

This is an Open Access document downloaded from ORCA, Cardiff University's institutional repository:<https://orca.cardiff.ac.uk/id/eprint/65969/>

This is the author's version of a work that was submitted to / accepted for publication.

Citation for final published version:

Boyer, Kate 2014. 'Neoliberal motherhood': workplace lactation and changing conceptions of working motherhood in the contemporary US. *Feminist Theory* 15 (3) , pp. 269-288. 10.1177/1464700114545321

Publishers page: <http://dx.doi.org/10.1177/1464700114545321>

Please note:

Changes made as a result of publishing processes such as copy-editing, formatting and page numbers may not be reflected in this version. For the definitive version of this publication, please refer to the published source. You are advised to consult the publisher's version if you wish to cite this paper.

This version is being made available in accordance with publisher policies. See <http://orca.cf.ac.uk/policies.html> for usage policies. Copyright and moral rights for publications made available in ORCA are retained by the copyright holders.



**'Neoliberal motherhood': workplace lactation and changing conceptions of working motherhood
in the contemporary USⁱ**

Kate Boyer

Forthcoming in Feminist Theory, 2014

Abstract

Through an analysis of policy texts, population statistics and a targeted sample from the popular press, this paper both furthers knowledge about changing meanings of working motherhood in the contemporary US, and proposes a refinement to existing conceptual work relating to how wage-work and care-work are combined. I focus analysis on recent US social policy which grants new rights and protections for women seeking to combine lactation and wage-work (the Patient Protection and Affordable Care Act of 2011). I critique this policy through Bernise Hausman's work on the politics of motherhood, arguing that it represents a form of work-life integration that is particularly burdensome for working mothers. I further argue that maternal practice as well as well as expectations of working motherhood in the contemporary US are being reshaped around the demands of neoliberalism, producing what I term 'neoliberal motherhood'. I assert that this policy represents a way of combining wage-work and care-work that is not captured within existing feminist theory, and suggest that a re-working of theory in this area is needed in order to address cases in which embodied care-work is enfolded within the time and space of wage-work.

Key words: wage-work/care-work relations, neoliberalism, working motherhood, breastfeeding, breast-pumps

Introduction

As feminist scholars have observed (including in the pages of this journal) there has been a rising interest in the role, or place, of care and care-work in public policy discourse over the last twenty years (Reiger, 2000; Reiger *et al* 2009; Sevenhuijsen, 2003). Herein I approach breastfeeding as a form of care-work, and seek to interrogate the rationalities behind state efforts to promote workplace lactation in the contemporary US. As such, this paper is part of a broader effort to extend knowledge about how maternal practice is understood and conceptualised. I analyse the cultural politics of combining lactation with wage-work through an engagement with feminist theory, particularly Bernise Hausman's work on the politics of motherhood (Hausman, 2004) and Nancy Fraser's conceptualisation of how wage-work/ care-work relate to one another (Fraser, 1997).

This work furthers knowledge about the role of the state in shaping understandings and experiences of maternity and working motherhood (Bezenson & Luxton, 2006; Crompton, 2006; Hausman, 2004; Perrons *et al*, 2006; Reiger 2006). Through analysis of policy texts, population statistics and the popular press, I argue that both embodied maternal practice and normative understandings about working motherhood are being reshaped around the demands of neoliberalism as it is constituted in the contemporary US, producing what I term 'neoliberal motherhood'. In this way I also extend scholarship on the disproportionate burden placed on women under neoliberalism by examining some of the ways neoliberalism disciplines mothers (Gunewardena and Kingsolver, 2007).

Breast pumps and the expression of breast milk have significantly reshaped understandings and experiences of maternity in a range of advanced capitalist countries over the last fifteen years.ⁱⁱ While the medical benefits of expressed milk over formula have attracted significant research (Boyd *et al*, 2006; EL-Khuffash and Unger, 2012; Horwood *et al*, 2001; Lucas *et al*, 1994; Rasmussen and Geraghty, 2011); relatively few studies have addressed the social and cultural politics of combining lactation with wage-work (Boswell and Boyer, 2007; Gatrell, 2007a; Johnson *et al*, 2009).

While acknowledging the specificity of US policy and parenting culture, this case (and analysis) nevertheless has international relevance in light of the increased prevalence of workplace milk expression in an international context (see Gatrell 2007; Payne and Nichols, 2009 and Ezz El Din, 2004 for examples from the UK, Australia and Egypt); and the historic role of the US as a 'policy exporter', particularly in the area of women's workforce participation (Deacon, 2000; Dolowitz *et al*, 1999).

Expressing breast milk has become a normative aspect of maternal practice in the US, with over 77% of American mothers reporting having used breast pumps at least once (Geraghty *et al*, 2005). As Bernise Hausman has noted: 'reliance on breast pumping as a way to manage waged labour... is transforming women's practices as breastfeeding mothers' (Hausman, 2004: 280). In 2011 the right to express breast milk at work began to be protected by federal law in the US, under the 'Reasonable Break Time for Nursing Mothers' provision of the Patient Protection and Affordable Care Act, which mandated that workplaces of over 50 employees must provide lactation rooms and breaks during the workday to express milk. This paper asks: What kind of normative conceptions of working motherhood does this legislation enable? What are we to make of these conceptions? And finally, what are the implications of codifying this kind of early working motherhood for feminist theory?

I analyse this legislation from the perspective of Bernise Hausman's 2004 call for a 'feminist politics of motherhood' which includes, among other things, a call for more and better ways of combining breastfeeding with wage-work. In addition to the most obvious work they do, breast pumps and the legislation regarding their use have both reshaped embodied practices of maternity and advanced a particular vision of how working motherhood should proceed in the contemporary US. On the one hand, recent legislation promotes a way of 'doing' early motherhood that validates care-work and extends rights for a (health-promoting) bodily practice which until recently has had uncertain legal and social status. Yet I suggest that although being pitched as a means of promoting policy goals of enhanced infant and maternal health and wellbeing, *Reasonable Break Time* is arguably not the best means of achieving these goals. Rather, I suggest that this piece of legislation promotes a way of combining wage-work and care-work that harmonizes well with new economic forms, but is highly extractive for working mothers: leading to what I term a condition of 'neoliberal motherhood'. I argue that by codifying this one solution to workplace lactation in the absence of expanded paid maternity leave or workplace breastfeeding, *Reasonable Break Time* fails to deliver policy support for the full range of embodied maternal practices --and breastfeeding in particular-- as called for by Hausman.

