then this is certainly no longer the case.

One area of interest for feminist breastfeeding work concerned to redress this oversight is to account for the ways in which maternal subjects and their bodies are constructed as either good or bad, and praise- or blame-worthy (Lupton, 2000; Murphy, 1999; Stearns, 1999). The hidden subtext of these debates is the often-occluded issue of sexuality and the question of desire and the erotic. It is not surprising, therefore, that it does not easily fit within the purview of health-care perspectives on infant feeding, which tend to take a much more pragmatic and instrumental, guide-book approach to the issue. These debates about infant feeding and sexuality are often played out in the public arena and often in simplistic terms that pitch constructions of “good” and “bad” maternal bodies against one another. This crude dichotomisation is mapped onto the symbolic division of the breast itself into two; on the one hand, the so-called sexual breast, and on the other, the maternal or lactating breast (see Galupo and Ayers, 2002). According to Marilyn Yalom (1998: 4), the “good” breast model tends to accentuate the power of the female body to nourish or give and sustain life, whereas the “bad” breast signifies sexuality, and even violence.

Part and parcel of this division is the unambiguous separation of maternity and motherhood from sexuality. This separation of maternity and motherhood from sexuality has historical precedents in the *Maria Lactans* imagery of the nursing virgin, whose status as a religious cult figure became increasingly significant in the Middle Ages and is depicted in Renaissance painting from this period onward. Traces of the kind of lactational symbolism that defined the paintings of the Nursing Madonna are also present in many contemporary representations of breastfeeding women, even though these latter images are

presented as departing from earlier Christian views and as free from contradiction and ambivalence (see Giles, 2002; Warner, 1976).²

Despite the existence of this (albeit compromised) breastfeeding iconography in our contemporary cultural imaginary, feminist scholars point out that the lactating and nurturing breast has, for the most part, been absent from public view. Not only are there few images of healthy breastfeeding women circulating in the popular media, breastfeeding in public in western society, is often fraught with tension and met with varying degrees of disapproval (Bartlett, 2002; Stearns, 1999). The recent release, for example, in New Zealand during World Breastfeeding Week (2002), of the poster of international actress Lucy Lawless (aka *Xena Warrior Princess*), breastfeeding her son, is a case in point.

The Lucy Lawless poster marks a promotional effort on the part of *Women's Health Action* in New Zealand to reclaim, and make public, the absented breast from its marginalised status in the private enclaves of men's and women's lives. While the Lawless image domesticates and sentimentalises the nursing dyad in ways that take the *Maria Lactans'* imagery beyond that of the earlier strictly religious symbolism, the composition nonetheless retains traditionalist vestiges (see Warner, 1976: 201-03). Lawless strikes a pose that is typical of the Madonna-child union; her gaze is downcast, and her attire—at least from the waist up—demure. Yet what is striking about this particular representation of maternity is that it is not entirely devoid of sex and sensuality. Indeed, the details of Lawless' dress—she wears a white puff-sleeve front buttoning blouse, short black skirt and fashionable black fishnet stockings—incongruously combine sacred, maternal, and erotic elements that many people do not customarily read as belonging to the nursing mother. This combination of classic maternal comportment with up-beat fashion sense and understated sexuality have not been to everyone's liking, however, and this has caused minor, but notable, offence among diverse groups of the New Zealand population who do not feel comfortable with the combination of voluptuous flesh, sex, and motherhood (Shaw, 2004a).

This kind of offence reiterates Iris Marion Young's insight from her famous "Breasted Experience" essay, that breasts are scandalous "because they disrupt the border between motherhood and sexuality" (1990: 190, 199). They are particularly scandalous, argues Alison Bartlett (2002: 111), when "breastwork" is performed in public and taken outside the home.

