

**Accumulating Cares:
Women, Whiteness, and the Affective Labour of Responsible
Reproduction in Neoliberal Times**

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Abstract

This thesis examines contemporary popular and news media representation of motherhood and labour in Canada and the United States. I explore what texts about motherhood and maternal labour suggest about gendered responsibilities to citizenship in neoliberal conditions. Building on important feminist research in the fields of citizenship, care, and the welfare state, I ask how are mothers being *socially* responsabilized toward multiple forms of labour simultaneously and to what effect? By engaging feminist theories of citizenship and bridging this field with feminist theories of science, media, and affect, I demonstrate how, under neoliberal conditions and in precarious circumstances, the ways in which women appear to juggle their commitments to paid and unpaid labour, determines how mainstream discourses reflect their value as citizens. This dissertation uses feminist critical discourse analysis to assess how, as women are responsabilized toward unpaid intimate work in newly empirical ways at the same time that they are encouraged to pursue career success in full-time paid employment, contemporary women in Canada and the United States are encouraged to rise above welfare retrenchment and inadequate provision by juggling “it all.” My thesis is an intersectional feminist project that interrogates questions of gendered citizenship and maternal affect, and I join feminist political theorists in applying pressure to the field of citizenship studies to centre reproduction in discussion of gendered welfare.

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Introduction

When I started my PhD in feminist and gender studies in 2010, Facebook COO Sheryl Sandberg gave what would become her tremendously popular 15-minute TED talk, “Why we have too few women leaders.” In her lecture, she told a room full of women in blazers that we have a major problem of women not making it to the top of any profession anywhere in the world. Its sister problem is that women face harder choices than men between professional success and personal fulfillment. By personal fulfillment, she meant motherhood. To the problem of personal fulfillment, Sandberg admitted she does not have the answer, though she knows well the feeling of her daughter wrapped around her leg, begging through tears for her not to get on the plane.

These problems are familiar by now, but rather than discussing known ways out, like universal child care programs, parental leave, and pay equity legislation, Sandberg spent the rest of her talk explaining women’s self-defeating behaviours. While she advocated for women’s career success, Sandberg was careful not to comment on structural discrimination or disadvantage, instead pointing to the individual woman whose responsibility it is to sort out her own learned behaviours. Even though Sandberg’s talk was based on women’s squeezed position between work and family responsibilities, and the emotional burden women inherit as a result of striving for success in both of these realms simultaneously, she attributed no material cause or solution to this phenomenon, and she avoided naming it. In neglecting structural oppression and

institutionalized inequity, as well as the complicated and often precarious status of mothers in paid employment, Sandberg was and continues to be careful not to ruffle the feathers of anyone who currently has power, instead making this a problem of many individual women that requires individual women's solutions.

Sandberg was not alone in highlighting this problem of mothers' conflicting responsibilities, particularly from the perspective of high-achieving corporate women. She simply came to represent what Joan Williams and Rachel Dempsey have since dubbed the "rise of executive feminism."¹ And while we might not expect that after decades of feminist research and activism around women's disproportionate labour burdens and mothers' career disadvantage, Sandberg's individualist recommendations would be taken seriously, never mind become so popular, her talk struck a nerve. Sandberg's subsequent book, *Lean In: Women, Work, and the Will to Lead* (2012) became an instant bestseller, with reviews and commentary in major newspapers and talk shows across the continent. In 2013, Sandberg launched LeanIn.org, a powerful non-profit organization that "encourages women to continue to be active and ambitious in their careers even as they start their families." Clearly, Sandberg hit on a real problem to which women thirst for answers. The question becomes, though, if Sandberg and friends are struggling to lean in one direction or another, what does this mean for women with far fewer resources and supports? Adding to the mystique of Sandberg's project, she is outspoken about her identification with feminism. What does it mean to encourage mothers toward corporate success as a form of feminism?

¹ See Joan Williams and Rachel Dempsey, "The rise of executive feminism," *Harvard Business Review*, 28 Mar 2013, retrieved January 20, 2015, <https://hbr.org/2013/03/the-rise-of-executive-feminism>

Over the last decade, we have been confronted with depictions of women straining to juggle their various responsibilities. We have also been presented with directives and strategies around how women might navigate mothering and paid work, including discourses of how and when to become a mother, how best to mother, and how or if to try to balance motherhood and career ambition. Across numerous, seemingly divergent mediated sites, including popular film and television, social psychology publications, political campaigns, consumer advertising, and scientific reports, we can discern an elaborate public discourse on what motherhood and work now entails, and what women should do about it.

The fact that we are seeing the labours, or responsibilities, of this “juggling mother” subject still debated, with a branch of the mainstream discussion now framed in a uniquely “executive” way by Sandberg and her contemporaries, got me thinking—why, after decades of feminist struggle and some, if minor, quantifiable shifts in social attitudes around gender and parenting, is the mainstream conversation about overburdened mothers still about what they should be doing as individuals for the good of themselves and their families? My examination of representations of motherhood in the seemingly disparate media literatures mentioned above raises a number of subsequent questions. What are mothers now being asked to do to be considered responsible parents and responsible workers? What are young women being encouraged to do with regard to their fertility and reproductive labour? What are the implications of our precarious social, economic, and environmental climate for different women’s wellbeing and the wellbeing of their families? What are the material and emotional consequences of our contemporary representation of an exclusive (or “executive”) motherhood for women who are not represented—who fall outside of what is considered responsible reproduction based on their social position? And in all

of these questions, what is the *affect*—or what are the feelings circulating within and between women as a result of their multifarious labour burdens—of contemporary motherhood, and what does this affect tell us about how we think about women, work, reproduction, and responsibility more broadly?

Simply, my guiding question is this: how are mothers being socially responsabilized toward multiple forms of labour simultaneously and to what effect?

Through critical discourse analysis of a wide range of contemporary representations of motherhood and labour, I am observing a cultural preoccupation with women's responsibilities, particularly in the historical situation of the contemporary North American context, that emphasizes women's personal responsibility for their children's health, emotional well-being, and future contributions to society, as well as their families' financial stability. I am also noticing renewed discussion of the intricacies of women's domestic labour, what feminist citizenship theorists term "care work." This public discourse of motherhood and labour differs from past and even recent conversations about the intersection of paid labour and care and domestic labour because it occurs in a complicated context: of women surpassing men in university enrollment and entry-level high-status professional fields like medicine and law; among some generational shifts in attitudes about gender, parenting and paid labour; at a time when middle-class families are outsourcing more aspects of care work than ever before; and in the general environment of global economic insecurity and labour precariousness. What emerges from my collection of contrasting texts is that the ways in which mothers, and young women who might become mothers, are responsabilized toward multiple forms of paid and reproductive labour

simultaneously are insufficiently documented and understood, particularly in terms of their affective components and consequences. In other words, when we are accounting for women's multiple labour responsibilities, the affect of motherhood is underappreciated, so we are unable to fully account for its consequences. In this dissertation, I will discuss the affect of motherhood, or women's affective citizenship, in two ways: in terms of the feelings circulating within and between women as a result of their multifarious labour burdens, and in terms of the specific affective labours that women are encouraged or expected to take on for responsible reproduction.

My use of the term “responsibilization” builds on George Parker’s (2014) concept, “maternal responsibilization,” which is the process by which mothers’ behaviour is regulated through public health interventions that seek to manage risks to health and society. Parker (2014), extending Foucault’s notion of power in governmentality, argues that the public health framing of a moral panic of “child obesity” reveals a technique of maternal responsibilization whereby we evaluate “good mothers” based on their children’s bodyweight—obscuring the structural inequalities that constrain women’s ability to mother. I am interested in how processes of responsibilization circulate and are generated socially—inside and outside of public health agencies—and how this responsibilization is a form of affective labour that disproportionately burdens and stratifies mothers. I build on Parker’s definition of responsibilization throughout this dissertation, extending the claim that today’s “average mother” is responsibilized toward maternal labours and paid labour simultaneously—the navigation of which is a form of responsibilization itself.

Seeing that this is a conversation about cultural expectations of women's labour, I take women's relationship to the nation as citizens as the starting point for my interrogation of how women are responsabilized toward reproductive and paid labour. I begin here because, as theorists of feminist citizenship show, contemporary divisions of labour are institutionalized in welfare state provision and firmly established in the national imaginary, and while attitudes about women's roles and responsibilities have shifted in some ways since the birth of welfare settlements in the post-WWII period, modern welfare states still presume and prescribe a gendered division of citizenship responsibilities. Using this theoretical point of entry, below I detail my argument and define its terms from a feminist citizenship perspective.

The central argument of this dissertation is threefold: (1) Women are *socially responsabilized*—or encouraged to accept, through a host of cultural texts, a sense of personal responsibility for curing social ills beyond their control—toward many forms of work in new and insidious ways in this age of economic precariousness and global insecurity; (2) Women are disproportionately inheriting the emotional burdens of neoliberal capitalism and are in turn encouraged to be flexible and resilient—producing a subject position I call *undone mothers* and a duty I call *responsible reproduction*; and (3) Women's particular affective conditions and responsibilities to the nation as caring, maternal bodies—what I call *mothers' affective citizenship*—is insufficiently addressed by theories of gendered citizenship so that this affective labour is not truly realized in strategies for de-gendering or redistributing care work. In the chapters that follow, I illustrate the first two pillars of the thesis to demonstrate the third. In other words, by analyzing representations of women's responsibilities and their affective content using scholarship that has underscored women's responsibilities for care in particular, I am able to

reveal how little we assert about an affect of motherhood, or women's affective citizenship, though we might already feel and know it deeply.

Throughout this dissertation, I rely on key definitions of a number of established yet contested terms, including feminist citizenship, responsibility, labour, and care work. Feminist citizenship theories are particularly relevant to my line of questioning because the language of citizenship, including individual responsibility, duties, rights, and social roles, frequently appears in mainstream discussion of motherhood labours. For example, women's work-family conflict is routinely discussed in the media in terms of women's competing "responsibilities."²

Breastfeeding is also a popular topic in media discussions of women's labour, and is frequently presented in terms of women's "right" to breastfeed in public³ or at work, or in terms of a child's right to be fed. The language of "duty" as in "domestic duty" is also familiar.⁴ It is therefore necessary for context that I explain what I mean by a feminist analysis of gendered responsibilities to citizenship. This is not a complete literature review of theoretical concepts—that comes in the next chapter. Here I provide a brief introduction to feminist citizenship theories and close with a roadmap of the chapters and concepts to come.

Feminist Citizenship

² E.g., in a 2013 *Globe and Mail* article, the author discusses women's "responsibilities" to home and work. See Brianna Iverson, "Ten time management tips for working moms," 10 May 2013, *Globe and Mail*, <http://www.theglobeandmail.com/report-on-business/small-business/sb-tools/top-tens/ten-time-management-tips-for-working-mothers/article11822811/>

³ E.g., Naimh Scallan, "Breastfeeding mom wants apology from daycare that asked her to leave infant room," 16 Nov 2012, *Toronto Star*, http://www.thestar.com/news/gta/2012/11/16/breastfeeding_mom_wants_apology_from_daycare_that_asked_her_to_leave_infant_room.html

⁴ E.g., Jodi Kantor and Jessica Silver-Greenberg, "Wall Street mothers, stay-home fathers," 7 Dec 2013, *New York Times*, http://www.nytimes.com/2013/12/08/us/wall-street-mothers-stay-home-fathers.html?pagewanted=all&_r=0

Citizenship, in the broadest definition of the term, involves membership in a community as well as a degree of loyalty to that community (Marshall 1950). It also promises basic rights and requires certain obligations to the community. These rights and obligations are complicated by identity, culture, and place (Lister 2002). Feminist citizenship theorists have shown that various interpretations of what counts as rights and what counts as obligations, and in particular the contractual relationship between rights and obligations, have resulted in unequal access to civic participation, especially for women and particularly for racialized women, migrant women, and women with disabilities (Lister 2002). To give a simplistic example of how this could play out, if citizens have a duty to work for pay as a means of guaranteeing their right to secure housing, people who do not work for pay for any number of reasons are not guaranteed a place to live.

Citizenship is a highly contested term, both theoretically and practically, and the definition and operation of citizenship is a major point of contention between competing political interests, even within feminist approaches (Lister 2002). As the foundation of postwar welfare settlements, ideas about citizenship—what it requires and guarantees, and how it organizes society—are central to feminist arguments about contemporary inequality, social justice, and divisions of labour. In recent decades, feminists have examined how states have worked to reconfigure modern citizenship regimes from their postwar configuration to undercut the abilities of citizens to represent their concerns (see Jenson and Phillips 1996; Tronto 2013). Since I am concerned with how mothers are socially responsabilized through contemporary representations, I touch on a specific predicament within feminist citizenship studies: the question of the *responsibilities* required by mothers under contemporary citizenship and their balance against citizenship *rights*—or, as I see it, their balance against mothers’ access to state power. Even more

specifically, I engage the argument that when we discuss women's specific responsibilities, we mean their duty to provide care.

Nearly all modern welfare states developed under the model of the male breadwinner at a time when public and private spheres were strongly demarcated (Lewis 1992). In this model, women received welfare assistance as wives and mothers (i.e., unpaid labourers) and men, presumed to be paid workers, were the main beneficiaries of social insurance (Lewis 1992). These social roles evolved alongside the “development of industrial capitalism and the organization of social reproduction,” with “women as bearers of children and as reproducers of culture” (Williams 1995, 147; see also Yuval-Davis 1997). Of course these roles are linked to ideals of nation and nation building, which are racialized and steeped in past and ongoing colonialism (Puar 2007, Razack 2008, Thobani 2007, Yuval-Davis 1997).

Feminist citizenship first became important when Fiona Williams (1995), in her groundbreaking work “Race, Ethnicity, Gender, and Class in Welfare States,” argued that classical citizenship theories “focus upon the state-market relationship does not systematically account for the significance of the family in this relationship, especially the extent to which social policies free women from caregiving and domestic responsibilities or redistribute responsibilities more equally within the home” (132). Williams outlined three concerns for feminist citizenship: generating more complex inquiry into social differentiation in the welfare state, applying this inquiry to the relatively class-centred study of welfare regimes, and exploring shifts in welfare regimes under neoliberal conditions. She outlined the relationships between nation, work, and family, urging political theorists to acknowledge how these meanings are constructed and how

they imbue social relations of power and divisions of labour by race, class, and gender. Drawing on Esping-Andersen's (1990) renowned work on welfare states and capitalist development, Williams argued that such a classical analysis, in its focus on labour and production, fails to consider gender and race and their relation to class, disability, and age, along with "associated issues of production, social and biological reproduction, paid and unpaid work, national and international divisions of labour, and the political discourses surrounding these" (n.p). Prior to this intervention, the universal "citizen" in political theory was a male, white, able-bodied, employable, and voting individual who relied on the unpaid labour of others to support his contributions.

Williams' work is still relevant, as we have seen little shift in caregiving responsibilities and family policies since the mid-1990s, though we have seen an evolution of her major ideas to include rich analyses of the gendered, racialized and classed distribution of domestic labour, or "care work," as well as frameworks for improving the status of care work through a civic ethics of care. I detail these specific developments in the next chapter's literature review. To give some context here, contemporary theorists of feminist citizenship are fundamentally concerned with the unequal social division of labour and systematic divisions of power along lines of gender, race, sexuality, class, ability, and migrant status. They engage in a range of issues and strategies around social inclusion, political participation, and transnational rights and mobility out of concern for the gendered or sexual divisions of labour and the subordination of women of colour. Leah Vosko (2010) has respectively termed these phenomena the "gender contract" and the "precariousness" of racialized migrant workers. For Vosko and many others (Arnot 1997, Kershaw 2010, Ong 2006, Orsini 2007, Robinson 2011, Tronto 2013, Williams 2010, Young

1997, Yuval-Davis 1997), domestic labour, or care work, and the role that states play in distributing this labour unequally by race, gender, and class, is an essential concern. The temporal conditions of paid versus unpaid labour have also become important. Vosko (2010), following Everingham (2002), explains that the gender contract “pivoted on a dichotomous conception of time in which ‘time allocated to the employer in exchange for a wage’ was defined as ‘time spent at work,’ whereas ‘time spent in the private sphere’, including responsibilities attached to biological and social reproduction, was supposedly ‘free.’” I bring forward this historical notion of domestic labour as free time, which appears in contemporary arguments to increase individuals’ “leisure” time for care work (see Kershaw 2005). Vosko also demonstrates the “state-sponsored erosion of the standard employment relationship” (Vosko 2000, 9), which I carry forward as I consider how women and men are responsabilized to be flexible and resilient in the face of insecure and piecemeal labour. I also consider the Canadian context where, based on maternity leave included under employment insurance for disability, women workers who leave paid employment for maternity leave are viewed as temporarily acquiring a legitimate disability that prohibits them from working. To overcome the stigma of hindering workplace productivity, they are framed as requiring and deserving “accommodation,” which, from a critical disability perspective, puts women’s maternal bodies as irreconcilable with productivity and the “normal” capitalist worker in ways that relegate differently abled bodies to the margins of society.

Even though feminist citizenship studies is now an established body of literature, as recently as 2013, *Citizenship Studies* published a special issue called “Reproduction and citizenship/reproducing citizens,” in which editors Sasha Roseneil, Isabel Crowhurst, Ana

Cristina Santos, and Mariya Stoilova declare, “Whilst the politics of reproduction have been at the heart of feminist struggles for over a century and a half, their analysis has not yet come to occupy a central place in the interdisciplinary study of citizenship” (2013, 901). They argue that while there is now a substantial body of feminist and queer literature that contends with familial relations and the political and practical contestations of reproduction and citizenship—including challenges to traditional understandings of citizenship that affirm a neat divide between public and private, personal and political (see Pateman 1988, 1992; Lister 1997; Yuval-Davis 1997)—“mainstream” (i.e., male-centric) citizenship scholars are not compelled to pay explicit attention to reproduction. As such, “the biological, sexual and technological realities of natality, and the social realities of the intimate intergenerational maternal and affective labour that is generative of citizens, and that serve to reproduce membership of, and belonging to, states, nations, societies and, thus of ‘citizenship’ itself, have largely remained marginal to ‘citizenship studies’” (Roseneil, Crowhurst, Santos, and Stoilova 2013, 901). The special issue of *Citizenship Studies* demonstrates that only by thinking through political contestations of reproduction and citizenship, be it in terms of feminist, gendered, inclusive, sexual, biopolitical, intimate, or embodied citizenship, will discussions underscore the state’s involvement in reproduction and women’s reproductive rights as central to their citizenship. This dissertation takes up their call to deepen research on this vital topic as I show that when even the most privileged women appear face a crisis of maternal wellbeing, many differently disenfranchised women are positioned to fail.

Recall that my primary goal is to interrogate how women’s responsabilizing is happening and to what effect. I hypothesize that if even the most privileged mothers are coming undone by

affective pressures in this age of global economic insecurity, mothers who are already in disadvantaged social positions are both set up to fail and destined to be deemed undeserving of help. In studying how motherhood is represented *socially*—in popular culture texts, biomedical research, political campaigns, and social psychology—I aim to illustrate some techniques of the cultural disciplining of contemporary motherhood, particularly how women are induced toward what I call “responsible reproduction,” which I define as having the “right number” of children at the “right time” and under the “right circumstances.” It is well understood that women living in welfare states like Canada and the United States are unfairly burdened and inadequately supported by the state when it comes to unpaid work (Lister 2003, Robinson 2010, Vosko 2010). But the ways in which women are charged with reproductive labour and paid labour simultaneously are clearly affective and embodied, and we do not yet have the vocabulary to describe and explain how the affective burdens of care work are transmitted to and circulated by women. I document the vocabulary we do have, following scholars of care work, gendered labour, human reproduction, and motherhood, and then I suggest the possibilities opened up by developing the two-pronged concept of women’s affective citizenship. In studying contemporary *representations* of motherhood across popular discourse in the context of these welfare states, I consider both how women are induced to take on various forms of paid and unpaid labour as well as how an affect of motherhood works to define what and who is responsible and deserving when it comes to women, family, and well-being.

Chapter Summaries

As mentioned above, this dissertation interrogates techniques of the social responsabilizing of motherhood by exploring contrasting collections of popular or mainstream texts. Chapter 1 gives the conceptual and analytical tools that construct this inquiry. I present a review of theoretical literatures, focusing on a particular strand of feminist citizenship literature that theorizes the gendered, racialized, and sometimes ableist nature of care work, and then drawing in feminist theories of affect and feminist science studies of human reproduction to show how these three sensibilities operate through representations of motherhood to persuasive effects. Here I suggest that feminist citizenship conceptions of care work require theories of affect and science studies, as well as a critical disability approach to caring and autonomy, in order to fully appreciate women's contemporary labour burden. This multi-theoretical approach is necessary to evaluate how the work so involves both reproductive labour and expectations of emotional management work—like concealing stress about children when at work, or mentally strategizing care work outside of the time spent doing it. And both of these elements of labour are more challenging to measure than traditional means of counting work, like time diaries. In 1983, Arlie Hochschild's *The Managed Heart* coined the term “emotional labour” and has inspired a vast body of twenty-first century sociological research, particularly in studies of interactive work and individuals' emotional reactions to their labour (Wharton 2009). Here I build on sociological conceptions of paid and unpaid care (England 2005) to theorize emotional labour as an emergent theory of care work. Theories of affect assist in bridging sociological and feminist citizenship research on care to understand the uniqueness of gendered burdens in the contemporary context of juggling labours. Queer theories of affect in particular give special insight to the systems of power operating through incitements to care. In Chapter 1, I also detail my method of critical discourse analysis.

The following substantive chapters, chapters 2 through 5, are organized into “cases,” which respectively form an archive, or an “anti-archive,” as I explain further in the methods section of Chapter 1. In Chapter 2, I turn to recent scholarship on representations of mothers in popular media. I then systematically examine representations of motherhood in popular news media and film over the past five years, identifying the “average mother” by her social location and responsibilities (for paid and unpaid labour). In examining what “average mothers” are being asked to do (and be) in contemporary popular culture and comparing these representations to news media about “real” motherhood, I demonstrate how “ideal” mothers are imagined culturally and how this fictional “average mother” circulates in news stories about real mothers and motherhood to disciplinary effects.

Continuing my investigation into how mothers are socially responsabilized, in Chapter 3 I turn to representations of mothers in biomedical research around infant feeding. As Chapter 2 shows, infant feeding is a central topic of popular media discussion with regard to contemporary motherhood and responsibility. It is also the topic of widespread feminist debate, and it reappears in political discussions of women’s formal rights and responsibilities, especially as a linchpin in discussions of state provisions for mothers. It is also a practice that is obviously embodied, which mainstream conversations deal with in different ways, though they almost always mention the affective sensations of breastfeeding for women and infants. In detailing women’s responsibilities according to “scientific parenting,” this chapter moves women’s responsabilization from popular cultural representations to the concrete prescriptions of biomedical data. I suggest that breastfeeding research in particular, as it is deemed politically

neutral in the biomedical community, responsabilizes mothers to cure social ills that are unrelated to infant feeding and requires mothers to engage in unsupported unpaid labour. Breastfeeding literature is just one case of how mothers who refuse to comply with scientific evidence are deemed not only ignorant or selfish, but also socially dangerous. Given that reduced breastfeeding rates intersect with race and class, these taboos give rise to inferential forms of racism and ableism.

Chapter 4 builds on this synthesis of biomedical literature on breastfeeding to show how state-sponsored political campaigns for public health mobilize scientific research in ways that bind individual mothers' responsibilities to family (unpaid domestic labour) to women's responsibilities to the state (*vis-à-vis* responsible reproduction), forming an overwhelming affective condition. An interrogation of representations of motherhood in breastfeeding advocacy campaigns shows how public health agencies imagine mothers and motherhood, and how state-sponsored advocacy categorizes women into deserving and undeserving citizens based on their mothering practices. Mothers who are not responsabilized toward breastfeeding (i.e., those who do not have a "legitimate disability") are rendered ignorant, stubborn, risky, or unentitled. This chapter, as it shows mothers tied to bodily, unpaid care labour, provides a twist in the thread from Chapter 2, which details how we imagine the modern mother to "have it all" and pursue the gender-neutral (neoliberal) citizenship ethic of "adult worker." I draw out this incoherence in Chapter 5.

Social psychology studies on maternal well-being complicate how motherhood is culturally represented and what mothers are asked to do to both cure social ills and afford their

belongingness as deserving citizens. In Chapter 5, I trace both representations of maternal happiness in popular editorials and social psychological studies on parenting and well-being. I interrogate this dialectical relationship using affect theories of the promise of maternal happiness. Popular representations of the “average mother” from chapter 2 suggest that while women may experience conflict between their paid and unpaid responsibilities, *some* women are nonetheless reasonably “happy” to juggle their commitments. Borrowing from Berlant (2004), I posit that mothers are in a cruelly optimistic relationship to their own fertility and their family’s wellness, since balance is always out of reach. That is, mothers hope and strive toward wellbeing for their families even though it is unattainable, making their relationship to their reproductive labour frustrating, ambivalent, and ultimately depressing. As I show in my comparison of media representation of women in the context of the so-called “fertility crisis”—reduced fertility rates among white, over-30, college-educated women—and studies on women’s well-being, another technique of responsabilization emerges: women’s responsibility to be happy and generate happiness *as mothers and workers*. Through this lens, unhappy mothers and women who refuse to become mothers are deemed a detriment to progress, national security, and cultural harmony.

In the conclusion, I return to the central question of this dissertation—how are women culturally responsabilized?—to assess its implications for thinking about *impossible responsabilizations*. I think about our “undone mothers,” how privileged women’s pursuit of the good life they are promised is their ultimate undoing as it is always floating just of reach. Women who have the resources to strive for “balance” and who have accepted this responsibility are thus “undone mothers”—unraveling in frustration and despair upon realizing impossible responsabilizations. I also reflect on how responsible reproduction exalts some women and not others. Some mothers

will not be undone because they are not considered equipped to pursue the good life in the first place. I question if these mothers might harbour radical potential since they cannot be socially responsabilized to cure the social ills of others. What happens when failing mothers refuse personal responsibility? Can they more readily reject the emotional inheritance of neoliberal capitalism? Can their subordination (or trauma, to use Cvetkovich [2003]) be partly harnessed as a source of power? Will struggling mothers find political solidarity? In the end, recording techniques of mothers' responsabilization—from paid to unpaid and emotional to conventional work—conveys which women are induced toward responsible reproduction and paid labour. It also opens the question of which women are left under the false protection of universal citizenship and asked not to reproduce for the “common good.”