I also argue that current US legislation relating to workplace lactation impels us to revisit how wage-work/care-work relations are conceptualised within feminist theory. Formulated in the mid-1990s, Nancy Fraser's foundational model of how care-work and wage-work relate to one another (Fraser, 1997) still holds sway as a dominant theory in this field. I revisit this key model in light of the economic and technological changes that have occurred since its development, and suggest a refinement to this theory in light of these changes.

This paper has three parts. First I review the relevant theoretical and empirical literature relating to breast-pump use in the context of the wage-workplace, analysing how work/life integration is currently theorised. Then I outline some of the key economic and political rationalities behind this bill, highlighting how it marks a shift in normative conceptions of working motherhood. I argue that this legislation enables the combination of wage-work and care-work in a way that is not captured by existing theory, and suggest how we might refine existing theory in order to address this. Finally, I offer a critique of the approach to combining wage-work and care-work that *Reasonable Break Time* promotes. I highlight how this legislation functions to synchronise maternal practice with new economic forms, while at the same time structuring a 'politics of the possible' in which alternative ways of combining lactation with wage-work which are not now protected by law might be rendered harder to achieve.

Literature Review

Recent legislation codifying the entitlement to express milk at work is situated within broader public and health policy narratives in which breast milk is recognised as the ideal food for infants 'everywhere' (eg in both the developed and the developing world) by the World Health Organization (WHO, 2011). The American Academy of Pediatrics recommends exclusive breastfeeding for the first six months of life, and continued breastfeeding in combination with solids and other complimentary foods for the first twelve months (AAP, 2012). These recommendations are echoed by the US Centers for Disease Control.ⁱⁱⁱ While 80% of US women initiate breastfeeding, only 16% breastfeed exclusively for six months (based on 2009 births)^{iv}. Although initiation rates represent a

significant improvement over recent decades, duration rates, particularly for exclusive breastfeeding to six months, as recommended, are still significantly below targets. Things are further complicated by the fact that breastfeeding is more common amongst older, better-educated white and Latina women, and less common (and arguably less-well supported) amongst other groups. In this context, women's ability to combine breastfeeding with the rest of their lives in the weeks and months post-birth has become a matter of concern to health policy.

Meanwhile feminist scholars have long conceptualised breastfeeding as an important aspect of embodied maternity (Bartlett, 2000; Blum, 1993; Hausman, 2004). Bernise Hausman situates breastfeeding within a broader, 'feminist politics of motherhood' in which the practice of mothering and the myriad choices mothers and families must make regarding the upbringing of a child are acknowledged as inherently political (Hausman, 2004: 275). To Hausman, a feminist politics of motherhood both recognises the deeply embodied nature of certain aspects of motherhood, and calls for attending to the ways in which practices of mothering –including decisions around infant feeding-- are not simply a matter of 'personal choice' as they are so often cast, but rather are enframed by wider social, economic and symbolic contexts (Hausman, 2004: 277). Translating this politics into praxis, Hausman calls for the need for increased support for breastfeeding, and efforts to combine this form of care-work with the rest of women's lives. I suggest that Hausman's theorisation of the politics of motherhood provides a fruitful way of framing breastfeeding for the analysis laid out here.

Feminist theorisations of breastfeeding constitutes a massive field (Bartlett, 2003, 2005; Blum, 1993; Boyer, 2012; Dykes, 2005; Galtry, 2000; Gatrell, 2007a; Hausman, 2003, 2004; Johnson, 2009; Longhurst, 2008; Sterns, 1999 to name a few examples), and it is beyond the scope of this paper to review this body of work in a comprehensive way. However, it is worth highlighting the key insights this scholarship has generated relating to lactation and the politics of integrating lactation with wage-work. First to note is the transgressive or subversive dimension of women's breasts functioning in modes other than at the service of male sexual desire (Bartlett, 2005; Hausman, 2003; Sterns, 1999), together with anxiety about breastmilk as a substance which transgresses the body boundary (Boyer, 2010; Hausman, 2003; Longhurst, 2008). These insights draw on Elizabeth Grosz's work on the idea of corporeal 'volatility' (Grosz, 1994) in the context of the unpredictability of breastfeeding and the spectre of the female body 'out of control'. Drawing on the work of feminist cultural theorist Sara Ahmed, scholarship has also identified the will to 'cloister' or occlude breastfeeding in public based on proscriptions against bodily practices which disrupt 'public comfort' (ie, disturb the comfort of others) (Boyer, 2012). At the same time, in spite of these difficulties feminist scholarship has also shown how a moral discourse has emerged around infant feeding in which breastfeeding has become associated with 'good' mothering (and bottle-feeding with 'bad mothering') due to the wide-ranging health benefits it provides. This can create a condition whereby women feel pressure to breastfeed, and this too can be very damaging for women who are not able to or choose not to breastfeed for whatever reason (Bartlett 2005; Blum, 1993; Hausman, 2003; Sterns, 1999).

Feminist scholarship has conceptualised breastfeeding as contingent, variable and sometimes contradictory in meaning. Breastfeeding can be painful (Kelleher, 2006) it can be experienced as oppressive or rewarding (or both) (Carter, 1995; McCarter-Spaulding, 2008; Hausman, 2003, 2004), and can produce feelings of frustration and inadequacy about bodily capacities (especially the ability

to make enough milk), as well as feelings of confidence and body-pride (Dykes, 2005; Marshall *et al*, 2007). Of particular import for this paper, Fiona Dykes has argued for conceptualising breastfeeding itself as a form of work (Dykes, 2005) in recognition of the social, physical and psychological labour it can require, even as it can be experienced as deeply rewarding. Some analyses of breastfeeding have made observations about pumping, including the fact that pumping can serve as a means of returning to 'normal' (eg pre-birth) activities (Dykes 2005, 2006, Galtry, 2000; Hausman, 2003), or as a means of obviating what are experienced by some as problems of breastfeeding, such as the loss of corporeal control and spatial freedom (Dykes, 2006).

A few studies have taken the social and cultural politics of milk expression specifically as their focus. This research has suggested that breast pumps contribute to the medicalization of motherhood (Van Esterik, 1996); that feelings relating to breast expression can vary from embarrassment to empowerment, and that these feelings can play a role in decisions about whether or not to express (Johnson *et al*, 2012; Morse & Bottorff, 1988). Recent scholarship taking an explicitly feminist and post-structuralist orientation has argued that pumping in the first days and weeks post-partum can serve as a strategy of maintaining the 'good maternal body' within extant moral discourses of infant feeding, by providing a way to manage pain associated with breastfeeding (and thus be able to continue to provide breast milk), as well as a means of avoiding social opprobrium relating to breastfeeding in public (Johnson *et al*, 2009, 2012).

