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On the Linguistic Design of Multinational Courts — The French Capture

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Abstract:

Lactation and breastfeeding are typically viewed as inherently female activities. Evolutionary biology designates females as the generators of the mammalian class’ milk supply. The assumption is that only female mammals lactate and, therefore, only female mammals nurse their own. Taking on the biological, social, and cultural aspects of male lactation, this chapter questions this gender normativity of milk. It argues that male lactation can be seen along a continuum, from the literal production of milk by mammals of the male sex, to male-identified parents and caregivers breastfeeding their children, to males’ role in shaping breastfeeding norms and practices. Male lactation thus understood blurs the distinction between male and female, between genders, between sex and gender itself, between sexual orientations, between nature and culture, as well as, perhaps, between humans and animals.

In man and some other male mammals (the mammary glands) have been known occasionally to become so well developed as to yield a fair supply of milk (Darwin [1871] 1874: 186).

Introduction

Lactation and breastfeeding are quintessentially mammalian, sex-based, heteronormative, and gendered characteristics. Lactation is one of the few things, along with pregnancy, that only females, defined biologically, are supposed to do. In coining the term “mammal” in 1758 to characterize a group of animals, Carl von Linné made the breast the icon of the class — in Latin mamma means breast (Schiebinger 1993). While in several cultures, including the Vedic, Greco-Roman, and Arabic civilizations, milk itself was seen as a masculine fluid, owing its perfection to the contribution of male semen (Altorki 1980; Mahias 1987; Myers 2016), the activity of breastfeeding has consistently remained feminized and subordinated.

Yet, neither breasts nor lactation are exclusively female. All mammals, but for the stallion, male mice, anteater, and monotreme mammals such as the palyptus, have teats. Instances of male lactation, defined in zoology as the production of milk by male mammals’ mammary glands, have long been reported in the scientific-medical, religious, and gender studies literature, as well as in the folklore, the popular press, fiction, and visual arts. To cite but a few examples, in 350 BC Aristotle ([n.d] 1907: 522a) asserted, “from time to time [milk] has been found in a male,” marveling at a buck that produced enough milk to make cheese. A couple of millennia later, French physician and
philosopher Louis de Jaucourt (1751-65) claimed, “breasts are the same in men and women because in both sexes they sometimes filter real milk.” Male lactation must have been such an obvious phenomenon in the eighteenth century that after referring to a couple of examples, Jaucourt swiftly concluded “[b]ut as no one doubts this truth today, it is unnecessary to dwell on it.”

Were these alleged cases of male lactation pathological, random, or functional? Scientists distinguish lactation in the presence of the physiological stimuli connected to nursing babies from “pathological” lactation or “galactorrhea” (Racey, Peaker and Racey 2009: 354). Galactorrhea occurs in males as well as female humans and animals (Rohn 1984). It has been reported due to environmental factors, the inadvertent consumption of hormones, or illnesses causing hormone disruptions such as cancer, obesity, or starvation (Kunz and Hosken 2009). Male primates are known to lactate in association with cancers such as carcinoma (Ringler and Abrams 1972). In the wake of World War II, when prison camp survivors were liberated and provided with adequate nutrition, cases of male lactation were observed — the so-called “inanition-refeeding syndrome” (Greenblatt 1972: 33). Prisoners had suffered liver, testicular, and pituitary atrophy due to nutritional deficiencies. With better nourishment, their testes and pituitary gland regained their function, producing large quantities of estrogens and androgens that triggered lactation.

Some cases of male lactation have been categorized as fortuitous, caused neither by pathology nor by infant stimuli. An Australian surgeon (Leggett 1991: 541) described the case of an air traffic controller, Mr. R. W-B, a “robust man, married with 4 normal children,” whose tests and blood work “revealed no abnormality.” However, his breasts were enlarged, producing “[q]uite profuse milky discharge. The amount was such that his wife, who was pregnant, declared that he should take his place in the feeding of the baby.” Instead, Mr. R. W-B was “cure[d]” by a bilateral subcutaneous mastectomy, illustrating the tendency to view male lactation as an anomaly to be rectified (Leggett 1991: 541). Domesticated, healthy male goats that “behaved quiet normally in all other respects” have also been observed to lactate spontaneously, without the stimulus of a suckling kid (Nair, Mathai and Nunjikutty 1981: 146). In fact, a familial predisposition to male lactation has been noted in some breeds that are known to be high producing dairy goats, such as the British Saanens (Wooldridge et al. 1999: 664).

Other instances of male lactation appear to be functional (need-based or role-based) in the sense that they arise in the context of infant feeding and care. Some male mammals have reportedly produced milk to feed their young in case of need — where the birth mother died, was ill, or did not produce any or sufficient milk. Since antiquity, the trope of the lactating widower has been recurrent in the European, Jewish, but also in the Chinese folklore, reflecting deep anxieties around infant feeding at a time when the absence of a mother or another female to nurse was akin a death sentence for a newborn, and the apparition of a lactating father, a godsend (Lionetti 1984). In their 1896 treatise, Anomalies and Curiosities of Medicine, American physicians George Gould and Walter Pyle chronicle several instances of male lactation, including “a sailor who, having lost his wife, took his son to his own breast to quiet him, and after three or four days was able to nourish him” (Gould and Pyle 1990: 397). They also relay Prussian naturalist Alexander
von Humboldt’s description of a “South American peasant of thirty-two who, when his wife fell sick immediately after delivery, sustained the child with his own milk, which came soon after the application to the breast; for five months the child took no other nourishment.” An analogous motif is found in the animal literature. Up until the 1920s an eighteenth century story circulated, featuring an “importunate lamb” that “had lost its dam in early life and persistently sucked a wether which grazed in its company. The lamb obtained its milk and was maintained by him all summer” (Fitzwilliams 1925: 104-105).

Still other occurrences of male lactation are presented as role-based, with lactation being associated with a caretaking role as a form of embodied parental care. The male caregiver’s desire to nurse and be intimately involved — with or without a female partner — in the nourishment and care of an infant appears to be determinant. The eighteenth century Scottish surgeon and scientist, John Hunter (1861: 238), tells the story of a Spanish father who began nursing in tandem with his wife after the birth of their twins. To soothe one of his children, he applied “his left nipple to the infant’s mouth, who sucked and drew milk from it in such quantity as to be nursed by it in perfect good health. He treated all his other children, eight in number and all alive in the same way, always dividing with his wife the business of nursing the children.” Among animals, the discovery, in the early 1990s, that male Dayak fruit bats in Malaysia lactate, raised the prospect that it was in fact a normal parenting behavior for the species (Francis et al. 1994). Evolutionary biologists conjectured that male bats could be providing milk to their young due to a monogamous mating system in which males and female co-parent, a topic to which I shall return later.