Chapter 1: Review of Literature and Methods

It is said that a mother's work is never done. As adult women are encouraged and disciplined into paid labour under ableist neoliberal conditions (Daly 2011, Giullari and Lewis 2005, Lister 2003), as public panic circulates around the reduced fertility rates of some women and not others,⁵ as middle-class domestic labour is increasingly outsourced (Glenn 2010, Hochschild 2012, Tronto 2013)—often to underpaid migrant women (Mohanty 2013, Torres, Spitzer, Hughes, Oxman-Martinez and Hanley 2012, Vosko 2010, Williams 2006)—the sexual division of labour and dated models of welfare provision remain stubbornly entrenched (Hochschild 2013, Kershaw 2005, Lister 2003). In these unwinnable circumstances, women's labour burden remains complicated, invisibilized, and inadequately understood, and women's responsibilities remain riveted to a responsibility for care.

Care is one of the key activities joining state and society, and its provision affects a series of social arrangements (Daly 2002). As we have seen in the Introduction, my work builds directly

⁵ Douglas Todd for the *Vancouver Sun* bolstered racist anti-immigration sentiment, warning readers about the relatively high fertility of Muslim, Hindu, and Sikh women in Metro Vancouver compared to their Christian counterparts. See, "High birthrate among immigrant women has implications for Canada," *Vancouver Sun*, August 8, 2013, accessed November 27, 2013, <http://www.vancouversun.com/life/High+birthrate+among+immigrant+women+implications+Canada/8766093/story.html>. This sentiment mirrors the white supremacist fringe publication, *The New Observer*, which echoed racist anti-immigration sentiment in, "If White Americans don't start having babies, the US will vanish by 2011," *New Observer*, 4 Sept 2013, accessed November 27, 2013, <http://newobserveronline.com/if-white-americans-dont-start-having-babies-now-the-us-will-vanish-by-2100/>.

on feminist conceptions of care work, which allow me to think about what contemporary representations of motherhood and work tell us about how contemporary women are induced toward multiple labour responsibilities. To approach this quandary, I put theories of feminist citizenship in conversation with theories of affect and feminist science studies, which together allow me to analyze the multiple discursive threads—particularly threads related to “best practices” of motherhood, as well as women’s emotional and management labour—operating through representations of motherhood. In bridging theories of affect and feminist science studies with feminist citizenship theories, I am able to analyze the embodied, emotional, and sentient aspects of care work in new ways, and draw out how representations of motherhood show women oriented toward responsibilities that are grounded in shaky evidence. In this chapter, I situate the concepts of care work, maternal affect, and feminist science analysis of human reproduction theoretically so that I can develop my analysis in subsequent chapters. I begin by signaling a few ways in which theorists within feminist citizenship studies are thinking about women’s relationship to state power and their social, reproductive, and labour responsibilities. I then situate theoretically the specific components of affect theory and feminist science studies that I use to deepen my engagement with feminist citizenship notions of care. I close by detailing my methodology, notably the basis upon which I have chosen each text for this archive and how it features in representations of contemporary motherhood.

The language of citizenship, rooted in civic republican and liberal traditions, frequently appears in mainstream discourses of motherhood in contemporary North America. Its affective and orienting qualities are thus of special relevance to this dissertation. As I alluded in the Introduction, theorists of feminist citizenship aim to show how citizenship discourse is

institutionalized in welfare settlements and embedded in cultural values. My examination of how mothers are represented *socially* (i.e., in cultural artifacts), and its responsabilizing effects, suggests that mothers are disciplined in insidious, symbolic ways not adequately considered in the study of social policy and welfare states. Following bell hooks (1996) and other critical feminist cultural theorists (Halberstam 1998, 2011, Hall 1997, Katz 2013, Mukhopadhyay 2008) I understand mass media texts to represent and reproduce intersecting systems of oppression. My feminist citizenship project takes seriously how mothers are represented with respect to their citizenship responsibilities and how these are both shaped by social hierarchies and shape understandings of what mothers should do. Before I elaborate key debates in feminist theories of care work to situate my examination theoretically, I turn now to briefly outline the contractual relationship of citizenship and notions of responsabilizing (elsewhere called inducing or incentivizing), as these concepts feature prominently in debates about care and gender and are important terms going forward. Gendered social contracts and individuals' responsibilities as citizens lay the foundation for feminist theories of care.

Contractualism

In the context of an “explosion of interest in the concept of citizenship” in the 1990s (Kymlicka and Norman 2000, 5) and increased attention to “civic virtues and the social duties they imply” (Kershaw 2005, 2), male-centric citizenship theorists identified a lack of “citizens’ willingness to accept responsibility for personal choices that affect the broader community and environment, particularly with respect to economic demands on the state” (Kershaw 2005, 2). In response to widespread critique of a “rights bias” of contemporary citizenship, where rights were prioritized over civic virtue, and under conditions of welfare retrenchment and neoliberal individuation, the

literature shifted from a discourse of rights toward one of duties. This discourse that emphasizes duties first links eligibility for social entitlements to the fulfillment of social obligations (Kershaw 2005). Stuart White (2000) has called the contemporary focus on this primary relation of citizenship “welfare contractualism,” which Paul Kershaw (2005) contends is rising in significance in contemporary civic republican as well as liberal (and neoliberal) conceptions of how to govern society.

The resurgence of interest among citizenship theorists in the contractual relationship between rights and responsibilities concerns some feminists, who warn of the danger that “rights can be fundamentally compromised if they become subservient to specific obligations” (Lister 2003, 23). However, tracing the individualist ethos of “no rights without responsibilities,” Kershaw (2005, 4) argues that, rather than being dismissed as the erosion of social citizenship, social obligations should be treated as a *condition* for social entitlement, to “integrate care as a constitutive responsibility and right of social citizenship that binds men as much as women.” Etzioni (2000) and Lister (2003) have disagreed, calling for a disarticulation of rights from responsibilities. Lister (2003) argues that rights and responsibilities cannot be contractual in the sense of *conditional*; they can only be *reciprocal*. Still, aiming to expand beyond rights from, and responsibilities to, the state toward notions of transnational justice, Lister (2003) and others (Mayo 2005, Ong 2006, Robinson 2011) have retained the language of citizenship—including the language of rights and responsibilities—as a means of promoting global citizenship, since this language implies that richer nations have a responsibility to nations with fewer resources to guarantee rights to their citizens. It is for this reason, and because the citizenship discourse on

roles and responsibility is so commonplace (and normalized) in popular discussions of motherhood, that I also preserve the language of responsibilities and responsabilizing.

It is here that my analysis picks up, as I am concerned with women's obligations or responsibilities of citizenship. But unlike important recent feminist projects seeking to shift responsibilities for care work to the centre of theories of democracy (Kershaw 2005, Tronto 2013), I am concerned with *how* women, particularly mothers, are currently *responsibilized toward accumulating cares under the precarious conditions of neoliberalism* and in the context of numerous forms of global insecurity. My research will draw out commonplace and thus sometimes imperceptible forms of responsabilization toward multiple forms of labour, contributing new understandings of reproductive labour to feminist work on social policy and welfare states.

Acknowledging the constructed nature of the gender category “woman” and its construction in binary opposition with “men” (Beauvoir 1972 [1949], Butler 1990, Fausto-Sterling 2000), I also concede that the gender binary is frequently presumed to be coherent in citizenship literature and public policy, with negative and sometimes tragic implications for those who fall outside of the binary as well as those feminized people in the “lower status” category, since obligations and rights are attached to gender contracts under modern welfare models (Vosko 2010, Young 1997, Yuval-Davis 1997). In line with rigid understandings of gender are rigid assumptions of sexuality, where heterosexuality is sometimes taken for granted when discussing de-gendering care work. My research questions how—despite, and in some cases because of, categorical exclusions in public policy and stubborn culturally embedded divisions of labour—mothers are

encouraged to take on more and new forms of labour than ever. Mothers are also, as a condition of their social belonging, inheriting the emotional burdens of cultural individualism and an unstable economy—labour burdens that are underdeveloped in theories of feminist citizenship, which I will make plain in the next two sections.

If, in the words of Aihwa Ong (2006), contractual citizenship is mutating globally and responsibilities are becoming disarticulated from rights, what symbolic evidence do we have of women's contemporary responsabilization? If moral imperatives, civic virtues, and social norms are not dictating citizens' sense of obligation as much as they did before the emergence of corporatist welfare regimes (see Kershaw 2005, Williams 2004), how are these ideals of responsible reproduction circulating? And what are the implications for mothers and motherhood?

Responsibility

The notion of responsibility is crucial to feminist citizenship theorists' resistance of the sexual/gender division of labour. I define it here to ground the following in-depth discussion of care work. Joan Tronto (2013) asserts that democratic politics should centre on assigning responsibility for *care*, given that caring responsibilities are allocated based on nineteenth-century ideas about domesticity. They have developed through the partial professionalization and institutionalization of care work in the twentieth century (Duffy 2011), and the general marketization of care in the late twentieth and early twenty-first centuries (Federici 2004). Responsibility for care is a feminist political idea: it is about power, determined by who gets to sit at the table in decisions about divisions of labour and the distribution of welfare provisions. In

the traditional breadwinner model of welfare provision, the breadwinner receives a “pass” from unpaid domestic responsibility, as he is compelled toward full employment and political participation. The unpaid domestic worker receives a “pass” (or is legitimately excluded) from political participation, as she contributes to society by virtue of supporting a breadwinner.

At the foundation of strategies of labour redistribution and reforming gender roles around an ethic of care is the question, what are citizens obliged or socially responsabilized to do in the current climate, in which family forms, the division of labour, and the types of labour available are different than they were when postwar welfare states developed? Kershaw (2005) and, to an extent, Finkel (2006) show how social policy within contemporary “corporatist” welfare regimes like Canada (and the US) puts an emphasis on individual responsibility, which Lister (2003) argues gives evidence for how responsibility is currently synonymous with employment (as a precursor for rights). Kershaw identifies what he calls “moral hazards”—employment leave, employment standards regulating full-time work, and child care policy—that secure what Connell has called the “patriarchal dividend” (1995), from which men benefit from the subordination of women. Kershaw delicately carries forward Fraser’s (1994) universal caregiver model, recommending policy that will “induce far more men to modify their behaviour so that they can act like most contemporary women, who perform primary care work in addition to employment and other citizenry ambitions and responsibilities” (Kershaw 2005, 138).⁶ Recall

⁶ Here, Lister (2007) and Kershaw (2010b) become muddled when theorizing how to resist the gendered division of labour. They diverge on the question of what counts as an obligation and what counts as political citizenship: Kershaw (2005, 2010) aims to induce men to provide their share of care (to *carefair*) by responsabilizing care work for all, whereas Lister (2007) is hesitant to politically *oblige* a private-sphere practice. In other words, Lister (2007, 57) disqualifies care work as a political obligation, but admits that perhaps the more pertinent qualification for political citizenship is “*what* a person does and with what public consequences, rather than *where* they are doing it.” Lister may resist casting care work as political citizenship for a number of reasons, which I detail in the following section on *inducing*.

that in my research, I observe women's labour burden and excavate their social responsabilizing in contemporary society. While I support Kershaw's goals, I see this call to "induce men" to "act more like women" to signal poor understanding of women's responsabilization and gendered labour burden. This is why I turn my research questions to feminist notions of care work and citizenship. Illustrating how women are currently responsabilized—toward paid and unpaid labour, care and other market work—will support the thesis that these items and orientations must be rendered visible if they are to be redistributed.

Care Work

Although modern welfare states are built on normative gender assumptions around the division of care work, care services have become a target of reform in recent years, particularly in Europe and the UK (see Ciccio and Bleijenbergh 2014, Keck and Saraceno 2013, Kelly 2014). In a recent study of European childcare services, Ciccio and Bleijenbergh (2014) find that although women's paid employment has dramatically increased in past decades, this has involved only a minimal shift in normative *assumptions* about care. Child care provisions, which are aimed at raising "maternal employment in the context of social policies increasingly requiring that all individuals are self-supporting, active members of labor markets" (Ciccio and Bleijenbergh 2014, 51), continue to take for granted a traditional division of labour, even as they encourage women into the workforce. Even where women's paid work is supported by welfare reform, their gendered labour burden is implied.

This dissertation is concerned with the social responsabilization of mothers toward multiple forms of labour, including care work. While care is a contested concept (see Kelly 2013), Fiona

Williams (2006, 103) defines care work as the “activities and practices associated with meeting the needs of those who are unable to care fully for themselves, for example, younger people, older frail people, or people whose illness or disability is such that they need support for daily living.” The activities might be unpaid and carried out by a relative or friend inside the home, or they might be paid and provided through institutions or home-based services and volunteers. Care providers are mostly women, and through globalization and the marketization of care, middle-class, often white families increasingly outsource care from racialized migrant workers. Williams (2006) makes plain that the way societies organize care reflects a given society’s sense of the boundary between public and private responsibility.

We can see in Williams’ conception of care that inability to care for oneself is central to the care relationship. Williams’ definition of care has been problematized by disability scholars who assert that this focus on the carer over those who receive care, as well as attention to the gendered nature of care labour, gives insufficient attention to the power inherent to the care relationship (see Fine 2007). As Kelly (2013) theorizes in her auto-ethnographic study of her “frien-tendant” relationship with a friend with physical disabilities, support activities can blur the lines between informal private service and formal publically outsourced activities, and, given power imbalances and abuse, care can be defined as a form of oppression. Following feminist disability scholars (Clare 1999, Kelly 2013), I approach the definition of care with some ambivalence. I understand care to include the less easily measurable emotional and management practices associated with meeting others’ needs, and in some ways, meeting one’s own needs. I also espouse a vacillating sense of focus between feminist citizenship and critical disability notions of care when I deal with particular care practices like infant feeding, which require

intellectual sensitivity to the ableist assumptions around breastfeeding, but also require sensitivity to newborns as extremely vulnerable and requiring very specific kinds of care. Within this sensitivity, as this is ultimately a project about inconspicuous labour burden, I follow feminist theorists of care work or care ethics who disambiguate “care” as a strategy to lessen women’s disproportionate responsibility for care and corresponding dependency on social relationships for economic sustenance. Further, I (with Kelly 2015) consider that violence might be an inherent risk in care relationships, a wager that feminist citizenship theorists consistently overlook.

Feminists have long debated what constitutes “care work” as they grapple with the intricacies and intimacies of the emotional and material aspects of care. In the 1970s, feminist scholars generally conceptualized two components of care: *caring about* (as a “labour of love”) and *caring for* (unpaid labour) (Williams 2006b). They argued that women’s unpaid *caring for* was discriminatory, and demanded the state subsidize care provision for young and old (Williams 2006b). It is easy to see in hindsight why disability scholars have taken issue with the framing of “caring for” as discriminatory when care relationships can be fraught with harmful abuse of power by the carer. Caring is also a potentially dangerous job, as carers are threatened by violence from carees in some relationships. Disability theory has also provided a framework to interrogate notions of productivity and labour, which is helpful in turning the lens on cultural assumptions about women’s inherent ability to provide care.

In the 1990s, Joan Tronto (1993) moved beyond the *caring for* and *caring about* binary to define care by four interconnected practices: *attentiveness* (recognizing when care is necessary),

responsibility (responding to those needs by summoning responsibility), *competence* (meeting needs and demands), and *responsiveness* (recognizing relationship dynamics between giver and receiver). In doing so, she showed how, as paid work, “care work is different from other jobs. It involves face-to-face emotional sensibilities (listening, talking) and intimate bodywork (bathing, washing, lifting)” (Williams 2006b, 104). Still, while she highlighted the complexity of care work, her examination does not delve into the affective components of the labour as her political project is concerned with centering this labour in theories of democracy. What Tronto and Williams show us is how care work is thus fragmented in terms of tasks and their corresponding cultural status, and it is variously outsourced. In health care, the lowest-status jobs, which are frequently performed by racialized women, have to do with managing bodily functions (Williams 2006b). Such jobs are seen as “unskilled” and are matched by low pay and status in stark contrast to high-status caring jobs like medical doctor or therapist. Making care arguments complicated, though, Williams (2006b) argues that there is also a sentient aspect to bodily work: a sense of reward and satisfaction associated with providing care. Care is thereby associated with both exploitation and satisfaction. Given its complex affective components, I will thread Tronto’s concepts through my analysis of women’s responsibilization.

We can see that the concept of care work is embedded in one individual’s power over another—adult over child, abled over disabled (Williams 2006b). Disability movements in the 1980s focused on this element of care to advocate for independence and autonomy through the right to self-determination and the removal of disabling social barriers. These barriers included institutionalized ideas about medical and charitable professions excluding people with disabilities from decisions about their own bodies. As mentioned above, some contemporary

disability perspectives even reject feminist notions of “care” that focus on the carer, as they pass over the potential for abuse in care relationships (Fine 2007). Christine Kelly (2013) puts these bodies of literature in conversation through what she calls “accessible care.” Following Douglas (2010), Kelly asserts that,

Care is a paradox; it represents the failure of medical cure and neoliberal progress; it is a deep compassion and empathy; a highly intimate relationship; an institutionalized approach to disability; a transnational supply and demand of feminized labor; a dependency on state-funded programs; and so on. It is a tension among all of these definitions, none to be disregarded.

What this conceptualization of “care as tension” shows is that feminist care perspectives and a disability approach might be unnecessarily antagonistic. We might recuperate notions of care while acknowledging nuanced power dynamics and tension at the heart of the care relationship. Working together, we can access how and to what effect the multifaceted nature of care is matched by elaborate ways of fragmenting and managing care. Infant care in particular is a site of intimacy, privacy, and the intersection of state and individual responsibility. It is also an inescapable trap for the myth of the adult worker. Some forms of infant care can be outsourced and degendered, and others are a puzzle for this model. In recent decades, the outsourcing of care work reflects the trend of marketization; there is now a “growing care gap,” alongside social changes around women’s paid employment, an aging population, and concerns about work/life balance (Williams 2006). Surely it is vital to highlight the complex power dynamics involved in who provides care and who receives it, especially who is entitled to receive it and expected to provide it in the purview of contemporary attitudes. The care gap is also relevant to and complicated by new policy conceptions of care. For example, in Christine Kelly’s (2014) study of the Ontario Direct Funding program, she finds that independent living services depict interactions between attendants and self-managers as “not care,” when in fact independent living

services shift but do not eliminate a care relationship. This sort of invisibilized care relationship—or neglect to consider some components of care as such—and blurring of management and care labour persists in my discussion of women’s labour, particularly in chapters 2 and 5. Bringing managerial, attendant, administrative, and emotional work to the surface as work is a guiding aim for this citizenship project.

For feminist citizenship, care is the labour that structures social relations and hierarchies of power. Joan Tronto (2013), in her recent work on democracy, argues that “thinking about caring in its broadest and most public form, as a way in which a society allocates responsibilities, offers a substantive opportunity to re-open the closed, game-like political system to the genuine concern of citizens” (n.p.) She contends that “despite the deepening insecurities wrought by terrorist attacks and continued globalization under the conditions of neoliberalism . . . nothing will get better until societies figure out how to put responsibilities for caring at the center of their democratic political agendas” (n.p.). In Tronto’s view, positioning care as integral to a democratic society “requires that citizens take seriously the responsibilities for ‘caring with’ each other” (n.p.). For Tronto, the way care has entered the market in new ways has coincided with the way domestic life has reconfigured around homes themselves entering the market in new ways. She declares that a clear public/private divide, enshrined in the domestic cross-stitch “home is where the heart is” is a myth (n.p.). Of course the continued blurring of public/private has implications for how care can be variously distributed among paid and unpaid labourers. Instead of the private sphere holding private, intimate work, Tronto argues that the latest world economic crisis, precipitated by the credit meltdown of 2008, gives a revealing picture of how people view caring in relation to the private, formerly nostalgic place of their homes: homes are

the asset most likely to make money, no longer assured that they would make a decent living through salary. For Tronto, home is an investment more than a nostalgic attachment, and with this “unmooring [of] ‘home’” as a concrete way to think about human life, people are thinking differently about themselves—not as carers, family members, or providers, but as investors. Tronto shows that through a variety of means, including financial incentives like low-interest “home improvement” loans in the United States, which folks used as sources of income, “homes” have become something different from merely shelter or sanctuary. “Home as revenue” became a way to hold on to some economic security and reduce anxiety, at least until the economic crisis that began in 2008 (Tronto 2013). Even though homeowners bore the responsibility for exceeding their household incomes when banks were bailed out, the idea remains that individuals are investors in their shelter, what Tronto calls the “delusional values of home as revenue” (n.p.). In the meantime, care value has changed. These parallel notions of commodification—of home as revenue, of care as potentially outsourced, and of family members as investors—is important to my analysis of mothers being represented doing the management labour of running households. Reframing these formerly nostalgic attachments as commodities, we might find potential to frame what is now gendered invisible, mental, planning labour as real work. Fittingly, sociological research on the time bind (Hochschild 1989, 1997) now finds that middle-class parents report spending more time managing their children’s likes and dislikes—echoing economic research on “preferences”—rather than cooking or cleaning with them, as this “dirty work” of caring is increasingly outsourced (Tronto 2013). Also in this vein, in the public policy arena, this commodification of daily life frames citizens, particularly citizens from historically disenfranchised communities as Orsini and Smith (2007) note, as “stakeholders” in government initiatives rather than as virtuous subjects or voters. While my project aligns with

these critiques, I also wonder whether conceiving of women's domestic work as administrative or managerial in a business sense might offer possibilities for counting invisibilized emotional labour as work.

A central consideration in this dissertation, as it deals in representation, is how women are differently responsabilized based on factors beyond their gender—like race, citizenship status, class, ability, sexuality, fitness, relationship to the beauty ideal, and conformity to traditionally feminine attitudes and behaviours. Throughout the following chapters, I elucidate how women who are already deemed “ideal citizens” based on their conformity to systems of power are disciplined toward the accumulation of cares and labours, whereas racialized women, women with disabilities, migrant women, poor women, and queer and transwomen—women who fall outside of what Thobani (2007) and others (Nadeau 2013, Zine 2012) refer to as the (colonial) national imaginary—are set up to fail.

Given different women's disparate relationships to power, women's incitement to care or outsource labour is embedded in the colonial legacy of the contemporary global care chain (Williams 2006b). Policies, government programs, and advertising that target the sexual division of labour (e.g., those that incentivize mothers and fathers to reduce their unpaid labour burden or expand their “leisure time” to account for care) have exploited migrant labour to fill the gap. Because of this, “care work has private, public, and global ramifications” (Williams 2006b, 105), which affect national citizenship relations and exploitative, colonial, international labour circuits. Becoming cognizant of how women are differently socially responsabilized is tied to recognizing

the “racist ableist” (Beratan 2006, n.p.) products of this infrastructure, which we will see born out in several representations of outsourcing labour.

The legacy of the heterosexual two-parent family structure also underlies beliefs about domestic versus paid labour, even as family and kinship structures and cultural values around families are changing (Williams 2004). This legacy stems from the normative sense that two-parent families are best for children, which hinges on a male-centric and homophobic understanding of the citizenship value of independence—where nuclear families represent independent economic units (Young 1995). This ideology provides the foundation for endorsing state-sponsored marriage promotion (while discouraging divorce) and devalues queer families as well as individuals who need support from others. Even as, for example, gay couples are normalized and granted marriage rights and thus folded into the family group deemed deserving of certain entitlements, queer and racialized family forms are excluded—sometimes socially and sometimes from material provisions (Halberstam 2012; see also Puar’s [2007] concept of “homonationalism”⁷).

Care work is embroiled in the debate over what constitutes a legitimate contribution to the “common good” of society, particularly in terms of the *political* citizenship contributions I mentioned above (see Kershaw 2005, Lister 2003, Tronto 2013). Many feminists, including Patricia Hill Collins (1994), the Combahee River Collective (1977), Audre Lorde (1996), Carol Hanisch (2006), and Shulamith Firestone (1970), have framed domestic labour, or unpaid care

⁷ Homonationalism is Jasbir Puar’s (2013, 336) conceptual frame for “understanding the complexities of how ‘acceptance’ and ‘tolerance’ for gay and lesbian subjects have become a barometer by which the right to and capacity for national sovereignty is evaluated.” In *Terrorist Assemblages*, Puar (2007) showed how the US state’s desire to become “gay-friendly” had imperialist aims; the US government deployed the rhetoric of “sexually progressive multiculturalism” to justify foreign intervention.

work in the private sphere, as political. Theorists of feminist citizenship have also drawn attention to the multiple ways of understanding care as “action directed at governmental authority”—a defining characteristic of political citizenship—outside of the formal political sphere. They have challenged mainstream ideas about the citizenship duty of formal political participation. For example, Patricia Mann (1994) invokes Foucault’s notion of “micro-politics” to highlight the political negotiations embedded in the daily lives of individuals, particularly women. Others relate how women appeal to welfare institutions, sometimes instigating policy change from below (Naples 1998, Lister 2003).

Following Lister (2003), my examination of how women are responsabilized considers care and political participation as *separate but mutually constituting acts* in the context of “democratic” welfare states. With Lister, I contend that the extent to which engagement with welfare institutions constitutes political citizenship remains “fuzzy,” since “not all engagement with welfare institutions has either direct or indirect wider political consequences” (Lister 2003, 27). Still, transnational feminists have underscored the contributions of community and social movements and protests to political action, even if those in power tend to term these demonstrations “disruptive” (Young 2000). Lister (2003) details the intricacies of this debate within feminist citizenship, arguing for a conceptualization of political citizenship located in the public sphere, but broadly framed—to include local political initiatives in which women are involved. She emphasizes a critique of citizenship obligations under civic republicanism in relation to pursuing a “common good.” A common good, as it implies a uniform ideal, requires the maintenance of a uniform identity and corresponding identity expression in the public sphere. Given the gender contract, time constraints, and public/private divisions, a minority of citizens

will be publically represented in this “common good,” namely the ones who participate in the public sphere and have access to political power.

I remain concerned with carers’ access to formal systems of power under current conditions and contemporary citizenship regimes. In other words, while I acknowledge and affirm the increasingly “fuzzy” public/private divide and the understanding of the personal as political, especially when it comes to the impact of formal political systems on identity politics and discrimination, I am most concerned with how women are still separated from access to decision-making power while performing care work. I am thus putting forward a political project that seeks to illustrate the techniques through which it becomes culturally acceptable and expected for women’s multiple labour burdens to be dramatically disproportionate to men’s.