This literature provides a useful background by laying out the key issues and critical observations about the politics of infant feeding, together with some of the ways that pumping fits into that. It identifies the cultural ambivalence surrounding breastfeeding relating to the sexualisation of women's breasts and discomfort with any substance that transgresses the body boundary, together with difficulties undertaking breastfeeding in public and even sometimes private space. It further shows how for some women, expressing milk provides a 'solution' to some of the problems breastfeeding can cause.

Despite the prevalence of combining lactation with wage-work (especially in the US and certain other Anglophone contexts), very few studies have analysed this directly. However Gatrell (2007b), and Boswell and Boyer (2007) constitute two exceptions. Gatrell's work, based on in-depth interviews with 20 women in professional employment in the UK between 1999 and 2002, reveals some of the difficulties in trying to combine lactation (either by breastfeeding or pumping) with wage-work (Gatrell, 2007b). This research highlights experiences of requests for flexible working (and other arrangements to combine lactation with wage-work) being denied, and shows how lactating bodies can be constructed as unacceptable within the wage-workplace. In line with Dykes's argument about breastfeeding as labour (Dykes, 2005), Gatrell highlights both the physical fatigue of women seeking to combine lactation with wage-work, as well as the affective strain of worry about bodily leakage and pressure to keep lactation hidden from view.

In a similar vein, Boswell and Boyer approach workplace lactation through a concern with the ways gender relations are constructed in and through spaces and practices of wage-labour, together with an appreciation for the different ways technology can mediate wage-work/care-work relations (Boswell and Boyer, 2007). Drawing on 12 interviews and 17 questionnaires conducted in 2004-5 in the US, this work highlights the social, affective and practical difficulties of expressing milk at work (echoing Gatrell, 2007b), and shows how the ability to combine lactation with wage-work in the first

instance can be powerfully shaped by socio-economic class and access to 'space-rich' professional work environments.

In addition to the ways workplace lactation relates to the wider field of scholarship on breastfeeding, it also relates to the way wage-work/ care-work relations have been conceptualised within feminist theory. The primary framework for positing wage-work/ care-work relations since the decline of the Fordist gender-contract and the family-wage since the 1970s has been the model advanced by Nancy Fraser in: *Justice Interruptus: Critical Reflections on the 'Postsocialist' Condition* (Fraser, 1997).^v Within this model Fraser avers that wage-work and care-work can relate to one another in three possible ways. In the first scenario, all adults are expected to participate fully in the wage-labour market, while care-work is largely marketised (the 'universal breadwinner' model). In the second, care-giving is valued in its own right as an activity distinct from wage-labour, and is supported by some form of government subsidy allowing parents (typically mothers) to care for their children themselves. Or alternatively, some workers (typically mothers) limit their participation in the wage-labour market after childbirth in order to participate in unpaid care-work. This model is referred to as 'caregiver parity', or alternatively the 'two track' or 'mommy-track' model, and is associated with the limitation of earnings and career-position for mothers (Gatrell, 2007b). Finally in the third model all workers limit their participation in the wage-labour market to some extent in order to participate in caring work (the 'universal care-giver' model). Fraser then evaluates each of the three models against seven metrics relating to gender equity, with the last (caregiver parity) holding the most potential for valuing care-work; destabilising the existing gender-coding of caring as 'women's work'; and achieving work-life harmonization.

Although each of the three formulations within Fraser's model represents an ideal form, different countries can serve as rough approximations of what each of model looks like on the ground. In an international comparative framework the US reflects a universal breadwinner model as much as any nation, while the UK, with its much lower rates of full-time working amongst mothers (as compared with the US) provides a serviceable example of the two-track model (whereas about 74% of mothers engaged in wage-work in the US are working full-time, only about 38% of UK mothers in wage-work are full-time (Tomlinson, 2007, p.403). Alternatively, with rates of full-time labour market engagement that are similar to the US's, but within a context of shorter-working hours culture and relatively long maternity leaves, Scandinavian countries arguably provide the closest real-world approximation to the caregiver-parity model at present (Borchorst, A and Siim, B, 2002).^{vi} In each of these cases, we can clearly see how both working patterns and trends in combining wage-work and care-work are powerfully shaped by the character of the welfare state in respective countries, particularly in terms of the existence and length of paid statutory maternity leave and the presence or absence of universal health care.

Fraser's model has provided an enduring and robust way to conceptualise how wage-work and care-work relate to one another. Yet much has changed since 1997 when this model was proposed. Economic conditions have changed, and responses to these changes have varied by cultural context. Policy contexts have changed, as has the technological landscape (including portable breast-pumps becoming widely available in certain cultural contexts). One of the questions this paper seeks to address is: what have these changes meant for the way wage-work and care-work are combined? This paper seeks to build on the scholarship outlined above in three ways. First, I extend knowledge about how practices of combining lactation with wage-work are changing normative understandings

of working motherhood in the contemporary US. In turn, I provide an analysis the cultural, political and economic rationalities behind the way workplace lactation has been codified into law, offering the concept of 'neoliberal motherhood' as a means to explain this. Finally, I mobilise this case to propose a refinement to existing theory in this area.

Having now outlined the relevant empirical and conceptual literature relating to workplace lactation I will now turn to consider the forms of working motherhood that the *Reasonable Break Time* clause of the Patient Protection Act enables. After placing this policy within a context of extant patterns of maternal working and forms of maternal workplace supports in the US, I analyse how *Reasonable Break Time* expands rights vis a vis work workplace lactation. I reflect on the politics of codifying the integration of wage-work and care-work in this way, and suggest how this formulation offers a refinement to existing conceptualisations of work/life integration. Finally, I reflect on how well *Reasonable Break Time* answers Hausman's call for a feminist politics motherhood.

Analysis

Rationalities behind 'Reasonable Break Time'

Reasonable Break Time was presented to the public as a way of helping working mothers achieve their personal goals for infant feeding, thereby also helping achieve public health goals relating to breastfeeding duration rates. Bearing in mind Hausman's call to contextualise infant feeding 'choice' within wider social, economic and symbolic contexts which work to practically structure and limit choice, I shall now turn to consider this legislation within a framework of mothers' workforce engagement and policy supports for working mothers in the US. But before doing this it is worth noting that undergirding this policy framework is a powerful moral discourse surrounding participation in the wage-labour market in which workforce participation is posited as a moral good and linked in the popular imagination with full rights as citizens. Within this view adults who are not engaged in wage-work (particularly women with children seeking assistance) are viewed with suspicion and vilified (such as was done so memorably in constructions of the benefit-receiving welfare 'queen' in the 1980s and '90s) (Hays, 2004; Mink, 1998).

