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ATTITUDES TOWARD BREASTFEEDING: A CONTENT ANALYSIS OF RESPONSES TO INTERNET NEWS STORIES

by

CHRISTINA MARIE MILLER-BELLOR

THESIS

Submitted to the Graduate School.

of Wayne State University,

Detroit, Michigan

in partial fulfillment of the requirements

for the degree of

MASTER OF ARTS

2015

MAJOR: SOCIOLOGY

Approved By:

Advisor Date



DEDICATION

For my sons: Alejandro and Joseph

You are my heart and soul and the motivation for everything I do.



ACKNOWLEDGEMENTS

First, I want to thank my advisor, Dr. Heather Dillaway, for all of the time, guidance and dedication working on this thesis with me. Thank you for being supportive of my research interests from the beginning. I cannot thank you enough for all of the time you put into reading my drafts and meeting with me. Next, I want to thank my committee members, Dr. Krista Brumley and Dr. Heidi Gottfried. Thank you for your comments that helped to move this work forward and for your time and commitment to this project. I also want to thank my family, especially my husband, Joseph Bellor, stepson, Alex Bellor, sister, Stephanie Miller, and my mom, Vivian Corey. Thank you for listening to me talk about breastfeeding and for always believing in me. Finally, I want to thank my colleague, Jenny Lendrum, for her support.



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CHAPTER 1: INTRODUCTION

The U.S. Surgeon General, the American Academy of Pediatrics, and the World Health Organization recommend breastfeeding for at least a year. The Center for Disease Control (CDC 2011) estimates that 74% of women initiate breastfeeding, while only 23.8% of infants are breastfed until age 1 in the United States. Data from the National Immunization Survey suggests that socio-demographic factors are associated with breastfeeding rates. For example, low income women are less likely to breastfeed than middle and upper class women. Maternal age and education are positively associated with rates of breastfeeding (CDC 2011). Asian babies are most likely to be breastfeed with 34.8% breastfed until age 1, 24.7% of Hispanic babies are breastfed until a year, 23.6% of white babies are breastfed for a year, and African American infants are least likely to be breastfed, with only 12.5% being breastfed for a year.

There are a number of barriers to breastfeeding that help explain why breastfeeding rates are lower than recommended. Several studies indicate that a barrier to breastfeeding is its incompatibility with work outside of the home (Acker 1990; Lindberg 1996; Galtry 1997; Bagwell et al 1992; Roe et al 1999; Trado and Hughes 1996; Wallace and Chason 2007). Other studies indicate that a lack of information is a barrier to breastfeeding. For example, Heck et al (2006:52) states that knowledge of the benefits of breastfeeding is a predictor of breastfeeding. Still other studies indicate that negative experiences while breastfeeding in public creates a barrier to breastfeeding (Boyer 2010; McIntyre et al. 1999; Smyth 2008). That is, attitudes can create a barrier.

Some studies (Avishai 2007; Blum and Vandewater 1993; Bobel 2011; Stearns 2009) indicate that views on breastfeeding as natural attributes to both positive and negative attitudes towards breastfeeding. Additional studies (Maher 1992; Wallace and Chason 2007; Wolf 2006)

indicate that the medicalization of motherhood contributes to positive and negative attitudes towards breastfeeding. Furthermore, studies explain how the sexualization of the breast contributes to negative attitudes towards breastfeeding and public breastfeeding in particular (Blum 1999; Maher 1992; Palmer 2009; Stearns 1999).

The purpose of my thesis is to examine one of the barriers to breastfeeding, attitudes towards public breastfeeding. Existing literature on attitudes toward public breastfeeding is limited and has focused primarily on the sexualization of breasts. Existing research has also focused more fully on negative rather than positive public attitudes. Further, existing studies rely mainly on interviews with breastfeeding mothers. The literature on public attitudes on breastfeeding can therefore be expanded in content and method. I argue that mainstream social constructions of women's bodies and women's health frame attitudes about public breastfeeding and that the impact of these social constructions have not been adequately studied. People are increasingly turning to the internet to research attitudes and public discourse therefore an analysis such as this could benefit the existent literature on attitudes toward breastfeeding. The research questions for this project are: Do people make more positive or negative comments online regarding public breastfeeding? What are the framing strategies being used to support positive and negative attitudes toward public breastfeeding? Do supporters and opponents use frames that suggest their attitudes on breastfeeding are a product of the social construction of women's bodies? To answer these questions I examined comments associated with five public breastfeeding cases as reported in online news stories in 2011. I performed a qualitative content analysis of these news stories and public responses to them.

The layout of this thesis is as follows. I first review existing literature about three major ways that breastfeeding is framed. Next, I review literature on the public/private debate which



ultimately represents a fourth barrier to breastfeeding. Next I present my theoretical framework, specifically concentrating on the social construction of gender and women's bodies. In chapter four, I discuss the methods I used to collect and analyze data related to my research questions. In chapter five, I detail the findings of this research. Finally, I draw conclusions based upon the findings.



CHAPTER 2: LITERATURE REVIEW

In this section, I review the existing literature on attitudes toward breastfeeding. Most of the social science literature has focused on the mother's perspective. I review this literature so I will be able to see the ways in which mothers are framing breastfeeding to later compare with how breastfeeding is framed in public discourse. In doing so, I look at three ways that breastfeeding is framed: as a natural bodily function, as a medicalized process, and as sexualized. Following my review of the literature on the three frames, I review literature that deals specifically with the public/private debate surrounding public breastfeeding. I argue that public/private debates represent a fourth frame for how individuals think about breastfeeding.

Breastfeeding as Natural

Framing breastfeeding as natural involves viewing lactation as something that occurs without any sort of intervention. In most cases, whether a woman chooses to breastfeed or not, her body produces milk around the time she gives birth. If the woman does not breastfeed, the milk dries up and the body stops lactating and if the woman does breastfeed, her body continues to produce milk until she discontinues breastfeeding (Wallace and Chason 2007).

Some research indicates that views of breastfeeding as natural parallel positive attitudes towards breastfeeding (Avishai 2007 and Bobel 2001). Avishai (2007) says that by focusing on the natural aspect of breastfeeding, health official expect that more people will be motivated to breastfeed and therefore have based their campaigns around breastfeeding being natural. Because only women can breastfeed, this embodied experience empowers women (Stearns 2009; Blum 1993:292; Blum and Vandewater 1993). Bobel (2001) calls breastfeeding "the most tangible embodied act." Breastfeeding gives women an opportunity to use their own bodies to nurture a child without artificial manufactured substances, and this can give women a sense of pride.

Women's bodies provide sustenance which is why Davis (2000:148) calls women "projected embodiments of nature's unrelenting powers." In Bobel's (2001:135) interviews with members of La Leche League, women discussed appreciating their breasts more after they learned to trust in their own bodies to provide for their children, rather than use unnatural manufactured formula. There is a sample bias when using members of La Leche League because the group is committed to breastfeeding and encouraging women to feel positively about this embodied experience.

In contrast, other research shows that some women may have negative feelings about breastfeeding since it can also be perceived as too close to nature. This is especially true for some African American women, particularly because nature was used for so long as a justification for racial oppression (Blum 1999:14; Davis 2000:149). Further, historically, slaves in the United States were used as wet nurses, forced to nurse the babies of their masters, sometimes at the expense of the slaves' own children. Davis (2000) explains that there was a push historically to "civilize" people who seem to be close to nature, mainly blacks and women. The perspective that breastfeeding is too close to nature may cause individual women to feel negatively about it and help explain some groups' lower rates of breastfeeding. Furthermore, Blum (1993) and Bobel (2001) acknowledge that for some feminists, framing breastfeeding as natural will lead to negative attitudes as they believe this is a push towards biological determinism. Thus, depending on how the equation of breastfeeding and nature is framed, attitudes may be positive or negative.

Medicalization of Motherhood

A second way of framing breastfeeding is to frame it within the medicalization of motherhood. The medicalization of motherhood is the combined medicalization of pregnancy, child birth, and infant feeding (Wallace and Chason 2007). Medicalization is the process by which natural, normal behaviors or conditions are defined in terms of health and illness (Riessman

1998:47). Through this process, behaviors that were once considered normal and natural become pathologized or made into medical problems that need to be monitored by experts using defined diagnostic and treatment protocols. During industrialization, scheduling became an American value as railways and factories required strict schedules; strict schedules and regimens were eventually built into medical understandings of health and illness, and this emphasis on scheduling was eventually applied to infant feeding as well (Wolf 2006). Beginning in the late nineteenth century, women started to report not being able to produce sufficient milk. They believed that they had insufficient milk because their babies needed to feed frequently. In 1912, the American Medical Association indicated that there was a possibility that women would no longer be able to nurse babies at all. They believed evolution was leading to nonfunctioning mammary glands (Wolf 2006:404). Mothers and male doctors perceived insufficient milk as a medical problem associated with breastfeeding that required attention (Wallace and Chason 2007; Wolf 2006). By the 1930s, doctors were ordering supplemental feeds by bottle and told women that because the fluid came from the mammary gland it could be just water and was not good for babies (Wolf 2006:407). Pasteurized cows' milk was deemed safer by physicians beginning in the 1930s (Wolf 2003). Later in the 1930s infant formula was developed. This formula was considered safer and more hygienic than breastmilk (Blum 2008). Eventually, infant formula became a symbol of modernity as it was considered safer than breastfeeding and was endorsed by the medical community (Blum 2008). Medicalization initially occurred, then, because of mothers' urgings but later was reinforced by the development of expertise and medical protocol.

Some individuals breastfeed and/or view breastfeeding positively because the medical community acknowledges and documents its many benefits. The Agency for Healthcare Research and Quality (AHRQ) reports "that a history of breastfeeding was associated with a reduction in



the risk of acute otitis media, non-specific gastroenteritis, severe lower respiratory tract infections, atopic dermatitis, asthma (young children), obesity, type 1 and 2 diabetes, childhood leukemia, sudden infant death syndrome (SIDS), and necrotizing enterocolitis," using sibling analysis to control for household and hereditary factors (Ip et al 2007:1). This AHRQ report also concludes that breastfeeding reduces a woman's risk of breast and ovarian cancer, type 2 diabetes, and possibly postpartum depression. Knowledge of health benefits can lead to positive attitudes toward breastfeeding and is also associated with increased breastfeeding rates (Heck et al.; U.S. Surgeon General 2011).