At the risk of becoming trapped in a “master’s tools” dilemma, the way care is currently structured as either private or outsourced to the (public) labour market is not conducive to challenging the sexual and racial division of labour and the corresponding low status of care in contemporary welfare states. Even though studies show that the most effective social policy to reduce women’s inequality with men is adequate child care provision (Keck and Saraceno 2013), political discourse and government policies are not moving in that direction in Canada and the United States. In this dissertation, I presume that women’s access to power in the public sphere and their ability to survive apart from family relationships is necessary for de-gendering care. To clarify, I do not advocate for mothers to pursue the neoliberal value of independence, but I do assert that state provision must guarantee carers’ survival apart from their social relationships. Silvia Federici made this argument in the 1970s, calling for “wages for housework” (see Federici

2012). While she and her contemporaries obviously did not succeed in their campaign for a living wage for everyone, they did succeed in making housework visible and providing a framework for desexualizing domestic labour (calling for wages for *housework*, not *housewives*). I follow Federici's claim that reproductive work and home management labour are fundamental to and produced through capitalist arrangements, so reproductive work must be underscored in order to challenge functioning capitalism and how we think about waged work (see Federici 2014).

I now turn to the concept of "agency" within theories of care work as it is embroiled in discussions of labour. Ruth Lister's (2003) concept of "human agency"—which echoes Patricia Hill Collins' (1998) work on self-determination, Nancy Hartsock's (1985, 110) notion of having "energy, capacity, and potential," and Giddens (1991) "self-actualisation"—demands that racialized, poor, and individuals with disabilities have social and economic control over their lives. Even though the feminist and leftist critique of rights discourse as individualist and legalistic holds, contemporary feminist citizenship theorists have recognized the extent to which rights are still not afforded to everyone, and thus pursuing the basic right to self-determination remains a critical aim. Ultimately, the feminist citizenship project "gives due count to the agency of different groups of women, while identifying also the public and private structures, gender cultures and power relations that continue to deny them their rightful place as full citizens" (Lister 2003, 41). As "the expectation that every person should be an independent worker has become more general" (Young 1995, 548) and women have entered paid labour, the notion that citizens should be self-sufficient has secured itself in our cultural common sense. Care and

dependency on care are thus stigmatized. This is an overriding problem, which this dissertation seeks to address.

Inducing, Incentivizing

In the citizenship framework, policy makers discuss how to induce or, using more corporate rhetoric, incentivize citizens to carry out their duties—especially since abstract moral principles have become less effective in manipulating human behaviour under contemporary corporatist welfare models (Williams 2004, Taylor-Gooby 1991). In these models, social insurance funds reward work performance and status. Some have argued that care work should be enforced as a responsibility of citizenship (Taylor-Gooby 1991), since “it is the state’s role to apply sanctions to those who do not undertake their fair share of unpaid care work” (Lister 2003, 179). Kershaw (2005), in his influential work on equitable care and responsibility, explores how to *induce* men to take on fair shares of care. While he remains suspicious of the neoliberal discourse of duties, which emphasizes individual self-sufficiency and personal decisions about care, he maintains that the “path to replacing the neoliberal paradigm does not lie so much in negating its vision, which partly resonates with much of the citizenry, but in reconstructing it to reprioritize what is currently missing and, therefore, relocate or exhaust problematic elements that are presently dominant” (5). Rather than advocating radical overhauls of welfare systems, Kershaw’s moderate approach contends that points of convergence between disparate political traditions, specifically around the language of responsibility, can become sites of compromise and mark out new directions. To that end, he echoes Janine Brodie’s (1997) work on the gendering of citizenship through its marketization, promoting a “re-emphasis on social obligations” as a response to the “morally hazardous dynamics that accompany gendered systems of social

provision present in families, the voluntary sector, markets, and state infrastructure” (n.p.).

Kershaw argues that simple policy measures could mitigate systemic gender inequalities, foster work/family balance for families, and remedy problems in modern labour markets more generally.

Kershaw is optimistic that a feminist policy framework, one that induces men to provide care work, will alleviate gender inequality. His philosophical discussion of care as a requirement for social inclusion is important for this thesis since I seek to de-gender care as a strategy for redistributing gender power, but I hesitate to appropriate his call to “induce men,” since it seems to build on universalist (male-centric) citizenship—especially his claim that “it is a uniquely feminist lens to treat care as a lens of analysis for citizenship and social policy.” To this notion I would add, only if the policy goal is de-gendering care, guaranteeing provisions for reproductive labour, and assuring that everyone has adequate time away from paid labour to do caring and to take rest from all kinds of labour. In the context of systemic gender and race oppression where women, especially racialized migrant women living in the most precarious circumstances, take on disproportionate amounts of care for little or no pay, it seems odd to focus on “incentivizing” men to participate in a burden that has long been *required* of women. His model may support the broader argument that state provision of care and increased fatherhood obligations are needed to challenge the gendered division of labour (see Lister 2003, Williams 2004). Men, especially poor and underemployed men, require more leisure time before they can take on more obligations with little state support. As women are overburdened in new ways in this age of precariousness, I assert that ways must be found to further degender the labour market and increase state provision for care.

In the debate over how to “induce” male carers, Kershaw (2010) puzzles over why Lister (2007) does not advocate for considering care as an “obligation” of political citizenship and social inclusion. It seems clear to me that this is because she asserts some division between the public and private spheres, insisting that public participation remains necessary for political citizenship so that carers have access to decision making and political leadership. In fact, as we shall see in my research, I might caution Kershaw that treating care as a lens for social inclusion and legitimate political participation is also the logic of *maternalists* (a term I explain in the next section). This logic can be coopted to advance essentialist or republican gender roles, at times to the exclusion of some women, particularly women with disabilities, queer and transwomen, and women who need to work for pay.

Kershaw’s (2005, 11) stated goal is to challenge patriarchy and “embrace the potential for public policy to minimize barriers that some men encounter in accessing and cultivating their spheres of affectivity.” His focus on removing barriers for men and his faith in current thinking about justice and levels of “tolerable inequality” still seem couched in universalist principles of citizenship—which imagine a universal (male) citizen—contrary to a truly feminist one, which would prioritize and centre the emancipation of racialized and poor women and the self-determination of people with disabilities. For example, in the following passage from Kershaw (2005, 11), “citizen” might be replaced with “men”:

Citizens ought not to be counted as full members of society just by virtue of their affluence, employment, or skills. The time citizens must allocate to secure these goods is also an important consideration because long hours in the labour force or in training often confront citizens with a time crunch that requires them to sacrifice participation in other important areas of social life, including participation in their private networks of intimate, familial, and friendship relations. Carefair responds to this risk by suggesting a more

nuanced vision of welfare that integrates a richer appreciation for the value that care provision and receipt contribute to individual and group well-being, all the while grappling with the risk that time poverty may constrain citizens' capacities to balance care while earning.

Kershaw's gender-neutralization of citizenship is at once resistant of gender roles or a sexual division of labour and at odds with feminist aims of differentiated universalism (Lister 2003), which account for a series of individuals and their sexual and reproductive needs. As I show in Chapter 4, on representations of motherhood, mothering, and infant feeding, when we "induce" women, we do not necessarily provide direct economic *incentives*. We might advocate or encourage mothers, arguably through shame, guilt, or fear (see Douglas and Michaels 2005). We might encourage migrant workers to fill a care gap by playing to their need to survive. This is how sexism and racism play out under a colonialist and corporatist welfare state built on universalist imaginings of citizenship. Even within (liberal) feminist circles, when we seek to change male behaviour, we are more likely to turn to policy and economic incentives. When a government agency wants to change mothers' behaviour, it *advertises* with moral imperatives. For example, we do not expect to see a poster in a local pub telling men to be more present in their sons' lives, even though mainstream opinion touts the importance of present fathers in children's lives. But we do see a poster in a government liquor store instructing pregnant women not to consume alcohol. Of course there are gender-neutral advocacy campaigns; for example, anti-cigarette advertising targets men and women. Still, in cases where we have evidence that women need more financial and social support to change their behaviour around, say, infant feeding or self-medicating, we do not see campaigns matched with financial incentive. In other words, I do not expect women to receive adequate financial incentive for work missed during the time to breastfeed, yet we do see examples of public policy in Canada aimed at incentivizing men to take paternity leave by topping up their benefits. And in Canada where maternity leave is

considered an established benefit, it is not accessible for women who are not working nearly full-time hours, though the pressure to breastfeed does not discriminate.

Fundamentally, my research is in line with the broader project of feminist citizenship that sees low-status care as integral to women's subordination and resistance, and as crucial labour for a healthy democracy (Tronto 2013). With the political will of Kershaw (2010), Lister (2003), Williams (2006), Robinson (2013), Tronto (2013), and many others, I view a redistribution of care labour as fundamental for social justice. Barring capitalism's replacement by some other system and corresponding revolt against the state's complicity with capitalist exploitation and imperial violence, there are many proven ways to redistribute state provisions and reconstruct the contractual relationship between rights and responsibilities. Within this debate, I focus on *how* mothers are socially responsabilized and how mothers are inheriting an emotional burden, to give evidence for shifting the way we think about gendered citizenship and labour burden. Ultimately, I seek to inform a nuanced feminist political strategy against the sexual division of underpaid, low-status work. The new data, interdisciplinary analysis, and theoretical concepts I devise in this dissertation provide support for policy reform advanced by theorists of feminist citizenship by detailing *women's symbolic responsabilization through the circulation of a range of public artifacts* in order to examine what is being asked of women in exchange for their social inclusion.

Maternalism

Maternalism is the promotion of the essential values of mothers. I consider it briefly here because it consistently emerges in popular discussion of women's contemporary social roles and

labour responsibilities. As mentioned earlier, in postwar welfare settlements, women's contribution to citizenship was through providing (unpaid) care, and their political contribution was to support male citizens' political participation (by providing unpaid domestic labour). As Iris Marion Young (1995) argues, "because the character of mothers ('noncitizens') is seen as emotional, it is seen as fitting that she is not influencing the *common good* through political participation, but through the sexual division of labour, the general good is approached" (547). Working out of the binary between male-citizen-breadwinner and female-noncitizen-carer, theorists of feminist citizenship have been caught in Wollstonecraft's dilemma: the debate over whether to advocate women's equality through "gender neutral" prescriptions of citizenship or gender-differentiated responsibilities and rights of citizenship. Seeing beyond essentialist, binary gender categories, Wendy Sarvasy (1992) suggests a synthesis of equality and difference, redefining equality as "comparable treatment" (as cited in Lister 2003, 100). Lister (2003) argues for "collapsing dichotomies" of equality and difference in order to reveal their overlap, and inclusion for trans identities and non-maternal or disabled bodies. She argues that feminists cannot afford to discard the principles of either equality or difference, but need to stop seeing them as opposing. Similarly, Joan Scott contends that the answer lies in the "unmasking of the power relationships constructed by positing equality as the antithesis of difference" (1988, 44). Still, as my research on contemporary media discussion of motherhood will show, feminists are divided over the issue of diminishing gender and sexual difference in attempts to either raise women's status as universal citizens or advocate women's rights according to their essential, presumably shared, traits—debates that usually come to a head over reproductive labour. We may see the importance of conceiving of women's needs and skills in series, where some forms of labour require a re-centring of natal and intergenerational caring.

Lister (2003) details the two basic strands of maternalism that characterize contemporary debates within feminism. The first involves women's accession to full *political* citizenship on the grounds of the qualities and gifts they can bring as mothers. Lister (2003) argues that Sara Ruddick's (1989) *Maternal Thinking* arguably embodies this strand. This strand has been used to justify mothering as a "philanthropic" contribution under the classic model within which philanthropy exempts citizens from political participation. Following this logic, this strand of maternalism has also been used to undermine suffrage, since women's political contributions are deemed unnecessary vis-à-vis their philanthropic contributions to the home. In emphasizing women's "essential" traits, women's role is seen according to a stereotype of the emotional and nurturing caregiver and women's participation in effective citizenship is undermined (Diquinzio 2006). The second basic strand of maternalism positions the contributions of motherhood as equivalent to men's citizenship participation, as complementary to the male right to bear arms—echoing a civic republican tradition. Goss and Heaney (2010, 30), in their article, "Organizing Women as Women," show how the maternalist frame is still in use and is still "regularly challenged by actors who claim that an emphasis on a women's care ethic does a disservice to women's political stature." We can see why maternalism is used as a strategy to advocate for women's reproductive rights, and we can also see ways in which it fails to improve women's status and access to power.

Lister distances her position from maternalism, arguing that women are not inherently bound to maternal thinking and should thus not be defined by their reproductive status. In the 1980s, Lynne Segal (1987, 145) dubbed the essentializing tendencies and pacifist values of motherhood

“maternal revivalism,” a sensibility that still thrives in contemporary debates over women’s labour burden and roles (see Goss and Heaney 2010). Maternalism, insofar as it ascribes essential labour characteristics and knowledge to female reproductive labour, risks underscoring sexist, heterosexist, and ableist notions of citizenship, specifically because this logic links women to the childbearing function as the source of their citizenship rights. As Chapter 5 of this dissertation will show, health agencies already link women’s moral behaviour, and corresponding entitlements to their reproductive potential, to distressing effects. Chapter 2 will also give evidence in policy and public conversation of nostalgia for this type of social organization, framed as a progressive response to extreme demands of market labour. While “opting out” of paid labour, as it is dubbed (Belkin 2003, Friedman 2013, Mainiero and Sullivan 2005, Matchar 2013), resists corporate (and capitalist) influences at face value, it does not necessarily challenge, and may even re-establish, the tenets of the corporatist welfare settlement; the emphasis on women happily returning to the home with the support of a male breadwinner could erode pressure on the state to provide universal provisions like child care support or comprehensive early childhood education.

In stark contrast to anti-maternalism, which argues that women’s citizenship rights and responsibilities should not be linked to their reproductive status, Fiona Robinson’s (2013) work aims to close the divide between maternalists and critical feminist political theorists. She rereads Ruddick’s *Maternal Thinking* as a feminist political theory that “provides feminists with a critical resource for considering the ways that masculinist power can drive a wedge between ‘mothers’ and ‘feminists.’” Examining Conservative Prime Minister Stephen Harper’s *Muskoka Initiative on Maternal, Newborn and Child Health*, which received a \$7.3 billion endorsement

from the G8 countries, Robinson argues that feminists reconsider Ruddick's work as giving insight into the discursive construction of women globally, rather than as a normative ethic that asserts the authority of mothers. I mention this here to set the stage for the complexities of maternal responsibility and responsible reproduction. As Lister (2003) and others have shown, collapsing women's right to care and women's gendered responsibility for care is a nuanced theoretical project—one that is important to my overarching thesis argument that women are currently overburdened with a responsibility to care to exclusionary and disempowering effects. But it is a necessary project for a number of reasons, including the fact that women who wish to or are made to have children currently engage in unsupported, unwaged labour, and women who do not reproduce for any number of reasons are framed in terms of their lack of reproductive labour or in terms of their (failed) potential to reproduce. The way maternalist ideas could enforce a link between women's reproduction and their social insurance—or could be used to stipulate their role as mothers caring for the home and subsequently undermine their political participation—demands careful reconsideration in resistance projects.

As I show in my examination of mothers in contemporary media, situating the authority of mothers is a prickly business that risks restricting or re-inscribing women's contributions to unpaid labour. That said, as I will show in Chapter 2 on representation of motherhood in popular film, television, and news media, women under neoliberal conditions are folded into the presumably neutral category of "adult worker" at the same time as they are responsabilized toward multiple forms of care. To account for this pressure on women, especially poor women who have little social support, I consider how women's relationships to the state and to citizenship are socially constructed. I also emphasize the range of mothers' intimate work and

how this work is represented (or not) to illustrate how caring tasks are differently diminished, essentialized, outsourced, and invisibilized.

To analyze the responsabilizing (and moralizing) effects of representations of motherhood, I build on Robinson's (2013) argument that public initiatives purporting to advocate women's health often promote an exclusionary version of the "good woman." Robinson asks feminists to pay better attention to the ways in which "maternal thinking reveals the fundamental moral importance of mothering for feminism *through* an analysis of the relations of power that account for the simultaneous 'honouring' and 'despising' of mothers and mothering" (Robinson 2013, 96, citing Ruddick 1995). Robinson calls on us to refuse the dichotomy between idealized motherhood and motherhood as "anti-feminist," suggesting that a frequent misreading of "maternalist" arguments might be responsible for some divisions within feminist thinking on motherhood.

Robinson's suggestions inform the delicate lens through which I observe how women are responsabilized, especially in the context of a global "crisis of care" (Anderson and Shutes 2014, Hochschild 1995, Zimmerman et al. 2006). Though the debate between so-called maternalist feminists and those who disagree with the basic view that mothers possess "essential" characteristics is not of central importance to my argument, my dissertation on the whole shows that the ways in which women are responsabilized to work in unpaid and paid labour simultaneously reflects a complex process of heralding and diminishing mothers' work. Whether or not mothers' work is supported or undermined depends on the policy context and the identities and social positions of individual mothers. Due to this unresolved complexity in the data, I move

in between Robinson's consideration of maternal thinking and Lister's desire to distinguish herself from maternalists, showing that both strategies might be useful depending on the context—a sort of flexibility that Young (1995) advocated when analyzing the relationship between nation and family.

Feminist citizenship perspectives of care work are crucial to interpreting representations of mothers and motherhood. As Young (1995) argues, there are many policy implications in this line of questioning, including issues of reproductive justice, father obligations, welfare reform, guaranteed income, and co-operative living for mothers. Following Lister's (2003) argument that the contemporary obligation to work for pay has come to stand in for past social obligations, I examine how this responsabilizing manifests in popular representations of mothers across the political spectrum, from wealthy, conservative politicians like former vice-presidential candidate Sarah Palin, to the “average woman” of product advertisements and Hollywood films, to corporate leaders like Facebook COO Sheryl Sandberg and Yahoo! CEO and President Marissa Meyer, to celebrity mothers like Angelina Jolie and Gwyneth Paltrow, to feminist activists who are mothers, like Naomi Klein and Jessica Valenti. The classical assumption that “charity work” and care work, which traditionally meet the requirements for citizenship as philanthropic, can supplant paid work as a legitimate citizenship contribution is challenged in part by contemporary presentations of mother-citizens doing both. Of course, this sense of philanthropy as a legitimate contribution, originating in civic republicanism, does not preclude citizens taking on dual forms of labour (e.g., paid and unpaid); but, as socialist feminist critique makes clear (see Federici 2004), postwar formulations of citizenship as a contractual relationship between rights and duties were built on the presumption of nuclear, single-breadwinner families. My project responds to

this problem of contemporary mothers' multiple forms of labour being both unintelligible to known citizenship models and greatly overlooked in traditional (male-centric) citizenship studies.

We can consider the above calls to shift the balance of citizenship rights and obligations and to de-gender care and unpaid labour as quintessential to the feminist citizenship project. I will examine how representations of neoliberal motherhood require that the balance tilt toward obligation, with citizenship rights invoked only when it comes to physical survival (Ong 2006). Representations of infant feeding and childcare demonstrate this emphasis in particular, as popular discourse emphasizes a “child’s rights” model of care. In this dissertation, I will interrogate the current set of obligations for mothers and examine how these duties relate to women’s social positions and their representation in the public sphere. Specifically, I will continually ask, what are the ways that women are responsabilized toward paid and unpaid labour in the contemporary economy? To answer this question, I will consider how the textual objects of responsabilizing—which transmit through more or less politicized media like governmental campaigns and popular headlines—are imbued with symbols and meaning that affect mothers in particularly intense moments.

Now that we have assessed the relationship between contractual citizenship, care work, and maternalism, we can move to consider affect theory and feminist science components of the theoretical framework. Theories of feminist citizenship elaborate care work, ethics of care, and labour distribution. Theories of feminist affect explain the production, circulation, and orienting effects of what is deeply felt. I am putting the two fields in conversation through the concepts of

mothers' affective citizenship, women's reproductive fatalism, and neoliberalism's undone mothers—all of which are elaborated in each chapter. Feminist science studies have criticized our biomedical and cultural understanding of human reproduction and what we know as motherhood and family relations. Taken together, affect theories and feminist science and technology studies—on gendered affective burden and the politicized nature of scientific data on motherhood respectively—inform my analysis of women's less well-understood labour responsibilities.

Representation is a concept and a practice—the key first “moment” in the culture circuit (Hall 1997). As a signifying practice, it “engages feelings, attitudes and emotions and it mobilizes fears and anxieties in the viewer” (Hall 1997, 226). Because of the clear affective components of “responsible reproduction” and representations of maternal labour responsibilities generally, I now turn to a few feminist theories of affect as informing part of a guiding framework that spans the dissertation. As I also encounter biomedical discourses around parenting best practices, I then turn to lessons from feminist science analysis of human reproduction and reproductive labour.

Theories of Affect and Feminist Science and Technology Studies

My critical discourse analysis is informed by feminist theories of affect and feminist science studies of reproductive labour, both of which involve critical race, critical disability, queer, and anti-colonial analysis. Taken together, these two interdisciplinary fields provide the tools for my intertextual analysis of how women are responsabilized toward multiple forms of labour.

Following theorists of care work and care ethics who disambiguate care to account for its affective components, I now turn to briefly elaborate critical feminist theories of maternal affect

and feminist science analysis of mainstream biomedical data on women's reproductive labour. These systems of thought frame my critical discourse analysis.

Maternal Affect

There is no single generalizable theory of affect (Seigworth and Gregg 2010). As Seigworth and Gregg (2010) describe it, affect is “the name we give to those forces—visceral forces beneath, alongside, or generally *other than* conscious knowing, vital forces insisting beyond emotion—that can serve to drive us toward movement, toward thought and extension, that can likewise suspend us” (1). To speak about affect, then, is to discuss processes of orientation—the forces that prompt thoughts, induce behaviour, and ultimately direct us. I do not engage the contours of affect itself, but instead apply the politically engaged work of feminist and queer theorists of affect who “attend to the hard and fast materialities, as well as the fleeting and flowing ephemera, of the daily and the workday, of everyday and every-night life” (Seigworth and Gregg 2010, 7). The above authors are trying to say that feminist theorists of affect take into account the daily routines and labours of bodies when reflecting on how bodies experience and make meaning of their surroundings and relate to others. This political commitment makes feminist theories of affect helpful for this dissertation's analysis of motherhood and labour, since they are dedicated to uncovering the intricacies of human experience that are not readily counted in our mainstream definitions of the work people do and the way people experience time, labour, and leisure. In Chapter 5, I especially elaborate on the work that deep feelings do to move us toward things that we want, or think we want, or toward behaviours that we think are good for us. This helps to fill a gap in current feminist discussions of care work—within which we readily acknowledge that many women are burdened and some women are living in particularly

precarious circumstances. Using affect theory here, we can better elucidate why representations of responsible reproduction matter and how responsiblization is taking place culturally, not just by way of welfare state arrangements.

I also think about affect in terms of its movement and circulation within and between mothers, whose body work generates and responds to affective experience. By this I mean that if we consider how affective sensations are not static feelings, and that we translate, interpret, pass through, and circulate our unnamable experiences continuously, we can see how women exchange meanings with each other to disciplinary effects that are perhaps deeply felt, but not easily accounted for, especially not in terms of their labour and responsiblizing effects. For affect theory that details how women are responsabilized, I turn to Sara Ahmed's work on the pursuit of happiness objects and the promise of "the good life," as well as her notion of how affective processes "stick" some bodies to each other (and to the national project) at the expense of others. In *The Cultural Politics of Emotion* (2004), Ahmed presents affective processes as cultural practices that have the power to bond some people together—in shared affective experiences and joint pursuit of national ideals—and exclude others. I draw on her work substantially in Chapter 5, where I explore how women are encouraged toward "responsible reproduction" through editorialized promises of happiness and threats of regret. In *The Promise of Happiness* (2010), Ahmed meticulously traces the intellectual study of happiness and demonstrates how women are tasked with producing happiness in family members as a condition of their own well-being and acceptance. That is, women have an outward-oriented responsibility to pursue their own happiness for the sake of generating happiness in others. For Ahmed, women's own sense of happiness is a result of their effectively producing the happiness of others. In my discussion of

responsible reproduction and the promise of maternal happiness in Chapter 5, I elaborate on Ahmed's use of Edelman's (2004) "reproductive futurism," as well as her use of "happiness objects," to explain how cultural symbols accumulate positive affective value, how proximity to these objects becomes desired, and how women are disproportionately burdened with responsibility for the pursuit of these objects.

To further excavate how affective processes orient mothers, I turn to Ann Cvetkovich (2003) and Lauren Berlant (2010), who both gesture toward the potential of affective processes to orient individuals toward or away from each other. This is helpful for my consideration of how some women are oriented toward each other at the expense of others, based on their conformity to ideals of responsible reproduction. In *An Archive of Feelings*, Cvetkovich (2003) presents the power of trauma to generate political communities. She attends to what she calls "ordinary affects," or the regular, normal traumas of everyday life. She shows how these trauma feelings can catalyze political orientations or movements. Pertinent to the study of responsabilizing motherhood, Cvetkovich's work explicitly challenges the divide between public and private, since what counts as legitimately traumatizing for the medical community is what occurs in public, or at least what can be witnessed, rendering invisible the insidious micro-traumas of individuals' private lives. If we think about the labour that mothers perform in private, we can see a parallel between Cvetkovich's work on trauma and how we conceptualize care. I do not just think of private in terms of the "invisible" labours that people perform behind closed doors, but also the internal labour, or stressful, mental time—what sociologists have called "contaminated time" (Schulte 2014) and Brigit Schulte calls "confetti time" (2014)—that women spend managing households that we know exists but do not know how to deal with. So I extend

Cvetkovich's idea of private, micro-traumas to think about the micro-cares of mothers—invisible labours behind closed doors as well as the mental and emotional work of caring that occurs internally and infiltrates our experience of daily life and responsibilities.

Like Cvetkovich and Ahmed, Berlant, in "Cruel Optimism," is interested in how bodies "lean toward" their objects of desire, which hold what she calls a "cluster of promises" (2010, 93). Berlant argues, with Ahmed, that we pursue proximity to objects that promise what we know as "the good life"—because "proximity to the object means proximity to the cluster of things that the object promises" (93)—even though for many, the normative good life is "a bad life that wears out the subjects" (97). This is where I built my concept of our undone mothers. As representations of the good life for women depict some elusive balance, satisfaction, and even happiness vis-à-vis family, mothers undo themselves in its pursuit, because notions of perfection and attainment through personal responsibility are out of reach. Berlant analyzes incitement and attachment toward possibilities, which is an inherently optimistic and arguably modern state of leaning toward the future good life. Of course this incitement to "lean toward" is a technique of discipline. I am concerned with its corresponding process of *undoing* for mothers, an affect that I see being touched on in the popular press and memoir by motherhood scholars—both of which I touch on in Chapter 2—though not articulated as such, and thus not taken seriously as a form of labour. In the vocabulary of citizenship, learning toward the good life is the modern promise of entitlements and well-being that responsiblizes mothers toward multifarious forms of labour.