Against the backdrop of this medley of science and folklore, this chapter questions the gender normativity of milk as a substance solely produced by females. My contribution is twofold. First, rather than focusing exclusively on the question of the biological production of milk by males, I use the notion of male lactation as a continuum to describe a variety of physiological and socio-cultural phenomena, from bio-males lactating, to male-identified parents using human milk or suckling their children to feed them, to the role of men in supporting or hindering breastfeeding. Along the spectrum, I distinguish three poles: 1) “male lactation,” which denotes a biological or physiological fact; 2) “male breastfeeding,” which describes a cluster of gendered practices of infant feeding; and 3) males’ support of or interference with breastfeeding at the personal and societal level. From one perspective, male lactation is a non-event. Why would we ever think of it in terms of social policies given that the physiological phenomenon is so rare that it is an outlier? From another perspective, all people regardless of gender can participate in lactation, if not literally, then by supporting breastfeeding partners, as I argue in Part III.

Second, my analysis is trans or cross-species. Building on evolutionary biology and its critics, as well as on anthropology, gender and queer theory, and queer ecology, I examine the way in which lactation and breastfeeding produce gender relations from a multi-species perspective. What does male lactation tell us about sex and gender across the species line? What does it tell us about who gets to parent, and how? Humans have long used animals to tell stories and make claims about human life especially when it
comes to normalizing matters of sex, gender, and parenting. While I do not profess to speak for other species, I resort to animal-human comparisons to illustrate how (human) sex and gender-based assumptions surrounding lactation and breastfeeding are culturally constructed. To be sure, there are huge gaps in the scientific knowledge needed to satisfactorily describe and explain male lactation. The dearth of information does not signal the impossibility of any inquiry on the matter, however, since this study primarily concerns the social meanings of lactation.

The chapter proceeds in three parts. It begins by critically examining the scientific literature on male lactation, which usually frames the phenomenon as an evolutionary puzzle. Part II argues that male lactation should be decoupled from “male breastfeeding” — a broader, non-biological notion. Finally, Part III turns to the ways men both strive for and resist participation in breastfeeding.

I. Biology: Male Lactation

A. Why Do Males Have Nipples?

That most mammalians have breasts has long been viewed as a scientific enigma for naturalists and, more recently, evolutionary biologists. Charles Darwin’s grandfather, Erasmus Darwin ([1794] 1818: 400), expressed perplexity that “no use can now be assigned” to “the breasts and teats of all male quadrupeds.” Numerous theories exist on the origin and evolution of the mammary gland and lactation. Biological explanations range from the idea that male breasts are relics of a previous utility, to the assertion that some males can still lactate to feed their babies.

In 2006, molecular biologist Claudia Vorbach and her team argued that originally nipples and lactation had little to do with feeding babies, but stemmed from the innate immune system, that is, cells and proteins that are always present, providing a first line of defense against common microorganisms (2006). She proposed that the mammary gland evolved from a protective skin gland that secreted large amounts of antimicrobial factors to shield the evolving mammalian skin, their eggs, and/or their newborns. On this view, lactation reflects an inflammatory response to tissue damage and infection. It only later evolved into a feeding role. The primary evolutionary function of milk was protective and not nutritional, explaining, perhaps, the fact that males as well as females have mammary glands.

Medical doctor John Launer (2011: 79) proposes a different evolutionary scenario. According to him, mammalian nipples and lactation evolved from sweat glands such that “over a period of millions of years, infants who could cling to their parents and suckle on increasingly nutritious secretions from this source must have had an adaptive advantage.” He speculates that early on,

*males as well as females may have developed the same capacity for secreting nutritious sweat, only for this to become redundant as a result of later
evolutionary pressures. An alternative and perhaps more convincing explanation is that the original adaptation served a dual purpose of physical attachment as well as lactation, so that it was of benefit to infants for both their parents to have this accessory on their chests (Launer 2011: 80).

More than a century earlier, Charles Darwin ([1871] 1874: 109) had explored the nutritional function hypothesis, speculating that in an earlier age male mammals aided females in nursing their offspring and that later, some pattern of events (such as smaller litters) rendered male assistance unnecessary. The disuse of the organ led to its becoming vestigial, and this was passed on to future generations.

Why is it that once male breasts became superfluous nature did not take them away? Evolutionary biologist and historian of science Stephen Jay Gould, critiquing this type of functionalist, adaptive mode of inquiry, offers an account based on structural rules of development. In his view it was not utility but pathways of sexual differentiation in mammalian embryology, that account for male breasts. He argues that “[m]ale mammals have nipples because females need them — and the embryonic pathway to their development builds precursors in all mammalian fetuses, enlarging the breasts later in females but leaving them small (and without evident function) in males.” (Gould 1993: 83) The development of mammary glands in utero happens independently of sex because fetuses are sex undifferentiated during the first stage of their development, starting with the same body plan and basic parts. Male nipples are not vestigial traces of a former function. Nipples are so fundamental to mammalian life that they pre-exist sexual difference. According to Gould, males have nipples simply because females do.

B. Can Males Lactate?

Although the scientific community as well as the general public assume that male lactation, like male pregnancy, is a biological impossibility, it is merely a biological improbability. Mammalian males do not have ovaries and uteruses, but they have mammary glands. Many, including humans, primates, and canines, have nipples and ducts leading to the surface of the nipples — the physiological equipment required for lactation (Marieskind 1973: 124). Until recently, it could have been objected that male lactation was a “man-made” phenomenon, only documented in humans and domesticated mammals. Yet, as noted in the introduction, in 1994 a group of biology researchers described for the first time lactation in a wild male mammal, the Dayak fruit bats of Malaysia (Francis et al. 1994: 691). A few years later, research wildlife biologist Frank Bonaccorso (1998) reported that another type of fruit bat, the masked flying fox of Papua New Guinea, presented instances of male lactation. Male lactation, therefore, is a naturally occurring phenomenon even in animals that have not been manipulated by humans.

Several of the male Dayak fruit bats examined had functional mammary glands from which small quantities of milk could be expressed. Microscopic analysis revealed similarities to female bat breast tissue. It is still unclear whether male fruit bats’ lactation represents an evolutionary adaptation to increase the survival of pups, the symptom of
some underlying health problem, or an abnormal event stimulated by the consumption of phytoestrogen-rich plants or pesticides. Yet, in both the Dayak and the flying fox species, the male bats were found perfectly normal in every other way, leaving open the possibility that they provide milk to their young. The team of researchers that investigated the Dayak fruit bat noted that the “nipples of the males were smaller and less cornified than those of the females, suggesting little, if any suckling” (Francis et al. 1994: 691). But years later one of the team members, Thomas Kunz, hypothesized that “because males express less milk than females — 5 µl versus 350 µl expressed from females — it is possible that some suckling occurs, but not enough to cause enlargement and cornification of the nipples.” (2009: 83). In sum, the adaptive function of male bats’ lactation remains uncertain, but that males are able to produce milk in the absence of pregnancy should come as no surprise.