Despite the benefits espoused by the medical community and the positive attitudes that might be linked to medical knowledge about these benefits, the medicalization of motherhood may lead to feelings of disembodiment while breastfeeding because of the way breastfeeding has been pathologized. For example qualitative interview studies indicate that some women have been led to believe they must go to extreme measures to ensure their babies are getting enough milk. Some mothers measure breast milk output and weigh babies before and after feedings to ensure that their milk supply is adequate (Avishai 2007). They may also pump their breasts to measure specific milk output and, when infant weights or milk measurements do not match with medical standards, mothers feel inadequate and believe they must supplement with formula (Avishai 2007; Maher 1992; Stearns 2009).

In Bobel's study, some women also indicated that they feel objectified by their babies because their bodies are equated with food (Bobel 2001). Women may feel as if they are baby feeding machines because it is work for them. For some of the women interviewed by Avishai (2007) and Stearns (2009), breastfeeding for purely nutrition reasons eventually became a disembodied activity; rather than enjoying breastfeeding as a unique, natural process, women felt

detached from the experience. They likely felt detached due to the pressures of following medical guidelines; subsequent negative attitudes towards breastfeeding reduces the chance of breastfeeding additional children (Avishai 2007; Maher 1992; Stearns 2009). Breastfeeding becomes burdensome if women are worried about whether or not they are adequately/properly engaging in breastfeeding. Notions of 'adequate' or 'proper' breastfeeding are often derived from medical definitions of this activity. There have numerous manuals written on breastfeeding and how to do it right. Similar to the first frame, then, medicalized attitudes towards breastfeeding can be positive or negative, depending on the exact emphasis. If health benefits are emphasized, medicalization may lend a positive perspective. If medical protocols stress infant weight gain and measurements of milk output, individuals can feel negative about the amount of time they must spend monitoring breastfeeding outcomes.

Sexualization of Women's Bodies

The third way of framing breastfeeding is through the sexualization of women's bodies. Studies that discuss negative attitudes towards public breastfeeding often draw on the sexualization of women's bodies and, specifically, the breast (Acker 2009; Johnston-Robledo et al 2007; Stearns 1999). While any part of the female body could be eroticized, in our era the breast is the focus of eroticism (Palmer 2009; Young 2005). The objectification of women's breasts is evident in common slang words used to describe them, including boobs, knockers, knobs, melons, etc. (Young 2005:77). Several scholars indicate that breasts are highly sexualized (Acker 2009; Blum 1993; Palmer 2009; Stearns 1999). Blum (1993) calls breasts the major visual symbol of female sexual value. She points out that breasts are such an important symbol of female sexual value that millions of women have implants - despite knowing that common side effects include hardening

of scar tissue which makes cancer detection difficult, decreased ability to breastfeed, and loss of sensation caused because nerves to the nipple are severed (Blum 1993).

Because breasts are sexualized, breastfeeding is problematic for male-female conjugal relationships. Blum (1999:16) seeks to understand the stake men have in breastfeeding and mothers' bodies and finds that "as partners or husbands, they have claims to women's bodies, to their physicality and sexuality" due to the historical marriage contract which grants men a right to sexual access and ownership (Blum 1999; Weitz 2003). The beliefs about women's bodies being products for male consumption and about male sexual privilege led to the use of wet nurses by middle and upper class women prior to the creation of formula, especially when it was believed that sexual intercourse spoiled the milk (Maher 1992). Early breastfeeding manuals reminded women not to let their husbands feel left out and to wear a good nursing bra to remind him that they wanted their breasts to look good for him for years to come (Maher 1992:14). More recently, Blum (1999) interviewed women about their attitudes toward breastfeeding and found that women were concerned that breastfeeding would affect the shapeliness of their breasts, making them less attractive to their significant others.

Other studies indicate that breastfeeding, particularly in public, threatens to expose breasts to the "male gaze" (Blum 1999; Maher 1992; Palmer 2009; Stearns 2009). The awareness of the erotic or sexual value of the breast for men may make women uncomfortable with breastfeeding in public (Blum 1999; Maher 1992; Stearns 2009). Stearns (1999:308) says that, "the construction of the good maternal body requires women to carefully manage the performance of breastfeeding in . . . [public,] with particular attention to the dominant notion of sexualized rather than nurturing breasts." She goes on to say that because of the strong cultural preference for sexualized breasts, breastfeeding mothers are transgressing boundaries between sexual woman and motherhood

(Stearns 1999:309). Therefore, the sexualization of breasts typically leads to negative attitudes about breastfeeding.

The Public vs. Private Debate

Studies (Acker 2009; Li et al 2004) show that while the average American is often supportive of breastfeeding, but prefers that it be done in private. Even when research participants indicate that they believe breastfeeding to be best, participants often see breastfeeding in public as immodest and do not approve (Acker 2009; Guttman and Zimmerman 2000; Johnston-Robledo et al 2007; Libbus and Kolostov 1994). Li et al (2004) used data from the 2001 Healthstyles survey, a nationally representative survey, and looked at 9 breastfeeding items. Li et al's (2004) found that the Healthstyles survey data indicate that the public supports breastfeeding on an abstract level (perhaps because of medical knowledge of its health benefits), but does not want to see it. 57% of respondents did not believe women should breastfeed in public. According to Li et al (2004), the breastfeeding policy that the public would be most accepting of is the establishment of lactation rooms in public places as 52% of respondents believed shopping malls should have private places for women to breastfeed. Another study (Acker 2009) measured attitudes toward public versus private breastfeeding using images of a woman breastfeeding in public and in private. In this study, subjects were given a series of images to look at and asked whether or not they were appropriate. Images were shown of women breastfeeding in what appeared to be a home and in what appeared to be a public space. Acker (2009) found that people viewed breastfeeding more positively if it appeared as if it was being done in private.

Breastfeeding women are not just transgressing boundaries because of the sexual nature of the breasts, but also because when women breastfeed in public they are going against the idea that women and families belong at home (Shaw 2004). Flood (2010:458) argues that the divide

between public and private life is still considered to be concrete and impenetrable today. In other words, people believe that what happens at home, behind familial doors, stays at home and is private matter (Flood 2010). Due to the gendered definitions of caregiving and paid work, the private sphere, or domestic sphere, is thought to be female while the public or cultural sphere is thought to be male (Tseelon 1991; Feree 1990; Shaw 2004). Feree (1990:867) discusses the gendered separation of spheres as indicative of the continued existence of traditional sex role ideology. The sexual division of labor which places women's role at home in the private sphere reaffirms the belief that women's lives are defined by human reproduction and bodily functions which occur in private, making a bodily function such a breastfeeding unacceptable in public (Shaw 2004:100). Consequently, it is not uncommon that women who choose to work in the public sphere and/or breastfeed in public have been the subject of harassment, lawsuits, and in some cases job dismissals when they have asked for time and space to pump and store breast milk (Blum 1993:296). Further complicating the issue, many daycares are also opposed to feeding infants breast milk (Galtry 1997; Mahon-Daly and Andrews 2002). This is likely because breast milk is viewed as dirty and potentially dangerous bodily fluid (Blum 1993). Overall, gendered attitudes about public versus private activities have led to positive attitudes about breastfeeding within the home, but negative attitudes towards public breastfeeding.

Certain public spaces have also been privatized. Németh and Schmidt (2011) examined the management division of publicly owned privates spaces using an observation based index to assess spatial management paradigms in publicly and privately owned spaces. They found that managers over privately owned public spaces tend to control behavior within those spaces. Németh and Schmidt (2011:5) write that privately owned public space are often criticized for "diminishing the publicness of public space by restricting social interaction, constraining individual liberties, and

excluding undesirable populations." Management in privately owned public spaces such as stores, restaurants, church, etc. create rules for the behavior that considered acceptable within the space. For example, there are signs outside of stores says "no shoes, no shirt, no service." Many stores open to the public have "no eating" signs. This may mean that management or owners of certain public spaces believing they have the right to now allow breastfeeding within a given space.



CHAPTER 3: THEORETICAL FRAMEWORK

To answer my research questions, I draw on literature focused on the social construction of gendered bodies. Feminists have been the major theorists who have brought studies of the body back into sociology (Malacrida and Low 2008). Feminist scholars often explore the social construction of women's bodies. The social construction of women's bodies is the process by which ideas about women's bodies becomes socially accepted (Weitz 1998:1). In the late eighteenth century women's bodies were legally defined as men's property in the United States (Weitz 2003). The very existence of these laws indicates that there was an assumption that women's bodies are inherently different (and lesser) than men's bodies.

I cannot talk about the social construction of gendered bodies, specifically women's bodies, without first discussing the social construction of gender. Gender, as defined by Lorber and Moore (2007:5), is the "legal status as a woman or man, usually based on sex assigned at birth." Sex is defined as the "biological criteria for classification as female or male" and is based on chromosomes, hormones, genitalia, and procreative organs (Lorber and Moore 2007:5). In other words, man/men and woman/women refer to gender whereas; male and female refer to sex. While there are some physiological differences between males and females they are not as different as Western culture makes them out to be (Lorber 1998). While the assignment of gender is based on these physiological differences, mainly genitalia, gender is not natural but is socially constructed (Bornstein 1994; Lorber 1998; Lorber and Moore 2007). This is evident when we consider other cultures where the assignment of genders is not as strict as in Western culture. For example, in Navajo cultures sometimes children help determine their own gender by being put in a tipi with a loom and a bow and arrow (Bornstein 1994). Their gender is then defined based on whichever item they choose (Bornstein 1994:23).



Lorber and Moore (2007:3) call gender a social institution that produces two categories of people with different attributes. These attributes assigned to boys and girls are defined as masculine and feminine. Their purpose is to fit people into gendered roles such as mother, father, nurse, etc (Lorber and Moore 2007). Girls are socialized to be emotional, nurturing and compliant, while boys are socialized to be assertive, powerful and rational (Davis 1997:5; Lorber and Moore 2007:3). Gendered body differences, like other attributes, are not natural, but are different as they are shaped by sociocultural ideals of what feminine and masculine bodies should look like and be capable of (Lorber and Moore 2007:4-5). Science and medicine as well as law construct the differences in gendered bodies to be natural, leading to the reaffirmation of the domination of men over women and the reinforcement of traditional sex roles and gendered public-private divides (Bornstein 1994; Feree 1990; Lorber 1998; Lorber and Moore 2007).