Focusing even more explicitly on the politics of affective orientations, Jasbir Puar (2006) argues that rhetorical constructions of feelings of nationalism and patriotism disaggregate bodies who

are deemed deserving of national inclusion from outsiders who are purported to threaten national security. Puar painstakingly traces the numerous, intricate ways in which some subjects and the symbols that come to represent them come to be reviled in the national imaginary—like brown immigrants and the turban—whereas other subjects are perpetually celebrated—like white, nuclear families—and others still move between subject positions of deserving and undeserving depending on their utility toward imperialist aims—like wealthy, white gay couples whose celebration is used to advance the US reputation of tolerant and civilized. Similarly, Sunera Thobani's (2007, 59) *Exalted Subjects* presents a portrait of the “cultural and emotional topography of the nation,” where women's responsibilities to citizenship are, as Puar (2006, 72) puts it “imagined, felt, feared, desired” with real consequences for our understanding of mothers status and their labours. Because of the complicated affective burdens of motherhood in particular, the affective duties of citizenship, or what I call *mothers affective citizenship* in Chapter 5, bring insight to the intricacies of women's relationships to responsible reproduction and the specific ways in which mothers are asked to strive for a better future for their families.

As there are many ways to discuss gendered emotional labour or gendered responsibilities to affective citizenship, my research is, out of necessity, only one incursion into feminist citizenship studies that considers affect and the neoliberal moment. I use this technique of bridging affect theory and citizenship theory to catalogue new expectations of gendered emotional labour, particularly around responsible reproduction. Operationalizing the concept of emotional labour is even more challenging than measuring unpaid labour and “informal employment” (see Hussmanns 2004), but my intent is not to *measure* the emotional labour expected of women, or to interrogate women's experiences of it. Instead, I trace its representation—engaging theories of

affect to explore representations of responsible reproduction. I also analyze representations of the forces and intensities that pass between mothers and that circulate among mothers and worlds, affecting and affected by their daily and nightly conditions. In this sense, the affect theorists I elaborate above have determined my theoretical framework as well as my methodology, as I follow the methods of Ahmed, Cvetkovich, Berlant, and many others who analyze cultural texts for their affective components and transmissions.

Feminist Science and Technology Studies of Reproductive Labour

Given the explicitly biological nature of human reproduction and care work, my analysis requires a critical feminist interrogation of science and its representations in the construction of motherhood and reproductive labour. As I mentioned in a prior section on feminist notions of care work, theorists (like Tronto) have long grappled with the embodied complexities of care and the uneven way it is outsourced globally. One thing that would help move this conversation forward, and out of the traps inherent in maternalist arguments, heterosexist family frameworks, and care work as an erasure of self-determination for those receiving care, is recognizing how the science of how to parent and who gets to parent has long been contested (Apple 1995, 2006, Douglas and Michaels 2005, Thompson 2005, Wolf 2011). In this short section, I briefly gesture toward three feminist science approaches to reproductive labour that shape my analysis on women's responsabilization: (1) how to parent, or "scientific motherhood" (Apple 1995); (2) how parents are made, or the "ontological choreography" of parenthood (Thompson 2005); and (3) which parents are celebrated and supported, or the cultural and biomedical pursuit of the "life unlimited" and forfeiting of "expendable populations" through human reproduction (Rachel Lee 2013). On the surface, medical and biotechnical arguments about parenting may not seem

pertinent to citizenship arguments about women's labour, but feminist science critique helps us understand that some of our political contestations are based on rhetoric that is not rooted in "fact." Engaging the science of reproduction and infant care as well as the implications of technological advancements in fertility are required to nuance what mothers are dealing with when it comes to their own reproductive decisions. To be rigorous about women's reproductive labour and affects of motherhood, we need to put "best practices" and "expert knowledge" around reproduction and care on shaky ground.

In 1995, Rima Apple investigated what she termed "scientific motherhood"—an ideology about how women should best take responsibility for their families' well-being by relying on the advice of medical practitioners—which she argued is transmitted to women through various educational and cultural means. Apple exposed the "complex interrelationship of medicine and social roles" by demonstrating how mothers both accepted and resisted medical practitioners' instructions. Ultimately she argued that scientific motherhood "positioned mothers as both responsible for their families and incapable of that responsibility" (n.p.) In other words, mothers were impossibly responsabilized toward an always-shifting brand of expert parenting determined by medical professionals. This trend toward "expert parenting" is still a popular area of criticism in motherhood studies (Douglas and Michaels 2005, Holt 2010, Wall 2004), what Apple (2006) went on to call "perfect motherhood" in, *Perfect Motherhood: Science and Childrearing in America*. The notions of "perfect motherhood" and "scientific parenting," as we will see in Chapter 2, have consistently reappeared in the popular press even though we know these notions to be part of a frivolous myth: one Judith Warner termed *Perfect Madness* in 2006.

In addition to exposing and politicizing the multiple forms in which scientific rhetoric appears in mainstream parenting directives and public health commentary on reproductive labour, feminist science analysis of reproductive labour also examines the intersection of science and politics in *becoming* a parent in the contemporary technological or gene age. This is a context yet to be fully recognized in theories of care work and reproductive labour. In *Making Parents* (2005), Charis Thompson questions what makes a parent in the context of assisted reproductive and genetic technologies and the “human drama” that orchestrates their use in the United States. She distinguishes between science and technology studies, on the one hand, and feminist studies of reproduction, on the other, drawing from both fields. She does this to focus on biomedical and legal interventions into fertility and reproduction and the corresponding cultural reorganization of kinship. In doing so, she examines “how so-called biological reproduction intertwines with the personal, political, and technological meanings of reproduction in the particularly telling site of assisted reproductive technologies” (8). Thompson argues that the “technical, scientific, kinship, gender, emotional, legal, political, and financial aspects of ART [assisted reproductive technologies] clinics” (8) are dynamically coordinated in what she calls “ontological choreography” to produce parents and children and “everything that is needed for their recognition as such” (8). We can see how many of the elements of her ontological choreography are explicitly related to questions of citizenship—like the legality of kinship and the politics of family. But Thompson’s project is helpful for mine in two different ways: as a theoretical lens and a methodological strategy. Thompson’s way of witnessing scientific data through cultural analysis informs my theoretical outlook throughout this dissertation, as I assess how scientific data is constructed and circulated culturally. As a methodology, Thompson’s “choreography” is helpful here as I examine the coordination of cultural symbols and stakeholders in motherhood

and human reproduction to understand the enmeshed forces affecting women's responsabilization. To this end, I also rely on Thompson's extensive critique of the moral and political implications and development of scientific research in her latest book, *Good Science* (2013). Here, Thompson traces the political and scientific origins of cell procurement and shows how government interest and investment in stem cell research determined the ethical purview of the research such that ethics and scientific progress converged to form contemporary biomedicine. Without this deep understanding of the relationship between what we know as scientific evidence around reproduction and infant care and political mandates around parenting and care, we will not catalogue women's labour, particularly its affective components, with enough careful consideration of why women are being asked to do the care work that they do. It is also pertinent to remember, in our positivist culture, the affective and responsabilizing implications of widely-circulated scientific rhetoric around motherhood.

Finally, to assess how scientific rhetoric permeates discourses of "responsible reproduction" in my data, and to consider the effects of this intersection for differently abled and racialized women's bodies, I turn to feminist science and technology analysis of reproductive labour that has interrogated the ways in which biotechnical infrastructures of reproduction *produce* health and income disparities in the pursuit of what Rachel Lee (2013) calls "life (un)ltd." (or life unlimited)—the ultimate "good life" ameliorated by the exploitation of already "expendable populations." In a 2013 special issue of the *Scholar and Feminist Online* entitled "Life (Un)Ltd: Feminism, Bioscience, and Race," Rachel Lee details the way feminist science and technology studies have traditionally focused on reproduction and fertility as a lifecycle moment (see Thompson 2005), "even as the disaggregating effects of assisted reproductive technologies

(ART) scatter the locales and agents of gamete provisioning, gestational labor, and postnatal caretaking or babysitting work, so that reproduction becomes as lucid as a distributed and ensemble choreography” (2013). Critiques by women of colour have complicated any singular notion of reproductive labour by underscoring and extending reproductive technologies to technologies of infant feeding, to the cultures of food marketing and movement, and to “relations of care that have become medicalized, professionalized, and made clinically experimental as well” (Rachel Lee 2013). For those working at the intersection of gender, race, sex, and technoscience, “motherhood” is a deeply political construction involving the agency attributed to non-human actors, problems on the scale of cellular and microbial interactions, new health disparities and the production of “expendable populations,” non-normatively gendered bodies, poor women’s bodies, gestational body parts as sites for medical experimentation, the emotional labour of cultivating human life, and a biomedical imagination of a “life unlimited”—a perfectly normal reproductive body (Rachel Lee 2013). “Motherhood” as we imagine it culturally, and as I alluded to above, also involves the presumed neutrality of biomedical research on reproduction and fertility. As Karen Barad (2007) argues in *Meeting the Universe Halfway*, science is only made to seem politically neutral by those who wish to foreclose those connections. For Rachel Lee and others in the *S&F* special issue, a feminist bioscientific critique is femi-queer and postcolonial—one that persistently questions what “counts” as scientific data or authoritative knowledge around reproduction, fertility, gender, and care. As we will see in chapters 3 and 4 in particular, my analysis of representations of motherhood is heavily informed by this call from feminist science scholars.

On the subject of biotechnical intervention in reproduction and fertility, my analysis of women's responsabilization toward multiple forms of labour is also informed by the effects of industries, ethics, and legalities of both egg selling and egg freezing as an increasingly common political and biomedical intervention in reproductive futurism. The film *Eggploitation* (2010), written by Jennifer Lahl and Evan Rosa at the Center for Bioethics and Culture in California, tells the stories of "third-party egg donors" who faced serious negative health outcomes (one of their interviewees died at age 34) after selling their gametes to earn money while completing their graduate degrees. In a related step toward the normalization of in vitro fertilization and the industrialization of reproduction, tech giants Facebook and Apple in 2014 announced their expansion of women's benefits packages to include egg freezing. Apple reasoned that it "cares deeply" about employees and their families and seeks to "empower women" to "do the best work of their lives as they care for loved ones and raise a family" by providing cryo-preservation and egg storage.⁸ Taken together, the film about third-party donors and new insurance policies around assisted reproduction show how women's responsabilization to reproductive labour sits at a complicated intersection of ethics, politics, economics, family formation, kinship, legality, and biotechnological advancement. I will apply this intersectional feminist science sensibility throughout this dissertation, most explicitly in chapters 3 and 4, when I will examine biomedical data on infant feeding and its state-sponsored circulation. There I will show how a lack of clarity around the science on breastfeeding is overlooked in mainstream discussions of infant feeding, following this established feminist science tradition of contesting biomedical data that is presumed neutral and circulated as such. These chapters help to advance a main question of the thesis—how are women responsabilized toward multiple labour burdens—as they interrogate the

⁸ See Mark Tran, "Apple and Facebook offer to freeze eggs for female employees," October 15, 2014, *Guardian*, retrieved December 8, 2014, <http://www.theguardian.com/technology/2014/oct/15/apple-facebook-offer-freeze-eggs-female-employees>.

institutions of both biomedicine and public health political campaigning that intersect around the unique care labour of infant feeding. In the next section on method, I explain how I select, assemble, and analyze a series of texts that tell a nuanced story about the responsibilities of contemporary motherhood.

Method

This critical feminist research project examines four samples of empirical data from a set of media reports in Canada and the United States over six years (2007-2013). As my feminist critique seeks social emancipation and change, I rely primarily on feminist approaches to critical discourse analysis (CDA), which aim to unpack complex ideologies sustaining gendered, racialized, and classed social hierarchies (see Lazar 2007). My research builds on qualitative methods of feminist theorizing by Jasbir Puar (2007), Ann Cvetkovich (2007), Sara Ahmed (2010), and cultural theorist Stuart Hall (1997) as I study media representations for their statements “about a particular topic at a particular historical moment” (Foucault 1978). Critical discourse analysis, which was coined as a method in the 1990s in response to increasing awareness of growing inequality between social groups (Luke 1997), is based on Foucault’s idea of the inextricable relationship between knowledge and power. It aims to address social problems or injustices by analyzing their production and circulation through texts, broadly conceived.

The notion of “discourse” can be understood in many ways. Ian Parker, a critical psychologist who studies the emergence of meaning and qualitative analysis in his field, defines a discourse as “a system of statements, which constructs an object” (2004, 252). In his view, the purpose of discourse analysis, put simply, is to break down or *systematize* text, in its multiple forms, in

order to understand the meaning of more complex ways of talking (Parker 2004). In “Discovering Discourse, Tackling Texts,” Parker asks, “what is ‘discourse?’” and outlines his seven criteria for distinguishing discourses at different levels of analysis. Parker argues that a discourse is located in texts, but it would be misleading to suggest that a researcher can “find” a discourse. Instead, we find pieces of discourse at work in texts, and the critical analyst deciphers these general messages through reflection and comparison. For the researcher performing CDA, this means that they should treat objects of study as texts, which are described, and these texts can range from speech writing, to fashion statements, to stained glass, to architecture, and so on. Parker argues that once texts have been recognized as constructed using multiple discursive threads, the researcher should engage in exploring connotations in the representation, perhaps through free association, which is best done with other people. Throughout this dissertation, I discussed each case study with colleagues or peers to hear the words they used to interpret and produce meaning from the selected texts. Even among colleagues with similar training, this exercise usually resulted in generating additional language to describe the object of analysis, and in turn pointed to different threads of discourse.

Though discourse by this understanding is a “representational practice” (Hall 1997, Woolgar 1988), discourse is also referring to a social “reality.” So the representation of an object refers to past discourses of that object and alludes to other discourses of common understanding in order to construct its meaning. Here is an example of what this conception of discourse looks like in my research. New York City hospitals were ordered to remove infant formula products from patient view to stop young mothers from thinking of formula as a viable option for their infants. The discourse constitutes infants as the responsibility of mothers, but hospitals as the protector of

infants against maternal ignorance. Further systematizing this representation involves next tracing the social realities of public health, motherhood, and infant care, and interpreting the representational practice of the New York City campaign in these contexts. From here, we might speak about “infant feeding discourse” as involving threads of maternal responsibility, the institution of public health promotion (which relies on biomedical research), and the commonplace debate over formula feeding and breastfeeding for infant health outcomes.

Ian Parker’s (2004) work on defining discourse also stipulates the importance of specifying which groups of people are being discussed in the discourse and speculating what these people can say about the discourse. Probing the above example of a text referring to a particular geographic context, local health practitioners, mothers, and infants, we might interpret that if mothers are fundamentally responsible for infant survival, mothers’ speech acts are bound by the confines of supporting the survival of their infants, for example. It is also relevant to witness how mothers are talked about in this discourse, which is justified based on the discourse of infant rights. Parker (2004) elaborates that CDA then involves mapping the picture of the world this discourse presents (in this case, perhaps mapping maternal responsibility on access to health or welfare provision), setting contrasting ways of speaking against each other (say, comparing breastfeeding promotion to ways of speaking about women’s “choices”), referring to other texts to elaborate the discourse as it occurs, and reflecting on terms used to describe a discourse. Stuart Hall (1997), in *Representation*, also advocates conceptual mapping, where these maps allow us to draw relationships between concepts and decipher new meaning as a result.

To make discourse analysis truly critical though, Parker argues that researchers performing *critical* discourse analytic research should go beyond traditional criteria for analyzing text to include consideration of the role of institutions and power in determining discourse. Parker's (2004) auxiliary criteria for critical discourse analysis include recognizing that: 1) Discourses support institutions; 2) Discourses reproduce power relations; and 3) Discourses have ideological effects. To pursue these three critical aims, Parker recommends that radical analysts start by identifying institutions that are reinforced or subverted when this or that discourse is used. In the above example of quitting infant formula from patient view, this would involve identifying both the institution of public health as transmitting expert knowledge, as well as the municipality of New York City as controlling bodies through sponsoring specific public health initiatives. Next, Parker advocates examining which social groups gain and lose from the employment of the discourse (or identifying who would want to promote and dissolve the discourse). In this case, one could argue that some health practitioners may wish to promote the discourse as their identities are bound in the institution, and some mothers may wish to dissolve the discourse as a matter of asserting their bodily autonomy. Last, Parker argues that researchers must demonstrate how discourses point to other discourses which sanction oppression, and how discourses allow dominant groups to narrate history in order to justify the present while subjugated discourses are erased from history. Though these aims seem to advocate social transformation through the exposure of hierarchies of power, feminists have criticized CDA as a project of straight, white men who fail to recognize diverse feminist works. Feminist CDA might also insist on moving beyond mere citation of feminist work and move to centralize subordinate voices in a move toward what Lazar has called "analytical activism" (2007: 145). In my research, my primary theoretical sources are feminist scholars and activists.

As the above presentation of the steps of CDA shows, two driving themes of CDA are power and ideology (Antaki 2008). For Parker (2004), a discourse is found in text, is about the object or reality to which the text is referring, and contains a coherent set of meanings that refer to other discourses. It is historically located—meaning there is room for resistance in our analysis since we are examining something that exists in the past—and it reflects on its own way of speaking (e.g., an author explicitly reflecting on the terms they are using, which gives a discrete sense of the ideological patterns of the analyst or writer). But for discourse analysis to be critical and feminist, it must draw out the reproduction of power relations, and it must examine the ideological effects of the discourse on already disenfranchised groups (Lazar 2007, Parker 2004). In my dissertation, this has meant first identifying the institutions supported by particular discourses (e.g. the medical-industrial complex), and then showing how some discourses of motherhood connect to others (e.g. the discourse of maternal protective instinct pointing to the discourse of women as producers of nature and men as producers of culture), which sanction various forms of oppression (e.g., women’s unpaid, invisibilized, and devalued labour). It has also meant unpacking how particular discourses about motherhood (i.e. their responsibility for infant feeding and breastfeeding in particular) allow the dominant group to tell its story, denying subjugated groups (i.e. women who cannot breastfeed or women who breastfeed out of necessity) a place in history. This was particularly striking in representations of the conflict between paid employment and care work, as many depictions centred the experiences of relatively to extremely affluent, often white, usually able-bodied women. In foregrounding unequal power relations that circulate through symbols in the abovementioned ways and

committing to producing an analysis that challenges hierarchies of power, my textual analysis followed Parker's (2004) criteria for anchoring oppressive ideologies.

Because my analysis began with analysis of the text of newspaper articles but moved to examine images and film clips discussed in these articles, I also turned to Norman Fairclough, a well-known theorist of discourse. Fairclough explains that discourse is used in various senses, including “meaning making as an event of social process, the language associated with a particular social field or practice (e.g. political discourse), and [as] a way of construing aspects of the world associated with a particular social perspective (e.g. a neoliberal discourse of globalization)” (2013, 230). As such, CDA is concerned with multiple “semiotic modalities,” of which language is one and visual content and, say, “body language” are others (Fairclough 2013). These modalities actively construct the world we experience and are constructed by social forces (Foucault and Rabinow 1984). Critical discourse analysis, then, is a “critical analysis of the whole, formal and conceptual architecture of texts,” (Fairclough and Graham 2002, 32) wherein language, symbols, and gestures produce and are produced by material social processes. Because this dissertation deals in *representation* of maternal bodies and their responsabilization through various discursive means, my sensitivity to representational practice has also been informed by Nicholas Mirzoeff's (2002) notion of visual culture, in which he, building on the foundational ideas of cultural theorists Adorno and Horkheimer, emphasizes how visual content “is not just part of everyday life, it is everyday life.” My analysis of talk, texts, and symbols is concerned with visual and non-visual content as persistent and constantly circulating and shifting in meaning, as I interrogate what representations of various, often conflicting aspects of motherhood say about gendered labour responsibilities. I take seriously the idea that visual

content is reflective of and embedded in systems of values that individuals consume with varying degrees of compliance and resistance.

Following the cultural analysis of media studies theorist Douglas Kellner (2009), the production, circulation, and consumption of representation adds meaning to the content itself. Rather than taking a quantitative approach, tracing the repetition of certain messages or symbols to demonstrate their prevalence or influence, I closely analyze a sample of texts that emerge from my media data as representative of a theme or code. The cases I have chosen are those that are widely circulated and may appear normal or strange, but in fact tell something about what strikes a chord with mothers and others (including publishers) and why. In my data collection of popular representations, I came across both stories that repeated versions of themselves and stories that stood out as bizarre. Throughout the dissertation, I present both kinds of stories based on their circulation as flagship moments, or “snapshots,” following the genealogical analytical strategy of Jean Carabine (2001).

With affect theorists Ahmed (2010), Puar (2007), Berlant (2006), and Cvetkovich (2003), my purpose is not to portray an exhaustive media analysis of each representation I surveyed, but to show that there are representations that appear to strike a nerve because they are peculiar, and there are others that are repeated to the point of saturation—where repetition of these images do not add new meaning—that also give rich meaning about our cultural ideas about motherhood. From a critical perspective, these representations have ideological consequences for particular groups. There are countless representations of motherhood taking place everyday. As I explain in more detail below, I focus on ones from a variety of sites that have appeared to throw down a

gauntlet in terms of what they are communicating—that is, representations that have ignited dialogue between newspapers and on daytime television talkshows, that have cut through the noise of other representations if even for a moment, and especially texts that have not only been circulated by numerous major mainstream media outlets, but that have served as the pivoting point for other subjects of editorial coverage long after the representation itself ceased to be circulated. These texts have received attention from other scholars and from major publication vehicles, though we can imagine these representations taking place in another period in which they might not be so high profile. The fact that they are high profile now is meaningful, and I push these images to the surface of my conceptual map alongside each other to question the deeper meanings of their relationships. I do not posit that the media representations I have selected are *the* story about contemporary motherhood and responsibility. They tell *a* story about gendered citizenship responsibility that we are seeing from different angles, from the assumptions of public health agencies to the portrayal of Canadian Members of Parliament to celebrity culture.

As mentioned above, this dissertation presents a series of texts across a range of social fields in order to trace and make meaning of their shared ideological underpinnings. Fairclough (1992) terms this tactic “interdiscursive” analysis, which shows how meaning emerges when discursive types are mixed together. This approach recognizes Dorothy Smith’s (2005) analysis of “active texts” in conjunction with the idea of “hybrid texts,” or “the condition in which a given text combines multiple discourses and genres (e.g., ‘fictional’ and ‘factual’)” (Bauer 2000, 132; Carroll 2004, 273; Leavy 2007, 230). Employing this tack and following Jasbir Puar, I foster a “deliberately broad citational praxis” (2008), including an archive of biomedical studies,

demographic data, motherhood scholarship, state-sponsored political campaigns, public policy, activist texts, print media, and social media. This archive, or following Cvetkovich (2003), this anti-archive that resists chronological archival traditions, is designed to make meaning of cultural messages through juxtaposing different genres of text that shape our understanding of mothers, motherhood, and labour.

In keeping with the tradition of critical social research to conclude with critical reflection, I am coming into this analysis of representations of motherhood from a particular social field: as a young, anti-racist feminist scholar without children, in a heterosexual relationship over the course of this writing. This has meant that some discursive relationships, like the representation of pregnant bodies as soon-to-be disabled and therefore undesirable to the capitalist workplace, emerge quickly and clearly upon first pass at the content. Others, like the relationship between conservative representations of bioethics and lesbophobia, have required many passes over the material. There is no doubt that others with different theoretical and personal sensitivities will interpret discursive relationships outside of the ones I detail in this dissertation, but I have aimed to critically interrogate the myriad discourses and hierarchical systems of power that construct the relationship between responsibility and contemporary motherhood—as well as the stakes of this relationship for already disenfranchised women. Also pertaining to reflexivity, feminist standpoint, and critical discourse analysis is the commitment to write using cognitively accessible language, which I am constantly striving to do (see Parker 2004).

Case Selection

Since I designed my research project to respond to an exploratory question—how are mothers being socially responsabilized toward multiple forms of labour simultaneously and to what effect?—I pursued an inductive methodological strategy. Inductive research is useful for developing new areas of research and theory building (Hesse-Biber 2012, Joffe and Yardley 2004). My method consisted of three main phases. The first phase involved collecting an empirical archive of news media data to get a sense of how motherhood was being characterized in mainstream representation. I chose to begin my exploration at the site of news media following media studies scholar Colleen Cotter, who demonstrates how the news is increasingly consumable and widely distributed, and so it provides a “natural data source” for researchers exploring discourse and culture (Cotter 2001, 423). In this first phase, I examined four national print newspapers (two in Canada, two in the United States) in the period of time from May 2007 to May 2013 (*USA Today*, the *New York Times*, the *Toronto Star*, and the *Globe and Mail*) for their representation of motherhood. The *Toronto Star* and the *Globe and Mail* are Canada’s top two widest circulation daily newspapers, both of which feature stories about motherhood and family life. *The New York Times* and *USA Today* have the second and third highest daily circulation rates in the United States after the *Wall Street Journal*, the latter of which I omitted because of its emphasis on business and international affairs and tendency not to run stories about motherhood or family. In each of the four papers, my exploratory keyword search included the terms “motherhood,” “mom,” and “work-life balance.” My search returned tens of thousands of articles in the six-year period, many of which departed greatly from the issue of maternal responsibility I wished to eventually probe. Limiting the search to the term “motherhood” still returned thousands of articles, which I detail below, and these painted a broad and fruitful picture of the myriad ways the specific but ample notion of motherhood is managed in news media

representation, particularly in the context of neoliberal notions of citizenship. The second phase of the research involved coding this data and arriving at four case studies, the steps toward which I detail below. The third and final phase included pursuing corresponding bodies of literature for each “case” that was sampled in Phase Two.

Methodological Steps using CDA

1. From my initial keyword search in four major North American newspapers over a six-year period, I first selectively coded titles (manually), specifically selecting texts that referred to an element of motherhood and eliminating several articles where motherhood was peripheral to the topic of the story. This process is sometimes called culling the data (Maykut and Morehouse 1994), whereby the researcher eliminates “raw data” from an initial search that does not pertain to the question to be explored. Due to the high number of articles returned that were expressly *about* motherhood, I eliminated articles that might refer to discourses of responsible motherhood, but did not centre or elaborate the meaning of motherhood or responsibility. (For example, the *Toronto Star* archival search returned a 2009 article entitled, “German cinema’s new, new wave; Satiric, dramatic or just plain weird; film series explores Berlin School,” in which motherhood was mentioned once, in reference to one of one writer-director’s areas of interest.) Where titles seemed to centre on topics other than motherhood, I assessed the body of the article before deciding whether or not to retain the article in the data set for in-depth analysis.
2. Since I was looking specifically at how texts referring to motherhood also referred to neoliberal notions of responsibility and flexibility, and discourses of responsible

citizenship, I developed a schematic for operationalizing these broader discourses with the title content in mind. I relied on specific notions of neoliberal citizenship that are supported by existing literature (see Appendix A). This schematic was inspired by the work of Melanie Knight and Kathleen Rodgers (“The Government is Operationalizing Neoliberalism,” 2012) which demonstrated how the Conservative Party of Canada under Stephen Harper displayed technologies of rule that instrumentalized the conduct of individuals as responsible citizens within neoliberal conditions.