Within this context, married mothers have accounted for the greatest increase in total labour market participation in the post-war era (Cohany and Sok, 2007), with workforce participation rates amongst women with children in the US increasing from 47% to 73% between 1975 and 2000 (BLS, TED, 2006). In 2008, rates of workforce participation amongst women with children under 3 years old were even higher than for women with no children under age 18 (59.6% as compared to 54.3%) (BLS, TED, 2009). And during the 2008-2010 economic recession, employment rates amongst women with children age 0-5 decreased less sharply than for those of either men or women overall (Landivar, 2011: 23). Thus *Reasonable Break Time* should be read within a context of moral discourses around both breastfeeding and wage-work, together with high levels of actual full-time working itself, even amongst relatively new mothers.

Echoing discourses about work as a moral good, *Reasonable Break Time* is also enframed by a social policy context reflecting some of the most minimal maternity entitlements in the world, and in which access to health care derives from attachment to the labour market. In contrast to every other nation in the developed world, paid maternity leave in the US is not a statutory right, and unpaid leave (of twelve weeks) is an entitlement only for those employed in workplaces of over 50

people (per the Family and Medical Leave Act of 1993). On average, two-thirds of US mothers return to work within three months of giving birth (Shabo, 2011), in contrast to the UK for example where the average length of maternity leave is six months (House of Commons, 2007). Essentially, US mothers are expected to return to the wage-labour market as soon as they are physically able.

At a practical level, these factors create a structural and discursive environment which impels many women to return to work within months, weeks, and sometimes even days after giving birth. Given the combination of high rates of workforce engagement for mothers of babies and young children on the one hand and powerful public health messages promoting breastfeeding on the other, *Reasonable Break Time* emerged within a broader socio-economic context in which combining lactation with wage-work through breast pumps had already become, if not normalised practice, at least not exceptional (especially within professionalised sectors of the US labour market). Having traced out some of wider social and policy contexts enframing this legislation let us now turn to consider what this law says about the changing relations between breastfeeding, maternal subjectivity and working motherhood in the contemporary US.

At its most basic level, the *Reasonable Break Time* provision of the Patient Protection and Affordable Care Act legitimates the enactment of a form of body-work and care-work in spaces of wage-labour in a way that is substantially new. Indeed, just as Bartlett has argued that the symbolic combination of breastfeeding with other aspects of womanhood (such as sexuality) is transgressive (Bartlett, 2000), the integration of breastfeeding into the spaces and practices of wage-work likewise transgresses the traditional spatial compartmentalisation of different forms of activity; and destabilises idealised conceptualisations of workers' bodies as bearing no signs of reproductive capacities. In this sense it marks a sea-change in mainstream workplace culture and practice in the US vis a vis normative embodied practice. Moreover, the process through which the bill became law rendered visible a wealth of information about women's personal experiences trying to pump at work, through the 1,850 letters submitted in response to the call for public comments (many of which were based on women's own experiences trying to pump at work).^{vii} Creating a 'space' for these narratives within the public sphere serves to symbolically illuminate a set of experiences which had been marginalised, hidden and in the main, powerfully marked by feelings of exclusion owing to gendered conceptualisations about normative corporeal workplace practice. Protecting workplace milk expression with a set of rights marks an improvement on the currently limited framework of legal support for maternal care-work. Approached this way, *Reasonable Break Time* can reasonably be seen as an innovation, an improvement on how things have been. The United States Breastfeeding Committee (which includes both maternal advocacy group MomsRising and La Leche League as members) as well as the National Partnership For Women and Families all 'applauded' this legislation's passage as a step forward for working mothers (Shabo, 2011; Stanton, 2011).

I have argued thus far that *Reasonable Break Time* validates a form of embodied care-work in spaces of wage-labour in a way that is substantially new, and that it suggests a form of work-life integration which is not readily explained by extant models within feminist theory. I will now shift focus to offer a critique of this legislation from the perspective of Hausman's feminist politics of motherhood, outlining the refinements this legislation suggests to existing conceptualisations of wage-work/ care-work integration, and examining the implications of codifying workplace lactation in this way for normative understandings about working motherhood in the contemporary US.

One of the clearest limitations to *Reasonable Break Time* is the fact that breaks are not waged, suggesting that who is able to take up this right will likely be structured by socio-economic class. Depending on how intensively a mother is lactating (which is linked to child's age, with older children typically receiving less breast milk), breaks of about 20-40 minutes are needed every few hours throughout the workday in order to prevent engorgement and maintain milk supply.^{viii} This creates a situation in which mothers who take up this right are paid less than their full-time pay packet, but are still working (and having to pay for child-care) for a full-time work schedule. The fact that breaks are not waged will likely delimit who is able to claim this right along economic lines in a way that excludes lower-income women, who are disproportionately women of colour in the US. (DeNavas-Walt *et al*, 2011). Thus *Reasonable Break Time* runs the risk of intensifying, rather than helping to redress, existing trends in breastfeeding duration rates in which African -American women and lower-income women tend to breastfeed for shorter periods of time than Latina, white, and higher-income women (McDowell *et al*, 2008).

Another limitation of this legislation is that it allows for pumping only, and not breastfeeding at the breast. Within a policy context of no paid statutory maternity leave in which many mothers need to return to wage-work very quickly after childbirth, differences between breastfeeding and pumping are typically downplayed or ignored in policy documents promoting workplace lactation via pumping. Contra scholarship highlighting psycho-social benefits of breastfeeding (as opposed to pumping) (Schmied & Lupton, 2001), within this context the myriad affective, emotional and bio-mechanical differences between the two practices are flattened. Instead, the 'goods' of breastfeeding are symbolically distilled down to, and contained within the substance or matter of breast milk itself (Smith, 2004). Pumping is then constructed as being 'as good as' breastfeeding in terms of the nutritional and immunological benefits for the baby.

Yet just as practices of pumping and breastfeeding are different, so is breast milk nursed by a baby different from expressed milk in a bottle. While better (in terms of nutritional and immunological benefits) than formula, expressed breast milk that has been refrigerated or frozen is materially different from fresh. Breast milk is a dynamic compound that changes composition in response to time of day, immediate climatic conditions, age of child, health of mother, and other factors (Hyde, 2012). The 'tailor made' aspect of breast milk is lost when frozen and given at a different time or in a different place. Even under ideal circumstances of refrigeration the nutritional content of expressed milk begins to degrade within 24 hours, with significant loss of vitamins C, A & E in milk that has been refrigerated or frozen (Ezz El Din *et al*, 2004). For example, the nutritional value of vitamin C in expressed milk that has been refrigerated 24 hours reflects a 36% drop in nutritional value as compared to fresh, while milk that has been frozen one week reflects a 60% drop (Ezz El Din *et al*, 2004). Biological properties of milk have also shown to degrade over time through processes of refrigeration and freezing (Francis *et al*, 2012; Hyde, 2012).^{ix} This is to say that despite the desire to downplay differences between fresh and expressed breast milk that is latent in policy narratives promoting workplace lactation, material differences exist between them. These findings sit uncomfortably with workplace legislation which offers pumping as the only means of capturing the full range of immunological and health benefits associated with breastfeeding.