Even in females, becoming pregnant is not necessary to acquire the hormones that trigger lactation. These hormones, in particular prolactin, considered nature’s “galactagogue,” that is, a substance triggering or promoting milk production, can spike as the result of nipple stimulation, various pathologies, or the administration of drugs. In females, it is the hormonal change brought about by pregnancy, rather than the carrying of a developing fetus and the birth that stimulate glandular growth and milk letdown (Creel et al. 1991). Manual or mechanical nipple stimulation as well as baby-wearing and suckling are alternative ways to release lactation hormones. These behaviors can be supplemented or replaced by the administration of hormones sparking milk production (Gabay 2002). Induced lactation is nowadays routine in a variety of situations, from parents needing to initiate lactation after the birth of a premature baby, to foster, adoptive, and intended parents in the context surrogacy, to lesbian or gender non-conforming couples in which the non-gestational parent wants to breastfeed, a practice known as “co-nursing” (Zizzo 2009; Wahlert and Fiester 2013), to friends and relatives, most often maternal grandmothers who (re-)lactate so as to breastfeed an infant in need, to people seeking to lactate for other reasons, such as to rid their body of toxins, to lose weight, or for sexual pleasure. Some individuals eventually produce enough milk to fully nurse a baby, while others make small quantities, requiring supplementation with formula or donor human milk. Lactation can also be induced in animals. Due to its potential economic benefit, there is a large agricultural literature on the “optimal” (human) methods to induce lactation in cows (Magliaro et al. 2004). But other animals can trigger lactation to nurse non-filial youngsters. Induced lactation has been observed in captive dolphins whereby orphaned dolphin calves suckle females with whom they are housed, leading them to establish a full milk supply (Ridgway and Reddy 1995: 610). Wild nulliparous marsupials occasionally foster other females’ babies, nursing them fully (Daly 1979: 327).

Can the standard protocol used to induce female lactation (stimulation alone and/or in conjunction with pharmacologic intervention) be duplicated in male mammals? In a 2000 study, a team of UC Davis researchers reported successfully inducing lactation in 4 out of 13 male goats — 33 percent — using a combination of hormonal treatment and mammary massage (Cammuso 2000). Similar to male bats that produce less milk than females, males goats produced considerably less than their female counterparts.
Induced female goats secreted from 20 µl to 530 ml of milk per day while induced bucks’ volumes ranged from 25 µl to 1.5 ml per day (Cammuso 2000: 6). However, what is remarkable is that in species in which male and female milk’s compositions have been compared, no significant difference between the two has been detected. A 1981 study showed that when human males secrete milk, it is of comparable quality as “colostrum and milk of normal lactating women” (Kulski 1981: 581). The composition of male bats’ milk has not been analyzed, leaving unknown whether or not it is similar to female milk. But at least some male animals’ milk is of equivalent compositional quality as females’. In the early 2010s, two separate teams of European researchers (Pilo et al. 2011; Gamboa et al. 2013) examined bucks’ milk, comparing it to does’ milk. The analysis revealed “no major differences” between the two, except for pH level and temperature (Gamboa et al. 2013: 99-100). Major constituents such as fat, protein, and lactose were the same, suggesting that when males’ mammary glands secrete fluid, it is rightly called milk.

Could human males lactate as the result of an induction regimen? Like female lactation, male lactation is not just something that happens passively to bodies. According to feminist breastfeeding scholar Fiona Giles (2005: 308), “[m]en can choose to lactate too, if they’re prepared to put in the required amount of nipple stimulation.” Though the blogosphere is rich with accounts of induced lactation in cis men and trans women, there is no scientific literature substantiating its feasibility. Does this lacuna indicate that lactating bio-males are an aberration? I see this gap as a reflection of the traditional gender roles which so permeate research agendas’ fundamental analytic categories that male lactation is considered unworthy of serious scientific inquiry, even if only to be refuted. To be sure, in practice, male lactation remains a rarity in the mammalian kingdom. The next section conjectures explanations for this outlier status.

C. If Males Can Lactate, Why Don’t They?

If lactation lies within the physiological potential of males, why don’t they lactate more commonly? Classic evolutionary theory predicts that parents should invest in their young in ways that increase their own lifetime reproductive success. Based on this premise, the absence of male lactation in mammals is explained by fitness maximization. Males’ evolutionary interests are supposedly best served by fertilizing as many females as possible and maximizing the number of their own surviving offspring. Accordingly, they would not gain any advantage by sticking around to help raise one or two of them. Male lactation, therefore, goes against the “fact” that male mammals have no involvement with their offspring post insemination, or when they do, provide considerably less parental care than females.

Evolutionary biologists attribute low male parental investment to a lack of certainty over paternity given that the degree of male care often correlates positively with the degree of paternity assurance (Trivers 1972). The mammalian mode of reproduction threatens paternity confidence due to its internal fertilization followed by a long gestation period. Providing costly care for offspring a male did not sire would be selected against, as males would incur costs for no benefits, losing out on other mating opportunities (Kunz and Hosken 2009: 80). The researchers who observed lactation in Dayak male fruit
bats argued “functional male lactation would be most likely to evolve in monogamous species, in which males share in the care of the young and have high certainty of paternity” (Francis et al. 1994: 692). Yet, why don’t monogamous fathers lactate? Standard evolutionary theory explains the absence of male lactation in the rare cases where males of a species are involved in parental care through male-male competition or territory control to maximize biological fitness (Kunz and Hosken 2009: 82). Male contributions in these species include behaviors such as gathering food for the female, chasing off potential competitors, defending the territory, and looking out for predators from other species. By contrast, evolutionary orthodoxy maintains that females lactate because of their reproductive features. They sire a limited number of offspring that require a protracted and intensive period of parental care. They are unable to desert them because their fitness maximization calls for a high investment in caring for them (Trivers 1972).

