

115 | book review

Lactivism: how feminists and fundamentalists, hippies and yuppies, and physicians and politicians made breastfeeding big business and bad policy

Courtney Jung, Basic Books, New York, 2015, 258pp., ISBN: 978-0-4650-3969-2, \$26.99 (Hbk)

Over the last two decades, breastfeeding promotion has intensified in the United States. Mothers are under greater pressure to exclusively breastfeed their infants during the first six months in conformity with recommendations from governmental public health authorities, the World Health Organization (WHO) and health professional associations such as the American Academy of Pediatrics (AAP). Breastfeeding has come to be seen as such a gold standard in terms of infant feeding, that it now represents idealised conceptions of good mothering and responsible citizenship. How did we get to this consensus? This is the question political scientist and University of Toronto professor Courtney Jung explores in her book *Lactivism: How Feminists and Fundamentalists, Hippies and Yuppies, and Physicians and Politicians Made Breastfeeding Big Business and Bad Policy*. After two years of research and interviews with experts, Jung answers the question from a critical perspective by examining the advocacy movement in favour of breastfeeding known as 'lactivism'; scientific research on breastfeeding; the moralisation of feeding choices; the lack of supportive breastfeeding policies in the US; and the emergence of a culture of breast-pumping and of milk, breastfeeding and breast-pumping markets.

Chapters 1 and 2 are dedicated to the emergence of lactivism in the mid-1950s, with the creation of the La Leche League in Chicago and its growth into an international organisation with the Nestle Boycott, which condemned the company's inhumane marketing practices in developing countries. According to Jung, the Nestle Boycott was a turning point for the breastfeeding advocacy movement, which grew stronger during the development of the 1981 *Code of Marketing of Breast-Milk Substitutes*, which all member countries of the World Health Assembly signed, except for the United States. Jung maps the subsequent growth of lactivism from the 1980s through the 1990s with the development and deployment of various global strategies advocating for breastfeeding.

During this time, scientific consensus emerged around breastfeeding as the optimal feeding method for infants, and it became an imperative within the rhetoric of health authorities and lactivists; that a reported 79 per cent of US mothers in 2011 were breastfeeding their children can be seen as indicative of the success of this rhetoric (p. 201). However, in Chapter 3, Jung suggests that in countries with ready access to drinking water, the health effects of breastfeeding on children are overestimated, as it provides only modest protection against otitis, gastrointestinal and respiratory infections, and necrotising enterocolitis. She argues that scientific data is inconclusive or mixed regarding breastfeeding effects on asthma, allergies, sudden infant death syndrome and intelligence. She also asserts that there is no evidence that

breastfeeding has an effect on obesity, blood pressure and most cancers. Her findings echo those of political scientist Joan B. Wolf (2011) in her book *Is Breast Best? Taking on the Breastfeeding Experts and the New High Stakes of Motherhood*.

Consequently, Jung asks 'where do you draw the line between legitimate interventions and overstepping?' (p. 124), and explores this question in regards to government intervention in Chapters 4, 5 and 6. She focusses first on the federal Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), which is offered to families and in 2014 covered half of the children born in the US. Jung draws attention to the fact that since 2009, the WIC programme has provided an enhanced food package to breastfeeding mothers, which she considers a substantial incentive to breastfeed. Breastfeeders receive this package for one year, instead of six months. They also receive a food package of higher monetary value with a wider variety of better quality and more nutritious food. In addition to distinguishing breastfeeders from non-breastfeeders, the programme also sets apart mothers who exclusively breastfeed from those who partially breastfeed. For Jung, this distinction between mothers regardless of their feeding method is discriminatory and coercive.

Jung considers government interventions in parallel with the emergence of the breast-pumping culture in the US. She points out that unlike the majority of women in developed countries, American women are not granted a state-paid maternity leave; indeed, at the birth or adoption of a child, most women are allowed a twelve-week unpaid maternity leave. Even if they have the right to it, a large number of new mothers simply cannot bear the financial impact of maternity leave—so much that 30 per cent of American women do not take any postnatal leave. To breastfeed as long as possible, new mothers fall back on breast pumping; in 2012, 85 per cent of American women with a four-month old infant tried it at least once.

Two recent government actions have promoted balancing work and breastfeeding among American mothers. In 2012, under President Obama, the government implemented two measures encouraging breast pumping. Firstly, in the *Affordable Care Act* (ACA), it is suggested that companies with more than fifty employees provide a place, other than the restroom, where mothers with infants younger than twelve months can pump their milk. Secondly, the purchasing cost for a breast pump, usually around \$250, is now covered by most private insurance companies and Medicaid, which provides government subsidies for health care to Americans with limited means.

According to Jung, lactivists generally consider the right to breastfeed at work and the economic support received for the acquisition of a breast pump as progress, because they view these measures as allowing for both work and breastfeeding. However, they hide a more complex reality. There are no sanctions for companies that do not provide a breastfeeding break or an adapted area to their employees. Basically, the law has no teeth. An employer could ask an employee to come in earlier or stay late to compensate breaks. These laws contribute to the creation of new standards. Now that it is possible to use a breast pump at work, women will be more and more encouraged to do so, while obstacles in the workplace are numerous and the government fails to reinforce a regulation protecting women. Jung argues that the real challenge that women are facing is a lack of a paid maternity leave.

Contrary to popular belief, Jung points out that with breastfeeding comes additional financial costs, such as the purchasing of special clothing and nursing bras, pads and pillows and the hiring of lactation

counsellors. If a mother also decides to pump, she spends money on a breast pump, bottles and storage bags, cleaning equipment, and so on. Jung also notes the psychological cost of breastfeeding for certain mothers; that breastfeeding takes time that would otherwise be invested in other activities, such as employment and socialising, and that the promotion of breastfeeding assumes the presence of a spouse, the problem of which becomes evident when considered in relation to the US divorce rate. From Jung's perspective, breastfeeding functions as a status symbol: 'we use breastfeeding to show not only that 'we' are good parents, but that other people, especially people who are black, or poor, or unmarried, are not' (p. 209).

Jung claims that breastfeeding an infant during the first six months, exclusively or not, is an insurmountable challenge for many women with limited financial means; only women with well-paid jobs, flexible schedules or the possibility of staying at home because of their partner's salary, can comply with the six-month, breastfeeding-only standard. Therefore, Jung concludes that breastfeeding is a social-class marker. And yet, government breastfeeding campaigns mainly target women living in vulnerable conditions and African American women. This reflects, according to Jung, a serious failure on the part of lactivists to consider, address and account for issues of class, race, autonomy and empowerment, not least when seeking explanations for the higher rates and duration of breastfeeding among middle- and upper-class white women than any other group.

In the end, is Jung against breastfeeding? Some might think so, but instead she states, 'I am not against breastfeeding. I am against *lactivism*' (p. 22). She is against lactivism's moral imperative around breastfeeding, commodification of breast milk, selective use of medical literature and unrealistic expectations regarding motherhood. She suggests the need to consider breastfeeding as a personal choice rather than a topic for public debate. As analyses such as Jung's are rarely taken into account by medical authorities or influence breastfeeding policies and guidelines, it is a 'must read' for doctors, health officials, researchers, lactivists, as well as the public at large. It critically informs us on the difficulties experienced by US mothers and brings us back to the urgent need to create federal policy that provides maternity leave for all mothers.

reference

Wolf, J.B., 2011. *Is Breast Best? Taking on the Breastfeeding Experts and the New High Stakes of Motherhood*. New York: New York University Press.

Chantal Bayard
Institut National de la Recherche Scientifique

doi:10.1057/s41305-017-0044-0