As well, although some women prefer pumping to nursing (Johnson *et al*, 2012; Morse & Bottorff, 1988),^x many others do not, and research has outlined the personal and political difficulties in trying to combine lactation with wage-work (Boswell and Boyer, 2007; Gatrell, 2007). In fact, the years

leading up to the passage of the Patient Protection and Affordable Care Act saw something of a breast pump 'backlash' in the US media, through the publication of several high-profile stories (in *New Yorker*, *The Atlantic*, and *the New York Times*) raising concern about the shift to workplace milk-expression as a normative practice (Lapore, 2009; Rosin, 2009; Warner, 2009). While it is to be noted that these news outlets reflect a predominantly East-coast readership and cater to a wealthier, whiter segment of the American public than the population as a whole, I nevertheless suggest that they point to common frustrations amongst the segment of the population most likely to breastfeed, and common concerns over how breast pumps are re-shaping normative practices of working motherhood that extends well beyond 'mother-focused' news outlets (eg, the so-called 'mommy media'/mommy blogs).

Echoing the important work of feminist Science and Technology Studies scholar Ruth Schwartz Cowan as outlined in her book *More Work for Mother* (Cowan, 1983), Hannah Rosin suggests that, like so many other 20th century domestic appliances, breast pumps ultimately generate more labour than they save. Indeed, Rosin casts pumping as 'the moment that...brings together all the awfulness of being a modern mother' (Rosin, 2009). In a similar vein, in an article titled simply 'Ban the Breast pump', Judith Warner portrays pumping as a 'grotesque ritual', stating she:

hope(s) that someday, not too long in the future, books on women's history will feature photos of breast pumps to illustrate what it was like back in the day when mothers were consistently given the shaft. Future generations of female college students will gaze upon the pumps, aghast (Warner, 2009: unpaginated)

In 1997 Judith Galtry first called attention to the class-politics of pumping, associating breast pumps with socio-economic privilege (Galtry, 1997). By 2009 feminist commentators such as those noted above were beginning to suggest that breast pumps may have become a 'privilege' some women didn't want. Written two years before *Reasonable Break Time* was passed into law, each of these pieces questions how 'good' the goods of breast pumps actually are: both because it is so labour-intensive, and because it is so unlike breastfeeding. Just as breastfeeding has been conceptualized as a transgression of patriarchy for the way it colludes a signifier of sexuality within a practice of motherhood (Bartlett, 2000), for some women breast pumps and the act of pumping seem to signify a kind of transgression of motherhood.

Approaching *Reasonable Break Time* from the perspective of Hausman's feminist politics of motherhood, I have analysed how wider social, economic and symbolic contexts shape the maternal practice promoted by this legislation. I have argued thus far that *Reasonable Break Time* is informed by political-economic logics which reflect dual moral narratives about the beneficence of breastfeeding on the one hand, and the good of full-time engagement in the workforce on the other, in a framework in which wage-labour functions in practical terms as a virtual pre-requisite to full-citizenship, and within a policy context of very minimal maternity leave. Returning to the question of the implications for normative conceptions of working motherhood of codifying workplace lactation in this way, I suggest that *Reasonable Break Time* encourages combining lactation with wage-work in a way that is as labour-intensive as breastfeeding, but without any of the affective/interpersonal benefits-- and with less of the nutritional and immunological benefits. I suggest that while this legislation represents a recognition and valuing of care-work in space of wage-labour, it binds normative conceptions of working motherhood to a particularly intensive form

of maternal practice. Relating back to Hausman's call for 'more and better' ways of combining lactation with wage-work, I submit that *Reasonable Break Time* falls short in terms of creating options which are both substantially better, and available equally to all working mothers.

At the same time, I suggest that *Reasonable Break Time* suggests a kind of work-life integration that is not readily explained by existing feminist theory. In creating a framework of legal protection for rights to undertake embodied care-work within spaces of wage-labour, *Reasonable Break Time* suggests a way of blending of care-work and wage-work that does not fit easily within the universal breadwinner model (in which care-work is outsourced to the private sector); the two-track model (based on part-time work for mothers); or the caregiver parity model (based on a more gender-equitable division of care-work). Instead, this legislation encourages the addition of care-work *on top of* the activities of a full-time working day: thus significantly intensifying the experience of wage-labour for working mothers. This new, more extractive mode of work-life integration leads us to consider a refinement to Fraser's theory. This refinement entails a 'fourth mode' in addition to universal wage-earner, care-giver parity, and universal caregiver in which certain forms of care-work (done by women only) is enfolded within the time and space of the workday. I suggest we could term this fourth mode 'wage-earner plus'.

Reasonable Break Time was promoted as a means to both capture the full medical benefits of breastfeeding, and enhance the wellbeing of working mothers. Yet as we have seen, it arguably achieves neither aim as well as it might. Taking as a hypothesis that expanding the field of choice relating to workplace lactation to include actual breastfeeding as well as longer, paid maternity leaves would both benefit infant and maternal health and wellbeing, as well as getting closer to Hausman's vision of motherhood I pose the question: what is achieved by narrowing this field to support only pumping?

By way of drawing my analysis to a close I suggest that while *Reasonable Break Time* does not function as well as other solutions might for working mothers seeking to combine lactation with wage-work, it functions very well in terms of advancing broader economic rationalities of neoliberalism in the particular way it is constituted in the contemporary US. While economic forms, approaches to the market and ways of working associated with neoliberalism are both variable and highly culturally specific (Gunewardena and Kingsolver, 2007), after Diane Perrons *et al* I am using this term to refer to long-working hours and a high degree of integration between work and non-work activities (Perrons *et al*, 2006). As Perrons *et al* have observed about the way new economic regimes have re-shaped gender relations in recent years: 'macro level changes are affecting the micro-organization of daily life (including) working patterns and gender divisions in Northern and Western Europe and the United States' (Perrons *et al*, 2006:2,). Relatedly, considering the influence of neoliberalism on maternity policy in Australia, Kerreen Reiger has argued that states can craft policy that both satisfy broader economic demands while also reflecting current social concerns (Reiger, 2006). Building on this I suggest that *Reasonable Break Time* reveals the power of extant economic regimes to shape not only gender relations but even a bodily practice as intimate as breastfeeding.