Malacrida and Low (2008) and Bartky (1998) write about the way that women's bodies have been constructed as docile bodies¹. According to Malacrida and Low (2008), docile bodies are bodies that are ready and willing to comply with social expectations. They explain the theory of docile bodies in the following way: power is implemented through punishment, and that power uses a disciplinary gaze. This disciplinary gaze leads to self-discipline and a desire to comply due to being watched or the threat of being watched (Malacrida and Low 2008:73). Breastfeeding threatens to expose women's breast to the 'male gaze' and compromises the object of the gaze, by potentially changing the shape of the breast so that it does not conform to the beauty or sexual ideal (Blum 1999; Blum 2008:105; Stearns 1999; Young 2005:77). In addition, not only are women subject to the male gaze, but also they are subject to a medical institution that is dominated by men. Medicine is a mechanism by which docile bodies are created and sanctioned. The medical

¹ While I do not cite Butler directly. Butler's *Gender Trouble* was referenced multiple times in Malacrida and Low (2008).



establishment takes control from women and puts it into the hands of established experts who are men. If mothers do not follow medical guidelines established by the medical institution, they are judged as bad mothers (Avishai 2007; Maher 1992; McKenna 1996; Stearns 1999). Thus, the concept of docile bodies potentially helps us understand how women breastfeed within the context of beauty, sexual and medical ideals. In the face of these ideals and guidelines, women's inclinations may be to become overly conscious about who can see them breastfeed, whether others are watching, and the measurable outcomes of breastfeeding, all of which may lead to more negative attitudes towards public breastfeeding and towards the act itself.



CHAPTER 4: METHODS

I conducted a qualitative content analysis of internet news stories about breastfeeding in public and the public's responses to these stories. Content analysis is an unobtrusive method, meaning the researcher does not intrude on peoples' lives. When using this methodology, the data exist in an intact form before I conceived of this study; therefore the data are not influenced by the researcher and exist separate from and regardless of the research being done (Hesse-Biber and Leavy 2005). Content analysis is a systematic analysis of text which allows researchers to focus on the meaning of texts rather than just how often themes occur (Esterberg 2002:175). I used qualitative content analysis because I wanted understand the framing strategies being used to support positive and negative attitudes toward public breastfeeding? I also wanted to find out if supporters and opponents use frames that suggest their attitudes on breastfeeding are a product of the social construction of women's bodies? In this chapter, I describe the data sources and sampling strategy, the five cases I analyzed, the data analysis, and limitations of the study.

The Case Studies

I examined internet news conversations about five public breastfeeding cases, which occurred between the summer of 2011 and December of 2011. These five cases illustrate how women are often harassed for breastfeed in public, even when being "discrete." These five cases are just a few of the many cases that have occurred over the last 10 years. I describe each of the five public breastfeeding cases below.

• Nirvana Jennette:

In the summer of 2011, Nirvana Jennette was at church in Camden County, Georgia, breastfeeding her infant, when she was asked to go in the bathroom and cover up. The

pastor compared her breastfeeding to stripping and, when she tried to "educate them," church leaders told her not to return to the church.

Afrykayn Moon:

On June 24, 2011, Afrykayn Moon was breastfeeding her 2-week-old son in a Moby wrap on a SMART bus just outside of Detroit, Michigan, when the bus driver ordered her to stop. Moon refused and when she did the bus driver called dispatch. At the next stop, security guards boarded the bus to question her.

Natalie Hegedus:

On November 8, 2011, Natalie Hegedus was in court for a boating ticket in Paw Paw, Michigan, "discretely" breastfeeding her 5-month-old son in the back of the courtroom. When the bailiff noticed he slipped a note to the judge, who then called her up and told her that her behavior was inappropriate.

• Michelle Hickman:

Michelle Hickman was breastfeeding her 5-month-old son on the floor of the women's clothing department at Target in Webster, Texas, on November 29, 2011, when she found herself surrounded by Target employees. She was asked to finish breastfeeding in the fitting rooms.

• Simone Mangio-Truell dos Santos:

Simone Mangio-Truell dos Santos was at a government building in Washington, D.C., on November 30, 2011, and stepped out of the courtroom to nurse her 4-month-old son in the hallway, when she was informed by the security guard at the building's entrance that she could not sit on the floor there. She stood and leaned against the wall to finish breastfeeding

her son who was covered with her jacket. A second security guard approached her and told her she was guilty of indecent exposure.

Data Sources and Sampling Strategy

I used a purposeful sampling strategy. I searched for data using Google's search engine. I first typed "breastfeeding" into the search bar. Once results were displayed, I clicked on the "news" tab on the left side of the search results. This narrows the search to news sources. I think started reading stories about women being harassed for breastfeeding in public places. I wrote down the names of the women in the stories and then did a Google search for more on these women. I found numerous stories and narrowed my possible sample by year. I found several stories which occurred in 2011. I selected these particular stories because they had multiple news stories commenting on the same incidents and the most online comments following the news stories. I used articles from three news sources for each case. This allowed me to compare how the stories are reported across different types of sources.

In total, I analyzed 15 news stories and the online comments posted in response to these news stories. All 5 cases were reported by *The Huffington Post*, a liberal national news source, and commented on by the public which allowed me to compare how the different cases were reported on by the same source. Each case was also reported on by a local news site; therefore, for each case I analyzed a local news story and comments posted in response. I also chose local news sources so that there are similar word counts among article describing the five cases (2704-5564) words. The idea here was to try to have the stories evenly represented. Finally, I analyzed an alternative news source for each of the 5 cases. For the Jennette's and Hegedus' cases, I used the report by *Jezebel*, a feminist news source. For Moon's case I used *Madame Noire*, a news site advertised for African American women. For dos Santos' case, I used *The Root D.C. Live*, a news

site dedicated to African American issues. Finally, for Hickman's case, I used *The Christian Science Monitor*, a news site developed by the Christian Science church which tends to be liberal. Using a variety of data sources for each case means there is a varied audience reading and commenting on the stories, thus giving a wider perspective on the topic. However, in using some liberal and feminist news sources, I was hoping to see slightly more positive views of public breastfeeding overall, to see how positive attitudes might be framed. I was also suspecting that news sources geared towards African American women might be more negative about public breastfeeding overall. Comparing the types of information relayed by each type of news source and the types of comments posted in response to each article was an important part of my analysis.

I copied and pasted all news stories and related comments into a Microsoft Word document and used Microsoft Word's word count function to compare the amount of data available on each public breastfeeding incident. The word counts on the stories of the two Black women are less than those on the stories of the three White women (see chart below), but I wanted some racial diversity in my sample and I paid attention to possible race differences throughout my analysis. Another reason I chose these five cases was that they represent a variety of geographic locations and types of public locations (i.e., a store, a courtroom, a church, a bus, and a government building).

Table 1: Description of the Five Cases

Who?	When?	Where?	News Sources	Word Count
Nirvana Jennette	Summer 2011	Church Camden County, Georgia	Huffington Post Jezebel WSAV 3 Savannah, Georgia	163,350 6,512 5,564
Afrykayn Moon	June 24, 2011	SMART Bus Just outside Detroit, Michigan	Huffington Post MLive Madame Noire	5,026 2,162 2,704
Natalie Hegedus	November 8, 2011	Van Buren County Court Paw Paw, Michigan	Huffington Post Kalamazoo Gazette Jezebel	500,478 1,544 4,952
Michelle Hickman	November Target 29,2011 Webster, Texas		Huffington Post ABC News Christian Science Monitor	54,029 38,742 3,663
Simone Mangio- Truell dos Santos	November 30, 2011	government building Washington, D.C.	Huffington Post WTOP Washington, D.C. The Root D.C. Live	1,117 8,690 5,355

Data Analysis

I used open and closed coding procedures to identify perceptions of breastfeeding, allowing emergent themes to surface but also using the frames specified in the literature review as my guide. Bazely and Jackson (2007) suggest that we begin with a typical case as the first document to code, and then code one that is very different as the second document to really be able to come up with appropriate codes. I began by coding 300 comments in the *Huffington Post* story of the Nirvana Jennette case and then coded the *Madame Noire* story on the Afrykayn Moon case. I chose the Nirvana Jennette case first because it is one of 5 stories from the *Huffington Post*, the common source I used among all 5 cases, and I believed it to represent the more typical case in my study. I then chose the Afrykayn Moon story as my case that was very different because it was short and came from an alternative news source. I began with a priori codes based on the literature yet remained open to emergent codes. I updated the code guide as I coded, to increase reliability.

Table 2: Code Guide

Attitude	Frame	Indicators (words, phrases, and types of
Orientation		comments that indicate code)
Negative	Sexualization	 Obscene Indecent Comparisons to strippers or similar roles Sexual Cleavage Exhibitionist "male gaze" Lewd Comparing breastfeeding to sexual acts or calling it such Pervert
Negative	Medicalization	 Negating health benefits Arguing health official don't know best Formula just as good
Negative	Natural	 Animalistic Unnatural Some natural acts not acceptable in public Comparisons to other bodily functions not acceptable in public
Positive	Sexualized breasts	 Breasts are not sexual, not for men Calling those who are against public breastfeeding perverts Justify exposure because sexualized breasts are accepted when being used for purposes other than feeding
Positive	Natural	 Is natural Bodies made to do this Religious perspectives on purpose of breast Humans are mammals Breastfeeding is simply eating
Positive	Medicalization	 Healthy Best for baby Nutritious Recommended by health organizations

I began coding the documents in Microsoft Word, using the review feature to make comments on the sides and highlighted in different colors to identify positive and negative comments by frame. Given there were thousands of comments for many of the stories, I quickly realized this color-coding process was going to make going back and making sense of the data rather difficult. The sheer amount of data was too overwhelming. The next data organization strategy I tried was copying and pasting comments into separate Word documents for each frame. This was also problematic because a lot of the comments are parts of conversations (i.e., a conversation could occur across comments among users). If I just cut and pasted the comments to other Word documents, it was hard to make sense of the excerpts in subsequent readings of the data. On a third attempt I ended up creating a chart in Microsoft Excel to organize the data (Table 3).

Table 3: Example of Coding Sheets

Comment Number	User Name	Orientation	Frame	Comment

I numbered the comments in the order in which they appeared. The "Orientation" column is where the codes positive, negative and other occur. I coded the orientation as other when the comment was neither positive nor negative. This includes comments that were more neutral (because I was interested in comparing positive and negative comments), comments that were vague so that I could not tell if they were positive or negative, and comments that were off topic. Under the "Frame" column, I coded the comments according to the code guide. The code guide

was based on the literature. I was particularly interested in finding out if the public used the same framing strategies as the breastfeeding mothers in the existing literature. I coded comments "other" in the "Frame" column when none of the main frames were used. Some commenters showed support or opposition to breastfeeding without giving specific reasons for their positions.