This brief review of the evolutionary literature on male lactation indicates that a binary sexual division of labor is seen as key to the evolution of lactation into a female task. However, biologist Charlotta Kvarnemo (2006: 144) argues for the reverse causality: “high paternity is not a prerequisite for male care to evolve but rather an outcome of it.” This may be because females are more attracted to caring males, or because male care leads to increased survival of the offspring (Seger and Trivers 1986). In other words, increased male parental investment could lead to more mating opportunities for males and/or to more numerous biological offspring. If that is the case it is unclear why males have not invested more in lactation. An alternative explanation for the rarity of male lactation is gender-based rather than sex-based. It may be because people are socialized to view lactation as an exclusively female enterprise that it is one. As women’s health expert Helen Marieskind (1973: 124) noted half a century ago, lactation “is very much dependent on the cultural values of the society: i.e., in societies which place great importance on breast feeding, lactation is readily found amongst all age groups and parital states of women . . . in these same societies lactation in men is more likely to occur.”

If gender is a socio-cultural construct, the gender coding of lactation and breastfeeding can shift. The paucity of scientific investigation of male lactation is itself yet but a symptom of the gendering of lactation. The scientific and medical establishments have refrained from probing a phenomenon — male lactation — which strains the bounds of credulity precisely because it contravenes our sex, gender, and parenting assumptions. Yet, as I argue in Part II, even if lactation is not part of males’ “normal” capabilities, or if bio-males produce such small amounts of milk that they cannot satisfy their children’s nutritional needs, there are other ways in which bio-males and male-identified persons can breastfeed.

II. Gender: Male Breastfeeding

A. Definition

Somewhat similar to the decoupling of sex and gender, I propose to dissociate
lactation from breastfeeding. Sex typically means the biological, genetic, chromosomal, or physiological characteristics associated with males and females, while gender designates the social identities affiliated with bodies perceived as sexed in a particular way. Analogously, lactation refers to the biological and physiological ability to produce milk, while breastfeeding, or “chestfeeding,” refers to the social practice of feeding children human milk or to latching them to the nipple while supplying them with milk. As infant feeding advocate Alice Farrow (2015: 26) has denounced, “[h]eteronormative and cisnormative assumptions are predominant in the language (including images) in mainstream breastfeeding literature and the language used by providers,” most obviously the systematic use of the female gendered pronoun when referring to nursing parents as well as the term “breastfeeding.” Though all humans have breast tissue, the word “breast” is typically associated with women. Accordingly, some trans men and gender non-conforming parents prefer to use the expression “chestfeeding” (Wolfe-Roubatis 2015: 36). As a concession to dominant linguistic practice, this chapter uses the expression “breastfeeding,” but with the caveat that it should be understood interchangeably with “chestfeeding.”

“Male breastfeeding,” I suggest, designates a cluster of practices, which sometimes intersect. Its three defining elements are: 1) male-identified parents or caregivers; 2) using human milk to feed their children and/or; 3) latching their children onto their nipples/breasts/chest while providing some nutrition — be it formula or human milk. This conception overlaps with, but is much narrower than Fiona Giles’ (2004: 301-2) notion of “queer breastfeeding,” which includes adults breastfeeding one another, long-term breastfeeding of children, cross-nursing (one woman occasionally breastfeeding another woman’s child), wet nursing, cooking with breast milk for adult consumption, cross-species nursing, induced lactation, lactation porn, and lactation art.

What makes breastfeeding “male” is the self-identified maleness of the breastfeeder. What makes it “breastfeeding” is one or two of the following reference points: a substance (human milk) and/or a location in the body (nipples/chest/breasts). Male breastfeeding undoes the presumption that parenting is binary, with men, fathers and women, mothers. A single parent or caregiver can take on both parenting roles as well as others, switch fluidly between the two, or embrace a role which is not traditionally assigned to her sex or gender. In that sense, the expression “male breastfeeding” should not be read as reinforcing gender distinctions and dualistic systems of categorization. My goal is rather to expand the gender coding of breastfeeding by including in the practice people whose bodies, gender expression, or social role are different to those traditionally associated with “nursing mothers,” and who many not identify with any gender.

As opposed to lactation, breastfeeding is neither defined by milk production on the breastfeeder side nor milk intake on the infant side. The distinction between “male lactation” (bio-males producing milk) and “male breastfeeding” (male-identified parents using human milk or latching their children to feed them) is fluid, rather than all-or-nothing, allowing for overlaps. This is not to say that I wish to collapse the divide between the biological and the social. But the phenomena of male lactation and
breastfeeding show that, as in many other contexts, the relationship between biological and cultural processes is complex. Biology can be just as constructed as the social in the sense that a phenomenon associated with biology (such as lactation) may be in reality a feature of social situations. Desires and cultural practices not only influence social behaviors, but also biologies. The more bio-male and male-identified parents will be interested in breastfeeding, the more common the physiological fact of male lactation may become. Reciprocally, as I argue below, the social situation of male breastfeeding may be just as fraught with obstacles as the biological fact of male lactation.

In male breastfeeding, parents use donor human milk to bottle-feed or suckle their children and/or provide them with their own breast/chest milk if they have been able to initiate lactation. Does merely using one’s nipples to soothe an infant without delivering any nourishment count as breastfeeding? Anthropologist Barry Hewlett conducted ethnographic fieldwork in a hunter-gathering society of the Congo Basin, the Aka, where he observed men putting infants to their nipples to pacify them, reporting:

*Aka infants have been observed attempting to nurse with their fathers, and fathers have been observed offering their nipple to fussy infants. We asked mothers about fathers trying to nurse and they said fathers may put the infant to their breast to try and soothe a fussy infant but they added that fathers are more likely to sing or dance with the infant or give her water before offering his breast* (Hewlett & Winn 2014: 204).

I would be reticent to call this practice “breastfeeding,” at least not a paradigmatic case of breastfeeding, given that no feeding is involved. Of course, breastfeeding is more than just nutrition. Whether or not milk is produced and ingested, breastfeeders and their babies experience touching and skin-to-skin contact creating an enriched sensory environment including eye contact, lulling, soothing, and cuddling. Non-nutritive suckling is widespread among mammals, often serving a social or emotional function — infants often suckle when distressed or alarmed. It also provides immunological benefits, as exposure to diverse strains of bacteria via skin-to-skin contact may optimize an infant’s immune system (Martin and Sela 2013). But even non-nutritive suckling is connected to nutrition, as it is important for stimulating milk production (Cameron 1998: 525). In sum, though breastfeeding needs not satisfy all of an infant’s nutritional needs, central cases of breastfeeding should encompass an element of feeding.

In what follows I outline three examples of male breastfeeding illustrating the diversity of practices encompassed by the notion. They involve people of different cisgender, sexual orientation, time, and place.