The form of work-life integration *Reasonable Break Time* promotes is characteristic of a mode of neoliberal citizenship in which individuals are made responsible for the maintenance of their own health and welfare (and, for mothers) that of their families (Bezanson and Luxton, 2006; Rose, 1999).

Under *Reasonable Break Time*, the responsibility for children's health is achieved through an almost wholly individuated socio-technical system of breast pumps, lactation rooms, refrigerators, and working mothers willing to discipline their bodies to the rigours of pumping at work. This costs organizations relatively little when compared with robust maternity leave, in terms of both maternity pay and lost labour. As well, pumping at work offers a way for breast milk to (eventually) get to babies in a way that is far less impactful on spaces and practices of wage-labour than bringing babies in to spaces of wage-work every time they needed to be fed would be. In this way, like other kinds of technologies before them, breast pumps become woven into and help support particular economic configurations and gendered ways of working (Layne *et al*, 2010).

Thus pumping at work functions as a form of 'neoliberal mothering', eg: a form of maternal practice that is congruent with the rigorous mode of workforce participation that is associated with neoliberalism, while also being responsive to expectations about delivering 'the best for ones' baby' in all ways, but especially where health is concerned. In this sense combining lactation with wage-work via breast pumping fits within a style of 'intensive' parenting associated with the Anglo-American middle-class which is characterized by privileging the child's needs (or perceived needs) above other factors, and shares with neoliberal citizenship a zeal for identifying and neutralizing potential risks to health (Fox; 2006; Hays, 1996).

Finally, after the work of Rancière (2010) and Mouffe (2005), I suggest that this legislation structures a 'politics of the possible', creating consensus around how working motherhood and workplace lactation should proceed in a way that makes it more difficult to argue for other ways of combining breastfeeding with wage-work (since a solution for this has now been provided). *Reasonable Break Time* essentially establishes a 'new order' vis a vis workplace lactation; and every order, as Mouffe reminds us, 'is predicated on the exclusion of other possibilities' (Mouffe, 2005: 18). Interwoven as it is with moral discourses about workforce participation and reflecting a policy context in which differences between breastfeeding and pumping are downplayed, *Reasonable Break Time* has the potential to render calls for alternatives which would take lactating women out of the wage-labour market (such as for longer, paid maternity leaves), appear ridiculous.^{xi}

Conclusion

This paper has offered a theorisation of how maternal practices and conceptions of working motherhood have shifted in recent decades in the US as work-place milk expression has become more prevalent. Through an analysis of the *Reasonable Break Time* provision of the Patient Protection and Affordable Care Act of 2011, I have shown how normative expectations of working motherhood have shifted in the contemporary US in ways that mark a radical departure from policy supports for breastfeeding found in all other western democracies. Although nominatively intended to advance public health goals, when looked at closely it appears that right-to-pump legislation supports certain kinds of working more clearly than it does policy goals relating to maternal and infant health. I have thus argued that such legislation promotes a normative ideal of 'good' early motherhood which is congruent with broader economic logics of post-Fordism (Perrons *et al*, 2006; Rose, 1999), but which is particularly extractive for working mothers.

I have argued that this legislation presents a form of work-life integration that is not captured within existing conceptualisations, and hope to have advanced feminist theory by proposing a refinement to the dominant model (Fraser's). I propose that the way care-work is enfolded within the time and

space of wage-work within current legislation suggests a 'hybrid' mode of work-life integration: a 'universal wage-earner' in which women are expected to participate fully in the wage-labour market, but – in contrast to the Fraser model—in which they are also personally responsible for completing certain forms of (embodied) care-work while *at work*. I argue this represents a fourth mode that is distinct from the three outlined by Fraser, and suggest that we can think of this mode as 'wage-earner plus'.

Building on Layne *et al* (2010), I have shown how socio-technical systems can be marshalled to provide support for particular gender and work regimes, and how breast pumps in particular can serve as means by which working mothers are made responsible for the care of the family within the 'consensus view' that early motherhood should include a rapid return to full-time work (eg within the first few months if not weeks post-partum). Without longer maternity leaves or the potential to nurse at work, I argue that the 'solution' to combining lactation with wage-work advanced by *Reasonable Break Time* marks the ascendance of a form of maternal subjectivity which is largely shaped by and aligned to the demands of neoliberal citizenship (Bezanson and Luxton, 2006; Rose, 1999). I argue this produces what can be thought of as form of 'neoliberal motherhood', combining elements of intensive motherhood with a high degree of integration between wage-work and care-work. While representing an improvement on what came before in terms of policy supports for workplace lactation, *Reasonable Break Time* ultimately fails to deliver the kind of social and policy change that would be needed to achieve Hausman's 'feminist politics of motherhood'. As ever, further work is needed in realms of theory, policy and practice in order to bring us closer to this aim.

Sources

American Academy of Pediatrics (2012) Breastfeeding and the Use of Human Milk, Policy Statement *Pediatrics* 129 (3), 827 -841.

Bartlett A (2005) *Breastwork: Rethinking breastfeeding*. Sydney, Australia: University of New South Wales Press.

--(2003) 'Breastfeeding bodies and choice in late capitalism'. *Hecate* 29(2): 153–165.

--(2000) 'Thinking through breasts: writing maternity'. 6# *Feminist Theory* (1) 173-186.

Blum LM (1993) 'Mothers, babies and breastfeeding in late capitalist America: The shifting contexts of feminist theory'. *Feminist Studies* 19(3): 291-311.

Bezanson K, Luxton M (2006) *Social Reproduction: Feminist political economy challenges neo-liberalism*. Montreal and Kingston: McGill-Queen's Press.

Boyd C, Quigley M, Brocklehurst P (2006) 'Donor breast milk versus infant formula for preterm infants: systematic review and meta-analysis'. *ADS Child Fetal Neonatal Edition* 92 (3): 169-175.

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

-- (2010) 'Of care and commodities: breast milk and the new politics of mobile biosubstances'. *Progress in Human Geography* 34 (1): 5-20.

Borchorst A, Siim B (2002) 'The woman-friendly welfare states revisited'. *NORA-Nordic Journal of Feminist and Gender Research* 10 (2): 90-98.

Boswell-Penc M, Boyer K (2007) 'Expressing Anxiety? Breast pump usage in American wage workplaces'. *Gender, Place and Culture* 14 (5): 551-567.

Bureau of Labor Statistics, (no author available) (2006) Labor Force Participation Rates of Mothers, The Editors Desk (TED), Available at: <http://www.bls.gov/opub/ted/2006/dec/wk1/art01.htm> Accessed 20 August 2012.

Bureau of Labor Statistics, (no author available) (2009) Labor Force Participation of Women and Mothers, 2008 The Editors Desk (TED), Available at: http://www.bls.gov/opub/ted/2009/ted_20091009_data.htm#a Accessed 20 August 2012.