Doing the coding in Excel made it easier to read in context, code, and go back and forth to sort information. I numbered the comments both to know how many comments I had for each story and to be able to sort information in the spreadsheet to find what I wanted. For example, I was able to use the alphabetic order function on the frame column and organize the data in order to be able to see all of the comments coded by frame. I then used the numerical order function to put them back in order and understand the comments in context. I opened another sheet in the document and copied the usernames into the sheet, then used the alphabetize function so that I could number the usernames and figure out how many different users were commenting in each story. I kept separate coding sheets in separate Excel files for each story. Sorting in the main sheet for each story by username also allowed me to check for consistency in my coding, especially regarding the orientation and tone of the comment. The same person is not likely to post some comments supporting public breastfeeding and others against it. This sorting process increased the validity of the research. Table 4 shows the total number of comments for each story and number of usernames appearing in the commentary.

Table 4: Information about the Data

Case	News Sources	Total Number of Comments	Total Number of Usernames
Nirvana Jennette	Huffington Post	2318	762
	Jezebel	57	21
	WSAV 3 Savannah, Georgia	83	59
Afrykayn Moon	Huffington Post	87	49
	MLive	21	17
	Madame Noire	27	23
Natalie Hegedus	Huffington Post	2935	737
	Kalamazoo Gazette	22	17
	Jezebel	57	32
Michelle Hickman	Huffington Post	781	127
	ABC News	336	258
	Christian Science Monitor	32	32
Simone Mangio- Truell dos Santos	Huffington Post WTOP Washington, D.C. The Root D.C. Live	1,839 102 75	709 61 39

Methodological Limitations

There are some limitations to content analysis and also to using news stories on the internet as my data sources. First, I am limited to the comments available on these news sources and cannot ask questions to clarify statements. Second, I have no control over who responds to these stories therefore I do not know their socio-demographics. Third, while I used a variety of internet news sources to try to get a wider audience I could not find conservative news sources that reported on the cases to balance the use of the liberal source, *The Huffington Post*. I found a list of conservative news sources including *Fox News* and searched their online news sites for these stories, but could not find them. I do know that the portion of the population who responds to internet news stories is limited to those who have computers or use them, those who read stories from these sorts of sites. Furthermore, people are probably not going to take the time to comment on the stories unless

they feel strongly about the issue which means I probably will not be analyzing comments from people who are more moderate in their opinions. Analyzing strong opinions can also be a benefit for this study, though, because it is strong opinions that make public breastfeeding controversial. The value of analyzing online responses is that individuals are less concerned with social desirability when responding, likely because they feel that they are anonymous. This means that online comments may offer sentiments that most people would not otherwise express out loud. I may be better able to gain insights into the frames individuals use by looking at extreme views of public breastfeeding in online comments, because individuals may more clearly articulate their true feelings.



CHAPTER 5: FINDINGS

Overall, across the 15 news stories, there were more positive than negative comments. There were 2082 positive comments and 1120 negative comments. Table 6 shows the total number of positive, negative, and other (comments that were neither positive nor negative and that were often times not about public breastfeeding). We can see that framing breastfeeding as natural was the most commonly used frame for positive comments. There were 537 comments that used the frame alone, along with 30 comments using the frame while simultaneously using a medicalization frame, 223 comments using breastfeeding as natural as well as a sexualization frame, and 9 comments using all three. This means that out of 2082 positive comments, 799 framed included framing breastfeeding as natural. We can also see that space was the most commonly used frame for negative comments. I coded any comments "space" when the commenter stated that breastfeeding was not acceptable in certain spaces without further explaining and then also if commenters indicated that babies did not belong in a particular space. Other than this, the most comply used frame was for the negative comments was sexualization. There were 173 negative comments framed as sexualization alone, 9 that simultaneously used a medicalization frame, 49 that simultaneously used a natural frame, and 1 comment that used all three frames.

Table 5: Overall Use of		% of		% of		% of		%
Frames	Positive	pos	Negative	Neg	Other	Other	TOTALS	Total
Medicalization	96	4.6%	22	2%	8	0.3%	126	2%
Natural	537	25.8%	130	11.6%	15	0.5%	682	11%
Sexualization	250	12%	173	15.4%	84	2.8%	507	8.2%
Medicalization & Natural	30	14.4%	3	0.3%	2	0.1%	35	0.6%
Medicalization &		0.9%		0.8%		0.1%		0.5%
Sexualization	18		9		3		30	
Natural & Sexualization	223	10.7%	49	4.4%	14	0.5%	286	4.6%
Medicalization, Natural and		0.4%		0.1%		0%		0.2%
Sexualization	9		1		0		10	
Space	313	15%	466	41.6%	60	0.2%	839	13.5%
Other	606	29.1%	267	23.8%	2821	93.8%	3694	59.5%
TOTALS	2082	100%	1120	100%	3007	100%	6209	100%
% of Total	33.5%		18%		48.4%			

Tables 6, 7, 8, 9 and 10 tables show the number of positive, negative, and other comments by frame for each case study. Overall, there were more positive than negative comments for each case. From this series of tables, we see that framing breastfeeding as natural was the most common way of framing breastfeeding in positive comments across the 5 cases. In all, but the Simone dos Santos case, sexualization was the most commonly used frame in negative comments, however, in the Simone dos Santos case, framing breastfeeding as natural was the most commonly used frame in negative comments. Overall, there were significantly less comments on Afrykayn case than there were on the other 4 women. These 2 findings on Simone and Afrykayn indicate that there may be some racial differences in the cases.

		% of		% of		% of	
Table 6: Afrykayn Moon	Positive	Pos	Negative	Neg	Other	Other	TOTALS
Medicalization	2	2.7%	0	0%	0	0%	2
Natural	25	34.2%	2	10.5%	0	0%	27
Sexualization	3	4.1%	3	15.8%	2	4.7%	8
Medicalization & Natural	1	1.4%	0	0%	0	0%	1
Medicalization & Sexualization	0	0%	0	0%	0	0%	0
Natural & Sexualization	8	11%	2	10.5%	0	0%	10
Medicalization, Natural and		1.4%		0%		0%	
Sexualization	1		0		0		1
Space	2	2.7%	5	26.3%	1	2.3%	8
Other	31	42.5%	7	36.8%	40	93%	78
TOTALS	73		19		43		135
% of Total	54.1%		14.1%		32%		

Table 7: Michelle Hickman	Positive	% of Pos	Negative	% of Neg	Other	% of Other	TOTALS
Medicalization	25	6.5%	4	1.2%	0	0%	29
Natural	68	17.6%	36	11%	2	0.5%	106
Sexualization	51	13.2%	45	13.7%	9	2.1%	105
Medicalization & Natural	8	2.1%	3	1%	0	0%	11
Medicalization & Sexualization	2	0.5%	0	0%	0	0%	2
Natural & Sexualization	47	12.2%	15	4.6%	0	0%	62
Medicalization, Natural, &		0.8%		0.3%		0%	
Sexualization	3		1		0		4
Space	60	15.5%	117	35.7%	12	2.8%	189
Other	122	31.6%	107	32.6%	412	94.7%	641
TOTALS	386		328		435		1149
% of Total	33.6%		28.6%		37.9%		

Table 8: Natalie Hegedus	Positive	% of Pos	Negative		Other		TOTALS
Medicalization	29	5.4%	2	1%	0	0%	31
Natural	136	25.2%	28	8.8%	4	1%	168
Sexualization	52	9.6%	51	16.1%	15	2%	118
Medicalization & Natural	6	1.1%	0	0%	0	0%	6
Medicalization & Sexualization	5	1%	0	0%	0	0%	5
Natural & Sexualization	42	7.8%	8	2.5%	2	0.3%	52
Medicalization, Natural, &		0.4%		0%		0%	
Sexualization	2		0		0		2
Space	99	18.4%	175	55.2%	3	0.4%	277
Other	168	31.2%	53	16.7%	717	96.8%	938
TOTALS	539		317		741		1597
% of Total	33.8%		19.8%		46.4%		



Table 9: Nirvana Jennette	Positive	% of Pos	Negative		Other		TOTALS
Medicalization	18	4.3%	8	4%	8	1.2%	34
Natural	101	24.1%	27	13.4%	4	0.6%	132
Sexualization	65	15.5%	48	23.9%	42	6%	155
Medicalization & Natural	5	1.2%	0	0%	1	0.1%	6
Medicalization & Sexualization	10	2.4%	6	3%	3	0.4%	19
Natural & Sexualization	51	12.2%	9	4.5%	12	1.7%	72
Medicalization, Natural and		0%		0%		0%	
Sexualization	0		0		0		0
Space	59	14.1%	73	36.3%	23	3.3%	155
Other	110	26.3%	30	14.9%	599	86.6%	739
TOTALS	419		201		692		1312
% of Total	31.9%		15.3%		52.7%		

Table 10: Simone dos Santos	Positive	% of Pos	Negative	% of Neg	Other	% of Other	TOTALS
Medicalization	22	3.3%	8	3.2%	0	0%	30
Natural	207	31.1%	37	14.6%	5	0.5%	249
Sexualization	79	11.9%	26	10.3%	16	1.5%	121
Medicalization & Natural	10	1.5%	0	0%	1	0.1%	11
Medicalization & Sexualization	1	0.2%	3	1.2%	0	0%	4
Natural & Sexualization	75	11.3%	13	5.1%	2	0.2%	90
Medicalization, Natural and Sexualization	3	0.5%	0	0%	0	0%	3
Space	93	14%	96	37.9%	21	2%	210
Other	175	26.3%	70	27.7%	1053	96%	1298
TOTALS	665		253		1098		2016
% of Total	33%		12.5%		54.5%		

Analysis of the news stories themselves was less informative for my research than analysis of the comments underneath each news story. Most of the stories were simply descriptive of the incidents, although the tone and amount of detail in each write up did vary. The stories from alternative sources showed the most support for the women, except for the *Madame Noire* story about Afrykayn Moon, which was very straight to the facts. The *Jezebel* stories about Nirvana Jeannette and Natalie Hegedus were both written in a very sarcastic tone and made explicit arguments about sexism and the sexualization of women's bodies which is typical of this news

source. One of the local news stories, the *Mlive* story on Afrykayn Moon, written by Darrell Dawsey, also stated that it is because we "hypersexualize" the female body that we have incidents such as these. The only *Huffington Post* story that went beyond simply explaining the chain of events and offered any insight into the author's attitudes toward breastfeeding was the story on Afrykayn Moon. By mentioning the health benefits of breastfeeding, it seemed this author was supportive of public breastfeeding.