3. After manually coding the titles for their discursive “threads” referring to motherhood, I performed *substantive* and *theoretical* coding on the remaining articles using both my developed schema and open coding (see Holton 2010): I allowed themes to emerge organically (open coding) but also searched for particular mentions (selective coding) of neoliberalism and citizenship (highlighting words like work, employment, independence, care, rights, responsibility, work-life balance, and duty). Once I established this set of substantive codes, I then created the conceptual map described in the above section on discourse by performing theoretical coding, which involves “conceptualizing how the substantive codes may relate to each other as hypotheses to be integrated into theory” (Glaser and Holton 2004, n.p.). This process involved collapsing the numerous codes derived from both open and substantive coding into a hierarchial tree of thematic saturation⁹ (see Appendix B).
4. Using my list of thematic codes, I devised themes for the major “case” chapters of the dissertation. At this point, I engaged in selective sampling of whole articles to select rich and representative texts for each prominent theme in the tree. These varied in number

⁹ Thematic saturation occurs when the analyst discovers, often through memoing, that coding texts is no longer generating or referring to new theoretical ideas (Glaser and Holton 2004).

depending upon the amount of varied content and number of themes in each text. In some instances, as in Chapter 3, which was sparked by the theme of representation of breastfeeding in news media, for example, the media articles I selected referred to other literatures, i.e. biomedical research on breastfeeding. In this case, I used the theme from my news media research as a jumping off point to pursue the theme of biomedical research on breastfeeding and its representation in news media in more depth, using its corresponding literature. This process of using the thematic categories to then read or re-read texts (or subcategories) through a research-generated theoretical lens is referred to as axial coding in qualitative methodology. But in the case of my research, I used my thematic categories to depart from my initial data set (to pursue corresponding literatures with corresponding surveying techniques).

5. Throughout this sampling stage of the coding process, I paused between the selected articles for theoretical analysis through conceptual memoing and discussion with colleagues and my broader community. The memoing and discussion processes pointed me to several themes that were contained by discourses of motherhood and labour in the context of neoliberal notions of citizenship. For example, in one memo between articles, I noted how articles about infant feeding often referred to scientific findings about children's aptitudes in later life, and articles about work-family conflict often pointed to family leave policies around infant care (which often referred to infant feeding). Here emerged a conceptual entanglement between the representation of infant feeding as a scientifically-supported social investment, and women's paid work and reproductive work as antithetical, to give one example. The memoing and discussion phase was key to

my conceptual mapping and drawing relationships between discursive threads to uncover deeper meanings about my topics of study.

6. Finally, using the established hierarchy of major and minor themes (Appendix B), I selected the distinctive empirical data sets for each chapter based on their representation of stories about responsible maternal citizenship that emerged here as unique, disciplinary, common or inflammatory, and most favourable for the dominant group of women. Following my inductive research approach, I allowed the exploratory data collection of news media texts to generate new themes and refer to new bodies of literature. Once the major themes were established, I probed respective bodies of literature outside of the field of citizenship that were points of reference in news media representation. This decision represents the critical “interdiscursive” component of my analysis, as I traced discourses to which discursive threads in my data were referring. I used the scholarly literature of citizenship, particularly notions of gendered responsibilities, care work, neoliberal notions of independence and flexibility, and maternalism as discussed above, to frame and thread together the four case chapters in pursuit of my research question. Here I followed the aim of CDA to connect the discourses of each representation to the broader discourses and ideologies to which they gesture. The themes I will present, which are discussed in more detail below in chapter summaries, are responsible working mothers; biomedical research on infant feeding and its representation; state-sponsored public health campaigns promoting breastfeeding; and responsible reproduction in the context of below-replacement fertility.

Note on Publication Sources

Given my use of CDA and visual content analysis, it is necessary to consider who is producing content and who is the target consumer (i.e. the general representational and political slants of each newsmedia source). Discussions of motherhood in the *Toronto Star* and *Globe and Mail* overlap in many ways, particularly on the topics of breastfeeding, juggling motherhood and paid labour, celebrity mothers, fertility and pregnancy, age of mothers, and maternal happiness. Their angles vary, though, which is unsurprising given the disparate political bents of each publication—the *Globe* has consistently endorsed the right-wing Conservative Party of Canada, while the *Star* has endorsed the more centrist Liberal and New Democratic parties. On the whole, the *Star* covered more stories on mothers juggling multiple labour burdens, especially the lifestyle of high-profile mothers or mothers in unique careers like elite athletics, military, or fine art. The *Star* also featured stories politicizing poverty and women’s wage gap as the “motherhood penalty.” The *Globe* covered many of the same topics, but was more likely to discuss parenting styles (e.g., attachment parenting, the helicopter mom). *The New York Times* enjoys a wide global circulation rate, known in the industry as the “newspaper of record” (Encyclopedia Britannica 2011). It is known for its cosmopolitan tone and liberal slant. The *Times* yielded 6,810 results on motherhood, covering a range of material from feature stories to content reviews to personal profiles to reports on demographics. The topics overlapped with those covered in the Canadian sources, including breastfeeding, maternal age, wage inequality and the motherhood penalty, juggling care work and paid labour, fertility, and kinship. Though difficult to accurately compare topic ratios with the smaller publications, which do not have nearly the breadth of coverage, the *Times* featured more discussion of migrant care labour, nannies, alternative kinship structures including international adoption and single motherhood,

motherhood and race, queer parenting, mental health and mothering, new reproductive technologies, literary profiles of mothers, and the political status of motherhood as a social position—unsurprising given its cosmopolitan target readership. It seemed to feature celebrity mothers less prevalently than the other three publications. *USA Today* represents celebrity motherhood almost exclusively. For example, in a keyword search of “motherhood” from February 16, 2015, the cover page turns up five hyperlinked icons of celebrities Mila Kunis, Jennifer Aniston, Li Na, Venus Williams, and Alyssa Milano, respectively talking about motherhood. These articles are generally depoliticized accounts of women’s “lifestyles,” which is to say their affluence and glamour is central to their stories. With the exception of some book reviews of popular motherhood literature and infrequent editorials (usually clustered around Mother’s Day), the high-profile publication presents an exclusive version of celebrity (often Hollywood) motherhood that captures public attention, a representation that became prominent in the 1990s (see Douglas and Michaels 2005). Because this phenomenon of celebrity motherhood is widely studied (Charlesworth 2014, Cobb 2008, Jermyn 2008, O’Brian Hallstein 2011, Pitt 2008), I will direct my analysis away from questions of celebrity motherhood when it comes to gendered labour. For numerical breakdown of representations by publication, see Appendix C.

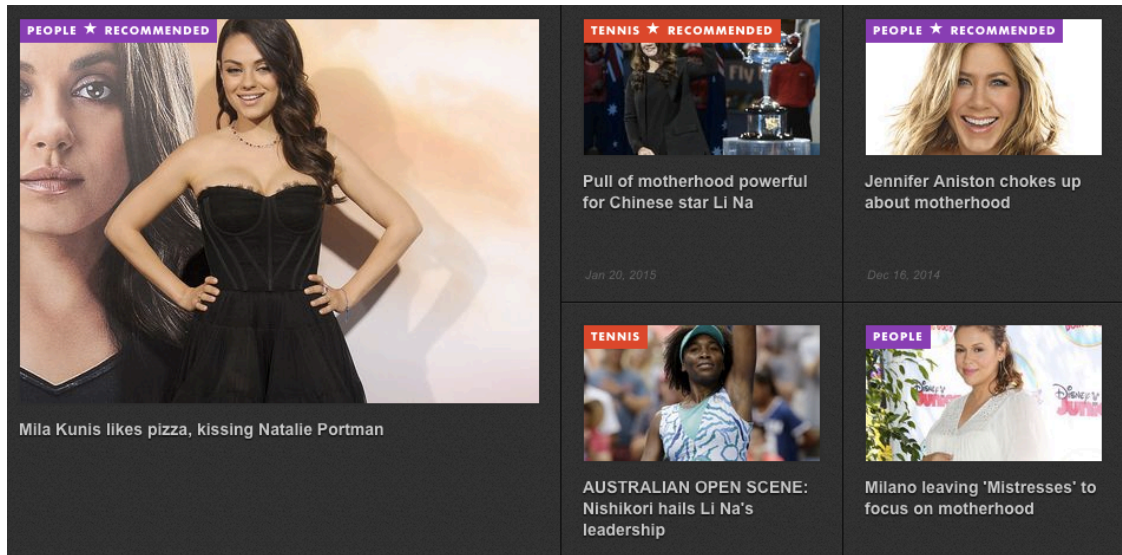


Figure 1: Screen shot from the results page of keyword search for “motherhood” on Feb 16, 2015.

I explore several prominent themes throughout the dissertation (see Appendix B), but pay particular attention to three of four top themes from my news media research: representation of women’s work-family conflict or role strain, infant feeding, and fertility and wellbeing. These relate directly to the question of women’s conflicting citizenship responsibilities. I limit my examination to texts produced and circulated in Canada and the United States for three reasons: because we share mediated content, from popular texts to scientific information, because of the analysis gleaned from analyzing representations against their contrasting welfare states, and to paint a detailed picture of both the pressures facing women and the global care gaps in these overlapping economies. In doing so, I am able to trace how mothers’ labour is represented and situate representations in contrasting national contexts, making distinctions between the two countries’ parental leave legislation where relevant. Since the data presented here is highly consumable across borders, I often abstract from place in discussion of maternal citizenship responsibilities in neoliberal conditions. The theoretical contributions presented here could be

operationalized and tested within national contexts more explicitly, following the research on the Canadian context and neoliberal technologies by Melanie Knight and Kathleen Rodgers (2012).

Guiding Comments and Map of Subsequent Chapters

From my title analysis of thousands of newspaper articles on motherhood and in-depth content analysis of hundreds of these, I discovered that discourses of contemporary motherhood frequently point to ideological conceptions of paid employment and infant feeding. The friction—generally presented with affective referents to anxiety, stress, depression, and feeling overwhelmed—between the ideal worker and the ideal mother is particularly focused on the highly specific and embodied reproductive labours of pregnancy, birthing, and breastfeeding. The friction is variously termed a problem of “work-life balance,” “work-life conflict,” and “work-family balance.” While of course this friction does not cease to exist for parents after the infant care years, often the discussion hinges on maternity leave and infant feeding—unsurprising given the lack of universal leave in the US, and the particularly gendered and embodied demands on mothers through pregnancy, childbirth, and breastfeeding. This focus is not exclusive. For example, Anne Marie Slaughter’s immensely popular messages as a public intellectual are rooted in her struggle to balance her devotions to work and her teenage son. Nonetheless, this window of embodied, intimate care for mothers of infants poses a thorny problem for the Wollestonecraft dilemma, as gender-neutral prescriptions of citizenship fail to account for uniquely sexed labour.

In Chapter 2, I draw out the complexity of the theme “work-family conflict” by staging a close reading of nine separate representations that rose as media moments from my newspaper content analysis: two film-spot advertisements, two Hollywood films, three public figures who are working mothers, and two women in politics. Each of these texts was selected based on its repeated circulation in multiple, international media outlets, as well as its richness for threading an elaborate and often incoherent story about the position of mothers with regard to their labour responsibilities. While these nine texts are not aiming to be *representative* of the data I surveyed in my newsmedia title and content analysis, together they contain many of the symbols that saturated my initial examination. Woven together, these nine texts provide crucial insight into how muddled women’s responsibilities are. This chapter sets the foundation for subsequent chapters since the discourses of women’s conflicting work and family responsibilities underlie discussions of infant feeding, fertility, and representation of maternal feelings of fear and sadness.

In Chapter 3, I examine the theme of infant feeding, as breastfeeding is embroiled in discussion of women’s labour and citizenship rights. In this chapter I highlight feminist science critique of the representation of women’s bodies as I synthesize and analyze leading Western scientific research on infant feeding since a landmark trial in 2007. The reason I take a feminist science lens to biomedical research is because in my media content research, scientific research was frequently cited in prescriptions of what women should do (breastfeed) to secure the future wellbeing of their children. The influence of science on moral prescriptions of citizenship has long concerned feminist philosophers of science (Haraway 1989). I determined the importance of the 2007 trial as a starting point because both media representation and biomedical literature on correlation and causality and infant feeding commonly referred me here, and the popular press

and transnational mainstream health organizations heavily cite the lead investigator of this trial as a primary source of scientific expertise globally. Feminist social scientists who engage the science of breastfeeding (Rippeyoung 2013, 2014; Wolf 2011) also rely on this groundbreaking research.

In Chapter 4, I take another look at infant feeding, but from a different angle to show how infant feeding has a far more complicated relationship to gendered citizenship than contemporary theories of citizenship and care allow. The theme of breastfeeding is unabating in contemporary news media representation of motherhood, and it appears relevant to women's citizenship through both the biomedical research examined in Chapter 3 as well as in public health discourse—a connected but discrete field of representation. Breastfeeding is both a persistent nub in popular debate over women's responsibilities to care, and particularly relevant to the corporal conditions of women's citizenship contract and thus the Wollstonecraft dilemma. At a recent conference on care, labour, and bioethics at Brock University in Ontario (Consuming Intimacies 2015), known cultural anthropologist and long-time breastfeeding advocate Penny Van Estrik announced that “breastfeeding is unlike anything else” when it comes to labour, care, the body, and health. Building on the feminist science lens from Chapter 3, here I examine the distinctly politicized aims of major *state-sponsored* breastfeeding advocacy campaigns in Canada and the United States since 2008—following the release of the 2007 breastfeeding trial. To clarify why there appears to be a second chapter on breastfeeding in this dissertation: here I move away from examining the biomedical findings themselves to examining the symbols and texts of public health campaigns that incite women to breastfeed. I focus on four major campaigns—two national, one provincial, and one urban/municipal—that have served as

templates for campaigns that followed, and that appeared repeatedly in my initial news media title and content research. While representation of infant feeding is the theme of chapters 3 and 4, each chapter presents distinctive voices and technologies that responsabilize women: modern medicine and the positivist tradition, and the biopolitical manoeuvres of the state.

In Chapter 5, the tone of my analysis shifts as I examine the third theme from my content analysis: representation of the relationship between women's feelings and their fertility or reproductive behaviours. The shift in tone is due in part to my turn to affect theory, which I use to make sense of an archive of popular editorial that tells a story about the relationship between women's happiness and their reproductive behaviours. The shift in tone is also due to the fact that by giving the theoretical concepts that I develop throughout this dissertation full connotation using affect theory, this chapter serves as both a case study of its own and a sort of theoretical terminus for preceding chapters. The editorials I analyze here—first appearing in current affairs magazines like the *Atlantic* and *Time* and sometimes in long-form essays in the *New York Times*—and off-shoot fringe publications that are cited in mainstream editorial, themselves became objects of re-circulation in the newsmedia I surveyed at the start of this project. Here, I start my tracing of this story at a popular work that was published in 2001, since this year marked a renewed discussion of women's responsibilities to citizenship after the US census revealed a dropping fertility rate and a shift of highly educated women out of the paid work force to domestic labour. I map the story theoretically by elaborating the way affect theorists have conceptualized the gendered responsibility to good feelings as a gatekeeper to citizenship. I focus on the notions of the “promise of happiness,” “happiness objects,” (Ahmed 2010), “cruel optimism,” (Berlant 2010), “reproductive futurism” (Edelman 2004), and “public feelings”

(Cvetkovich 2003), as these ideas directly question heteronormative and gendered responsibilities to human and social reproduction, and the feelings generated by bodies who refuse to or cannot be dedicated to securing a normatively healthy future. To assist in unpacking this nuanced and at times incoherent conversation about what women should do to navigate their competing labours and securing good feelings, I momentarily invoke social psychology findings on the relationship between women's reported wellbeing and childbearing—findings that are inconclusive and helpful to interrogate popular, commercial directives. I conclude by considering the dialectical relationship between women's responsibilities in popular editorial and social psychology literature in the context of queer theories of affect advanced by Ahmed (2010, 2012), Berlant (2004, 2010), Cvetkovich (2012), as well as Halberstam (2010) and Puar (2007) on the temporal qualifications of feelings, and suggest what a theory of the affect of motherhood—specifically its futurist orientation to the wellbeing of others—has to offer theories of feminist citizenship and gendered labour (Lister 2003, Tronto 2013).

Chapters 2 through 5 will advance my question—how are mothers being socially responsabilized toward multiple forms of labour simultaneously and to what effect?—and show that different women are being differently tasked with an unprecedented affective burden related to their fertility and child-rearing responsibilities in an age of precariousness. I keep close the idea that if the most privileged women are coming undone in pursuit of the good life, women with less power are set up to fail.

Chapter 2: Media Portrayals of Responsible Working Mothers

Facebook COO, Sheryl Sandberg; Yahoo! CEO, Marissa Mayer; Former Princeton University Dean and Director of Policy Planning for the US State Department, and current President and CEO of the New America Foundation, Anne Marie Slaughter; to name just a few. In the past five years, we have seen the stories of these working mothers and their high-power contemporaries splashed across numerous major media sites including the *National Post*, *Globe and Mail*, *CNN*, *Time*, *New York Times*, *LA Times*, and *Washington Post*.

As I highlighted in the introduction to this dissertation, contemporary popular representations of motherhood and work include a set of stories about mothers, some of whom have come to represent the “rise of executive feminism”¹⁰ in mainstream media. Of course, contemporary representations of motherhood are not limited to stories about these “c-suite” (senior executive positions beginning with “chief”) mothers. When taken together with other prominent stories, two things are additionally striking: their ordinariness, especially the extent to which representations depict women of considerably privileged social locations as “typical” of the

¹⁰ Joan Williams, Distinguished Professor of Law, UC Hastings Foundation Chair and Founding Director of the Center for WorkLife Law, and her daughter, legal scholar Rachel Dempsey, coined this term in the *Harvard Business Review* in an article responding to the popularity of Sheryl Sandberg’s *Lean In* and Anne Marie Slaughter’s *Atlantic* article on “why women still can’t have it all.” See Joan Williams and Rachel Dempsey, “The rise of executive feminism,” *Harvard Business Review*, 28 Mar 2013, retrieved January 20, 2015, <https://hbr.org/2013/03/the-rise-of-executive-feminism>

“average” mother’s struggle. Second, the ways in which these mothers are represented as what Sunera Thobani (2007) would call “exalted subjects,” or the way in which representations of the struggling, juggling mother subject glorify the way she is “coming undone”—struggling with feelings of stress, anxiety, and depression in the face of multiple burdens—in her pursuit of the most respectable of causes: wellness for her family.

In this chapter, I closely detail this three-part phenomenon—our cultural curiosity about c-suite women and our glorification of the struggle of ordinary mothers who are not “ordinary” at all—by examining nine separate representations. These texts speak to the same theme of work-life conflict, but their symbolic differences bring nuance to the topic of gendered responsibilities. Staging these nine texts together, I ask what they mean for understanding how and which mothers are responsiblized toward multiple forms of labour simultaneously. In my methods section in Chapter 1, I referenced Appendix C containing a number of themes that emerged from my newspaper key-word search of motherhood including work-family conflict or balance, infant feeding, fertility and timing of children, and the distinct struggle of women in prestigious physical and creative careers, like professional athletes or professional artists, becoming mothers and preserving their skills and ambitions. Here I focus on the first set of these representations, “work-family conflict,” as I explore the nuances of infant-feeding rhetoric in biomedical research and state-sponsored political campaigns in Chapters 3 and 4 respectively, and the rhetoric of career women “delaying” childbearing for their striking affective components in Chapter 5.

I begin this chapter with a close reading of a typical representation of the “average” juggling mother as she appears in a popular advertising spot for Fiat automobiles. The Fiat ad was

circulated and debated in major news media publications internationally, including in the publications I examined in my research. I then turn this analysis on several more representations of the juggling mother—both “average” and “executive”—in advertising, popular film, politics, and news media to draw out the various signifiers of the responsibilities of contemporary motherhood. In doing so, I demonstrate how the struggle of the most privileged mothers is deemed ordinary, even desirable. In this chapter, we also see how women’s responsibilities to citizenship are ranked depending on her ability to “juggle” successfully, and how neoliberal individualism, particularly the notions of personal responsibility and choice, prevail across different kinds of representations, even *competing* representations. In staging a reading of both the “average mom,” and the “c-suite supermom,” I end with a discussion of what these exceptional representations say about the complicated subject position of working mothers. Among the number of messages that women are receiving from popular content, what is transmitted by these symbols is that the way to guarantee self-sufficiency is either to have a financially secure partner and prioritize care work, or to accumulate enough wealth personally to outsource care responsibilities and to be “flexible.”

We know from queer disability studies (McRuer 2007) that the heightened urgency of the contemporary capitalist moment demands “flexible bodies” (Martin 1994): bodies that are both able and heterosexual, since queerness and disability are thought to threaten productivity and the capacity to adapt to changing and scarce circumstances. Building on Harvey’s (1990) “flexible accumulation,” and “flexibility” as celebrated condition of neoliberalism (Harvey 2007), Tronto (2003) has presented “flexible” work arrangements as dependent upon multiple care arrangements, while care work itself remains inflexible work. Time spent caring is qualitatively

different from time spent in non-caring paid labour, as caring is “not about mastery and control but about maintenance and nurturance” (Tronto 2003, 123). For citizenship, untangling the ways that mothers are represented as more or less “flexible” in response to these dichotomous labours gives a sense of how they are incited toward competing labour responsibilities for their inclusion in responsible citizenship. The representations of motherhood that we will see here show that this “flexibility” and also agility is demanded of mothers in particularly sexist and ableist ways, and is also tied to their ability to make smart consumer choices. The latter capacity is particularly classed, as low-paying jobs are less likely to provide flexible hours, paid vacation, or personal days off (Heymann 2000, Tronto 2003). As we will see, flexible bodies responding to flexible work reproduces hierarchies of care and responsible citizenship then, as outsourcing care to a global care chain remains a privileged way to get a ‘pass’ out of responsibility (Tronto 2013; Zembylas, Bozelek and Shefer 2014).

The Mother(hood)

In December 2012, the Italian automobile manufacturer Fiat mobilized the “juggling mom” motif in a YouTube video advertisement¹¹ that received over 2 million hits in its first month. “The Motherhood,” a hip-hop parody about a professional woman encountering the adversities of mothering young children, features a slender, blonde, white, British woman (in skinny jeans, Ugg boots, and obvious makeup). She is managing three blonde children, who are mostly contained to a living room furnished entirely in white. The spot fades into a spilling cereal bowl, continues with nods to countertop stickiness, laptop destruction by yogurt, and the slow erosion of glamour by leaking breasts, spit-up, and “infant defecation,” and wraps up in stylish relief with the hip, practical,

¹¹ Retrieved on January 15, 2015 from <http://www.youtube.com/watch?v=eNVde5HPhYo>.

reputation-saving Fiat 500L. The glistening (white) automobile reflects the mother's sophisticated taste while containing her domestic chaos and her two (white) terrier "bitches."

The three-minute spot went viral across news and social media, taken up in mainstream English papers including the *Globe and Mail*, the *New York Times*, *USA Today*, *MSNBC*, the *Guardian*, the *Daily Mail*, and the *Huffington Post* (in the United Kingdom, the United States, and Canada). On comment boards and in editorials, parents (mostly women) discussed various components of the ad, some claiming offence by what they deemed the insensitivity and hyperbole of the parody,¹² others reflecting on what they found to be the accuracy of the script,¹³ and others commending the script for

¹² See the Facebook comment board of Upworthy's posting of the ad: <https://www.facebook.com/Upworthy/posts/561889927185203>

¹³ Sarah Ditum, "How the Fiat ad captures the essence of modern motherhood," *The Guardian*, Jan 7 2013, accessed December 3, 2013, <http://www.theguardian.com/commentisfree/2013/jan/07/flat-ad-modern-motherhood>

its humour and validation of new mothers.¹⁴



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Despite its popularity and somewhat polarized reception, this advertisement can be viewed as typical in the genre of “modern mom” media representations, and in fact was purported to represent the “typical life of a mom” (Plant 2010). The most curious thing about the representation is, in fact, how it is deemed quintessential or representative when we know from distilling the content down to its component parts that “The Motherhood” only epitomizes our expectations of mothers in *cinematic* life. Outside of popular visual culture, we might expect the ins and outs of this mother’s day to look very different—less white in a number of ways. Yet we are accustomed to seeing this mother in film and popular fiction (e.g., the characters of Debbie in *This is 40* and Kate Reddy in *I Don’t Know How She Does It*, which I analyze below), and

¹⁴ See Facebook page, “The Motherhood feat. Fiat 500L,” accessed December 3, 2013, <https://www.facebook.com/pages/The-Motherhood-feat-Fiat-500L/143784392439351>

¹⁵ Figure 2: Fiat’s “The Motherhood,” still from film, accessed November 27, 2013, <http://theinspirationroom.com/daily/2013/fiat-and-the-motherhood/>

advertising (e.g., the “sainted” mother¹⁶ in television commercials who enjoys doing domestic labour for her family¹⁷), so regardless of whether or not her strife is relatable or average, we understand her as common, even ordinary.¹⁸ This version of motherhood is distinctive and exclusive, particularly in terms of the privileged identity of the woman and her obvious affluence—both of which we are encouraged to see and indeed relate to as typical and plainly middle class. In cultural studies, there is an explanation for this phenomenon of seeing archetypal life as typical, and its power to induce consumption. “The Motherhood” advertisement represented an illusory, archetypal life where the “collective fantasies of popular life are worked out” (Hall 1997: 265)—that is, where the exclusion of poor and racialized motherhood is the norm in representation and even takes on the status of a cultural truth.¹⁹ To create a desire for and sell Fiats, this representation, which skyrocketed to fame, encourages women to relate to and desire this brand of motherhood. Importantly, the lead character in “The Motherhood” achieved celebrity status not because she accurately portrayed most women’s lives, but because her collective glamour, pleasure, and heroic charisma are out of reach for most women. Media theorist Chris Holmlund (2013) explains that popular representations depict “impossible bodies” because consumers are most intrigued by bodies that have higher status than their own, as if consuming them allows the viewer to temporarily share in that status. As advertising expert Jean Kilbourne (1990, n.p.) at the Center for Media Literacy confirms, these ads sell products by selling “concepts of success and worth, love and sexuality, popularity and normalcy. They tell us who we are and who we should be.” For Fiat, women are seduced by the idea of a chaotic life

¹⁶ Guerilla Girls (2003).