**B. Examples**

Male breastfeeding designates a range of situations that differ vastly, but are united by the male identification of the parent-caregiver and the form of nourishment of a child.
1. Gay Fathers Who Breastfeed

In a fascinating, multi-authored article titled “The Pregnant Man,” law professor Darren Rosenblum (2010) tells the story of having his daughter, Melina, with his husband, Howard, through a gestational surrogate, Beth Jones, who is one of the article’s contributors. During her pregnancy, Beth decided that after her delivery, she would pump her milk, knowing from her previous pregnancy that it would facilitate her postpartum recovery. Upon learning about the possibility of human milk donation, she offered Darren and Howard to breastfeed Melina at birth and to donate her milk after that, as she reveals in the article (Rosenblum et al. 2010: 258). Immediately after giving birth, Beth began pumping so that Darren and Howard could feed Melina themselves, using a bottle. They had happily accepted her milk donation offer, renting a breast pump, purchasing pumping supplies and accessories, and setting up an UPS shipping account. Beth sent her frozen milk on dry ice from Oklahoma to New York, where Darren and Howard would thaw it and feed it to Melina. Darren recounts that “thanks to Beth’s generosity (and UPS’s reliability), Melina had three months’ worth of breast milk” (Rosenblum et al. 2010: 276).

This story raises the question of who breastfed Melina. Darren writes, “we “kind of” breast fed Melina because we gave her breast milk but did not have the intensely corporeal proximity to Melina through breast-feeding” (Rosenblum et al. 2010: 276). Darren and Howard did not suckle her despite her attempts: “even if Melina did not — she frequently tried to feed off our hairy chests.” If Darren and Howard breastfed, does it mean that any male-identified parent who feeds an infant expressed human milk in a bottle is “breastfeeding”? The socio-cultural notion of breastfeeding is flexible so I would not rule out any proposal without contextual background. However, what distinguishes Darren and Howard’s story from other familiar tales of male participation in human milk-based infant feeding is that theirs was a sustained endeavor in the absence of a parent producing milk or breastfeeding. Unlike male identified people partnered with a lactating person, who may limit their involvement to the act of bottle feeding, taking no or little part in the storing and handling of the milk, Darren and Howard fully engaged with the corporeality of human milk — unpacking it, thawing it, preparing, and cleaning the bottles. This was not an occasional undertaking as they fed Melina nearly exclusively on human milk for as long as their supply lasted.

I agree with Darren that he and Howard “kind of breastfed Melina.” At the same time, Beth “kind of” breastfed Melina too, even though she had zero “corporeal proximity” to Melina, to continue Darren’s choice of words. During her couple of months of maternity leave, Beth was engaged in another form of work — the time and labor intensive job of making milk — even though she was not paid for the milk she produced. This embodied work presumably entailed managing her clothing to facilitate pumping and handling leakage, continuing with prenatal regimens such as taking vitamins, avoiding restricted beverages, drugs, or smoke, as well as eating and drinking more because lactation requires extra energy and hydration. Besides, producing milk in the absence of a suckling baby imposes its own set of tasks: pumping takes a lot time and in addition to setting up, dismantling, and cleaning up the pump several times per day, it
requires storing the milk in collection bottles or disposable bags which are weighed and dated, frozen, before being packed in Styrofoam coolers to be shipped on dry ice. It is clear from the article that Beth enjoyed her surrogacy and lactation work enormously and was able to perform it under the best possible material and emotional conditions. She makes a point of countering the common critique of surrogacy as exploitation by presenting her experience as “mutual exploitation,” whereby “any construed exploitation done “against” me was equally matched” (Rosenblum et al. 256-7). This case study suggests, therefore, that inasmuch as some forms of breastfeeding depend on outsourcing lactation, parents should be as mindful as Darren and Howard of the well-being and working conditions of their milk providers.

2. Trans Fathers Who Breastfeed

Female-to-male Canadian trans father Trevor McDonald (2016), who became pregnant and was able to produce small amounts of milk, breastfed his baby, documenting the experience on his blog, Milkjunkies.net as well as in a book. McDonald identifies as a man and a father, but his sex assigned at birth was female. He transitioned by taking hormones and having chest surgery, removing most of his breast tissue. He retained his female reproductive organs, hence his capacity to carry a gestational pregnancy. As two medical doctors explain (Obedin-Maliver and Makadon 2016: 6) “[s]ome transgender men defer chest reconstruction (also known as ‘‘top’’) surgery in light of a planned desire to chest feed. Those who have had ‘‘top surgery’’ may still be able to lactate or can engage in chest feeding with assistance of a support device.” Breastfeeding trans men may “experience dysphoria as they take on (and challenge) this traditionally feminine role” (Obedin-Maliver and Makadon 2016: 6). More generally, all male identified breastfeeders may feel discomfort because breastfeeding and the bodily changes it may occasion do not match their gender identity.

Though McDonald’s son was able to latch at birth, he was not gaining sufficient weight after a few days, calling for supplemental feeding. Using donated human milk from friends and friends of friends, McDonald continued to breastfeed Jacob with the help of a supplemental nursing system (“SNS”). The SNS includes a tube taped to the breast next to the nipple which is connected to a bottle containing formula or human milk. The infant sucks on the nipple while the tube passes milk into its mouth. The device avoids “nipple confusion” and provides sucking stimulation to boost milk production. McDonald’s widely publicized use of the supplemental nursing system contributed to its dissemination in popular culture as the contraption that allows parents regardless of sex or gender to partake in the breastfeeding experience. It has since been emulated, with the invention of new breastfeeding gadgets. “Mr. Milker” vests are now available for sale on Amazon for men experiencing “breastfeeding envy.” Publicized as “the original male breastfeeding device,” the vest hides baby bottles behind “easy to clean, BPA, and lead free” artificial nipples, allowing children to latch and ingest milk simultaneously.

McDonald was instrumental in exposing socio-cultural presumptions about the gender of breastfeeding. The dominant breastfeeding subculture alternatively supports
and undermines the ungendering work accomplished by male breastfeeding. While he was breastfeeding, McDonald (2013) joined a local La Leche League support group, which he described on his blog as “an incredible support system that I credit with helping me to nurse my baby for his first year of life.” Yet, his application to become a La Leche League leader was later denied. In its rejection letter, the organization wrote, “[s]ince an LLLC leader is a mother who breastfed a baby, a man cannot become an LLLC leader,” adding that “the roles of mothers and fathers are not interchangeable” (Tapper 2012). The organization was not prepared to ungender breastfeeding by endorsing a male breastfeeding as a role model. Since then, the organization revised its policy noting, “[a]s the cultural understanding of gender has expanded, it is now recognised that some men are able to breastfeed. In the spirit of nondiscrimination and with this awareness, La Leche League International has refined the eligibility qualifications for its volunteer breastfeeding counsellors to include men who otherwise meet the prerequisites for becoming a volunteer applicant” (West 2014).