Comments illustrate the arguments that are being used in the present, both for and against public breastfeeding. Comments were oftentimes framed as I expected based on existing literature, using frames such as: breastfeeding as natural, sexualization of breasts/women's bodies, and medicalization. These frames were present in many of the comments in which a person explicitly displayed only positive or only negative attitudes toward public breastfeeding. However, comments representing each of the three major frames could be either positive or negative. The next section details the findings on each major frame.

Breastfeeding in Public is Acceptable because it is Natural

One of the most commonly used frames in the positive comments on news stories about public breastfeeding was *breastfeeding as natural*. Over one third of all positive comments (38.4%) about public breastfeeding (on all five stories) used this frame. I found that comments that supported public breastfeeding because it is natural tended to use the frame in three major ways: by talking about breastfeeding as simply a baby eating, by talking about lactation as the purpose of female breasts, and by explaining lactation as a characteristic of all mammals.

Table 11: Positive Comments Using		% of Positive Comments
Natural Frame	Positive	
Natural	537	25.8%
Medicalization & Natural	30	14.4%
Natural & Sexualization	223	10.7%
Medicalization, Natural and Sexualization	9	0.4%
Total Comments Using Natural Frame	799	38.4%
OVERALL TOTAL	2082	

Many of the positive comments about public breastfeeding in response to all five stories referred to breastfeeding as eating. An example of a typical comment of this sort from the *ABC News* story on Michelle Hickman is:

"Funny that most, if not all, of you have eaten in public, yet no one has asked for you to go eat your lunch in the bathroom, or the car, or call you "vile" or "attention seeking" when you do it, or asked that your head be covered with a blanket whilst doing so."

This comment shows that this person sees breastfeeding as akin to any other type of eating. The commenter suggests that, if adult commenters have eaten in public, then they should not have a problem with a baby eating in public. Another similar comment from the same news source regarding the same story is: "Do you have to hide when you eat? No! Neither should a baby. Grow up." Again here, we see the commenter making no differentiation between breastfeeding and other ways of eating. Because breastfeeding was the act of providing sustenance to a baby, it was seen as natural and positive by these commenters.

These comments are written in response to numerous others, however, that indicate breastfeeding mothers should go to places such as bathrooms, cars, and dressing rooms to feed their babies or cover them with a blanket. The perspective that breastfeeding should not be allowed in public spaces, because breasts themselves as well as breastfeeding were private, led some commenters to have negative reactions to the cases of Natalie Hegedus, Nirvana Jennette and

Simone Dos Santos, as well as Michelle Hickman. Thus, positive comments about breastfeeding as sustenance answered negative comments about the private nature of breasts and breastfeeding. Based on the ordering of comments, it seems as if using a breastfeeding as natural argument was one of the best defenses against privacy arguments.

Another way people talked about breastfeeding while using a breastfeeding as natural frame was to talk about how lactation is the purpose of breasts, often times while simultaneously negating comments about sexualized breasts. An example of a typical comment using the natural frame from *The Huffington Post* story on Simone dos Santos is: "What the hell is wrong with people? A female breast is meant to feed an infant. She was doing what her breasts were intended to do." Some of these comments were religious in nature and talked about God creating breasts for women to feed their babies. These comments were especially common in the news reports about Nirvana Jennette, because she was in a church when she was breastfeeding and harassed by the pastor. The following is one such comment from *The Huffington Post* story on Jennette's case:

"It is unfortunate how disconnected religious people (and I say this about my own fellow Muslims as well as Christians) become so disconnected from and offended by the natural aspects of being creations of god. God created an amazing system for our mothers to feed our children... it should be respected as a core function of a family, not shunned."

Another example of this type of comment from the same story is:

"Firstly, the church is the house of God and He made breast to fill and nourish the children that were created in His image. So I don't see a God that created life rebuking a woman for nourishing that life when He does this every day. God provides for our needs then why should we not provide for the children that we have been blessed to receive. It amazes me that we are not so afraid of a woman's body. Doesn't that body represent life? Without a

woman none of you would be here. What do you fear? Is it a woman's breast that offends you? If so, ask yourself why? If you were a babe feeding from your mother would you reject nourishment because other people were offended?"

In these comments we can see that commenters are supportive of breastfeeding in particular public locations. Especially because of the religious location of breastfeeding in Jennette's case, religious arguments were used about the natural purpose of breasts, to support this instance of public breastfeeding. People commenting also wrote about how Jesus was breastfed and that there are many religious images of this. In one of the comments (also from *The Huffington Post* story on Nirvana Jennette), a commenter asked, "how does the pastor presume Jesus was fed?" The idea that breastfeeding was natural and not shameful derived directly from faith-based definitions of the purpose of bodily functions.

A third way in which people talked about breastfeeding using a natural frame was to talk about lactation as a characteristic of all mammals. These comments do not refer to women's breasts exactly and their purpose but, rather, to the scientific fact that we are classified as mammals and this is one of the characteristics that make humans mammals. For example, one such comment from *The Huffington Post's* story on Simone dos Santos is:

"I believe that the biggest problem is that people forget what we are. They've turned normal functions into dirty happening. People just need to grow up, we're mammals get over it."

Others talked about how "unnatural" formula is and questioned people on whether or not they drank cow's milk, making comments such as, "We are mammals. Milk is species specific." This comment, also from *The Huffington Post* story on Simone dos Santos, indicates that the commenter believe humans should drink human milk only. Many also indicated that breast milk already comes in the perfect package, is always ready and warm. In all of these instances, commenters feel that

breast milk is the "natural" and "appropriate" food for human babies and, consequently, women should be able to give their babies breast milk from its "natural" container anywhere and anytime a baby is hungry. For example, a commenter who responded to someone suggesting that breast milk can be fed from a bottle said this:

"The breast is the proper container for the baby's milk. It's sterile, at the right temperature, economical, and available. There is no better container and you don't have to haul around more baby luggage just to carry the milk."

This comment indicates that the breast is the perfect packaging for a baby's milk and it makes no sense to pump and put it in a bottle, so a woman should be able to breastfeed her baby anywhere and not be questioned about it. Another example of a reactive comment from *The Huffington Post* story on Michelle Hickman is:

"Bottles are often unsanitary no matter how hard you try. The breast is the most sanitary and portable container for baby food possible."

Like the previous commenter, this person sees feeding from the breast as better than using a bottle. Because feeding from the breast is natural and does not involve extra cleaning, heating, or serving, it is more sanitary. Comments such as this were often posted in response to negative comments about the exposure of breasts in public. Some commenters who were negative about public breastfeeding because of exposure did not deny the health benefits of breastfeeding, but specifically argued it was a private act. A perfect retort seemed to be a breastfeeding as natural argument that "her breast is always with her."

Framing comments by depicting breastfeeding as natural to support public breastfeeding was very common. This frame was used in three main ways: to argue that breastfeeding is simply a baby eating, with the understanding lactation is the purpose for female breasts, and by explaining

that lactation is a characteristic of all mammals. It was the most frequently coded frame in all but two of the news stories when I coded for positive comments. A breastfeeding as natural frame was used equally as often as medicalization and was used more often than sexualization in *The Kalamazoo Gazette's* story on Natalie Hegedus. Positive comments in *The Christian Science Monitor's* story on Michelle Hickman frequently framed breastfeeding as natural, however, not as often as framing breastfeeding as a sexual activity.

Sexualization of Breasts and Positive Attitudes toward Public Breastfeeding

Individuals who made positive comments also frequently used or responded to a sexualization frame. About a quarter of all the positive comments (24%) about public breastfeeding used a sexualization frame. I found that comments that supported public breastfeeding while using sexualization to frame their arguments used the frame in two major ways: to negate sexualization - arguing that breasts are not sexual - and to argue that sexualized breasts are already accepted in public spaces (and therefore breastfeeding, if sexual, should be accepted too).

Table 12: Positive Comments		% of Positive Comments
Using Sexualization Frame	Positive	
Sexualization	250	12%
Medicalization & Sexualization	18	0.9%
Natural & Sexualization	223	10.7%
Medicalization, Natural and Sexualization	9	0.4%
Total Comments Using Sexualization		24%
Frame	500	
OVERALL TOTAL	2082	

Some of the people who support public breastfeeding specifically argued that breasts are not sexual. About half of the comments that negated sexualization also used a natural frame at the same time; for example the following comment from *The Huffington Post* story on Natalie Hegedus:



""Dammit [sic], that's what breasts are for. They are not "fun bags" or a sex toy, they're open restaurants for babies. We have so completely sexualized a woman's body that the functions that (your deity of choice) gave a woman have been lost. If it offends a judge to have women feeding their babies in court, he/she should have quietly provided a place for the mom to feed. Not public humiliation. Inappropriate response dude!"

This comment begins with a natural frame, by stating the natural purpose of breasts and negating the idea that breasts are "toys" or "fun bags" for others' (men's) enjoyment. This person infers that sexualization of women's bodies is the reason others have negative reactions to public breastfeeding and that the sexualization of breasts is inappropriate in reference to breastfeeding. In other words, when we misconceive the purpose of breasts as sexual objects for male pleasure, we are unable to view the breasts for their natural purpose. Another commenter on the *WTOP* story about Simone dos Santos similarly asks, "Why are people so offended by public breastfeeding? Breastfeeding is not a sexual thing at all that's what breasts are for."

Other positive comments that used a sexualization frame drew on the idea that sexualized breasts, breasts used to entice men, are accepted in public, so breasts being used to feed babies should also be accepted. These comments do not deny the sexual nature of breasts but, rather, argue that women's bodies are always sexualized. In this context, then, so why is it a problem if we see part of a woman's breast while she is feeding her child? For example, a commenter from *The Huffington Post* story on Afrykayn Moon proposes:

"Let's see, if you turn on the television at any given time you will see people having sex, people dying, completely unrealistic images of women and men flaunting cleavage, muscles, and tans, young female pop stars dancing like strippers in music videos, dead

bodies on crime shows...did I miss anything? And we're worried about the possibility of seeing a nipple when a mom feeds her baby?"