¹⁷ See Scharrer, Kim, Lin, and Liu (2006).

¹⁸ See “Fiat 500L 'The Motherhood' ad: U.K. car ad shows 'typical' life of a mom (VIDEO),” *Huffington Post Canada*, retrievable at: http://www.huffingtonpost.ca/2013/01/03/flat-500-the-motherhood-ad_n_2403894.html.

¹⁹ Dicker (2013) says “Whether the ad sells cars or not, this mom speaks the *truth*: Once you’re in The Motherhood: ‘you’re here for good’” (*emphasis mine*).

where career and children collide with a nice house, nice things, good friends, and a hip white car.

Based on my news media research, the Fiat advertisement can be conceived as an entry point into a genre of media representations of white motherhood that construct motherhood as both exclusive to thin, white, wealthy, heterosexual, married women and common to the middle-class. “The Motherhood” typifies what could be called the “juggling mom,” whose role friction and sense of dissonance we celebrate and satirize—as the respectable story of a responsible woman who was once a self-sufficient professional and is now, among some farcical obstacles, redirecting her devotions toward her family, at least for a time.²⁰ The representation of the juggling mom is not new and has not always been tied directly to white skin. For example, in the 1980s, TV moms like Clair Hanks Huxtable on *The Cosby Show*, Angela Bower on *Who’s the Boss*, and Maggie Malone Seaver on *Growing Pains* showed shifting gender roles in the “typical modern family.” Clair Huxtable was (and still is in commercial media) framed as a “feminist hero” for her representation of strong, black, marriageable femininity; a woman with a law degree, a successful husband, well-behaved children, and a flourishing romantic life.²¹ *Who’s the Boss* aimed to tell a cutting-edge story about gender role reversal, with Angela Power representing the beautiful, professional matriarch who scoffed at her own lack of domestic expertise.²² Maggie Malone Seaver, the journalist whose husband worked at home so she could go back to work, also depicted the modern, dual-earning family where the traditional gendered division of household and paid labour was challenged. However, the context for

²⁰ See Blair-Loy’s (2005) *Competing Devotions*.

²¹ See Jason Bailey, “The other Huxtable effect,” 18 Sept, 2014, *Slate*, http://www.slate.com/articles/arts/television/2014/09/clair_huxtable_feminist_hero_the_cosby_show_wife_revisited_on_30th_anniversary.html

²² See Justine Harman, “She’s the boss,” 27 Jan, 2015, *Elle*, <http://www.elle.com/culture/celebrities/interviews/a26401/shes-the-boss-judith-light-on-angela-bower-transparent-and-diamonds/>

and specificity of these symbols of motherhood have shifted and stayed the same in several important ways. Women's rate of participation in the workforce has been fairly stable for the past two decades, and more women than men are entering university programs, so the juggling mother is now standard (Basset 2005, Doucet 2004, England 1996, Garey 1999, Guberman and Maheu 1999, Hays 1996, Hewison and Downswell 1994, Hochschild 1989, O'Connell and Bloom 1987, O'Reilly 2010, Thompson 1996). At the same time, the middle of the middle class has "hollowed out" in both Canada and the United States,²³ making representation of the financially-secure family of suburban domestic life far less common; dual-income households are more common and necessary than ever;²⁴ and the labours of responsible parenting have intensified to comply with empirically-based (but selective) risk aversion (Douglas and Michaels 2005, O'Brian Hallstein 2010, O'Reilly 2010, Wolf 2011). For all that we understand recent representations of the juggling mother as typical or average, a figure embodying what Nira Yuval-Davis calls the dual nature of women's citizenship (1993) where women are at once included in the public realm in some respects but must obey rules specific to them in others, this kind of mothering and its myriad signifiers are out of reach for most women.

²³ For the widening income gap, see "An Overview of Growing Income Inequalities in OECD Countries: Main Findings," 2011, *Divided We Stand: Why Income Inequality Keeps Rising*, <http://www.oecd.org/els/soc/49499779.pdf>. For plot of the declining median income and media wage, see BCA Research Report, "Occupy Wall Street: Just noise?" 21 Oct, 2011, <http://blog.bcaresearch.com/page/5?s=report+2011>. For analysis of these figures, see Eric Lim, "Canada's middle class being 'hollowed out,'" *Financial Post*, 5 Dec, 2011, retrievable from, <http://business.financialpost.com/2011/12/05/canadas-middle-class-being-hollowed-out/>; Daniel Tencer, "Hollowing out of middle class jobs in Canada: TD Bank sees low-, middle-wage jobs shrinking," *Huffington Post*, 28 Feb, 2013, retrievable from, http://www.huffingtonpost.ca/2013/02/26/hollowing-out-middle-class-canada_n_2765929.html; Tavia Grant, "Five myths about Canada's middle class," *Globe and Mail*, 19 Nov, 2013, retrievable from, <http://www.theglobeandmail.com/news/national/time-to-lead/five-myths-about-canadas-middle-class/article15515586/>

²⁴ For Canadian context, see Employment and Social Development Canada "Indicators of Canadian Wellbeing," retrievable from <http://www4.hrsdc.gc.ca/.3ndic.1t.4r@-eng.jsp?iid=37>. For US context, see United States Department of Labor, retrievable from <http://www.dol.gov/wb/factsheets/Qf-ESWM07.htm>

The Motherhood Signifiers

The Fiat advertisement “The Motherhood,” its popularity, its symbols in video and text, and its unapologetic sales objective, is a useful place to start unpacking what counts and who is counted in the symbolic realm of contemporary motherhood. As E. Ann Kaplan (1992) notes, dominant cultural products that represent motherhood, or represent what she calls the “Imaginary mother” (218), give meaning about cultural values that interacts with “real life” mothers. Thus pulling apart the symbols contained by a representation of motherhood tells us something about how we imagine mothers, and what this has in common or not with mothers in real life, as many others have noted in their discourse analysis of media motherhood (Collins 1990, Douglas and Michaels 2005, Green 2012, Hancock 2004, Podnieks 2012, Stitt 2012). The Fiat advertisement’s obviously white and upper-middle-class prejudice is common in advertising where “the needs of capitalism and the traditional values of patriarchy are happily married” (Bartky 1990, 28; see also Baumann 2008, Bordo 1993, hooks 1992, Redman 2003). In addition to these facets, its compilation of symbols, all strategically compiled with the aim of selling a car to a newly discovered target audience,²⁵ tells a detailed story of what it means to be a young parent today and plays on the idiosyncrasies of how this has shifted. From her modern living-room decor to her Facebook activity, the mom of “The Motherhood” portrays a scrambling mother as the contemporary mothering ideal and, according to some critics, “gets real” with the “essence” of “modern motherhood.”²⁶

²⁵ Fiat UK marketing director Elena Bernardelli told the *Daily Mail*, “We wanted to connect with our target audience, starting with young mums, in a way that demonstrated our understanding of the challenges they face balancing motherhood with their desire to keep hold of their pre-children identity. We hope by dramatising the reality of embracing a new life stage in this way will raise a knowing smile from mums everywhere.”

²⁶ See “Fiat ad captures the essence of motherhood,” *Ottawa Citizen*.

In the Fiat ad, we see the rapping mother in three outfits, two of which are pyjama sets. Her other outfit—jeans and a cropped jacket—show that she is (or at least was) casually stylish even though motherhood has made this look less comfortable. As she explains, “Still got my wardrobe, but my thong now itches.” Her casual wardrobe and the fact that she is breastfeeding (“I express like the best from these holes in my chest”) put this mother in the home doing domestic labour in the daytime, implying that she is taking at least some time off work, or her work responsibilities are taking backseat to her family at this time. Her laptop is shown in the living room with the children’s toys to signal that she now prioritizes the domestic setting but that her work and family responsibilities are intertwined. It is clear that her primary devotion at the moment is to breastfeeding her baby, and when that is through, the dutiful mother has “a blender out the back” so she can responsibly “start up the weaning” with her homemade baby food. We do not see the mother dressed professionally, only knowing her juggling issues by the admittance that “work versus home is a mental combination.” Here she broadcasts how juggling labours puts strain on mental faculties, with “mental” doubling as ableist slang.

In many scenes, this mother is infantilized; in her pyjama pants and hooded sweatshirt, she is shown in the kitchen giving up on “real food” for “leftover fish fingers,” which is not supposed to strike us as odd because we have already bought into the idea that for this classy mother, fish fingers are not real food. Here the ad tells us that this mother is aware of the movement away from processed foods toward organic, natural foods, but she becomes relatable to mothers as she admits she has given up on the impossibility of a real food diet under the time trials of motherhood. As she bemoans spending “three months in PJs,” the mother is shown wearing one-piece pyjamas and an earflap toque, sitting cross-legged on the floor of a child’s bedroom. We

gaze at her through crib bars, feeling the full extent of the “house arrest” of motherhood that she is “in for good.” But we are to understand her house arrest as admirable, and her loss of friendships, expected. Longing for adult company, she “joined a book club just so [she] can drink some wine.” Here she solidifies her responsible devotion to the home; this is not the kind of mother who drinks a beer or two at home while watching her children. This kind of pleasure is relegated to leisure time. Also, she is continuously staking out a particular social class, as we see her as literate and with cultivated tastes: she joins extra-curricular activities like book clubs.

In addition to her responsibility to her two children (a boy and a girl), this mother is presented as responsible to her pre-child figure. While she claims to be living it “large, I mean bigger,” the actress is thin. Still, she ruffles through current trends in diets (Atkins, Keto) and exercise (yogalates, Zumba, pilates) to get her “bod back,” and links this expensive fitness regimen to her smart consumer choices: “I try [to] avoid the bread so I nearly never buy it.” These types of popular exercise routines are commonly couched in “fitspiration” mantras in other spaces (Hodler and Lucas-Carr 2015, Nash 2011), and, as Lianne McTavish (2013) explains in her academic popular culture blog *Fitspiration Brouhaha*, are grounded in the neoliberal, fatphobic, and ableist ideology of individuals “taking care” of themselves. This ableist “taking care” is particularly feminized. As Bordo (1993) explains in *Unbearable Weight*, discourses of “traditional femininity” include self-mastery, denial of appetite, temporary embodiment of masculine toughness in the public sphere, suffering, and bodily transformation. Even though the Fiat advertisement encourages us to laugh along to this mother’s trial and error through dieting and exercise, we are still affirmed that she knows her responsibility to fitness, thinness, and nutrition despite her change in lifestyle.

We understand the woman in this advertisement to be attractive (for a mom), but not as sexy as she was before she became a mother. In addition to her nursing bra and now-itching thong, in a string of wordplay at the end of the rap, she refers to herself as an “orgasm-faker,” suggesting that her sexuality now takes a backseat to her role as mother. Faking orgasms lands as a punch line, presumably because it is all-too familiar to new mothers, and of course, a woman concerned with sexual satisfaction on top of being a (presumably married) mother would be asking too much. Indeed, she “swapped [her] sexy handbag for a snot-stained sack.” This example of the selfless mother in a neoliberal context presents the tension of neoliberal motherhood: individual self-interest and responsibility are, at the point of becoming a mother, deferred to responsibility for children, so while the good mother must be responsible to her appearance, her responsible consumer choices now revolve around the needs of her family. Recall the second part of my argument from the Introduction: women are disproportionately inheriting the emotional burdens of neoliberal capitalism and are in turn encouraged to be flexible and resilient. Here we see not only a material commitment to being physically flexible through fitness, but also how the “mental combination” of juggling entails resilience to an incoherent hierarchy of responsibilities: to children’s wellbeing by dint of her individual commitments to fitness, nutrition, and smart purchases.

Breastfeeding is mentioned several times in the spot, fixing itself as a modern-day linchpin for good motherhood, which I explore in greater depth in the next chapter. Puffing out her chest, the mother declares that she wears her “nursing bra like a bullet-proof vest.” She further insists that she expresses “all the time, because the doc says to not breastfeed is a crime.” Here we see the

professionalization of parenting via the doctor expert (Apple 1995, 2006; Wolf 2011) and the militarization²⁷ of breastfeeding accoutrements (the “holes in her chest” and “bullet-proof vest” gesturing toward her patriotic conscientiousness and function over sex appeal). Reference to the doctor’s dismissal of alternatives to breastfeeding invokes the criminalization of women who do not breastfeed (Wax-Thibodeaux 2014), as well as the medicalization of women’s bodies via breastfeeding advice (Ehrenreich and English 1978). These directives are secured and respected by the responsible mother, even through laughs. Sure, she is agile enough to “pop a nappy on his back without a changing mat,” but when it comes to the child’s best interests, in step the medical and parenting professionals. The popularity of referring to parenting experts has increased since the 1970s. Over eight hundred books on motherhood were published in the US between 1970-2000, twenty-seven of them between 1970 and 1980 (see Douglas & Michaels 2005). A search on Amazon.ca turns up hundreds of non-fiction titles published between 2009 and 2013. This mother gives an example of being flexible enough to include the input of experts in her care work. Further securing the medicalization of pediatrics, she distinguishes herself from her own mother’s generation, giving birth in a time when cesarean sections are commonplace; she and her friends “compare cesarean scars, episiotomy stitches”²⁸ like battle wounds.

²⁷ See de Volo 2004, Enloe 2000, and Sjoberg and Gentry 2007 on militarization of women, maternal bodies, and femininity.

²⁸ In 2010, the caesarian section rates were 33 percent in the United States (US Centers for Disease Control and Prevention), 26 percent in Canada (Canadian Institute for Health Information), and 25 percent in the United Kingdom where “The Motherhood” is set (Health and Social Care Information Centre). Prior to its withdrawal from the question of optimal caesarian rates in 2010, the World Health Organization declared an optimal caesarian section rate of 10–15 percent. Potential reasons for the increase in C-sections in many countries include malpractice, improved technology in detecting prebirth distress, elective C-sections (popularized by “glitterati moms” like Britney Spears and Kate Hudson) and more complicated births due to rise in age at first birth in many countries (Canadian Health Services Research Foundation 2011).

We can see in the samples of text I have included so far that at its foundation, the song commandeers racialized tropes of criminality, rebellion and risk from the hip-hop genre²⁹— including mention of holes in her chest, a bullet-proof vest, time behind (crib) bars, house arrest, and the club in the hood. Within this cultural appropriation of genre and identity, the contents of the advertisement also invoke a white colonial sensibility in another way: through the mother’s turn to sterilization, cleanliness, and civility (hooks 1992, Jacobs 2009, McClintock 1995). We see this mother as ultimately hygienic within the temporary mess of spilled cereal bowls: her “sterilizers so dope, all [her] bottles be gleaming.” The slang in this line in particular reminds us that this hip-hop spot is ironic, calling up the recent trend of thin, rich, white women (e.g., Taylor Swift, Miley Cyrus, Lily Allen, Ke\$ha, Katy Perry) to culturally appropriate hip-hop by mocking black masculinity. The Fiat ad hip-hop spot followed a trend that prompted music writer Miles Raymer to designate 2012 the “year of the white girl rapper.”³⁰ At the heart of this cultural appropriation is ridicule. One need only think of Taylor Swift referring to herself as “T-swizzle,” a “singer turned rapper,” who “raps hardcore” while she “knits sweaters, yo,” rapping to Thug Story with black male rapper Faheem Rashad Najm (T-Pain). The staging of the Fiat ad as a hip-hop music video continues to mock in this vein: leaning on the car with her arms crossed and chin tilted upward looking tough, pelvic thrusts (although resignified, in this case), the popping of the hoodie, and gang signs. Mere months earlier in 2013, Lily Allen deployed the same symbols in her sarcastic and ultimately racist music video, “Hard Out Here.” While satirizing the genre, The Motherhood mom affirms the class privilege and hyper-civilized nature of good, white, responsible motherhood, and she does so in several explicit moments in case we miss it:

²⁹ See Rodriguez (2006) and Androutsopoulos and Schultz (2003) on the cultural appropriation of the hip-hop genre.

³⁰ See Miles Raymer, “Kitty Pryde and the Year of the White Girl Rapper.” *Chicago Reader*, 9 May 2013, accessed November 18, 2013,

this mother's "décor was smart, [her] taste was extra picky" prior to having it appropriately cluttered and understandably sticky from the work of raising children. The home is almost all white, impractical by most parents' and most people's standards, and she has sacrificed her "designer sofa" to "puke in the stitches" because that is the stuff of motherhood. Somehow this video is so preposterous, and yet it remains exactly what we have come to expect from and desire in both cinematic mothers and cultural appropriative texts featuring white women.



Perhaps the subtlest signifier for contemporary responsible motherhood in the Fiat advertisement is the presentation of the mother's appropriate obsession with her children, which Andrea O'Reilly (2010) explains is unique to the context of recent intensive mothering. On the one hand, the mother escapes the motherhood prison for a book club, a metaphor that brazenly likens this affluent white woman's domestic labour to being celled in the context of the unprecedented size

³¹ Figure 3: Fiat, "The Motherhood," still from film, accessed November 27, 2013, <http://www.contracthireandleasing.com/car-leasing-news/fiat-celebrates-da-motherhood-with-new-500l-rap-film/>

and scope of criminalization and incarceration of communities of colour by the prison industrial complex (see Brewer and Heitzeg 2008; Davis 1998; Sudbury 2004, 2005). On the other hand, she is also “flooding up your [Facebook] timeline with [her] baby news,” and proudly, though sarcastically, noting her new expert knowledge: the difference between her child’s toy tractor and toy digger. Invoking more military metaphor, the mother describes herself as the peacemaker of family feuds, and the fighter of “nappy rash.” She pokes fun at herself, understanding the humour in her sudden, obsessive devotion to childcare. She explains that she and her friends used to talk about their “lives,” but “now the conversation switches,” as if to say that motherhood is outside of real life, or life ceased to exist when the totality of motherhood began. Upholding the false dichotomy between nature and culture, a tireless myth, we see that the mother is no longer a producer of culture, but a producer of nature (Haraway 1989, Harding 2011, Sydie 1994); she is attuned enough to be in on the joke of how silly is all-consuming motherhood, but she accepts this devotion as par for the course and quips with reference to gang culture about it holding her captive: “once you’re in the club, you’re here for good.” This is meant to be a portrait of what contemporary responsible motherhood looks like: concerned with image, responsible for thinness, responsible for care work, responsible to breastfeeding, responsible for working outside of the home (but only after domestic responsibilities are tended to), sophisticated enough to drink wine at a book club, and she blends her own baby food.

How does such an exclusive representation come to be understood as representing the “essence” of motherhood? Surely the comedic beats around caring for children are endearing, and mothers—the target audience of the campaign—are encouraged to see their own undone selves in this amusingly worn-out character. At the same time, the ad refers to a real labour struggle that

women are encouraged to overcome, and in fact this mother successfully rises above the “stuff” of motherhood—the juggling of multiple labour burdens without another parent or caregiver in sight—through a smart consumer purchase (the Fiat). As cultural theorist Stuart Hall argues, such idealization in representation involves both affirmation and disavowal, where “a powerful fascination or desire is both *indulged* and at the same time *denied*” (1997: 227). Though the mother is presented here in a “struggle” against the confines of new motherhood, we are encouraged to identify with and affirm the fantastic, or eccentric, bits of her life, while disavowing them as messy, unsophisticated, and trivial—kept contained by the right, stylish material objects. Fiat presents us with an example of the “everymother” who is trying to hold it all together but is always on the verge of breakdown, and though this mother does not come close to representing the “average” mother’s trials, we are seduced by her glamorous presentation of family issues and therefore see her as at once a hero and grotesque. This juxtaposition not only makes her more charismatic to the viewer, and further consecrates her as the mother ideal; it incites us to celebrate this mother’s undoing for a noble cause. She feels as though she is on the verge of coming undone, as all mothers do and are, and we cheer the fact that she barely contains herself with diets, fitness routines, and a modish vehicle. Far from critically presenting the strain between mothering as a restricted, or oppressive, site and mothering as a site of relief from the capitalist workplace,³² or even of empowerment where we

³² Motherhood, as it involves domestic labour in the private sphere, is embroiled in the tension between home as secure retreat and home as a primary site of violence. While feminists have demystified the private or domestic sphere as “safe” or free from violence and abuse (see Westendorp and Wolleswinkel 2005), critical scholars have also framed homes as necessarily places of security for queer and disabled folks. In “Disability, embodiment, and the meaning of home,” Rob Imrie (2004) presents the nuanced view of home as sanctuary, or a “place of secure retreat.” Still, Eli Clare (2007) complicates the notion of “home” as not necessarily your family home or where you come from. Ann Cvetkovich (2012) develops this idea further through an examination of nostalgic attachment to home and place.

might consider both the oppressive and radical potential of care labour;³³ Fiat's version of modern motherhood is a place of struggle and humour that is willingly accepted so long as the buyer acquires the proper accessories (in this case, a Fiat 500L).

Fiat's The Motherhood is not unique in style or strategy. In 2015, Similac, a popular brand of infant formula, released a hip-hop parody with the nearly identical title—"The Mother 'Hood," making its racialized reference to the "hood" undeniable—which received a stunning 4.5 million views in its first week. Similac's umbrella campaign is called "Welcome to the sisterhood of motherhood"—language that represents a commodification of feminism. It also calls to mind the white feminist desire to achieve "sisterhood" by grafting all women's experiences onto their white ones in pursuit of a "common cause," raising a history of shattered partnerships between white and racialized women, able-bodied and disabled women, and queer and cis women (see Williams and Chau 2007). The campaign strategy shows awareness of women's role burdens as well as the tiring and emotional public conversation about women's multifarious responsibilities, especially when it comes to infant feeding, as demonstrated in the seductive video tagline: "Feel judged as a mom? Now you can finally laugh about it. Watch and share if you can relate." With this one candid phrase, giving women permission to have a laugh about their experience of surveillance and discipline, the campaign appreciates that mothers are in a state of coming undone, and leverages women's anxiety to appear the benevolent and sympathetic formula company.

³³ Fiona Green (2004) suggests that Adrienne Rich's argument—"even when restrained by patriarchy, motherhood can be a site of empowerment and political activism"—is still missing from motherhood scholarship and dialogue.

The Mother ‘Hood is scored to commercialized house music, a genre of electronic dance music from the 1980s that has surged in popularity with youth and young adults as electro house or progressive house, and is commonly blended with popular music (e.g., Lady Gaga’s “Marry The Night”). The Mother ‘Hood opens with eight frames, showing eight groups of parents with corresponding stereotypical “parenting styles” converging at a playground, including a group of breastfeeding mothers, formula-feeding mothers, “executive” mothers in suits, “alternative” mothers with short haircuts (raising lesbian possibilities for these mothers), baby-wearing mothers doing yoga, and formula-feeding fathers (shown barbequing meat!³⁴). The dialogue opens with a white woman who is bottle-feeding, exclaiming, “Oh look, the breast police have arrived,” to which a mother wearing a breast cover responds, “100% breastfed, straight from the source.” The cast goes on exchanging stereotypical quips—the script of the mommy wars,³⁵ writ large—until the “showdown” escalates and everyone charges toward the play equipment to fight each other. Caught up in the offensive, one mother accidentally lets go of her stroller, and the stroller and baby are shown tipping over the crest of the hill. The music cuts as a few characters take note. All at once, the troop of parents rushes down the hill, forgetting their quibbles to save what really matters to all of them—the baby.

Like the Fiat ad, the Mother ‘Hood reinforces and mocks intensive parenting at the core of contemporary motherhood, and despite the revolutionary move to include fathers in an ad about infant feeding (though they appear as temporary “babysitters”), refers only to motherhood in the

³⁴ The ad was lauded for including fathers, but by depicting the only men in the spot alongside a barbeque, the ad affirms the masculinity of these fathers as they partake in parenting. It invokes both the construction of masculinity using meat (Adams 2010, Buerkle 2009, Nath 2011, Neron 2015, Stibbe 2004) and the barbeque in particular as a masculine leisure hobby (Avieli 2013, Deutch and Elias 2014, Engelhardt 2010, Molina 2014): safely aligning the possibility of fatherhood with traditional masculinity by rendering beef preparation and consumption male activities.

³⁵ See Akass (2012), Crowley (2015), Lopez (2009), Steiner (2007).

title of the campaign and its hashtag, #sisterhoodunite. The ad reaches out to undone mothers, or mothers who are toiling under an emotional burden of juggling multiple labours while ultimately respecting the primacy of child wellness, who can relate to the all-encompassing feeling that the baby's safety is paramount. The ad portrays the accouterments—breastfeeding covers, birthing pools, the newest in slings, carriers, and strollers, and cloth diapers—of motherhood labour as comical. Here the Similac ad joins the Fiat ad in separating motherwork from actual labour—reproducing the 1970s framing of caring *about* as a “labour of love” (see Williams 2006b) and relegating care work invisible to the economy (Federici 1975, 2012). While Similac's portrayal of formula feeding as just as loving as breastfeeding challenges the supremacy of breastfeeding in intensive motherhood scripts, rhetoric of which I explore in the next two chapters, it establishes the baby as central to women's labour. The ad ends in the tagline, “No matter what our beliefs, we are parents first,” despite representations of women performing multiple labours simultaneously—a woman in a skirt-suit holding a tablet announces, “Oh yeah, well I pump during conference calls, hello.” The ad tells the story that women's ways of juggling their labour burdens, especially the way they are under each other's surveillance, are mere accessories to their real responsibility for the baby's wellbeing. The closing scene zooms out of a crowd of beaming parents around a safe baby in a wayward stroller. Now that baby is safe, their differences, which we now see as petty, no longer matter.