3. Roman Nurse-Fathers Who Breastfed

The Latin word nutritor has long been understood as a synonymous of paedagogus, that is, the tutor who took over the education of privileged Roman children once they were weaned. Referring to funerary inscriptions dedicated by couples presenting themselves as nutritores lactanei (literally, milk nurses), classicist Marine Bretin-Chabrol (2012) argues that there may have been male nurses actively participating in infant care and feeding in Ancient Rome. In imperial Latin, two masculine nouns existed in the same family as nutrix (female nurse), nutricius and nutritor, which can be translated as male nurse or fostering father raising a child not his own. Who were the men calling themselves nurses or nourishing fathers and did they participate in breastfeeding?

Bretin-Chabrol questions the dissymmetry between the roles supposedly assumed between female and male nurses. Calling a nutrix “lactaneus” was a way to signal that she was a wet nurse rather than a dry nurse caring for her nurslings without breastfeeding them. Analogously, by calling oneself a nutritor “lactaneus,” could a man have indicated his involvement in breastfeeding? Ceramics specialists and archeologists have established that breast pumps and baby feeding bottles were used in certain situations in the Greco-Roman world and even before (Obladen 2012). The Romans produced pumps allowing women to suck through a tube, creating a suction effect which resulted in expressing milk (Rouquet, 2003). They likely mastered the manual expression technique as well, which allows milk extraction by simply using self-massage and stroking. Male nutritores lactanei could have therefore fed their nurslings female milk produced by their partners in addition to fulfilling other forms of nursing and caring, such as swaddling, culling, story-telling, singing, suckling, and other traditional tasks bestowed to wet nurses.

Breastfeeding men would not have been incongruous in the context of Roman family structures and child-rearing practices, as the Roman father assumed, symbolically but also often practically, the nourishing function (Dupont 2002). As evidenced by Aristotle and Hippocrates’ biological theories, milk itself was conceptualized as
masculine, a semen-infused concoction composed of female blood heated and perfected by the addition of male seed (Myers 2016: 85-6). In upper-class circles, children were rarely breastfed by their legitimate mothers, who resorted to wet nurses that were either slaves or servants recruited on a contractual basis (Bradley 1985). There were two couples in the Roman family: the procreating couple composed of the father and mother, and the nourishing-educating couple composed of the wet nurse and the father (often called pater-nutrix) (Dupont 2002: 132-3). Romans did not require biological reproduction to establish filiation (Thomas 1986). The link between father and children was established through nourishment — legitimate children were those the father decided to nourish at their birth.

Male breastfeeding in Rome may have been a function of slave owning in a society characterized by extremes of wealth, power, and status. The insessional evidence suggests that even if some male nurses were free, a steep social hierarchy often separated the infant’s parents from the nutritor (Bretin-Chabrol 2012: 191-204). In sum, if male breastfeeding was ever commonly practiced in Western society, it developed in the context of a deeply unequal polity based on the slavery system, where gender and class oppression intersected. In antiquity, the position of men in the gender order created a scale not just of maleness but also of humanness (Myers 2016: 82-3). Being masculine was being fully human, enjoying full personhood, orderliness, and perfection while being feminine was aligned with subordinate and less than human status. As a feminine, hence devalued activity, breastfeeding may have been acceptable for men to engage in only if they were considered as social inferiors. Similarly, dominant heteronormative and patriarchal norms in contemporary society may explain why today male breastfeeding is primarily claimed by sexual minorities such as gay or trans men, rather than embraced by straight and cis masculinities. Is male breastfeeding more common in the animal realm where gender repression and identity roles may be less rigidly enforced?

C. Animals

Though there are no reported cases of “male breastfeeding” among animals in the sense outlined in this Part, I would not be surprised if such findings emerged as researchers become interested in the question. Ethology suggests that lactation is a social behavior among animals just as among humans, including an important “cultural” component in the sense of learning behaviors from others (Plotkin 2002). Much like humans, animals apparently learn how to breastfeed. “[S]ome chimpanzees when delivered in captivity have . . . not known what to do with their newborn babies,” while others successfully breastfed after being “taught” by their keepers (Gunther 1955: 575). In a number of species, this learning process occurs through allomothering — infant care performed by a group member other than the gestational mother. Allonursing is an expression used by zoologists to refer to females nursing offspring that are not their own. The practice exists in the majority of human cultures (Hewlett & Winn 2014) as well as in dozens of species of cooperative breeder animals such as monkeys, wolves, dogs, and wales (Packer, Lewis & Pusey 1992). A few studies have shown that one of the functions of allonursing (the nursing of non-offspring) is for inexperienced females to improve their maternal skills, in particular breastfeeding (Maestripieri 1994; Roulin 2002: 205).
Animals’ parenting practices as well as genders and sexual orientations are by some accounts just as diverse as humans, if not more (Roughgarden 2004; Hird 2006). As LGBTIQ life gains greater visibility in mainstream human culture, we see its powerful impact on scientific studies of animals’ sexuality and mating systems. As environmental sociologist Myra Hird (2008: 227) has argued, “animals have for some time been overburdened with the task of making sense of human social relations. In most cultures, and for most people, nonhuman animals are symbolic. It matters less how nonhuman animals behave, and more how we think they behave.” She points out, in particular, that trans is not a distinctly human enterprise, as virtually all plants and many animal species are intersex, switch sex, have same-sex relationships, and engage in transvestism (Hird 2006). The diversity of sex, sexual, and parenting behavior amongst species is much greater than human cultural notions typically allow. Amongst most living organisms daycare, fostering, and adoption are common, as are infanticide and incest. Female single parenting is the norm among animals, monogamy the anomaly.

Non-human mammals may lack the technology humans possess to engage in male breastfeeding (breast pumps, feeding bottles, artificial nipples, supplemental nursing systems, refrigeration, freezing/thawing techniques, shipping), but they are known to employ reproductive and nursing strategies which are surprisingly similar to humans’. Myra Hird (2006: 40) reports, “many animals practise forms of birth control through vaginal plugs, defecation, abortion through the ingestion of certain plants, ejection of sperm and, in the case of chimpanzees, nipple stimulation.” Mammals often engage in highly cooperative communal infant care. For example, in some species of social canids, only a couple of females in the pack give birth a particular year, and the entire pack helps care for the litter (Riedman 1982: 416). While the current scientific evidence suggests that allonursing is limited to females, another form of food sharing involves males as well as females: premastication (also known as “kiss feeding”). Adults returning from a hunt regurgitate food for the pups as well as for their caretakers (Pelto, Zhang & Habicht 2010).