Cohany S, Sok E (2007) 'Trends in labor force participation of married mothers of infants'. *Monthly Labor Review Online*, US Bureau of Labor Statistics 130 (2) (no pages numbers). Available at: <http://www.bls.gov/opub/mlr/2007/02/art2exc.htm> Accessed 20 August 2012.

Cowan, RS (1983) *More Work for Mother: The Ironies of Household Technology from the Open Hearth to the Microwave*. New York: Basic Books.

Centers for Disease Control (2012) Breastfeeding Report Card <http://www.cdc.gov/breastfeeding/data/reportcard.htm>, Accessed 19 August 2012.

---<http://www.cdc.gov/breastfeeding/faq/>, Accessed 16 August, 2012.

Crompton, R (2006) *Employment and the Family* Cambridge, Cambridge University Press.

Deacon A (2000) 'Learning from the US? The influence of American ideas upon 'new labour' thinking on welfare reform'. *Policy & Politics* 28 (1): 5-18.

DeNavas-Walt C, Proctor B, Smith J (2011) *Income, poverty and health insurance coverage in the United States: 2010*, US Department of Commerce, Economics and Statistics Administration, United States Census Bureau.

Dolowitz D, Greenwold S, Marsh D (1999) 'Policy Transfer: Something old, something new, something borrowed, by why red, white and blue?'. *Parliamentary Affairs* 52 (4): 719-730.

Dykes F (2005) "'Supply" and "demand": breastfeeding as labour'. *Social Science & Medicine* (60): 2283-2293.

EL-Khuffash A, Unger S (2012) 'The concept of milk kinship in Islam: issues raised when offering preterm infants of muslim families donor human milk'. *Journal of Human Lactation* 28 (2): 125-127.

Ezz El Din ZM, Abd El Ghaffar S, El Gabry EK (2004) 'Is stored expressed breast milk an alternative for working Egyptian mothers?' *Journal of East Mediterranean Health* (10): 815-821.

Francis J, Rogers K, Dickton D, Twedt R, Pardini R (2012) 'Decreasing retinol and a-tocopherol concentrations in human milk and infant formula using varied bottle systems'. *Maternal & Child Nutrition* 8(2): 215–224.

Fraser N (1997) *Justice Interruptus: Critical Reflections on the 'Postsocialist' Condition*. New York: Routledge.

Fox B (2006) Motherhood as a class act: the many ways in which "intensive mothering" is entangled with social class", in Bezanson K, Luxton M (Eds) *Social Reproduction: Feminist political economy challenges neo-liberalism*. Montreal and Kingston: McGill-Queen's Press: 231-262.

Galtry J (2000) 'Extending the "bright line": Feminism, breastfeeding and the workplace'. *Gender & Society* 14(2): 295-317.

Gatrell C (2007a) 'Secrets and lies: Breastfeeding and professional paid work'. *Social Science & Medicine* (65): 393-404.

-- (2007b) 'A fractional commitment? Part-time work and the maternal body', *The International Journal of Human Resource Management* 18 (3): 462-475

Geraghty S, Khoury J, Kalkwarf H (2005) 'Human Milk Pumping Rates of Mothers of Singletons and Mothers of Multiples'. *Journal of Human Lactation* 21 (4): 413-20.

Grosz E (1994) *Volatile bodies: Towards feminist corporeality*. Sydney: Allen Unwin.

Gunewardena N, Kingsolver A (2007) *The Gender of Globalization*. Santa Fe, NM. School for Advanced Research Press.

Hansard of UK Parliament, House of Commons, July 16 (2007) Available at: <http://www.publications.parliament.uk/pa/cm200607/cmhansrd/cm070716/text/70716w0011.htm>
Accessed 20 August 2012

Hausman BL (2003) *Mother's milk: Breastfeeding controversies in American culture*. New York: Routledge.

-- (2004) 'The feminist politics of breastfeeding'. *Australian Feminist Studies* (19): 273–285.

Hays S (2004) *Flat broke with children*, Oxford: Oxford University Press.

-- (1996) *The Cultural Contradictions of Motherhood*. New Haven: Yale University Press.

Horwood LJ, Darlow BA, Mogridge N (2001) 'Breast milk feeding and cognitive ability at 7-8 years'. *ADC Fetal & Neonatal Edition* 84 (1): 23-27.

Hyde M (2012) *Regulating Human Products: Breastmilk as a product*, presentation given at Keele University Workshop on Breastmilk Breastfeeding, 3/2012

Johnson S, Williamson, I, Lyttle S and Leeming D (2009) 'Expressing yourself: A feminist analysis of talk around expressing breast milk'. *Social Science and Medicine* 69 (6): 900-907.

Johnson S, Leeming D, Williamson I and Lyttle, S (2012) 'Maintaining the "good maternal body": expressing milk as a way of negotiating the demands and dilemmas of early infant feeding' *Journal of Advanced Nursing* (in press).

Kelleher, CM (2006) 'The physical challenges of early breastfeeding'. *Social Science & Medicine* (63) 2727-2738.

Landivar L (2011) The Impact of the 2007-2009 Recession on Mothers' Employment, Industry and Occupation Statistics Branch, Social, Economic, and Housing Statistics Division U.S. Census Bureau, Working Paper 2011-29 Available at: www.census.gov/hhes/www/.../NCFR%20Landivar%20111011.docx Accessed 20 August 2012

Layne L, Vostral S, Boyer K (2010) *Feminist Technology*. University of Illinois: Champaign-Urbana and Chicago.

Lapore J (2009) Baby Food: If breast is best, why are women bottling their milk? *The New Yorker* 19 Jan http://www.newyorker.com/reporting/2009/01/19/090119fa_fact_lepore Accessed 12 Sept 2012.

Lister R (2008) 'Gender, citizenship and social justice in the Nordic welfare states: a view from the outside'. In: *Gender equality and welfare politics in Scandinavia: the limits of political ambition?* Melby, K, Ravn, A.-B. and Wetterberg, C Eds. Polity, Bristol: 215-222.

Longhurst R (2008) *Maternities: Gender, Bodies, and Spaces*. Routledge, New York and London.

Lucas A, Morley R, Cole TJ, Gore, SM (1994) 'A randomised multicentre study of human milk versus formula and later development in preterm infants'. *ADC Fetal & Neonatal edition* (70): 141-146.

Marshall JL, Godfrey M, Renfrew, M J (2007) 'Being a "good mother": Managing breastfeeding and merging identities'. *Social Science & Medicine* (65): 2147-2159.