The Juggling Mother in Film

Hollywood producers have also capitalized on the enticing relatability and humorous plight of contemporary white, “middle-class” mothers. The plots of two popular films in particular are advanced by the figure of the “juggling mom” who comes undone through her labours for her

children: *I Don't Know How She Does It*, based on a novel published in 2002 by award-winning British author Allison Pearson and adapted by screenwriter Aline Brosh McKenna, and *This Is 40*, written and produced by Judd Apatow. Both of these films were reviewed and discussed in all four newspapers I examined, as well as in high-circulation papers outside of Canada and the United States. They both enjoyed some box office success (with annual ranks of 142 and 43 respectively), which is rare for the genre.³⁶ These films are part of a meager canon of popular screenplays about juggling motherhood that includes *Baby Boom* (1987) and *Erin Brockovich* (2000). The two films I am analyzing are the only blockbuster (successful, high-budget) films since *Erin Brockovich* to feature the story of juggling mother at the centre of the plot, though in Apatow's film, Paul Rudd receives first billing. *I Don't Know How She Does It* stars Sarah Jessica Parker as Kate Reddy, a "wife, mother, career woman, and juggler *par excellence*." Oprah hailed the novel on which the film was based as "a bible for the working mother" (MediaGuardian 2007). Journalist Marjorie Williams (2002) for the *Washington Post* called it "the definitive social comedy on working motherhood." Scholars have made reference to the novel by Pearson (2003) to ignite conversations about care work (Folbre 2008), work/family conflict (Cuddy, Fiske and Glick 2004; White 2005), geographies of motherhood (Ekinsmyth, Elmhirst, Holloway and Jarvis 2004), the birth of "mommy lit" (Hewett 2006), the problem with discourses of "juggling" and "flexibility" (Armstrong 2006), and the rhetoric of choice used to

³⁶ Box-office grosses are only one measure of a film's popularity, particularly since box-office results are more reflective of who goes to films and how well films are marketed by production companies. Further, box-office revenue no longer accounts for the majority of film revenue. Still, examining what kind of content succeeds at the box office tells which films are shown on the highest number of screens in real time. The two films I am analyzing here were the only two stories about motherhood labour among the top 150 highest-grossing films at the domestic US box office from 2008-2013, but they were not the only films to feature motherhood in that time period, nor were they reviewed highly. The fact that these films were marketed for a popular movie-going audience, which has been female-dominated since 2009, tells us something of the kinds of stories being told about motherhood that are marketable to a movie-going audience, especially which stories are *not* deemed marketable to a mass audience.

describe why successful professional women leave the workforce (Stone and Lovejoy 2004). I turn to *I Don't Know How She Does It* first in my analysis.



Figure 4³⁷

I Don't Know How She Does It presents unconcealed compassion for and exaltation of the juggling mother figure, affirmed by the cheeky tagline of the film: "If it were easy, men would do it too." Kate Reddy, the fictional "icon" for contemporary working motherhood, is *the* most impressive juggling mom. Her best friend tells us in the film's overture that she is,

³⁷ Retrieved from IMDB, "I Don't Know How She Does It, 2011," accessed November 26, 2013, http://www.imdb.com/media/rm392740608/tt1742650?ref_=ttmi_mi_all_prd_42

[the] smartest girl around, and [has] a heart of gold too. All us working mothers feel like we're spinning fifty plates in the air at once, but Kate, you can give her ten more plates, all the size of manhole covers, and she just keeps going. Big report due the next day at work: done. Sew some extra fairy wings on for Emily's recital: she's doing it. Last minute in-laws show up, she can do it—without mixing vodka and Xanax. It's amazing. I'm telling you, she's amazing.

Kate's frenetic juggling of labour is unapologetically celebrated in this film. Her coming undone, characterized by a bad bout of head lice and dried cereal on her blazer, upholds Stuart Hall's idea that ideal figures are at once idolized and admonished—we are encouraged to envy Kate's success and chuckle at her turmoil. Kate is a financial executive at a Boston-based investment firm. She is agile, efficient, coordinated, intelligent, and responsible: ever the dedicated (and successful) capitalist and the loving mother. She imitates the ableist, neoliberal ideal of flexibility that critical disability, feminist, and labour scholars seek to challenge (Armstrong 2006, Harvey 2007, Martin 1994, McRuer 2007). She is thin, blonde, heterosexual, and wealthy. She lives in a beautiful home in one of the most expensive markets in the United States. She is married with two children (again, a boy and a girl) and she claims to enjoy having sex with her husband. As Ahmed (2010) might say, she strives for the right happiness objects and she finds the right things pleasing.

In one of the film's early scenes, we see Kate lying in bed next to her husband, who is sleeping.

In special effects, a list—"the list"—appears on Kate's ceiling:

Emily's birthday party theme, pirates or popstars; things to buy, paper towels, toothpaste, pork chops; buy a birthday present for Jedda's birthday party; find out Jedda boy or girl; call the guy about the thing; make play-date for Emily with that kid that doesn't bite; refill washer fluid—wait, shouldn't that be on Richard's list? Ah, who am I kidding? Richard doesn't have a list!—wax something, anything; call Richard's mother and say 'hi,' or just email 'hi;' wash Ben's teddy bear; renew birth control pills; Twinkies;

Ambien; finish year-end fiscal summary; new hamster; start year-end fiscal summary; kegels; bagels!

There are many sensibilities at play in this list, but in general, we see Kate's family responsibilities laid out (with a work obligation somewhere near the end) and while we feel compassion for insomniac Kate during the scene, it is clear that none of these items are necessary for the survival of herself or her family. She is overburdened, and the film does suggest a critique of this gendered phenomenon, but her set of privileges keep her emotional burden from being a material threat to her family's survival. For the duration of the film, we see Kate spiralling toward breakdown, coming undone, plagued by extra travel at work (representing her exceeding success) and increasingly disappointed family members. The film reaches a climax when her son trips on a long-broken staircase at the family home, which Kate has not gotten around to reminding her husband to fix; she misses the trip to the hospital where the boy needs stitches, instead meeting the family there. This is the moment Kate realizes she is going too far toward coming undone. She is not keeping track of work around the home, and this has resulted in her son's injury. And she is not keeping up with care labour—at least not the high-status work of caring for children's emotional needs. Later that week, in a heroic moment, she tells her boss that she will not work late on one particular afternoon because she needs to rush home to make a snowman with her daughter—an activity that we can imagine as the high-status care work apart from body labour, which in the film is already outsourced to the babysitter. This story imitates Tronto's (2013) discussion of the trend of middle-class families outsourcing care labour, with the high-status work of supporting the son emotionally while he gets stitches, or enriching the daughter's experience through play (by making a snowman), still falling to the mother. When those tasks slip, mothers are coming *too* undone.

Like the mother in the Fiat ad, Kate Reddy is seductive because she purports to represent the trials of modern motherhood, of juggling care work and paid labour and achieving career success and a happy, healthy family, but Kate Reddy's life is exclusive. Not only does the actress Sarah Jessica Parker represent a typically exclusive Hollywood identity that is white, heterosexual, blonde, thin, and wealthy, Kate Reddy's slow erosion of glamour (a flake of cereal on her blazer; head lice in a business meeting; falling asleep before having sex) is both relatable and petty compared to the more pressing concerns of the "average" mother. Median household incomes in Canada and the United States are estimated at \$75,000³⁸ and \$51,000³⁹ respectively. We might imagine pressing needs like affordable child care, housing, health insurance, and transit. Kate Reddy's labour "failures" are humorous, never devastating, but still they are seductive, as overworked mothers can relate to the sadness or guilt of missing their children's discoveries and growth. Kate does not risk losing her (full-time, permanent, high-paying, high-status) job for showing up to work late. She only risks not being promoted to an account with a higher profile, a promotion she eventually does get because she is the juggler *par excellence*. In the scene where she advocates for herself in true *Lean In* fashion, she simultaneously tends to her daughter's emotional needs. Throughout Reddy's juggling and coming undone, the children are not going without care; they have a private nanny, a racialized young woman who, incidentally, is presented as unambitious, forgetful, and disorganized—far less responsible than Reddy. Still, Reddy does show us that time is scarce, even or especially for mothers at top income brackets.

³⁸ See 2012 figures at "Median total income, by family type, by province and territory," retrievable at <http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/famil108a-eng.htm>

³⁹ See "Household Income: 2012: American Community Survey Beliefs," retrievable at <https://www.census.gov/prod/2013pubs/acsbr12-02.pdf>

The main conflict in this story is one of not enough time for leisure and high-status, nurturing care work. As Kate climbs the corporate ladder higher, her time at home decreases.

We can see that this popular representation of motherhood and labour, like the others we have seen so far, contains both affirmation of mothers' labour burden and disavowal of both its messiness and its consequences. Xan Brooks (2011) for the *Guardian* writes, "who really cares about the troubles of the rich and powerful?" But this is the magic of popular representation of mothers—it is hyper-real, and women who will never reach the security of Kate Reddy are compelled to think that they belong in this story, as they too come undone. Finally, a film for them. All the while, viewers can see her flailing as laughable, even displeasing. Her messy hair, representing her feminine undoing, is almost maddening to watch because of course it is superficial and typically feminized. Adding to Kate Reddy's appeal, though, she makes a mockery of pressures to be a perfect mother—Kate's friend tells us that "any working mother who says she doesn't bribe her kids can add 'liar' to her resumé," and the scene cuts to Kate offering her children cartoons—and she subtly condescends those who make trivial demands of her time, like the stay-at-home mothers who organized a school bake sale, and the kindergarten teacher: "I work at a high-powered investment firm, yet nothing scares me more than being caught by my daughter's kindergarten teacher when we're late for circle time." (Yeah, right.) Reminiscent of the mothers of the Fiat and Similac ads, the script invites undone women to laugh at the hysterical demands on working mothers, while they are simultaneously expected to navigate their own comically laborious path for the good of their families. The various other representations in the film, including of the heterosexual marriage, aloof but responsible

fatherhood, stay-at-home mothers, and vulnerable children, work to secure the mother's accumulating responsibilities as status quo.

We might imagine that the juggling mom is now an established figure in contemporary popular family comedies—indeed, as one online commenter (electricceiling 2011) wrote on a message board about *I Don't Know How She Does It*, “A woman juggling a career and a family? Whatever next!”—but as my inspection of top-200 box office rankings since 2008 shows, motherhood is rarely in focus and almost never taken seriously in blockbuster films. This complies with systemic sexism in the film industry as illuminated by the Bechdel test.⁴⁰ Where it is developed for the silver screen, though, signifiers of her labour burden stray little from the key signifiers mentioned above. The year following the release of *I Don't Know How She Does It*, celebrity screenwriter and producer Judd Apatow featured the juggling mother figure in *This Is 40* (2012), his star-studded semi-sequel to *Knocked Up* about a married couple and the trials of family life at age forty. Critics touted the film as the story of everyone's family: Richard Brody, in a feature for the *New Yorker*, called the film “a tremendously rich experience” about “the stuff of life.” Starring Leslie Mann as the “whiny but self-aware mother of two” (Pols 2012) and Paul Rudd as a bumbling, modern-day everyman, the trailer contends: “This is marriage. This is family. This is work. This is life. This is not just their story. This is everyone's story.” The family in *This Is 40* looks like the West Coast version of the Reddy family. More critical reviewers were quick to point out that the film is hardly representative: Mary Pols (2012), reviewing the film for *Time* magazine, echoed its universalist appeal until she notes that it represents “a very white, upper-middle-class family life.” Philip French (2013) of the *Guardian*

⁴⁰ Introduced by Allison Bechdel in her 1985 comic strip *Dykes to Watch Out For*, to pass the Bechdel test, a movie must have at least two women who talk to each other about something besides a man. Test *Bechdeltest.com* is a user-edited database of films categorized by passing and failing the Bechdel Test.

rated the film highly but called attention to the “relatively narrow social range the film covers,” describing *This is 40* as “closer to *The Philadelphia Story* than *The Grapes of Wrath* when it comes to reflecting a national Depression.” Still, for a family comedy that is carried by Leslie Mann (even though she is billed second behind Paul Rudd) to reach acclaim and popularity, it is clear that *This Is 40* struck a chord.



Figure 5⁴¹

Judd Apatow’s mother character in *This Is 40* typifies the sort of white motherhood canon we have come to understand in popular film and television. Falling in line with Sarah Jessica Parker’s Kate Reddy and Fiat’s “Motherhood” character, Leslie Mann’s Debbie is very thin, white, and heterosexual, with long, blonde hair. In contrast to Kate Reddy, though, Debbie is not just flustered with responsibilities; she is lonely, desperate for a connection, and fundamentally unhappy. The representation is sad, and likely relateable. Debbie is married, has two children, lives in a big, white house—actually a renowned mansion in affluent Brentwood, Los Angeles—drives a luxury Lexus SUV, and works as the owner of a high-end boutique in white suburban

⁴¹ Retrieved from IMDB, “This is 40, 2012,” accessed November 26, 2013, http://www.imdb.com/media/rm559984896/tt1758830?ref_=ttmi_mi_all_sf_23.

Santa Monica, another of the most expensive real estate markets in the country. Like the other mothers, she is shown juggling labours and keeping up appearances, personally, professionally, and domestically. She is responsible to her family and her able body: the film shows several shots of Debbie running and doing calisthenics exercises in a park with a personal trainer. Though she is fit, she blames herself for her husband's use of Viagra, telling her trainer, "That's why maybe I work out so hard. Maybe he'll be able to get a boner again." We then see Debbie envying the youthful body of a coworker (played by Megan Fox) when it is clear that Debbie conforms to the beauty ideal. Like Kate Reddy, Debbie is shown taking responsibility for every part of family management, down to her husband's sexual pleasure.

In contrast to *I Don't Know How She Does It*, the main conflict in *This Is 40* is financial—they may have to sell the mansion—and the plot is driven by the what we are meant to view as a slightly eccentric yet relatable husband-wife relationship of Debbie and Pete (as opposed to the labour demands on mothers in particular). While this family's financial struggles are obviously not life threatening, the viewer is invited to relate to the sense of loss of control, of slipping, of worrying if they will ever get that sense of security back. Really, though, despite its superficiality in terms of the family's financial struggles, the film also serves as a critique of the American Dream, as these characters, who appear to be living it, are disconnected and unfulfilled. In one scene, after Debbie tells Pete she is pregnant, Pete is shown standing in front of the fridge, stress-eating. Debbie is shown struggling not to smoke cigarettes, and ultimately failing. We can read this presentation of Debbie as a critique of the idea that modern motherhood is fulfilling. However, the film also uncritically mobilizes symbols of affluence, which reproduces the erasure of families whose struggles are about survival. Debbie's multiple paid and unpaid labours

underpin plot turns as she comes undone—overwhelmed with pressure to keep her daughters from fighting, to keep her husband from bankrupting the family, to keep her business earning money, and to keep herself attractive and fit. In steadily coming undone to keep the family functioning and happy, Debbie presents the objective as futile and nonviable. But she also reinforces, though her subject position as an affluent, conventionally attractive white woman, a kind of maternal responsibility that exalts juggling mothers as at once the shrill-woman butt of the joke and the backbone of the American family. Debbie’s story tells us that the American Dream is a hoax, but she also tells us that in striving for it, we will likely land somewhere pretty great: a birthday party surrounded by people who love you. We can see Debbie’s labour responsibilities as subtly distinguished from earlier representations of mothers who played the successful counterparts to their equally successful husbands (*à la* Claire Huxtable, the lawyer, married to Cliff Huxtable, the medical doctor). Now Debbie’s work and home success is *required* to compensate for her unreliable husband—her boyish husband Pete is shown floundering with a gimmicky, nostalgic record label. Like Kate Reddy, whose husband is between jobs, Debbie is shown taking care of business, getting the kids ready for school, cooking vegan dinners from scratch, and trouble-shooting her business to try to improve household revenue. She and Pete represent what Jack Halberstam (2012, 19) has called the “new heterosexualities,” which Halberstam explains is the hallmark of Judd Apatow comedies: “women in these films, like high school students preparing for a competitive college application, pad their resumes with good works, yoga classes, advanced degrees, high salaries and lots of know-how.”⁴² Halberstam argues that we take these popular representations of the heterosexual

⁴² In his cultural analysis, Halberstam was theorizing the issue of gay marriage being struck down in California in 2008, and how the media framed black voters, particularly black women voters, as supposedly to blame for regressive legislation while white folks were framed as open-minded gay-marriage defenders.

white family seriously in the context of some families in the United States struggling to survive in the currently insecure (and racist, ableist, homophobic) political and economic climate. He critically positions “new heterosexualities” and the heterosexual woman character and her middle-class white household, both typical of the Apatow comedic genre, alongside the political rhetoric of “saving the family” or “investing in the family” in the United States. This family Halberstam contrasts with how black families in current affairs media, particularly in California following Proposition 8, are represented as “more conservative, more homophobic, but also more broken, more divided, and more perverse than any other” (2012, 24), reminding us that representations of white, responsible motherhood produce and are produced by a rhetorical responsibility to ethics in media and political culture. In the context of homonormative⁴³ liberal discourse, where race politics are intersected by gender, class, and sexuality politics, our appreciation of new (middle-class, white) heterosexualities provide the conditions for Debbie’s white motherhood to appear to reflect the norm, a beacon of liberalism. The shared race, class, bodily and sexual privilege of Pete and Debbie are reflected in the climax of *This Is 40*, where the family has a collective emotional breakdown at Debbie’s birthday party. Again, like the Reddy family of Boston, this family’s failure and this mother’s undoing are not actually threatening—they only result in a slightly awkward birthday party. The children are fine. At the same time, we bear witness to the failed promises of the American dream—as the parents of this family who have aspired to stability and happiness through known responsible acts are lonely and depressed.

⁴³ Lisa Duggan (2004) defines homonormativity as a politics that maintains heteronormative assumptions and institutions, anchoring a depoliticized gay culture in domesticity and consumption. In other words, homonormativity involves the protection of queer people who mimic heteronormative institutions of the family. It assumes that queer people desire heteronormative domestic life.

We have seen representations of the juggling mom and her responsibilities to care and paid labour in two widely circulated product advertisements and two Hollywood films about juggling motherhood. Not surprisingly, the juggling mom in these representations is far from representative of the “average” Canadian or American by race, class, age, or body type.⁴⁴ But her struggle with the multifaceted burden of household management, paid work, and the emotional labour of both nurturing children and coping with coming undone is meant to sell by appealing to and validating real women’s burdens to comedic effects. Taking a turn toward representations of real-life women in media, I now look to current affairs and news media portrayals of mothers’ responsibilities to work and care. One of the major thematic categories in my research on news media texts about motherhood was the juggling of the “executive” mother that we saw in the introduction to this dissertation. Here I briefly gesture toward the representation of the executive juggling-mom character, saving a deeper discussion of the affect of executive motherhood for Chapter 5. These are women whose reproduction and domestic labours are scrutinized in the media while they achieve the highest possible status on the corporate ladder. They tell us something specific about women’s labour responsibilities, particularly when outsourcing some kinds of domestic labour is appropriate.

C-suite mothers in the media

In my news media research that foregrounded the themes of this dissertation,⁴⁵ the most common theme by far was the conflict between high-status demanding careers and motherhood. Note that

⁴⁴ Another figure that remains prominent is the “celebrity mom.” Media fascination with celebrity motherhood rose in the 1990s (see Douglas & Michaels 2005 on the celebrity-mom juggernaut), and continues in the form of “baby bump watch” obsession with celebrity pregnancies (e.g. Beyoncé, Kim Kardashian, Kate Middleton) and speculation over empty wombs (e.g. Jennifer Aniston; see Valenti 2012).

⁴⁵ For list of themes, refer to Appendix C.

it was not about all mothers in demanding work situations—like juggling two part-time jobs with a long public transit commute in between—but about the high-status work of venture capitalists or professional elites. It was also usually about women in typically masculinized careers like computer science or economics. Within this theme, journalists debated “raising a business and a baby at work,” (Leger 2012) the “momprenuer” figure (Ballon, Botterell, and Reuber 2011; Carniol 2008; Gordon 2008; McCarther 2011; Pearce 2011; Salzman 2012; Saunderson 2009; White 2013), the “supermom”⁴⁶ figure, the “pink-collar ghetto” (Gordon 2011), the “mommy track,”⁴⁷ and the “high cost of motherhood” (Cooperberg 2009), asking “is being a mom still a bad career move?” and, ultimately, “how does she do it?” We can interpret the media’s fascination with the corporate mother, like the fictional figures discussed earlier, as indicative of both a desire for and disavowal of her labour burdens. She is both praised and chastised by men and women across the political spectrum for combining corporate career success with reproducing, a cliché the media has referred to as have-it-all motherhood.⁴⁸ In more sophisticated analyses of these women’s multiple labour burdens, journalists deplore the narrow framing of these conversations about motherhood and career, reminding us that “many of the arguments we’re having now—can women have it all, for instance—were hot debates when I was young and my mother worked full time. [...] It’s incredible, and a little dull, that we are still at the same place” (Gilmour 2012). Still, the majority of reporting on mothering and work continues to engage this topic, often using portraits of high-profile working mothers to weigh the pros and cons of her many “choices” and “priorities.” As Stone and Lovejoy (2004, 63), invoking Joan

⁴⁶ See “Video: Meet three super-moms who are also professional scientists,” *Globe and Mail*, 10 Feb 2013, accessed November 27, 2013, <http://www.theglobeandmail.com/news/national/education/video-meet-three-super-moms-who-are-also-professional-scientists/article8431016/>

⁴⁷ See Ayelet Waldman, author of *The Mommy Track Mysteries*, discuss her book *Bad Mother: A Chronicle of Maternal Crimes, Minor Calamities, and Occasional Moments of Grace* with Carol Memmott (2009) of *USA Today*.

⁴⁸ Anne-Marie Slaughter (2012) re-popularized this term in, “Why women still can’t have it all.”

Williams (2000) work on choice, highlighted in “Fast Track women and the ‘Choice’ to Stay Home,” “choice rhetoric attributes women’s work status to their private and personal tastes and preferences and assumes that their decisions operate outside any system of constraints.” They also note the media’s depiction of women’s manoeuvres with paid work and care work as “choices” obscures the structural factors that go into these choices.

In media discussions of “having it all,” we see both support for and backlash against women’s rise in the corporate sphere, with conservatives and feminists alike arguing for more (though different) support for mothers.⁴⁹ In 2012, *Globe and Mail* columnist and founder of *Femme-economics*, Leah Eichler, published “Who Says You Can’t Be a Good Mom and a CEO?” in which she defends newly promoted Yahoo! CEO Marissa Mayer for working through the week that she gave birth and returning to the office within that same week. Here we have an example of support for a woman who prioritizes career, predictably from one of Canada’s most prominent female journalistic voices on work-life balance and an executive mother herself. In her article on Mayer, Eichler (2012) cites Souha Ezzedeen, professor at the School of Human Resource Management at York University in Toronto, who argues that if Mayer were to take maternity leave, it “would lead others in the business community to yet again question whether women are suited to the CEO job and whether they can actually handle both the executive job and parenting... Many still doubt that, and that’s why the glass ceiling persists.” This assumption reflects the deep-rooted misogyny that women in high-powered, traditionally male-dominated

⁴⁹ For example, Sheryl Sandberg came under fire in the feminist blogosphere for calling herself a feminist after publishing *Lean In: Women, Work, and the Will to Lead*, a book designed to help privileged white women succeed in business. Unexpectedly, prominent feminist author Jessica Valenti (2013) defended Sandberg in the *Washington Post*, saying that mainstream detractors underestimated her radicalism and that feminism could use Sandberg as a powerful ally. Support for and criticism of Sandberg came from unexpected places.

public positions must constantly resist. The patriarchal thinking at the heart of these assertions, though, seems to slide by unnamed as solutions focus on different ways for women to change their individual behaviours to cope with hateful attitudes. Eichler's work on equality echoes Sandberg's executive feminist *Lean In* directives for women to advance their careers—Eicher's parallel TED talk is called “The importance of asking for a cup of sugar,” in which she explains how she launched a social media app in 2012 to help women achieve their career goals and build business relationships.

Eichler's praise for Meyer is, like representations of juggling mothers in popular culture, ignorant of class, race, sexuality and bodily privilege: both Eichler and Mayer are very thin, white, wealthy, conventionally attractive and blonde; they look alike, they are both married to professional men, and they are both CEOs. The difference between Mayer in particular and the fictional characters of Kate Reddy, Debbie, and the characters in Fiat and Similac film spots (besides the fact that Mayer is a real person) is that Mayer runs a multibillion-dollar multinational corporation—an extreme of corporate success. Due to her prominent career position, Mayer is constantly in the spotlight of the business community and the media, even if for her love of Oscar de la Renta tunics and “pregnant-in-Prada” maternity style (Weisberg 2013). She has come to embody discussions of executive women and career-family conflict at the maximal level of corporate success. Criticizing gender discrimination in business is of course necessary. But prominent women in these stories show how they have internalized sexism by asserting that they must change themselves to fit into a male-dominated world. This critique is not only sad, it is shallow, ill informed about the many structural barriers women encounter when it comes to representation in leadership positions, and profoundly unhelpful for making

real changes. It also reinforces how we think about, value, and rank women’s multiple labour burdens in the context of motherhood and paid work—mothers are responsabilized to do the mental work of having their priorities straight.



Figure 6: Marissa Mayer, “Hail to the Chief.” *Vogue*, 2013

The above photo depicts Marissa Mayer reclined upside-down on a garden chaise. The photo ignited a hotbed of controversy in the media about the inappropriateness of her pose, prompting Mayer to insist that she was only taking the photographer’s direction.⁵⁰ The image, published in *Vogue*, is accompanied by the explanation: “As she works to reverse the fortunes of a failing Silicon Valley giant, Yahoo’s Marissa Mayer has fuelled a national debate about the office life, motherhood, and what it takes to be the CEO of the moment” (Weisberg 2013). The feature

⁵⁰ Allison P Davis, “Marissa Mayer kind of embarrassed by *Vogue* shoot,” 25, Sept 2013, *New York Magazine*,

article covers many aspects of Mayer's personal and professional life, including her "stylish geek" persona, her wardrobe, her style influences, her controversial decision to ban working from home at Yahoo!, the private nursery and personal staff in her office, and her business acumen. For a relatively supportive article, it still focuses on Mayer's shy, blonde, feminine persona, and how she could possibly become CEO of Yahoo!.

Inserting a critical feminist voice in debate over Mayer's multiple labours, Ryerson professor May Friedman contends that backlash (see Benedict 2012; Grose 2012; Nisen 2013) against Mayer's success stems from the cultural belief that women are still "expected to be caregivers first and foremost, and to only turn to the world of paid employment after ensuring that they have achieved stability in the domestic realm" (n.p., as cited in Eichler 2012). It is true that in Mayer's case, we know she can afford to outsource child care and all of her domestic management needs. We do not see the children of these women fairing poorly at all, and if we almost do, like in the case of Anne Marie Slaughter's teenage son who was "skipping homework, disrupting classes," we see them reprioritize their family's wellbeing—Slaughter left her position at the US State Department, stopping her commute from New Jersey to DC, citing worrying about her son's wellbeing. I expand on Slaughter's media story below, but for now note that even among executive women, we see women's labour responsibilities tipped toward care labour, which gives a clue about the gendered nature of stress and emotional labour expected of mothers while they work outside the home. The reason we are able to celebrate their success and their family sacrifice is because their children are not deemed at any real risk. On the Mayer story, Eichler concludes that, "ultimately, the media circus surrounding Ms. Mayer's work-life choices thinly disguises an underlying bias about a woman's ability to manage a demanding job and her role as

a parent.” While it is important for our understanding of women’s hierarchies of labours to remember that in the case of affluent women, the infant is probably receiving adequate care so outsourcing is a viable option, the public scrutiny of Mayer’s behaviour as she becomes a parent is also an example of sustained misogyny. This is an example of racialized and classed misogyny, as Mayer is deemed responsible and adept enough to do her work, which is at least partially a function of her privileged social position, but the public is also ready to insult her abilities based on her gendered responsibilities for care and her courage to work in a male-dominated sphere. These women are under intense patriarchal surveillance at the same time that they ignore structural discrimination that prevents racialized, poor, and disabled women from accessing power through public leadership. Further, in invoking feminist values to frame their experiences in male-dominated spaces, they link corporate success to gender liberation: a relationship that prompted Nancy Fraser to publish her controversial essay in the *Guardian* (2013): “How feminism became capitalism’s handmaiden.” Fraser (2013) argued that commercial feminism, as it refuses to challenge structural oppression, secures capitalist enterprise. Incidentally, Fraser’s work met sharp criticism from anti-racist, anti-colonial feminists for referring to white, commercial feminism as representative of contemporary feminist movements.