Again, another example from the New Zealand context illustrates Young's point well. This situation, which attracted controversy, is one in which a prostitute and the parlour she worked for advertised breast-milk tasting as part of the prostitute's repertoire of services. What is purportedly scandalous about this particular situation is the way in which it de-contextualises the nurturing function of the breast by re-infusing it with the erotic and sexual breast from which it is usually cleaved. When this case was aired on national New Zealand television (on the 18th of July, 2003, on the *Holmes* show, as an item called

“Breast Milk used in brothels”) the article was framed by the presenter, Susan Wood, in the context of the recent decriminalisation of prostitution. Wood claimed that this lactation incident revealed an immediate decay of moral standards, and was one of the consequences of the decriminalisation of prostitution. Read through the lens of Young’s analysis, however, the perceived “scandal” is really an effect of phallogocentric culture which objectifies the breast as an object “with clear boundaries of right” (1990: 191). In Young’s (1990: 192) view, our culture demands that a woman’s “breasts belong to others—her husband, her lover, her baby,” and that the pleasures derived from those breasts are not really hers. This is, of course, in keeping with dominant conceptions of normal motherhood that would have it constituted as an infinitely gratuitous identity construct. At the same time, “adult meanings of eroticism” are required to sublimate infantile pleasure and to divorce those desires “from mothers,” in order to ensure, as Young (1990: 197) says, submission to the law and “compatibility with civilisation.” That a man should seek pleasure from suckling a prostitute confounds these rules: although he participates in a market economy in which women are exchanged between men to satisfy male desire, he also nostalgically invites a return to the original home of his repressed memories and the polymorphously perverse pleasures of the mother’s body. What this indicates, suggest psychoanalysts (see Grosz, 1989: 71), is that one’s flight from the mother’s body is not absolute.

Finally, the ideal mother is one whose identity is constituted by an endless, often thankless, unconditional disposition to give. The thought of a woman deriving some kind of pleasure (assuming she does) from lactation, which is culturally construed as an essentially giving act, suggests that “mother love” is not entirely one-way, and that lactation may in fact involve some enjoyment for the woman herself. It is this hidden dimension of lactation and breastfeeding that phallogocentric culture has difficulty coming to terms with.

For instance, when the case involving the prostitute was debated in the New Zealand news media, the rights and wrongs of the issue were framed in terms of the violation of the physiological indivisibility of the nursing dyad, and the infant’s right to feed unimpeded by the non-nutritional needs or desires of an intruding third party. A related issue was the possibility of cross-contamination, which could occur via the breast and breast milk from the prostitute’s clients to her own infant. For critics, this was really an issue about breast ownership and it was clear that the prostitute had no right to determine how her breast milk would be “disseminated”. It also demonstrates just how circumscribed general cultural perceptions of sex and erogenous zones are.

For the small minority of conservative hard liners, sex is (penetrative) sexual intercourse and is intended for procreative purposes. In this view, it is immoral or sinful to lactate if not for the purposes of feeding one’s infant, because “this is what God gave women breasts for.” Hence, the link between a woman’s body and the reproductive functions and capacities associated with that body are indissoluble and sacred. On a practical level, there are clearly

problems with the notion of a “natural” or god-given physiology, due to the remarkable capacity for the body to adapt to changing or unusual environmental circumstances. One problem with the notion of an inviolable link between bio-genetic mother and infant is that lactation can extend beyond these physical limits. Indeed, with much forbearance “surrogate” and adoptive mothers can, for example, induce lactation to feed an adopted baby (Giles, 2003; Kirkman and Kirkman, 2001). Moreover, and perhaps more remarkably, medical case histories have recorded men spontaneously lactating; especially under conditions of extreme hardship, illness, or duress (Diamond, 1995).

Our general cultural distaste toward seeing or using breast milk in non-normative contexts thus stems from the unarticulated assumption that the leaks and flows of female physiology are decreed by divine design with one sole purpose in mind: breasts, or more particularly, their products, are made for baby and not for daddy. That is, breast milk is produced naturally by post-partum mothers in order to suckle their young.

