

Breastfeeding and Feminism 2010: Rethinking Public Health Approaches

A **symposium** and **edited collection**, organized by
Paige Hall Smith, Bernice L. Hausman, and Miriam Labbok

Symposium Date: March 20, 2010

(March 19 is reserved for a meeting with presenters)

Weatherspoon Art Museum, University of North Carolina, Greensboro, NC

Since 2005 academic scholars, practitioners, and activists have gathered together for a regular symposium on Breastfeeding and Feminism. Dr. Paige Hall Smith began this tradition as the Linda Arnold Carlisle Professor of Women's and Gender Studies at the University of North Carolina at Greensboro, inviting Dr. Bernice Hausman, author of *Mother's Milk: Breastfeeding Controversies in American Culture*, to give the keynote lecture at the inaugural event. The following year, Dr. Miriam Labbok became the director of the Carolina Breastfeeding Institute in the Gillings School of Global Public Health at the University of North Carolina, Chapel Hill, and CBI became a co-sponsor of the symposia in 2007. The 2007 and 2009 symposia were funded in part by the United States Department of Health and Human Services, Office of Women's Health.

Over the years, the symposia have illuminated major constraints mothers experience as they seek to breastfeed their children in the 21st century. *Breastfeeding and Feminism 2010* seeks to identify and analyze how public health approaches to promoting breastfeeding might be advised by feminist insights to develop comprehensive, politically knowledgeable, and culturally sensitive interventions. The symposium and book are transdisciplinary efforts to address breastfeeding as a public health priority, using feminist perspectives to emphasize the impact of gender and other forms of social stratification on individual women as they feed their babies. The editors seek collaborators to develop a new approach to understand how current social systems and cultural practices influence women to not breastfeed or otherwise keep them from achieving their breastfeeding goals. *Breastfeeding and Feminism* will focus primarily on the United States, but also address international and cross-cultural issues.

WE INVITE 250-WORD ABSTRACTS ON TOPICS OUTLINED BELOW IN THE BOOK DESCRIPTION.

Please send the abstracts as pdf attachments to Paige Hall Smith (pksmith@uncg.edu) by October 15. Notification of acceptance to the symposium by November 15.

The symposium is aimed at a public audience interested in feminist, public health, clinical, legal, sociocultural and historical approaches to breastfeeding in culture and society. The book is targeted more specifically to a public health audience, including those who identify as feminists and those who are interested in learning more about how feminist perspectives impact public health approaches. Overall, *Breastfeeding and Feminism: Rethinking Public Health Approaches* aims to engage a diverse, broad, and inclusive audience eager to understand how feminist analyses can contribute to new thinking about motherhood, breastfeeding, and gender issues in public health theory and practice. For a background on the symposium visit www.uncg.edu/hhp/cwhw.

Acceptance to present at the symposium will involve participation in a two-day event March 19-20, 2010. Presenters meet to discuss the book on the first day and present to the public on the second.

BOOK DESCRIPTION:

Breastfeeding and Feminism: Rethinking Public Health Approaches joins together academics, public health educators, and breastfeeding advocates in an attempt to understand how feminist approaches can transform public health initiatives to promote, protect, and support breastfeeding. We believe that recent efforts to promote breastfeeding have led to important gains, but are hampered by inattention to the gendered contexts and related social and cultural issues that affect mothers' practices and constrain their behaviors. By developing explicitly feminist approaches to breastfeeding promotion, protection, and support, we seek to offer transformative concepts for public health research and practice in this area. We also seek to garner support for breastfeeding from organized feminism, primarily by demonstrating how feminist perspectives are valuable inputs for developing public health policies for maternal and infant health. Our approach is synthetic and interdisciplinary, aiming for an inclusive audience of public health educators, policy makers, researchers, and practitioners, as well as feminist academics and activists, breastfeeding advocates, and healthcare workers.

Public health is the science and art of preventing disease, prolonging life, and promoting health through the organized efforts and informed choices of society, organizations, communities, and individuals. By definition, public health aims to provide the maximum benefit for the largest number of people.

An accepted conceptualization of the public health approach consists of 4 steps:

- Defining the problem through the systematic collection of information about the magnitude, scope, characteristics, and consequences of the problem;
- Establishing why the problem occurs, using research to determine (a) the causes and correlates, (b) the factors that increase or decrease the risk, and (c) the factors that could be modified through interventions;
- Finding out what works to solve the problem by designing, implementing and evaluating interventions; and
- Implementing effective and promising interventions in a wide range of settings, monitoring the effects of these interventions on risk factors and the target outcome, and evaluating their impact and cost-effectiveness.