If kiss feeding, allonursing, and the female use of nipple stimulation as a contraceptive are common among certain mammals, it would not be such a stretch to imagine that males too could stimulate their nipples to induce lactation or obtain milk from females to feed it to their young. In the 1970s, an adult male macaque in captivity was observed “to express a milk-like secretion from the left nipple after self manipulation and sucking of the nipples. 5 days later the secretion was expressed from both nipples. Since then the animal has been observed to express the secretion on 36 occasions” (Trollope and Orgill 1976: 375). Though this single example cannot be generalized, it suggests that lactation self-inducement in male animals is within the realm of possibility. Technology itself is not uniquely human. Animals incorporate external structural materials into their bodies (such as the above-quoted vaginal plugs used as contraceptives) and move around and store food. Perhaps some mammals have found ways to store, transport, and transmit expressed milk to infants, allowing male caregivers to partake in breastfeeding. Although more research is needed on mating behaviors and the physiology of lactation, the existing evidence does not preclude the prospects of
animal male breastfeeding.

After having reviewed some of the different ways in which males can be said to breastfeed, Part III turns to examine an even broader understanding of male lactation.

III. Society: Males and Breastfeeding

As noted earlier, male lactation can be seen as a continuum, from the physiological production of milk by bio-males’ mammary glands, to male-identified people breastfeeding, to males’ contributions to or impairment of breastfeeding at the personal and the societal level. At the last end of the spectrum, in the human realm, male involvement in breastfeeding can manifest itself in contrasting ways, from hostility toward the idea of male breastfeeding, to supporting breastfeeders regardless of their gender, to controlling other people’s breastfeeding.

A. If Men Can Breastfeed, Why Don’t They?

Major socio-cultural barriers stand in the way of male breastfeeding and male support of breastfeeders, including, most evidently, gender constructions of the body and the emotion of disgust surrounding female bodily fluids. A significant impediment to male breastfeeding is the lived experience of the gendered body, through which masculinities and femininities are constructed and enacted. Transgressions of gender-based bodily norms such as male breasts and male lactation are read in scornful and moralized ways. Man breasts are typically experienced as shameful in our fat-phobic, patriarchal, and heteronormative culture. Robin Longhurst (2005: 155) has written about the experience of “breasted men living in the contemporary West,” who try to hide their breasts, avoiding activities and spaces that require exposing their upper bodies. Her analysis shows that they find themselves quite literally out of place in societies that value muscular male torsos and represent man-breasts as “grotesque and/or funny,” where even finding a suitable bra can be an ordeal (Longhurst 2005: 163). “Gynecomastia,” the growth of male breast tissue or mammary gland hypertrophy, is considered a condition despite its pervasiveness. According to a recent medical article, gynecomastia “is common in normal individuals, particularly in the newborn period, at puberty, and in the elderly. Around 60 percent of all boys develop transient pubertal breast enlargement, and 30–70 percent of adult men have palpable breast tissue, with the higher prevalence being seen in older men and those with concurrent medical illnesses” (Carlson 2011: 16). The aversion for so-called “man boobs” manifests itself most dramatically in the recourse to surgery to remove “excessive” breast tissue on men. As mentioned in the introduction, some doctors recommend mastectomies to “cure” male gynecomastia and galactorrhea — while their colleagues specialized in (female) breast cancer medical use “words like “disfigurement,” “mutilation,” and “lop-sided” to describe the post-mastectomy patient” (Wilkinson and Kitzinger 1993: 230).

Luce Irigaray (1985: 106-18) has shown that in Western ontology firmness and solidity are coded as masculine while softness and fluidity are associated with femininity.
The female body is depicted as unrestrained and flowing, lacking self-control: women menstruate, secrete vaginal discharges, lactate, experience postpartum incontinence, and cry. In the early modern period, power was inscribed on lower class and female bodies through shame about these liquid bodily functions (Paster 1993: 1-22). Breasted and lactating men disrupt understandings of sexual specificity and social hierarchy because they exhibit a feminine-fluid physique, becoming “abject bodies subject to loathing and derision” (Longhurst 2005: 153). Historian Lisa Wynne Smith (2010) analyzed medical discourse surrounding male menstruation in eighteenth-century England and France, revealing that leaky male bodies are profoundly undesirable. Uncontrolled flow goes against the ideal of the self-contained man. Willpower was and still is “central to claims of political virtue and hierarchy” — men unable to control themselves are seen unfit to govern others (Smith 2010: 28). Male breastfeeding, therefore, goes against centuries of medical and moral theory that left us with an ideal of masculinity defined by containment and self-discipline.

Another hurdle to overcome for male identified people to breastfeed or to support others who do so, is the negative cultural construction of female bodily fluids (Bramwell 2001). Though human milk benefits from a public health discourse in favor of breastfeeding, it is still an object of disgust (Cox et al. 2007). Many of those who find a glass of cow’s milk appetizing are repulsed by the idea of tasting, or even touching, human milk. The offensive nature of human milk surfaces in everyday life with objects such as breast pads that “protect” against the embarrassment of leaking milk and baby bottle labels to avoid cross-feeding in the context of daycare. Familiar stories of caregivers’ lack of enthusiasm for (or outward refusal to) manipulating human milk and feeding it to children also reflect its ambivalent status. It is the gold standard of infant nutrition, yet at the same time treated as a vile bodily waste product on par with menstrual blood, urine, saliva, mucus, or sweat. As psychologists Paul Rozin and April Fallon (1987: 28) have shown, the human category of disgust is deeply connected to animals — all animals or animal products being potentially disgusting to humans. Bodily fluids, particularly female-coded fluids, may be perceived as disgusting because they remind us of our animalness, threatening our self-perception as being distinct from and superior to other animals. In sum, breastfeeding, especially gender diverse breastfeeding, is eminently subversive, disrupting not only dominant norms of gender, but perhaps also of species identity and hierarchy.

B. What Could Men Do Instead?

Men do not need to literally lactate or to breastfeed in the ways described in the case studies to participate in breastfeeding. There is now a substantial literature showing how men’s beliefs about lactation, breastfeeding, and gender roles color their interactions with the key people in their lives as well as with friends, colleagues, and strangers, thereby impacting on their infant feeding decisions (Bar-Yam and Darby 1997). Men (just like everyone else regardless of sex and gender) can support breastfeeding through a variety of behaviors, including offering encouragement and advice; participating in setting up, cleaning and storing breast pumps, pump accessories, expressed milk; bottle-feeding babies with human milk; attending breastfeeding classes; supporting the resort to
lactation consultants; doing more child care and housework to compensate for the time breastfeeders spend nursing, including grocery shopping, cooking nutritious meals, and making sure breastfeeders are kept hydrated and comfortable during feeds; offering financial compensation for lost earnings; supporting breastfeeding and pumping in all spaces — whether coded as private, public, or work spaces; advocating for legal and social reform aiming at securing material and economic support for breastfeeders, including paid leaves, workplace support, high quality, subsidized childcare, affordable and competent lactation consultants, and the wide availability of gender neutral lactation rooms. If more widespread, these behaviors would contribute to making breastfeeding an activity that can be shared across sexes and genders and possibly beyond the family unit.