It is not difficult to account for public aversion toward the idea of breast milk being used for some activity other than infant feeding. In a recent essay, social theorist Bryan Turner (2003: 4) draws attention to the fact that “human fluids are potent” (see also Kristeva, 1982). As Turner says, fluids “can have both negative and positive effects” (4). Certainly breast milk can be viewed as both cure and poison. Historically, breast milk has mythical life-saving (and now scientifically proven) immunological benefits for the sick and ailing. Its curative properties are socially accentuated when the donor is known to the recipient and when the risks of transmitting infectious diseases through the exchange of breast milk are able to be regulated. But this gift-giving or life-giving quality marks a thin line in the twenty-first century. The curative benefits of breast milk for the ailing are not only seen by many people to be outweighed by moral panic about sharing bodily fluids, this is compounded by the over-sexualisation of the breast in western culture and its association with sexuality and the erotic. In the contemporary public imagination, breast milk and lactation are still associated with abject bodily zones and substances. So while Turner is correct in presenting breast milk as a prized bodily fluid that sits higher up the “effluvia” hierarchy than many other body fluids, this placement is entirely context dependent. The abjection of these bodily zones and secretions is certainly amplified in the context of pornography or prostitution and where the “specter of infection” (Grosz, 1994: 195) may be involved. In the case of breast milk, eroticism is to be kept separate from nourishment, and leaky bodies, while they fulfil necessary reproductive functions, are to be kept hidden from view (Giles, 2002). Indeed, it is almost a truism in feminist thinking these days to suggest that it is precisely this leakage and spillage that causes such unease. Yet, because it is such a leaky substance, breast milk has the potential to disrupt what is perceived to be the bounded corporeality of the individualised body.

While we may think that breastfeeding and bio-genetic maternity form a

so-called natural pairing, the bio-physiological act of lactation and motherhood does not exhaust the possibilities of thinking lactation otherwise. Certainly, in an economic climate that demands women's workforce participation in increasing numbers, it may well be time, as breastfeeding advocate Maureen Minchin (1986) says, to give some further thought to some of our stultified attitudes toward wet-nursing. To Minchin's suggestion that we rethink wet-nursing in the twenty-first century, I would add cross-nursing, adoptive or "surrogate" nursing, and breast milk donation. Not only do these practices have in common investments in the social identity of Mother, they also demonstrate how permeable the boundaries around women's maternal bodies actually are in relation to this identity category.

In Giles' book, *Fresh Milk* (2003), New Zealander Pam Sutton recounts a story about her experiences of the limits of such permeability. The story is now virtually famous in Australasia.³ This is Sutton's account of how she felt when a woman she barely knew breastfed her eight-month-old infant without her "consent," while she attended a Parents' Centre conference dinner in New Zealand in 1996. While it has been argued elsewhere that Sutton's case is not as straightforward as it first seems (Lupton, 1999; Shaw, 2003), this particular incident and Sutton's recounting of it in *Fresh Milk* demonstrate just how socially and culturally contested the moral boundaries of our bodies really are. According to this version of Sutton's story, it is due to the fact that the cross-nursing act was non-consensual that it failed to enhance the social bond between the two women concerned, and thus led to its further fragmentation. Allegedly, Sutton's main concern, in regards to a woman she barely knew feeding her infant without her knowledge, was the risk of transmitting infectious diseases to her baby. On these grounds, she and her husband requested the other woman undergo tests for HIV and Hepatitis C, since these could be passed on to their child via the other woman's breast milk. The tests proved to be negative.

Notwithstanding these results, it was clear that the underlying subtext of the altercation following the cross-nursing act had as much to do with the limits of the women's perceived bodily boundaries and the concomitant problems of intimacy and morality, as it did with ostensible health issues. Sutton, for example, was quoted at the time of the incident as saying it was akin to "finding your partner in bed with someone else and being told, 'Well, they needed it and you weren't here.'" (qtd. in Crawshaw, 1997: 65). Sutton then went on to say in a later essay: "Breastfeeding is not sexual. It's sensual. But it's personal and it's intimate. I don't want to share my partner. I sure as hell don't want to share breastfeeding my children" (qtd. in Giles, 2003: 37).

It is significant that Sutton approached a lawyer and considered laying an assault charge against the other woman in this matter, as well as taking her case both to New Zealand's Commission for Children and to the Human Rights Commission. While they were both interested in the matter, they were not prepared to take action on behalf of Sutton. Although the question of consent

(or permission) in this case remains a grey area for many people (see Shaw, 2004b), the intent of the other woman to act on good faith to calm a distressed infant, whose mother apparently could not be found at the time, appears to outweigh any charge of “moral wrong” or indecency in this instance.