McDowell M, Wang C-Y, Kennedy-Stephenson J (2008) Breastfeeding in the United States: Findings from the National Health and Nutrition Examination Surveys, 1999–2006 NCHS Data Brief #5 National Center for Health Statistics of the Centers for Disease Control and Prevention, available at <http://www.cdc.gov/nchs/data/databriefs/db05.htm> Accessed 21 August 2012

Mink G (1998) 'The lady and the tramp (II): feminist welfare politics, poor single mothers and the challenge of welfare justice', *Feminist Studies* (24): 55–64.

Morse J, Bottorff JL (1988) 'The emotional experience of breast expression'. *Journal of midwifery & women's health* 33 (4): 165–170.

Mouffe, C. (2005) *On the Political*. London: Routledge.

Noddings N (2001) 'The Care Tradition: beyond "add women and stir"'. *Theory into Practice* 40 (1): 29-34.

Peary A (2009) At the Pump, *Brain Child Magazine* http://www.brainchildmag.com/essays/winter2009_peary.asp Accessed 12 Sept 2012.

- Perrons D, Fagan C, McDowell L, Ray K, Ward K (2006) *Gender Divisions and Working Time in the New Economy*. Cheltenham, UK: Edward Elgar Press.
- Perrons D (2000) 'Care, Paid Work, and Leisure: Rounding the Triangle'. *Feminist Economics* 6 (1): 105-114.
- Payne D, Nichols D (2009) 'Managing breastfeeding and work: a Foucauldian secondary analysis'. *Journal of Advanced Nursing* 66 (8): 1810-1818.
- Rancière J (2010) *Dissensus: on politics and aesthetics*. London: Continuum.
- Rasmussen K and Geraghty SR (2011) 'The Quiet Revolution: Breastfeeding Transformed With the Use of Breast Pumps'. *American Journal of Public Health* 101 (8): 1356-1359.
- Rose N (1999) *Powers of Freedom: Reframing political thought*. Cambridge: Cambridge University Press.
- Reiger, K, Garvan, J and Temel, S (2009) 'Rethinking Care: a critical analysis of family policies and the negotiation of dependency'. *Just Policy*, 50.
- Reiger, K (2006) 'The neoliberal quickstep: contradictions in Australian maternity care policy', *Health Sociology Review*, Special Issue, Childbirth, Politics and the Culture of Risk 15(4): 330-340.
- Reiger, K (2000) 'Reconceiving citizenship'. *Feminist Theory* 1 (3) 309-327.
- Rosin H (2009) The Case Against Breastfeeding *The Atlantic* (April) <http://www.theatlantic.com/magazine/archive/2009/04/the-case-against-breast-feeding/307311/> Accessed 12 Sept 2009.
- Schmied V, Lupton D (2001) 'Blurring the boundaries: breastfeeding and maternal subjectivity'. *Sociology of Health and Illness* 23(2): 234–250.
- Sevenhuijsen, S (2002) 'The place of care: the relevance of the feminist ethic of care for social policy'. 4 (2) 179-197.
- Smith J (2004) Mother's milk and markets'. *Australian Feminist Studies* 19 (45), 369–379.
- Stanton R (2011) US Breastfeeding Committee's Public Comments on the Department of Labor's Request for Information Available at: <http://www.usbreastfeeding.org/Employment/WorkplaceSupport/WorkplaceSupportinFederalLaw/tabid/175/Default.aspx> Accessed 20 August, 2012.
- Stearns CA (1999) 'Breastfeeding and the good maternal body'. *Gender & Society* 13(3): 308-325.
- Shabo V (2011) 'The good, the bad and the hope for breastfeeding rights', National Partnership for Women and Families (22/8) <http://blog.nationalpartnership.org/index.php/2011/08/hope-for-breastfeeding-rights/> Accessed 20 August, 2012.
- Tomlinson J (2007) 'Employment regulation, welfare and gender regimes: a comparative analysis of women's working-time patterns and work-life balance in the UK and the US'. *International Journal of Human Resource Management* 18 (3): 401-415.

Van Esterik P (1996) 'Expressing ourselves: Breast pumps'. *Journal of Human Lactation* 12(4): 273-274.

Warner J (2009) 'Ban the Breastpump' *The New York Times*, 2 April
<http://opinionator.blogs.nytimes.com/2009/04/02/why-i-dumped-the-pump/> Accessed 12 Sept, 2012.

Weir A (2005) 'Global Universal Caregiver'. *Constellations* 12 (3): 308-330.

World Health Organization (2011) <http://www.euro.who.int/en/what-we-do/health-topics/Life-stages/maternal-and-newborn-health/news/news/2011/01/exclusive-breastfeeding-for-six-months-best-for-babies-everywhere> Accessed 20 August 2012.

Notes

ⁱ This paper was developed through exchanges with members of the Department of Science and Technology Studies at the University of Wisconsin, Madison funded by a grant from the World Universities Network in 2011. I would particularly like to thank Rima Apple and Daniel Kleinman for their input into this work.

ⁱⁱ I use the term 'milk expression' in a broad sense to refer to any method of getting milk out of the breast other than by a baby. I further use the terms 'pumping' and 'expressing milk' interchangeably throughout the paper.

ⁱⁱⁱ <http://www.cdc.gov/breastfeeding/faq/> Accessed 16 August, 2012.

^{iv} Breastfeeding Report Card, Centers For Disease Control, 2012
<http://www.cdc.gov/breastfeeding/data/reportcard.htm>, Accessed 19 August, 2012.

^v see Borchorst and Siim, 2002; Lister, 2008; Noddings, 2001; Perrons, 2000 and Weir, 2005 for examples of engagements with this framework.

^{vi} Though with increasing numbers of stay-at-home fathers in the US, Canada, the UK and elsewhere, new configurations are also beginning to emerge.

^{vii} Comments are available at: <http://www.regulations.gov/#!searchResults;dct=PS;rpp=25;po=1825;s=whd-2010-0003> Accessed 21 August 2012.

^{viii} Lactation is a dynamic process whereby the amount of milk produced is a response to the amount consumed/extracted; thus in order to keep producing milk a lactating woman must continue to breastfeed (or express).

^{ix} These findings are perhaps especially problematic in light of the common practice amongst working mothers of 'banking' or 'stockpiling' frozen milk for weeks or months as insurance against foreseen and unforeseen absences from home (such as out of town conferences or other work trips) (Payne and Nichols, 2010).

^x See for example the following testimonial from one mother who prefers pumping to breastfeeding:
http://www.brainchildmag.com/essays/winter2009_peary.asp

^{xi} The fact that major women's groups did not raise concerns over this legislation can be read as evidence of the ways public discourse is constrained in the US regarding discussion over the question of workplace lactation.