This person gives examples of media images and draws attention to the fact that we are exposed to a variety of bodies and body parts in sexual or otherwise vulnerable and compromising positions on television. The commenter makes it clear that we are creating a double standard if we draw a hard line against seeing public breastfeeding, when we do not stand up against other media images. While the commenter does not necessarily argue that the sexualization of breasts or bodies is a good thing, they are using the acceptance of sexualization to promote the acceptance of public breastfeeding. Another such comment can be pulled from responses to *The Huffington Post* story on Natalie Hegedus:

"Get a grip, people. There are women in lingerie on network TV at 8 PM. There are Victoria Secret commercials plus other ads for bras on network TV that feature scantily clad models. And you're offended by a women breastfeeding in public??? How can you watch TV without getting offended? We are such a nation of hypocritical prudes. And it's time to get over it. Women need to be supported in their efforts to do what's best for their children, themselves, and the nation."

In this comment, the commenter also draws attention to the images we see on television, but focuses more specifically on the hypocrisy of those who draw a line against public breastfeeding. Within the comments that use a sexualization frame, it is clear that tensions exist about whether sexuality should be public or private, and whether breasts are public body parts. This tension or debate intertwines then with arguments both for and against public breastfeeding and we see how complicated it is to separate arguments about acceptable physical locations, acceptable uses of breasts, and the value and visibility of breastfeeding.

A sexualization frame was often present in positive responses to public breastfeeding, but about half of the people who supported public breastfeeding and framed their comments by referring to the sexualization of women's bodies argued against the sexual nature of women's breasts. Therefore, the mention of and/or use of a frame in a comment did not mean strict adherence to that frame. Others argued that women's bodies are sexualized and, therefore, we should not have an issue with seeing part of a woman's breast when she is feeding her child. These latter comments were not denying or confirming the sexual nature of women's breasts, but were arguing that sexualization should not be an argument against breastfeeding in public. From a social constructionist perspective, these findings suggest that some people may be accepting the culturally accepted belief that the female breast is a symbol of sexuality. Others do not accept this symbol and, instead, are arguing against a sexualization frame. They recognize that there is a shared cultural view in America of breasts are symbols of sexuality, but wish to combat the construction of this symbol and reify the natural purpose of particular female body parts.

Sexualization was used more often than the natural frame in the *Christian Science Monitor's* story on Michelle Hickman. It was used equally as often as the natural frame in the *Kalamazoo Gazette's* story on Natalie Hegedus. It was the second most used frame in *The Root* and *Huffington Post's* stories on Simone dos Santos, *Jezebel's* story on Natalie Hegedus, and in *WSAV's* story on Nirvana Jennette. It is not surprising that the sexualization frame was used so frequently, since it is well documented that female breasts are a symbol of sexuality in our culture (Acker 2009; Blum 1993; Johnston-Robledo et al 2007; Maher 1992; Palmer 2009; Stearns 1999; Young 2005).

Positive Comments that Use Medicalization Frame

Positive comments that used a medicalization frame occurred much less frequently than positive comments using other established frames. Only 7.3% of positive comments used a medicalization frame. In fact, medicalization was not used to frame any of the comments in *The Root's* story on Simone dos Santos, *The Christian Science Monitor's* story on Michelle Hickman, and *Madame Noire's* story on Afrykayn Moon. A medicalization frame was only used in one or two comments on *The Root* and *WTOP's* stories on Simone dos Santos, *Jezebel* and *The Kalamazoo Gazette's* stories on Natalie Hegedus, *WSAV's* story on Nirvana Jennette, and *MLive and* the *Huffington Post's* stories on Afrykayn Moon.

Table 13: Positive Comments Using		% of Positive Comments
Medicalization Frame	Positive	
Medicalization	96	4.6%
Medicalization & Natural	30	14.4%
Medicalization & Sexualization	18	0.9%
Medicalization, Natural and Sexualization	9	0.4%
Total Comments Using Medicalization Frame	153	7.3%
TOTALS	2082	
% of Total	33.5%	

The comments that used a medicalization frame to support public breastfeeding did so by suggesting that, because of the health benefits and recommendations by major health organizations, public breastfeeding (really, any act of breastfeeding) should be deemed acceptable. Commenters mentioned that by breastfeeding exclusively, a woman is following medical guidelines and expertise, so it should not matter where she does it. The following commenter from *The Huffington Post* story on Nirvana Jennette makes this clear:

"Actually both the Center for Disease Control and the World Health Organization recommend that children be breastfed for the first two years of their lives or even longer.

If you don't like it, no one will make you do it. But since the science seems to support the view that this is what's medically best for the child, don't judge someone else for doing it."

This statement shows that the commenter knows the CDC and WHO recommendations for breastfeeding and is arguing in favor of mothers who breastfeed in public because they are doing what the experts recommend. Other commenters use this idea as well, but also add that support for breastfeeding in public is particularly important because it will insure that women can follow medical recommendations. One such commenter, also from *The Huffington Post* story on Nirvana Jennette, explains:

"Society should support every mother who chooses to breastfeed, especially those who want to do the best for their children by following the World Health Org. and American Academy of Pediatrics which is at least 6 months exclusive breast milk, then another 6 months of breast milk as bulk of nutrition, and then continuing breastfeeding for up to and beyond 24 months. The comments on here are ignorant and neurotic. And mean. It can be very hard for women to nurse, and it makes it harder to nurse according to recommendations, if a woman has to keep running to a secret place. Almost all nursing women do so discreetly. The next time you see a nursing mother, give her a smile and thumbs up."

This commenter mentions how difficult it is for women to meet the recommended breastfeeding goals if they cannot do so in any location, and how "running to a secret place" may be a hindrance to women's adherence to these goals. The idea that society as a whole should adhere to medical guidelines is clear in these comments, and that breastfeeding is positive in any location specifically because it is medically recommended. Another comment from *The Huffington Post* story on Nirvana Jennette that exemplifies this idea as well:

"What you are missing . . . is that we fall far short of even the minimal breastfeeding targets set by public health, American Academy of Pediatrics and WHO and that a large reason for that shortfall is societies view on breastfeeding, as this case perfectly illustrates. Breastfeeding, discreetly, needs to happen whenever and wherever and then we'll have a generation that simply considers this the norm."

In this comment, we again see a person who states that major health organizations recommend breastfeeding and that to enable women to breastfeed for the recommended time periods, women need to be able to do so in public. However, even in their support of breastfeeding via a medical frame, debates about private and public activities are evident in this poster's use of the word "discreetly." As much as this is a positive comment, we see a fourth frame of public-private divides sneak into individual comments to complicate perspectives on public breastfeeding.

While medicalization was not used to frame as many positive comments about public breastfeeding as other frames were, it was used to make a notable argument about breastfeeding in any location. The comments show that some people believe that women need to be able to breastfeed in public (and need support in able to do so) so that they can achieve recommendations set by leading medical organizations.

Negative Comments that Use a Natural Frame

In response to all of the news stories, there were also negative comments about public breastfeeding that used a natural frame. 16.3% of all negative comments used a natural frame. The frame was used in three ways in this case. One way the frame was used was to argue against public breastfeeding because eating is not deemed acceptable in all physical spaces. Another way the frame was used was to compare breastfeeding to other natural acts which are not acceptable in

public. The third way the frame was used was to argue that breastfeeding is less civilized than other ways of feeding babies because it is too close to nature.

Table 14: Negative Comments		% of Negative Comments
Using Natural Frame	Negative	
Natural	130	11.6%
Medicalization & Natural	3	0.3%
Natural & Sexualization	49	4.4%
Medicalization, Natural and Sexualization	1	0.1%
Total Comments Using Natural Frame	183	16.3%
TOTALS	1120	

In many of the negative comments accompanying the stories about Natalie Hegedus and Nirvana Jennette, the equation of breastfeeding and eating was used to argue against breastfeeding in public spaces. These comments often appeared in response to other positive comments that used a natural frame. More specifically, positive comments about the natural purpose of the breast (i.e., sustenance and feeding) were often followed by negative comments about the inappropriateness of eating in certain public spaces. Thus, negative comments could equate breasts with their natural purpose but still not advocate for breastfeeding in public. Here again we see a public-private tension and, as much as most commenters might agree that breastfeeding was natural and utilize that frame in their comments, they might fall on different sides of the public-private debate. For example, the following comment accompanies *The Huffington Post* story on Nirvana Jennette:

"Eating is natural so maybe people just start bringing dinner to their Church and chowing [sic] down during the service. Maybe they could start having a pizza delivered."

The commenter uses the example of having pizza delivered during a church service to highlight just how inappropriate eating in church may be – however "natural" eating might be. It may be that people view breastfeeding and/or eating in general as something that distracts from what

should be going on in certain places. Another such comment from *The Huffington Post* story on Natalie Hegedus is:

"Nice sour face. Sometimes laws compete with each other. According to the Article One of the Bill of Rights I have freedom of speech, yet according to the rules of the courtroom I am not allowed to talk out of turn or to use my phone. I could go to the hallway just outside the courtroom to make a phone call so my rights don't really seem infringed. So Natalie can breast feed anywhere she wants in Texas but if the rules of a court room asks that all Citizens respect the common rule of no eating in the courtroom, then her rights really aren't being infringed upon if she jsut[sic] steps outside the court room to tend the needs of her baby. Just as I respect the Rules of the Court and step outside to make a phone call. What a fun day everyone is having getting their blood pressure up over not that big a deal."

While confirming that breastfeeding may be something individuals are allowed to and need to engage in (thus, confirming its purpose and importance indirectly), the commenter above makes it clear that public spaces cannot always accommodate all activities. Particular spaces have particular purposes. This commenter is not arguing against all instances of public breastfeeding and, instead, is arguing that mothers need to be aware of the rules that apply to very particular spaces (like courtrooms). The public-private debate becomes more complex in these comments for, no longer is it a simple question of whether breastfeeding is a private or public act. A variety of public and private spaces may exist and all may not accommodate "natural" activities.

Other negative comments that pulled on a natural frame compared breastfeeding to other natural acts that are unacceptable in public. Some of these comments compared breastfeeding to sex, while also describing sex as a natural act. Such comments were therefore framed using both

natural and sexualization frames. For example, a commenter from *The Huffington Post* story on Simone dos Santos argues:

"Yes, breast feeding is natural but no, I don't want to see it. Sex is natural too but it is done or should be done in private."