Consistent with this, the public health approach to breastfeeding seeks to (1) understand the magnitude, scope, and characteristics of the practices of breastfeeding or the lack of breastfeeding; (2) identify the factors associated with the low rates of initiation and continuation of breastfeeding and explore how these factors may be modified through interventions; (3) use this information to formulate approaches to protect, promote and support breastfeeding; and, finally, (4) implement and evaluate interventions that might provide the maximum benefit for the greatest number of people.

The 4-steps are a complex process. The public health approach to breastfeeding has made progress on steps 1 and 2. The evidence base outlining the benefits of breastfeeding for babies, mothers, communities is growing, and becoming more credible and recognized by important decision-makers and individuals. In addition, many factors influencing mothers' decisions and practices have been identified, such as hospital and workplace practices. Steps 3 and 4 receive less attention from funders and program planners alike. *Breastfeeding and Feminism* interjects a broad variety of feminist perspectives into public health approaches to breastfeeding.

Feminism draws our attention to:

- The multiple political dimensions of breastfeeding and the public health response to it;
- The need for public health research, policy, and practice to account for gender and other power dynamics, which influence the social distribution of breastfeeding among the population;
- The value of women's experiences with breastfeeding as crucial to the process of advancing definitions, conceptualizations, and meanings of breastfeeding, as well as the assessment of risk and protective factors and interventions;
- The importance of empowering and enabling women to breastfeed and trusting them to act as their own agents as we develop intervention programs; and
- The powerful connections between breastfeeding, the sexualization of women's bodies and breasts, and gender inequality as we seek to understand risk and protective factors and develop interventions.

The chapters in this book represent a broad but not inclusive set of issues that are important to women and provide insights into ways of investigating and resolving them. The selection of these issues comes from our experiences working and publishing in this field for many years and from the issues raised at the Breastfeeding and Feminism Symposia. When feminist perspectives are focused on breastfeeding, we see that gender politics have a constraining effect on maternal self-efficacy. The issues associated with women's social subordination, with pervasive sex discrimination, and with gendered economic inequities need to be seriously addressed by the public health community in order for our society to achieve our public health goals for breastfeeding. To date, there has been some attention to breastfeeding in public health efforts on the health benefits of breastfeeding, as well as (but perhaps less) to the social and cultural constraints that contribute to lack of breastfeeding initiation or early weaning. Interventions must take account of the lived experience of mothers, many of whom face multiple obstacles to breastfeeding success, including the increasing medicalization and commodification that has defined normal breastfeeding in recent years.

Within each chapter, the author(s) address all or some of the issues raised above. Taken as a whole, the chapters in this book provide groundbreaking insights into how public health researchers, practitioners, and policymakers can advance their own agendas and efforts, as well as society's interest, in advancing the health of women, children, and communities through breastfeeding. Chapters will address both empirical and theoretical issues, concluding with recommendations for innovative public health research, policy, and practice.

The editors will solicit chapters from prospective authors during fall 2009, for presentation at the symposium March 19-20, 2010 at the University of North Carolina, Greensboro. The symposium will give the editors and authors a chance to present material to be included in the book and work together on the chapters and the volume's conceptualization as a whole. We expect to deliver the completed manuscript to the publishers by August 2010.

BOOK CHAPTERS:

Organizing Chapters

1. Where is breastfeeding in public health? **[editors]**
2. Reframing problems, reframing solutions from feminist perspectives **[editors]**

Political Contexts

3. The politics of infant feeding in the United States
4. Changing and current feminist approaches to breastfeeding in public health
5. Gender in global breastfeeding advocacy

Gendered Contexts and Gendered Constraints

6. The gendered status of motherhood
7. Public breastfeeding: mothers' bodies and the public control of sexuality
8. Adult autonomy and the dependence of breastfeeding

Institutional Contexts and Infrastructure Issues

9. Employment and motherhood
10. Obstetric care and breastfeeding
11. Pumping: Commercialization of breastfeeding or recognition of 21st-century realities?
12. Lactation consultants and the professionalization of breastfeeding support
13. Pediatrics and maternal authority

Sociocultural Contexts and Pressures

14. Race and breastfeeding in America
15. Poverty/class and breastfeeding in America (could include WIC)
16. Breastfeeding across cultures
17. The cultural contexts of guilt

Emerging issues: Environmental contexts

18. Environmental sustainability and breastfeeding
19. Breastfeeding and pandemic emergencies

Conclusions

20. Planning the way forward **[editors]**
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