In practice, however, communal and gender diverse breastfeeding is impeded, as I argue below, not only by patriarchal norms casting breastfeeding as a subordinated female task, but also certain some strands of feminism.

C. The Dark Side of Male Lactation

There is a dark side to males’ involvement in lactation. Male-dominated institutions and interest groups have had a long-standing role in prescribing breastfeeding norms and practices in a way that typically benefits their interests, reinforcing gender dualisms and hierarchies. In what follows I discuss two examples drawn from male-female interactions, in which men hinder breastfeeding by treating female breasts as their own and by endorsing a view of co-parenting that presents bottle-feeding as the great equalizer.

1. Breasts Are For Men

As feminist theorist Iris Marion Young (2005: 80) has emphasized, “male-dominated society tends not to think of a woman’s breast as hers. Woman is a natural territory; her breasts belong to others — her husband, her lover, her baby.” Dominant heteronormative ideologies depict female breasts as sexual objects for the pleasure of men rather than multidimensional body parts including nutritive, soothing, and sexual functions. According to anthropologist Kathy Dettwyler (1995), the limited view of the breast as a sexual appendage is so pervasive it has inhibited women’s ability to successfully breastfeed. Women and their partners worry, for example, that breastfeeding will make their breast ugly (Arora et al. 2000) or interfere with sex (Freed, Fraley and Schanler 1992).

At other times and places, men’s view of breasts as sources of nutrition for infants cut the other way. In eighteenth century Europe and North America, the anti wet-nursing movement was tied to male moralists and physicians’ take-over of traditional female domains such as obstetrics and infant care, which resulted in the medicalization of women’s reproductive health, including lactation. A new medical and moral literature encouraged fathers to closely supervise infant feeding on the premise that left to their own devices, incompetent or vain women would endanger the welfare of their offspring (Schiebinger 1993: 407). Mothers were accused of sending out their children to be nursed
by “mercenaries” so as to preserve their figure or not miss out on worldly pleasures. Wet nurses, typically recruited in the lowest rungs of the social hierarchy — peasants, immigrants, and slaves — were vilified as indecent and dangerous creatures. Human milk came to be seen as the only “natural and most proper food for infants,” every child needing to be “suckled by its own mother” (Lindemann 1981: 381). This male control and the medicalized discourse that justified it constructed breastfeeding as a quintessentially womanly duty through which women could be policed and subordinated. This gendered and naturalist view remains alive today, including in major breastfeeding advocacy and legal initiatives which assume that only “mothers” breastfeed, using their own milk, leaving out not only male, transgender, and non-binary breastfeeders from their agendas, but also cross-nurseries or those using donor human milk.

2. Equal Parenting

In contemporary times, men’s interest in egalitarian parenting can translate as less breastfeeding, rather than more. This is the case because formula is commended as allowing fathers to participate in infant feeding on an equal footing. Many a woman reports choosing formula from the beginning, or deciding to switch to formula “as an effort to share the labor of infant feeding” (Boswell-Penc and Boyer 2007: 561). Anthropologist Penny Van Esterik (1994) points out that the breast or bottle debate reveals contradictions inherent in feminist theory. From a feminist perspective, breastfeeding can be seen both as a form of empowerment and oppression for women — as asserting the value of women’s productive and reproductive work or as reinforcing the biological determinism feminism has sought to eschew. Reflecting this ambivalence, feminist research and advocacy has exhibited an oscillation between two poles.

On the one hand, a maternalist orientation, sometimes using the language of difference feminism, identifies pregnancy and childcare as central themes of political fight for women. Liberation consists for women in empowering themselves as mothers with specific needs and interests, including breastfeeding. Breastfeeding is women’s particular embodied caregiving, which should be protected and promoted by requiring accommodations in the work place and in the family. Bottle-feeding, in that view, is a chimera of gender equality, as it ignores women and children’s interests while furthering those of the male-dominated, speciesist market economy (Cohen 2017; Cohen, forthcoming). Bottle-feeding provides wealth and power to the men who control the dairy and baby food industries, perpetuating the traditional division of labor between men as producers and providers and women as reproducers economically and socially dependent on men. On the other hand, some strands of equality feminism focus on women’s self-realization both within and outside the family, free of repronormativity, gender differences, and ideals of motherhood. A top priority on the equality feminist agenda in the family context is undifferentiated parenting. In as much as breastfeeding is seen as an aspect of maternal experience that is not shareable with men, it is repudiated as an ideological practice that maintains women’s subordination (Blum 1995).

Both these discourses, however, contribute to maintaining the female gendering of breastfeeding in a way that excludes gender diverse parents and caregivers. If, as this
chapter argues, breastfeeding can be ungendered, neither female breastfeeding nor bottlefeeding should be seen as panaceas for women’s equality and empowerment. The road to equality lies in opening up breastfeeding to people regardless of sex or gender.

Conclusion

Mapping out different ways of thinking about lactation in a typology moving from the biological to the cultural, I have outlined some of the ways in which lactation and breastfeeding challenge sex, gender, sexual orientation, and species oppositions. To subvert the powerful heteronormative female coding of lactation, a substantial part of the chapter focused on identifying “male” forms of lactation and breastfeeding. The objective was not to reinforce oppressive dualisms such as male/female, culture/nature, human/non-human, or hetero/homosexual. Quite the reverse, my purpose is to suggest that lactation in animals, including humans, manifests itself as phenomenon with a high degree of flexibility and variability. There is no single “natural” mode of lactating and breastfeeding one’s young. Lactation and breastfeeding are multidimensional behaviors, which can be ungendered.

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1 In what follows, whenever I use the term “parent,” it is with the assumption that the term includes caregivers who do not consider themselves as a child’s parent (or who are not legally parents) but play a

2 As I explain in Part II, this chapter is limited to lactation and breastfeeding in the context of infant-feeding rather than addressing adult nursing or other forms of “queer breastfeeding.”

3 In that sense, “male breastfeeding” does not include male-to-female trans persons who breastfeed.

4 The term nipple confusion refers to an infant’s difficulty in latching and suckling on the breast after bottle feeding or other exposure to an artificial nipple.