Here we see the commenter stating that breastfeeding is natural but then comparing it to sex. This person sees both natural activities as those that should take place in private. Here, two frames become tangled but it appears that breastfeeding as sexual may be the primary frame, and the acknowledgment of breastfeeding as natural may be secondary. Seemingly because of the sexualization of breastfeeding, it must take place in private – even if it is natural too. Other comments that used a natural frame did so by comparing breastfeeding to other natural acts such as urinating and defecating. For example, the following comment from *The Huffington Post* story on Natalie Hegedus compares breastfeeding to urinating:

"It may well be that the only and defining answer is "because the baby is hungry". And I am fine with that. But if someboody [sic] considers that is not the pivitol [sic] point then what is the difference between this and me taking a leak in the bushes beside the courthouse?"

The above comment appeared in response to an argument made in support of women breastfeeding in public because their baby is hungry and hungry babies need to be fed. This commenter is comparing breastfeeding to urinating and suggesting that, because urinating is also a natural act, public breastfeeding is akin to public urination. If the latter is wrong, then so is the former, at least according to the commenter. A similar comment resulted from *The Huffington Post* story on Michelle Hickman:

"Wouldn't the most natural thing we do be pooping or peeing? Men and women can pee [sic] and poop whereas only women can breastfeed. Just saying...."

These commenters are not arguing against the definition of breastfeeding as natural but are using that definition to further equate breastfeeding with other natural acts. Furthermore, the commenter above infers that women's capacity to breastfeed is lesser because men do not also have this capacity, making other nongendered behaviors almost more natural. I do not have enough evidence of sexist views of breastfeeding to make an argument about what this commenter might have meant by this, but it is clear that the fact that breastfeeding is a gendered natural act allows the commenter to discount argument that breastfeeding should occur in public. These comments also may result from people feeling that breastfeeding in public can lead to contamination of the physical space, as urinating or defecating would. There is an existing body of research that explores how breastfeeding is viewed as unsanitary, because it involves the exchange of bodily fluids (Bramwell (2001) and Morse (1998), as cited in Battersby 2007). This may help explain, in part, why people recommend that women breastfeed in bathrooms. I do not have enough data from these five stories to make a comprehensive argument about the definition of breastfeeding as unsanitary, but the argument that breastfeeding, like other natural behaviors, has potential to contaminate, allows public-private arguments to resurface. If breastfeeding is seen as unsanitary and able to contaminate public spaces, even if it is a natural act, then commenters can easily make an argument against public breastfeeding.

A third way that a natural frame was used to articulate negative views towards breastfeeding was to argue that, because breastfeeding is so natural, it is less civilized than other ways of feeding babies. The following comment from *The Huffington Post* story on Simone dos Santos exemplifies this viewpoint:



"Mammals also poop whenever and wherever they want to. So... do you want to be mammals or civilized humans?"

This comment exemplifies two ways in which breastfeeding in public is argued to be unacceptable. First, as in other comments previously quoted, the commenter compares breastfeeding to defecating. Second, in arguing against positive commenters who argued that we are mammals and that mammals lactate to feed their babies, this commenter suggests that doing what other mammals do (i.e., doing what is "natural") makes humans less civilized. Another such comment from *The Huffington Post* story on Simone dos Santos portrays the same sentiment: "You're not an animal, give the child a bottle. Are women that hard up?" In portraying breastfeeding as animal-like, breastfeeding is defined as having less value than other, human-made styles of infant feeding. Humans rise above the natural, according to this commenter.

Negative comments about public breastfeeding that used a natural frame appeared in all of the news stories I analyzed. The frame was used in three ways: to argue against breastfeeding in certain places because eating is not deemed acceptable in those places, to compare breastfeeding to other natural acts/bodily processes which are unacceptable in public, and to argue that breastfeeding is less civilized and too close to nature. The natural frame was the most commonly used frame for negative comments in *MLive's* story on Afrykayn Moon and in *The Huffington Post's* stories on Simone dos Santos and Michelle Hickman. A natural frame was used equally as often as sexualization in *ABC's* story on Michelle Hickman, *Madame Noire's* story on Afrykayn Moon and *WSAV's* story on Nirvana Jennette. In *WTOP's* story on Simone dos Santos and *Jezebel's* story on Nirvana Jennette, this frame was the least used frame for negative comments. In the rest of the stories, a natural frame was second most common after sexualization in helping opponents of public breastfeeding argue against public breastfeeding.



Sexualization of Breasts and Negative Attitudes toward Public Breastfeeding

Sexualization was the most commonly used frame in negative comments about public breastfeeding. 20.7% of all negative comments used a sexualization frame. This frame was used in two main ways. First, commenters compared breastfeeding to other sexual acts or indecent exposure. Second, some people called breastfeeding itself a sexual act.

Table 15: Negative Comments		% of Negative Comments
Using Sexualization Frame	Negative	
Sexualization	173	15.4%
Medicalization & Sexualization	9	0.8%
Natural & Sexualization	49	4.4%
Medicalization, Natural and Sexualization	1	0.1%
Total Comments Using Sexualization		20.7%
Frame	232	
TOTALS	1120	

One of the ways in which people talked about negatively about breastfeeding while framing breastfeeding in a sexualized way was to compare breastfeeding to other sexual acts and/or indecent exposure. For example, in the following comment on *The Huffington Post* story about Natalie Hegedus, breastfeeding is compared to masturbation:

"Oh in that case having a kid hanging out from under the shirt isn't distracting at all in a COURT ROOM. So by your thinking, i [sic] can stroke myself as long as I do it in my pants....COOL!"

In comparing breastfeeding to masturbation, breastfeeding is redefined as a sexual act. Another commenter from *The Huffington Post* story on Nirvana Jennette also compares breastfeeding to sexual intercourse:

"It's not even about breast exposer [sic]. Is the couple who makes love under a blanket in a public park or on a beach justified because no one can see them, but everyone knows what they're doing?"



There were many comments associated with each of the news stories that emphasized that public breastfeeding would be acceptable if the breast was covered. However, in equating breastfeeding with other, seemingly discrete sexual acts, the commenter argues that any act with sexual connotations should take place in private. The definition of breastfeeding as sexual allows posters to define it as a private act in this case, unacceptable for public consumption or public space.

Some commenters went so far as to call breastfeeding indecent exposure. A commenter from the *ABC News* story on Michelle Hickman defines breastfeeding as "flashing": "Giving a baby fresh breast milk? In private, it's called 'nursing'. In public, it's called 'flashing'." Accordingly, if public breastfeeding reveals a part of the body deemed to be sexual in nature, it is deviant and wrong; if breastfeeding is done in private, it is acceptable. Another example of such a comment from the *MLive* story on Natalie Hegedus is:

"I don't blame the judge one bit. He probably didn't want to see it and I don't want to see it either. If her child was supposedly sick, why did she even bring him out of the house? It is his courtroom, and he sets the rules. They have breast pumps so women don't have to breastfeed their child in public. Use one and stop being an exhibitionist in public. I think women that want to breastfeed in public should be charged with indecent exposure if it's not covered up."

In the last few comments, we see that not only is the sight of breasts problematic but also the knowledge of breastfeeding activity. Despite the fact that individuals understand that breastfeeding occurs, it is problematic if we acknowledge this body part or evidence of its activities in public spaces. The last commenter further calls women who breastfeed in public exhibitionists. According to the *Merriam Webster Dictionary*, exhibitionists are people who get sexual gratification from exposing their genitalia (exhibitionists 2014). Another second comment

parallels this view of breasts as genitalia as well, this time from *The Huffington Post* story on Nirvana Jennette: "It doesn't matter if she is being "erotic", she is exposing genitalia-personally I don't want to look at another womans [sic] breasts, for ANY reason." Because this commenter sees breasts as such, he/she does not believe breasts or breastfeeding in public is acceptable.

Another way in which the sexualization frame was used in negative comments was to define the act of breastfeeding as an actual sexual act. For example, the following comment was posted in response to the *ABC News* story on Michelle Hickman:

"Ok, I am happy to see most on this post have a healthy attitude about this. What nobody wants to talk about is the fact that breastfeeding can and does cause orgasms. The women wanting to bare it all without any modesty or covering are clearly getting their jollies from this."

Another example of a comment that indicates the equation of breastfeeding with a sexual act is from *The Huffington Post* story on Afrykayn Moon: "I don't see why breastfeeding in public should not be allowed as long as it is between two consenting adults." For these individuals, there is no separation between breastfeeding and sexual activity whatsoever.

Negative comments about public breastfeeding that used a sexualization frame appeared in all of the news stories I analyzed except for the *MLive* story on Afrykayn Moon. This frame was used in two main ways: to support arguments against public breastfeeding by comparing breastfeeding to sexual acts or indecent exposure and by calling breastfeeding itself a sexual act. It was the most commonly used frame for negative comments in *The Root and WTOP* stories on Simone dos Santos, all three stories on Natalie Hegedus, *The Christian Science Monitor* and *The Huffington Post* stories on Nirvana Jennette and Afrykayn Moon. A sexualization frame was used equally as often as the natural frame in

negative comments in *ABC's* story on Michelle Hickman, *Madame Noire's* story on Afrykayn Moon and *WSAV's* story on Nirvana Jennette. In *The Huffington Post* story on Simone dos Santos it was used less frequently than the natural frame, but more than the medicalization frame, when individuals made negative comments.

Framing Other Negative Comments- Breast Pumps

A theme that arose from the data was that some negative comments about public breastfeeding focused solely on breast pumps. Individuals commenting on public breastfeeding stories argued that women could give their infants the benefits of breastmilk, but that they should use breast pumps in private and feed the baby breast milk from a bottle in public. There are a number of ways that we can make sense of this way of thinking. One way to make sense of it is to understand it through a medicalization frame. Buckley (2009) talks about how the medicalization of childbirth has led to a rise in technological interventions; she argues that this medicalization has carried on to breastfeeding, resulting in an increased reliance on breast pumps. Lepore (2009) also explains the historical development of breast pumps and demonstrates how they were created initially to treat inverted nipples and help babies who were too small or too weak to nurse on their own. Over time breast pumps were used to respond to the need to breastfeed and the need to work for pay. Women working outside of the home (and away from baby) could follow the breastfeeding recommendations of leading health organizations, and still go back to work after 6 to 8 weeks, the average maternity leave (Lepore 2009).

Technological equipment developed according to medical guidelines and in response to breastfeeding pathologies is now seen by some to improve the feeding process and also help women monitor babies' milk intake. Once this technology exists, its use becomes culturally normative and natural methods of feeding (i.e., from the breast) sometimes become more deviant,

leading to confusion among commenters about why women would opt out of using a pump. In addition, if we keep a private/public debate in mind, as well as the ways in which commenters have used a sexualization frame, it makes sense that pumping would align better with notions that breasts are sexual and should be kept in private. Pumping may seem like a way to limit exposure of this sexualized body part, yet it does not have to deny the health benefits of this seemingly natural but also medicalized way of feeding a baby.

