ESRC seminar series: Social experiences of breastfeeding: building bridges between research and policy

March 11th 2015: Breastfeeding and Changing Cultures of Parenting
Speaker abstracts and biographies.
Changing Cultures of Night-time Breastfeeding in the U.S.

After decades of low and declining breastfeeding rates from the 19th through the mid-20th centuries, the United States have witnessed a growing number of mothers attempting to breastfeed their babies. While initially propelled by grassroots advocacy, the dramatic expansion of research and support from the medical community has increasingly become the key driver behind women’s changing perceptions of breastfeeding as important and beneficial to their infants’ health. Despite public health advocacy for breastfeeding, however, few structural changes have been implemented to materially support this practice. Moreover, numerous cultural barriers to breastfeeding continue to hinder mothers and their families in their breastfeeding plans. This talk addresses the cultural dilemmas that the re-incorporation of breastfeeding as a bodily practice brings about during the nighttime, an area that remains largely unexplored in contemporary discussions of cultural controversies surrounding breastfeeding. Specifically, I explore the challenges that this intercorporeal relationship between mothers and babies poses for American ideologies of personhood, which are embedded in space and time and undergirded by capitalism. Using evidence from my two year ethnographic study of families who intended to breastfeed their children in the American Midwest, I argue that the demands of bodily closeness entailed in breastfeeding disrupt expectations for separate sleep between parents and babies during the nighttime. Nighttime breastfeeding and co-sleeping, in turn, prompt families to reconsider cultural expectations for their babies and themselves, ultimately renegotiating concepts of personhood and the very fabric of their relationships with one another.

Cecilia Tomori earned her doctorate in Anthropology from the University of Michigan. Her dissertation, based on a two-year ethnographic study in the American Midwest, addressed nighttime breastfeeding and kinship, personhood, and capitalism in a comparative perspective. After completing a postdoctoral fellowship, she is currently a Research Associate in the Department of Epidemiology at the Johns Hopkins Bloomberg School of Public Health, where her work addresses the social and cultural aspects of health and illness. She has recently published her first book based on her dissertation work, entitled, “Nighttime Breastfeeding: An American Cultural Dilemma” with Berghahn Books.
Why does breastfeeding generate intense emotional responses, both from mothers and the wider public? This paper argues that breastfeeding has come to be situated at the centre of struggles to secure recognition for the quality of role performance in the early stages of motherhood. Public health campaigns tend to rely on moral norms which equate good mothering with the maximisation of infant health through breastfeeding. However, the practice is caught up in more general forms of recognition, not least for the competence of one’s embodied self-presentation. The tension this generates is experienced by new mothers through relations with healthcare professionals, family and friends, as well as other mothers. This paper argues that the experience of normative tension here provokes feelings of guilt and shame, with multiple and conflicting foci, as women struggle to demonstrate their competence as mothers in a complex and contested normative environment.

Lisa Smyth is a Senior Lecturer in Sociology at Queen’s University Belfast. Her research interests focus on social roles, norms and interaction, with a particular focus on families. Her most recent book is The Demands of Motherhood: Agents, Roles and Recognition (Palgrave Macmillan, 2012). She is also the author of Abortion and Nation: The Politics of Reproduction in Contemporary Ireland. (Ashgate 2005).
Breastfeeding works best when the infant is fed on demand with no restriction on frequency or length of feeds including the opportunity to feed regularly at night. However society often has conflicting ideas about how infants ‘should’ behave. ‘Good babies’ feed at spaced out regular intervals, self settle between feeds and do not wake at night.

There is a global multimillion-pound parenting book market promoting books that prescribe strict feeding and sleeping routines to enable mothers to achieve this. However these routines are often at odds with the need to feed a breastfed baby on demand and despite their popularity, often entirely lack an evidence base.

This presentation combines findings from a number of studies exploring mothers’ perceptions and anxieties about their infants’ feeding patterns and how this fits within wider beliefs about early parenting. It shows how anxieties about how frequently a baby feeds, beliefs about how much milk a baby should consume and concerns regarding sleep and behavior contribute towards mothers stopping breastfeeding. These beliefs are often fuelled by the perceived comparative normal behavior of formula fed infants.

The importance of raising awareness of baby-led feeding and normal infant behavior amongst new mothers in what has today become a formula feeding society is emphasized.

Amy Brown is an Associate Professor in Public Health at Swansea University. Her research explores the factors that influence whether infants are breast or formula fed and when and how they are introduced to solid foods. In particular her work examines how complex psychological, societal and cultural factors can affect maternal experiences at this time.
“I think they might do that in Swansea”; the challenge of increasing breastfeeding when rates are very low.

Breastfeeding rates in Wales are low. Whilst data from the infant feeding survey shows us that initiation rates have increased since the 1990’s Local Health Board data reveals a static picture over the last 5 years and stark inequalities. We are still a long way from realising the step change towards significant higher breastfeeding rates at 6 weeks and 6 months that would make the biggest difference to the health of mothers and babies.

Public Health Wales has been asking ‘what works to increase breastfeeding rates in this context? And ‘what else do we need to understand to develop a robust evidence based approach to developing the breastfeeding programme?’ This talk will focus on key themes, which have arisen from several recent pieces of work. When breastfeeding is rare, it is seen as something other women do somewhere else and this has implications for pregnant women, their ability to even consider breastfeeding, and for the experiences of women who are breastfeeding. Listening to these stories is an important first step, but what does it mean for the programme? So far we have raised more questions than answers, but they are important questions grounded in the lives of women in Wales and are likely to resonate with others working in similar communities across the UK.

Sally Tedstone is the coordinator of the National Breastfeeding Programme for Wales. Her professional background is in midwifery; she was a practicing midwife for over 20 years working in a variety of settings from large maternity unit to small birthing centres and the community. She has held a number of infant feeding lead posts in maternity and health visiting services where her role has been to drive up standards of care for mothers and babies and deliver improvement in breastfeeding rates. Sally has also held a number of strategic posts; with UNICEF UK as part of the Baby Friendly Initiative team, and for the Department of Health leading the Healthy Early Years and Infant Feeding Programme in the South West of England.