Nonetheless, it is this question of moral decency that forms the crux of the issue, as it revolves around social and cultural ideas and anxieties about the appropriate exchange of bodily fluids, parts, and substances in the late twentieth and twenty-first centuries. The morality of the issue also impacts on the importance we place on our bodies as signifiers of self-constitution in contemporary, affluent societies. That is to say, underpinning concerns for her child’s health, Sutton vehemently objected to what she perceived as the violation of her intimate, private relationship with her child, which the exchange of effluvia and the exposure of intimate bodily parts between the other woman and her infant set in train. Since the correlate of the self-present individual in modern, western societies is one whose body is defined by clear boundaries that mark it off from the bodies of others, any intrusion or invasion of that body is considered to be a violation of one’s autonomy, individuality, and self-containment that opens that body up to possible contamination. According to Deborah Lupton (1999: 129), this culturally and historically specific psycho-social affect is expressed in terms of a contemporary politics of fear that has been dubbed “Body McCarthyism.” Says Lupton; “in this new politics, hygienic standards come to stand for ways of identifying self and other, with the other standing as the contaminated, polluting threat to the purity of self” (1999: 129).

Without the benefit of speaking directly to those involved, we can speculate that this is why the case against Shannon Denney from Stigler, Oklahoma in May 2003, for cross-nursing someone else’s infant, has also evoked disgust, horror, outrage, and revulsion in the public imagination. At the time of writing, Denney faced a fine of \$US500.00 and up to a year in jail on a “morals” charge. The charge of the District Court of Baskell County, State of Oklahoma, against Denney reads as: “wilfully and wrongfully committing an act that was injurious to public morals and openly outraged public decency by breast feeding a child not her own without knowledge or consent of the parent of said child” (Case No. CM-2003-209). While Denney’s case rehearses many of the issues that haunt the New Zealand incident, the charge of violating “decency and public morals” is unreservedly conspicuous in the North American example where Denney’s social “deviance” is put on trial. However, in much the same way as the New Zealand case, we can take Denney at face value, and assume she was responding to the needs of a hungry infant whose mother was not available for suckling. It would then be feasible that her action on this occasion was justifiably altruistic, and not self-serving. At the very least, Denney’s intentions were purely motivated if she acted out of concern for the well being of an Other, and not to endanger the infant. If this is true, then it appears that the objection against Denney is moral only insofar as it is based on socio-cultural convention or prejudice, which is sanctioned by a legal system

that, in this case, seeks to discourage or prohibit inter-corporeal generosity between human beings, especially those who are not kin. Indeed, while little research has thus far been undertaken on cross-nursing, anecdotal evidence suggests that it is much more widespread than previously thought (see Giles, 2003; Shaw, 2004b). It is thus likely that it is unfamiliarity with cross-nursing as a practice, moral panic about paedophilia, and/or the legacy of exploitation involved with wet-nursing historically, that prompts overwhelming social conservatism in this regard.

In sum, the most salient question to be raised in respect of these myriad cross-nursing practices, and of the other breastfeeding anecdotes I have been discussing in this essay, is thus a matter of the intersection between the sociological and the moral. In what ways do we regulate competing discursive versions of the good, based on different material bodily practices in contemporary pluralistic societies? And how do we place limits on the corporeal openings we have with other human beings if we want to ensure that those practices, which make us both social and human, remain part of our cultural repertoire?

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¹This incident was reported in the Australian newspapers, *The Age* and *The Australian*, on 28 February, 2003.

²See Bartlett (2000: 178-79), for a brief discussion of the Annie Leibowitz photograph of Jerry Hall breastfeeding her son, in conjunction with my points about *Maria Lactans* imagery.

³Sutton's story was first told in the New Zealand *Metro* (1997: 65-9) magazine, which was then followed by a slightly shorter version of the story in the Australian *HQ* (May/June 1997: 45-7) magazine. The story in *Fresh Milk* is an adaptation of these earlier versions.

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