One example of a breast pump comment from *The Huffington Post* story on Michelle Hickman fits with the above perspectives:

"As far as getting the "best nutrition" for her child, well, that's what breast pumps are for.

She could have carried the breast milk in a bottle if it is that important to her."

This commenter places the words "best nutrition" he/she is responding to others who support breastfeeding's well-documented health benefits. The commenter may not buy into this idea that "breast is best", hence the quotation marks, yet also is willing to allow for the fact that medical guidelines suggest this. Another example of such a comment from *The Huffington Post* story on Simone dos Santos is: "Have you ever heard of a breast pump?" This simple comment was written in response to an argument that breastfeeding must be done publicly sometimes because of its frequency. Another example from *The Huffington Post* story on Natalie Hegedus is:

"I am a woman. I have never understood why women must breast feed in public. There is such a thing called a "breast pump." Put it in a bottle, for heaven sake."

Comments like this may be in response to sexualized views of breasts/breastfeeding, or because of rules about the functions of public spaces. Because of content analysis methodology, there is no way to go back and probe these commenters about the meanings of breast pump comments to understand in full the multiple frames they were utilizing. This is an instance in which we see the

limitations of the methods for this project. In an interview study, I could have probed more to find the underlying reason for these comments that emphasize the use of breast pumps. Comments about breast pumps were found in the commentary on all of the news stories that I analyzed. Regardless, it is clear that norms about appropriate public activity, sexualization of breasts, and the naturalness of breastfeeding all intertwine to create the possibility that breast pumps are advocated.



CHAPTER 6: CONCLUSIONS

Overall, there were twice as many positive comments as there were negative comments in the commentaries associated with the news stories I analyzed. More specifically, there were more positive comments than negative comments in all but three of the news stories used for this study. The three stories that had more negative comments than positive comments were *The Huffington* Post and The Kalamazoo Gazette's stories on Natalie Hegedus and The Christian Science Monitor's story on Michelle Hickman. The reason there were more negative comments on 2 of the 3 stories on Natalie Hegedus' case, is partially because of the fact that the courtroom location added specific meaning. Because of the strict rules associated with courtrooms and courthouses, commenters were less likely to support this case of public breastfeeding. This case reminds us that all public spaces are not the same, and may induce different levels of support for public breastfeeding. In addition, due to the religious nature of *The Christian Science Monitor* publication that released a story on Michelle Hickman's case, there was a slightly larger focus on the sexual nature of the breasts. Displays of sexuality may often be frowned upon in religious settings, so commenters may have felt inclined to use a sexualization frame to make negative comments on this story and in this news source in particular.

During my analysis, I looked for differences in the way people commented on the cases based on race. I expected to find that a natural argument would more frequently used in the comments of public breastfeeding opponents due to the way the literature talked about blacks being perceived as too close to nature (Blum 1999; Davis 2000). I did not find this to be true. The most interesting finding is that the word counts on the stories about Afrykayn Moon and Simone dos Santos were much lower than those of the other women. Local news and alternative news sources cannot necessarily be compared this way because they varied and reached different audiences, but

the *Huffington Post* stories and associated comments offered a valid place to make such a comparison. The word count on the story and associated comments about Simone dos Santos was 1,117 and 5,026 for Afrykayn Moon whereas, they were 54,029 on Michelle Hickman, 163,350 on Nirvana Jennette, and 500,478 on Natalie Hegedus. This indicates that there was more interest in discussing commenting on the stories of white women. The *Huffington Post* story and associated comments on Afrykayn Moon also had the lowest number of commenters and the lowest number of comments. This indicates that there was more interest in discussing commenting on the stories of white women. The *Huffington Post* story and associated comments on Simone dos Santos were actually higher than some of the stories on the other women indicating that the comments were briefer since the word count was lower. More people may have taken interest in her story because she has a prestigious job (lawyer).

One of the major ways in which supporters of public breastfeeding framed their arguments was by saying breastfeeding is natural. Views of breastfeeding as natural are used most often to argue for public breastfeeding, probably in part because it is hard to argue against using bodies in in a way that is natural. Especially because medical organizations are also arguing that it is important for women to breastfeed and steer away from excessive formula use in recent decades, a natural frame is quite easy for commenters to use in offering support for these cases of public breastfeeding.

On the other hand, a natural frame was used frequently to argue against public breastfeeding as well. If a commenter could argue that breastfeeding is less civilized because it is too natural and animal-like, they succeeded in flipping the use of this frame to support the opposite side of the debate. Opponents also argued that while breastfeeding is natural, it is one of many natural bodily functions (including eating) that should not occur in public. Therefore, the

inappropriateness of bodily behavior in particular public spaces was a common theme across stories as well. These arguments informed me beyond what I could have predicted from the literature, and made me realize that public-private debates informed commenters' usage of the natural frames in particular. Depending on whether they believed breastfeeding should occur in particular public spaces, commenters would use a natural frame differently. This occurred with commenters' use of the sexualization frame as well, indicating exactly how flexible these frames ultimately are. According to Avishai (2007), health campaigns in the last decade have promoted breastfeeding by framing it as natural. As we can see from the analysis of the comments, however, campaigns need to go beyond arguing for the naturalness of breastfeeding if they truly want to advocate, because a natural frame does not convince opponents and make them more likely to accept breastfeeding. In fact, opponents simply twist the use of that frame and make their own arguments for or against connections between breastfeeding and nature.

As mentioned, another way that opponents of public breastfeeding argue their position is through the use of a sexualization frame. Some commenters who framed public breastfeeding negatively compared it to sexual acts or indecent exposure, and others noted that breasts were objects of sexual desire. These positions are consistent with the literature on sexualization of the breasts. As Blum (1993; 1999) and Stearns (2009) suggest, individuals have difficulty negotiating the sexual nature with the nurturing nature of breasts because of the mainstream social constructions of women's bodies and breasts. I also found a sexualization frame was used in many comments supporting public breastfeeding, however. Some positive commenters were simply arguing against a sexualization frame (yet had to call upon this frame in order to deny it) and used their comments to illustrate the inconsistencies in how breasts are defined in American culture. In

other words, commenters suggested that if sexual breasts are accepted in public, then nurturing breasts should also be.

The medicalization frame was used less often than natural and sexualization frames, but it still played an important role in understanding the ways in which people made comments on these news stories about public breastfeeding. Supporters of public breastfeeding sometimes took the stand that, because major health organizations recommend breastfeeding, breastfeeding is the "right" or "best" way to sustain a child, and, therefore, should be accepted in public. Some commenters against public breastfeeding did try to discredit these organizations, however. Another important, related finding was that many opponents of public breastfeeding focused on the fact that breast pumps exist and should be used. Reliance on pumps may initially be a result of medicalization, but the belief they need to be used to feed babies in public likely stems from other issues such as sexualization and views of breastfeeding as a natural, sexual, and even lesser and perhaps unsanitary process.

This research contributes to existent literature on breastfeeding. I used a different type of analysis to explore attitudes and perceptions about public breastfeeding than the type used in previous research. I contribute by using the internet to explore public discourse which is a growing trend in research today. Furthermore, I looked at specific ways in which public breastfeeding is framed in public discourse rather than relying on the perceptions of breastfeeding mothers. This offers a differing perspective than that of most of the other literature on breastfeeding. There were also limitations to my research. When commenters were not specific about their opinions or did not provide enough information for me to really have an idea what was fueling their comments, I was unable to probe for more understanding. I also did not have any control over who was responding to the internet news stories. There was no way to gather demographic information on

the commenters. I was unable to determine by usernames if the commenters were male or female. Some commenters gave away their race or gender, but most did not. Finally, some people's perspectives may be overrepresented due to the number of times he or she commented on a given story.

Future research could focus on exploring framing strategies used by supporters and opponents of public breastfeeding through in-depth interviews. This would allow the researcher to determine if the framing strategies vary by the race, age, education, gender, etc. of the respondent. My interest in lactivism was also peaked through this research. I would like to explore the motivations behind this movement and find out if it is successfully changing perceptions on public breastfeeding. I am specifically interested in a group in Eastpointe, Michigan called Breastfeeding Mothers Unite. This organization was founded by Afrykayn Moon after the bus incident.

This research adds to the existing body of research on breastfeeding and more broadly on feminist literature on the body. Through this analysis, we can see that the social construction of women's bodies and ideas about when and where they are allowed to be are at the heart of the public breastfeeding debate. This research should also be of interest to public health officials who aim to increase rates of breastfeeding rates and duration. It is necessary to consider the factors that make breastfeeding difficult to sustain, one of which is facing hostile condition when attempting to feed babies in public.

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ABSTRACT

ATTITUDES TOWARD BREASTFEEDING: A CONTENT ANALYSIS OF RESPONSES TO PUBLIC BREASTFEEDING ON INTERNET NEWS STORIES

by

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May 2015

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Leading medical organizations recommend breastfeeding for at least a year. The Center for Disease Control (CDC 2011) estimates that 74% of women initiate breastfeeding, while only 23.8% of infants are breastfed until age 1 in the United States. These statistics indicate that while there is an increase in women trying to breastfeed, there are barriers to sustained breastfeeding. Some studies indicate that negative experiences while breastfeeding in public creates a barrier to breastfeeding (Boyer 2010; McIntyre et al. 1999; Smyth 2008). This research contributes to existent literature on breastfeeding. I used a different type of analysis to explore attitudes and perceptions about public breastfeeding than the type used in previous research. I examined comments associated with five public breastfeeding cases as reported in online news stories in 2011. I performed a qualitative content analysis of these news stories and public responses to them. Furthermore, I looked at specific ways in which public breastfeeding is framed in public discourse rather than relying on the perceptions of breastfeeding mothers. This offers a differing perspective than that of most of the other literature on breastfeeding. Through this analysis, we can see that the social construction of women's bodies and ideas about when and where they are allowed to be are at the heart of the public breastfeeding debate.

AUTOBIOGRAPHICAL STATEMENT

I am a Master's candidate in Sociology at Wayne State University. I have a MA in Latin American and Caribbean Studies with a concentration in Comparative Sociology from Florida International University and a B.A. in Latin American Language and Civilization from Oakland University. I aspire to go on to earn a Ph.D. from Wayne State University with a gender inequality specialization.