In another article, Eichler is her own struggling, juggling mother subject. I quote Eichler at length here because her writing reveals how discourses of multiple responsibilities and corporate measures of women’s success are interwoven in media discussion of gendered labour burdens and conflict among middle- and upper-class white women:

By most measures, I have it all: fulfilling work, a wonderful family and friends. At least, that’s the 10,000-foot view. Come a little closer and you get a clearer picture of my life,

which includes disastrous meetings, unpaid bills and epic mom mess-ups. Despite appearing to have it all, I want more and I'm getting pretty fed up with the assumption that it can't happen. I blame this defeatist attitude on the fruitless discourse that has dominated any discussion about women's advancement in business with one question: "Can women have it all?" Rather than continue this debate ["Can women have it all?"], we owe it to ourselves, and future generations, to refocus our attention on real issues: a stubborn wage gap, the underrepresentation of women in senior roles and covert discrimination in the workplace. At the same time, let's continue to highlight successes, which include Janet Yellen's nomination as the first chairwoman of the U.S. Federal Reserve Board and Kathleen Taylor's appointment as the first woman to chair a board of directors at a major Canadian bank.

Eichler describes the sense of longing for something more and the frustration of feeling it might be out of reach—a cruelly optimistic (Berlant 2011) relationship to some future "success" in mothering and paid labour that does not exist. I will expand this affective relationship to a promissory future that is just out of reach in Chapter 5. But Eichler's sense of unfulfilled promise is evident in how she attributes her frustration to a "defeatist attitude" in discussions about women and business, which tend to question whether women can endure their multiple labours without coming undone. Eichler's value in striving for more, in overcoming⁵¹ obstacles, and in juggling paid labour and family labour with finesse are characteristics of neoliberal individualism, where able, responsible citizens are those who do not rely on others for care or other provisions. Her tone shifts as she considers "real issues" of pay inequity and discrimination, but she seems careful not to sound pessimistic or "fed up" when she insists we exalt two individual women who have found extremely high levels of corporate success—both wealthy, white, able-bodied, heterosexual women who have children and who are married to a Nobel prize-winning economist and a Bay-street lawyer respectively. So while Eichler hints at challenging structural discrimination, she supports the status-quo notion that corporate leadership

⁵¹ See Eli Clare's "The Mountain" (in *Exile and Pride*, 2007) on the neoliberal ableism of overcoming narratives.

equals success, and that the individuals at the top have worked hard to overcome challenges, therefore earning their exaltation.

It is clear who this familiar rhetoric about the juggling mother describes: highly “successful” and publicly-recognized working mothers who are nearly always white, rich, heterosexual, and able-bodied. Liberal feminism, often associated with white women who have historically advocated for women’s individual autonomy and political and social equality within existing legal and political systems, has allowed for women’s corporate success to be framed as part of an historic trend toward men and women achieving equality.⁵² While not all feminist movements associated with liberal initiatives—e.g., the marriage equality movement, or campaigns that promote an individual’s equal treatment based on their sameness with the dominant group—support corporate ladder-climbing as a symbol of feminist progress, “executive feminism” (Williams and Dempsey 2013) certainly does. The incompatibility of domestic and paid labour burdens of affluent women in prominent, high-status careers are well-documented (see Armenti 2004; Blair-Loy 2005; Williams 2000, 2010), but neither power structures nor the intricacies and intimacies of care labour are challenged in this literature. Sociologist Mary Blair-Loy (2005), who studies women’s *Competing Devotions* to paid work and care work, gives detailed insight, based on interviews, into how women strive toward incompatible paid and unpaid labour goals. However, though her work gets close to describing an affect of working motherhood through the concept of *devotion*, her idea that women are oriented out of love or loyalty re-inscribes understandings of care work as a labour of love from the 1970s. This idea risks essentializing gendered experiences of caring and does not account for the nuances of bodywork and nurturing care labour, their

⁵² See Hanna Rosin’s (2012) *End of Men* where she cites women’s corporate rise as evidence that women are surpassing men in terms of opportunity and success.

sentience, physicality, or intensities (recall Williams [2006] on the difference between care work and other work). It also does not frame or pull apart devotional work as labour itself, the way Tronto (1993) suggests is necessary for changing its status in mainstream culture. Also, this literature tends to presume the inevitability of wage labour and always erases historic and ongoing colonialism and capitalist notions of success, allowing for only shallow discussion of structural (cis-gender) oppression. If we acknowledge the privileged working mothers whose stories we tell, mothers who report feeling that they are coming undone under multiple, inexplicable, invisible labour burdens, we can see not only the extremely narrow identities who come to represent the pursuit of responsible citizenship for women vis-à-vis work-family balance, but we can view the pursuit of successful juggling as depicted in media representations as simply impossible for those without incredible means. What does this mean for the subject position of mothers? How are mothers, who might be struggling to survive for a number of reasons like illness, poverty, discrimination by race and gender, conflict with the law, abuse, or job and housing insecurity, see their own families' lives as liveable? For the irreconcilable labors of affluent women, I turn now to a few noteworthy moments when major news outlets dealt with the issue of working mothers by way of their representation in formal Canadian and US politics. This section provides some nuance to the c-suite mother story, showing a few high-profile women advocate for women staying home. The stories give a sense of how mothers and their labours figure similarly in overtly politicized discussion of mothers' responsibilities to the nation as they do in fictional portrayals.

Motherhood in Politics: Responsible Choice Rhetoric

In formal politics, citizenship rights and responsibilities are openly debated, making nationalist and neoliberal discourses even more transparent, though no more coherent. As mentioned earlier, when it comes to discussing individual responsibility, the (liberal feminist) notion of choice is treated as prerequisite for framing “women’s issues,” which can lead to contradictory values receiving support based on their having been “chosen.” For example, at the same time that feminists use the notion of choice to protect receding access to reproductive justice, antifeminist mother groups that advocate women’s role in the home also frame their values as pro-woman, co-opting traditionally feminist notions of choice and autonomy (Saurette and Gordon 2015). Debate over women’s labour responsibilities or burdens commonly becomes gridlocked around the notion of choice, no matter the political aim.

One ripe example of the power and incoherence of choice rhetoric in motherhood debates turned up in the 2012 campaign for President of the United States, where GOP candidate Mitt Romney competed against President Barack Obama for the women’s vote. The issue of motherhood and labour responsibilities loomed large after Hilary Rosen, a Democratic strategist, remarked that Mitt Romney was unqualified to comment on women’s economic issues because his perspective is skewed by the financial security of his wife Ann, who has “never worked a day in her life.” Following Rosen’s comments, the GOP campaign released an attack ad in the lead-up to Mother’s Day. In an interview with *Fox News*, Ann Romney declared her career choice to be “motherhood.” She then said, “We need to respect the choices women make.” Ann Romney made stay-at-home motherhood about respecting women’s right to choose, employing a strategy made popular by anti-abortionists (Saurette 2013; Watson 2013a). Shortly after these statements, Ann Romney published a Mother’s Day op-ed in *USA Today*, insisting, “One hat that moms

never take off is the crown of motherhood. There is no crown more glorious.” In this media moment, Ann Romney invoked both the neoliberal ethic of choice and the civic republican value of unpaid care work as a legitimate contribution to citizenship duties. President Obama’s campaign posted a filmed apology where he famously claimed, “There’s no tougher job than being a mom. Anybody who would argue otherwise, I think, probably needs to rethink their statement.”⁵³ Affirming care labour is a “tough job,” President Obama acquiesced to the established rhetoric that motherhood is not only a valid citizenship contribution of work to the state, but is perhaps the most valid. Of course we do not see either campaign celebrating women’s “choice” to stay home in other contexts, like when living with chronic pain or depression, or living in poverty, or self-medicating. Ann Romney’s total financial security allows her not only to prioritize care work, but absolves her of a responsibility to paid labour altogether.

Ann Romney’s representation of motherhood does not comply with the c-suite mother trope, but her representation does not negate it either. Making the simple “choice” of a “career” in motherhood, Romney allows the c-suite mother and the stay-at-home mother to coincide as “options” for motherhood. She strategically borrows language from the right-to-work movement to defend the right to stay home, yet she does not challenge women’s responsibility to paid labour. She does, however, exalt motherhood as the ultimate, “most glorious,” roll, showing the primacy of care labour in the hierarchy of women’s labours. But she is only able to do so because her family’s financial needs are secure—Mitt Romney’s estimated net worth puts him in the top 0.001 percent of Americans.

⁵³ <http://abcnews.go.com/blogs/politics/2012/04/obama-rejects-rosens-comments-on-ann-romney/>

Similarly incoherent rhetoric around women's responsibilities—to care work only if the family is already financially secure—has recently circulated in Canada. Interestingly, the rhetoric is similar in defense of women's corporate work if the nest is sufficiently maintained. In 2013, Andrea Mrozek, executive director of the conservative think tank Focus on the Family, argued against subsidized childcare, the right to abortion, and no-fault divorce, citing the empowerment of parents and wellbeing of children.⁵⁴ She employed consumer choice rhetoric to argue against universal childcare, insisting that giving families an allowance (of \$100 per month, inadequate by any standard) allows them to choose their preferred form of childcare. But she then condemned choice rhetoric, arguing against the notion that abortion should be a choice because “to put it in those light, airy terms” would, she argued, do a disservice to “women who have suffered in their abortions.” Mrozek uses pro-woman and pro-family sentiment to argue against increased provisions to assist families and to condemn reproductive justice. In spite of recent studies that show how children raised by lesbian parents score higher on measures of self-esteem, development, and social behaviour, and display lower levels of aggression and disobedience,⁵⁵ Mrozek selects “man-woman research showing children fare best when raised by their own biological parents,” and claims to be “cautious” about “sanctioning same-sex marriage for wondering what the outcomes for children are.” Mrozek, using the notion of choice, erodes provisions for mothers that would decrease their competing labour burdens. She then restricts women's reproductive justice and choice citing pro-woman sympathies.

Mrozek's views, like Romney's, steer clear of exalting the c-suite mother archetype that we have seen so far (with some irony as she is an executive director), but they do not negate the archetype

⁵⁴ See Pearce, T. (April 5, 2013). “Wedded to marriage – at least in principle,” *Globe and Mail*, **L5**.

⁵⁵ See Gartrell & Bos (2010), “US national longitudinal lesbian family study: Psychological adjustment of 17-year-old adolescents.”

either. She does not make the ultra-conservative argument that women should stay home with their children; she only argues that they should be given the “choice” of whether to stay home or outsource childcare. Mrozek’s views are supported by voters, and are therefore helpful to contextualize how popular representations of the juggling mother are in tension with conservative sentiments—but how these representations share the language of responsibility, choice, and work. Responsibility for self and family is paramount in both camps and, fittingly, the discourse of choice is prevalent in conservative scrutinizing of celebrity c-suite mothers and their fertility decisions, which I examine in Chapter 5. Women are responsiblized toward the emotional work of “choosing” no matter the political orientation.

Putting the examples of Ann Romney and Andrea Mrozek against examples of the c-suite mother from above, we can see that discourses of personal responsibility and choice characterize public discussions of women’s responsibility to prioritize care work over paid work, and to the invisible labour of making sure those priorities are in check. I expand on this in the following two chapters, but briefly consider the representation of a woman politician here to show how mainstream representation of high-profile working mothers devolves into the Wollestonecraft dilemma mentioned in Chapter 1—the debate over whether women should be treated the same as men or different from them in pursuit of equality. There are many women politicians whose mothering has been scrutinized—comparisons between Hillary Clinton and Sarah Palin are exhaustive—but I have selected a Canadian example to show how the citizenship responsibility to juggle care labour and political (paid) labour in particular was called into question following a specific media moment. In February 2012, Sana Hassainia, then the Verchères—Les Patriotes Member of Parliament for the New Democratic Party of Canada, caused a commotion in the

Canadian House of Commons and especially the media scrum by bringing her newborn, Skander-Jack, into the House for a vote on the long-gun registry. In the aftermath of the unprecedented move, many MPs and journalists sympathized with Hassainia and framed the event as unavoidable (her husband, who was responsible for childcare and kept the baby around Hassainia so she could breastfeed, was temporarily unavailable at the time of the vote), and others argued for better support for MPs with young children (MPs are not entitled to parental leave).⁵⁶ Hassainia was also struck with criticisms that reflect systemic misogyny and a colonial sense of civility in houses of parliament. Barbara Yaffe, writing for the *Vancouver Sun*, deployed politics of respectability,⁵⁷ focusing her critique of Hassainia's family needs on decorum and common sense: "The fact that rules have become so relaxed in parliament is a reflection of how tough it has become to impose practical rules of decorum anywhere these days." Yaffe's colonial sensibility of enforcing civility and decorum fall especially grotesquely on Hassainia, a Tunisian-born Muslim woman. Others used the rhetoric of choice to frame Hassainia's move as a publicity stunt, insisting that her salary gives her the choice to make alternative childcare arrangements. The vitriol in these comments would be striking if it did not match the gamer-gate type hatred we are accustomed to seeing directed at women asserting power, particularly in the public sphere. Even though in this case, the issue was not that she needed childcare, but that her husband, the primary caregiver, was temporarily out of sight at the time she was called to vote. Skander-Jack was only on Parliament Hill because Hassainia was still breastfeeding. Hassainia's move swiftly ignited the work-family debate, causing what *Victoria Times* columnist Iain Hunter infantilized

⁵⁶ Elizabeth May commented to the *Globe and Mail*, "If we're going to fully integrate women in the House of Commons, that includes babies. If you're going to be a working mom, then you need to have the institutions prepared to accommodate" (Feb 4, 2012, "From House to crèche, women are still juggling bébé and work").

⁵⁷ See Ann Laura Stoler's (1997) "Making Empire Respectable," in *Dangerous Liaisons*, and, more recently, Tamara Winfrey Harris's (2012) "Black women and the burden of respectability," in *Fame + Fortune*.

as “a tempest in a potty.” The comments by Yaffe and others showed reluctance to support Hassainia to breastfeed in a position such as hers, prompting the question, what are MP Hassainia’s citizenship responsibilities? Barbara Arneil (forthcoming) argues that,

MPs face additional specific issues that exacerbate the contradiction [between breastfeeding and work timeframes], including: 1) being elected for a 4-5 year window so that maternity leave is either unavailable or if it is, MPs feel they should not take it; 2) a formal and ritual laden ‘chamber’ which creates a more hostile environment to breastfeeding than an informal workplace; 3) division bells and unpredictable times for votes that create particular kinds of conflicts for lactating MPs; and 4) pressure to be role models as public figures for ‘breast is best’.

I expand on breastfeeding in particular in the coming chapters, but Arneil’s (forthcoming) work on infant feeding responsibilities of Canadian women in politics draws out the irreconcilable responsibilities and hostile environment women in political leadership must face. This tells an important message about women’s citizenship status and their lack of access to positions of power. If we recall Lister’s (2003) concern from Chapter 1—that we should still consider political participation in the public sphere a necessary, if nuanced, citizenship goal for women’s equity—we see, in the mainstream response to Hassainia’s role as a politician, reticence to view her political role as necessary, even acceptable. Instead, we see the misogynist response that women should only move into traditionally male spheres if they can live up to the established, male-centered norms—approaching women’s equality from the liberal women-as-men side of the Wollstonecraft dilemma.

Hassainia’s story brings even more nuance to the way that the Canadian public understands mothers’ multiple labour responsibilities—understanding care and paid work as separate at the moment when job performance declines. Hassainia gave birth to her second child in 2013. In August 2014, Hassainia left the NDP to become an Independent, citing disagreement with her

former party's position on Israel, but the press secretary for the NDP announced a falling out over her voting record—the worst in the House of Commons. Debate over her (and women's) labour responsibilities came to a head again in 2015, when her voting record for 2014—16 of 269—was publicized. Several major news outlets in Canada told the story of her absenteeism, citing a former employee from her constituency who complained of her invisibility in the riding.⁵⁸ Hassainia gave an interview to the *Ottawa Citizen* in January 2015 explaining:

The party I worked for (the NDP) didn't help me at all with my work-family balance. I decided even if that bothered the party at the time, (I would) not be as present for votes. I had two kids – and for me it's important to be with them – and the vast majority of votes are at the end of the day or the evening, so I didn't show up for that reason. [...] It's certain that it's a personal question with some of my colleagues who have given birth, and I think it's a personal question of how a mother wants to live and how much personal time they need. It's not the same for everyone. Me, I have to be there for my kids, I feel it's important to be there to put them to bed, to pick them up at the nursery, to be there when they wake up. There are some mothers who will do this and, without judging, some mothers who won't. And that's OK by me. It's really a personal decision to make. My voting absence doesn't mean I'm not working. There's a lot you can do otherwise and I do it. It doesn't reflect a lack of work, it's most of all a personal decision because I am a mother. Many who are much more advanced in parliamentary life also really think that we must face the future. I put forward a bill in 2012 concerning, among other things, work-life balance, and the bill fell because the Conservative government wasn't interested in it. I think it's important to allow females – certainly among them mothers who want to spend time with their children – the possibility to either bring them in to their seats, as we see in the European Parliament, or find a way to allow (voting) for people who can't be there when they have a family responsibility.

Hassainia repeatedly refers to her need to spend time with her infant children as a “personal decision,” careful not to shame women for their different mothering practices and needs. She also explains that reform is needed and that she worked for reform that was shut down. Though she employs choice rhetoric to defend her “decisions,” her prioritizing of care work over working the late hours expected of her political position was met with bitter criticism. Public

⁵⁸ CBC News, “MP Sana Hassainia takes flak for poor vote attendance record,” *CBC News*, 27 Jan, 2015, retrieved from <http://www.cbc.ca/news/canada/montreal/mp-sana-hassainia-takes-flak-for-poor-vote-attendance-record-1.2933570>

commentary referred to her as a “lowly parasite,” and mocked her situation: “so sad that an MP caused so much interference with her family priorities.” She also became referred to as the “mom-MP” when she decided in February 2015 not to seek re-election,⁵⁹ which should have indicated the need for parliamentary reform but instead reproduced the notion that mothers do not belong in political leadership. While women are responsiblized toward the juggling mother subject and encouraged to see coming undone as their success, they are not allowed to fail at the work they are putatively electing to do. If they do fail, they should leave the work for citizens who are unencumbered—supported by (her) unpaid labour (see Federici 2004). Even though mainstream culture in Canada and the US has developed the gender-neutral, neoliberal idea of the adult worker as independent, self-sufficient, responsible citizen, when their work duties fail, individuals, in this case women, are to blame. While some argue for more support for women in demanding work environments (usually only if these labours are high-status), like breastfeeding rooms and childcare at work, most commentary around Hassainia indicated a more or less subtle unwillingness to encourage women to stay in the workforce while their babies are young, and a disinclination to shift the politics of respectability in the formal and masculinist arena of the House of Commons (see Arneil forthcoming). By extension, Hassainia’s detractors showed the convergence of nationalist and neoliberalist ideologies, arguing for her to take personal responsibility for her childcare situation, and invoking “good of the kids” research (as in Mrozek’s case) to hit the point home.

Mothers’ competing devotions have become part of our cultural “common sense.” The salience of this subject position—that we require responsible women to have children to improve the

⁵⁹ Dylan Robertson, “Mom-MP Sana Hassainia won’t seek re-election,” *Ottawa Citizen*, 5 Feb, 2015, retrieved from <http://ottawacitizen.com/news/politics/mom-mp-sana-hassainia-wont-see-re-election>

“health” of the nation, and we require women’s employment for self-sustaining families so that the nation will stay competitive in a precarious global economy⁶⁰—establishes the incoherence of women’s citizenship responsibilities so that they are beyond our awareness.

Conclusion

Over the past five years, as media has attended to corporate moms and “executive” feminist responses to women’s competing labour responsibilities, some journalists and scholars have resisted these stories by attending to the class bias⁶¹ involved in this debate.⁶² But the collision of tropes around the responsible mother that we tend to see represented in mainstream media publications now frequently depicts working as a millionaire corporate executive and choosing and performing a style of intensive motherhood (like co-sleeping or baby-led weaning). Arguing that this discourse strips working mothers to their biological “breeding” function, Canadian journalist Elizabeth Renzetti calls this new subject the “fund manager mommy,” the “new breed of superwoman”—this woman has a high-powered job in the financial sector and “more children than can comfortably fit in a range rover.”⁶³ This executive form of career success is certainly exceptional, but we can see that the stories of the c-suite mother and the not-so-average mother are becoming part of our cultural common sense when it comes to envisioning women’s juggling of work and care labours. In fact, as these mothers are represented as coming undone, they are relatable, seductive figures, and they also point to real problems that are more seriously

⁶⁰ See Harmes (2011) on the rise of neoliberal nationalism.

⁶¹ See Annette Laureau’s (2011) book *Unequal Childhoods* on the impacts of class and race on mothering and family life. Her study concludes that class, which intersected with race in the mid-western town of her study, had a direct impact on parenting styles.

⁶² See Chrystia Freeland, “On working women, there is the super-rich view, and everyone else’s,” *Globe and Mail*, May 2013, accessed November 27, 2013, <http://www.theglobeandmail.com/report-on-business/economy/on-working-women-there-is-the-super-rich-view-and-everyone-elses/article12268002/#dashboard/follows/>

⁶³ *Globe and Mail*, accessed November 27, 2013, <http://www.amanda-foreman.com/globeandmail.shtml>

impacting women with lesser means. The popularity of representations of affluent women's struggle also indicates how we imagine the hierarchy of women's responsibilities, which extend to mothers' everyday lives. Women are not just responsabilized to work. They are not just responsabilized to care for children. They are encouraged by mainstream, commercial, or "executive feminism" to aim to be the COO of Facebook, but encouraged by discourses of responsible mothering (produced in a range of content by motherhood advocacy groups and public health campaigns, the latter of which I examine in detail in Chapter 4) to breastfeed, or blend their own baby food, or never un-strap the toddler. At the very least, they will receive some public support for making smart market decisions about outsourcing care work. Unlike juggling women of the 1980s who turned to infant formula, disposable diapers, and jars of baby food as the obvious solutions to working long hours, we imagine today's corporate women to wean from breastfeeding using home-blended organic vegetables, and we do not see, for example, the technology of the breast pump questioned as a solution in desperate times. The responsible mother subject has advanced from being stressed out to an incoherent representation of coming undone from unattainable expectations of balance or juggling, of outsourcing labour, of remaining tied to reproductive and care labour in some ways, and ultimately of striving toward flexibility, agility, and balance.⁶⁴ If mothers are sinking under competing demands of their labour, they, like the mother in the Fiat advertisement or Kate Reddy in *I Don't Know How She Does It*, must remain aspirational.

⁶⁴ See Ingrid Peritz's, "The good mother doesn't exist. She's a myth," *Globe and Mail*, Apr 2012, accessed November 27, 2013, <http://www.theglobeandmail.com/life/parenting/the-good-mother-doesnt-exist-shes-a-myth/article4103709/>

In this chapter, we have seen the story of the undone mother presented as a story of status. The flailing, juggling mother nearly careening out of control but striving and managing to hold her multiple labours together is performing well according to tenets of responsible citizenship: her flexibility, agility, and ability to make smart consumer choices around when and how to outsource labour. Her fumbles are presented as silly instead of crucial. At the same time, these real and fictional affluent, high-profile women, all of whom but Hassainia are white, are admitting that their competing labours are causing them bad feelings. They offer an affect of motherhood that I am calling “coming undone” through a number of means, including feelings of isolation and depression at home, feeling overwhelmed by media and social surveillance of labours, feelings of guilt and sadness about not having enough time to spend with children and doing care work, and feelings of anger with the so-called defeatist attitude about not being able to “have it all.” Of course, in these representations of mothers who have above-average access to political and economic power, the mother is not actually coming undone to the severe detriment of her family. Children on the other end of these stories are not going without care. Providing even more tension to the demand on women’s bodies to be flexible, we have also seen motherhood presented as a career choice using neoliberal rhetoric, and we have seen that when care work interferes with women’s responsibilities to paid labour, they should “choose” one or the other—of course despite the fact that for many, if not most women, this choice does not exist.

While lower- and middle-class mothers may relate to the affect of motherhood presented in these stories, the tendency for these mothers to still be smiling, if rolling their eyes at designer furniture with “puke in the stitches” or in slightly worse versions, feel “fed up” or on “house arrest,” tells us whose coming undone has which kinds of consequences. Plainly, for other mothers—like mothers of

working poor dual-income families, single mothers, mothers living with incredible obstacles to their neoliberal success like depression or accessibility needs, mothers with job insecurity, incarcerated mothers, abused mothers, self-medicating mothers—the consequences of coming undone could involve she or her children not eating enough, or not adequately heating their home, leading to known negative health consequences that are correlated with low family income or physical insecurity. In contrast, the mother who feels overwhelmed trying to remember to pay the bills on time—bills she can afford—will never need to navigate the poverty-induced ill health of her children, or anything related to parenting for their survival.

At the same time, representations of the responsible mother are fertile ground for understanding the contemporary subject position of undone mothers. Now that we have seen how the story of mothers' undoing is an expected part of contemporary motherhood in popular culture and mainstream media, and how mothers responsibility to care is represented as their primary devotion even while working for pay, we can turn to examine what exactly responsible care work entails in contemporary mainstream culture. In the next chapter, we look at the case of infant feeding, which, as I mentioned at the start of this chapter, was one of the most prominent themes of discussion around motherhood in mainstream media. Moving away from media representation, I present a snapshot of widely circulated and interpreted scientific research on breastfeeding versus infant feeding. Chapter 3 continues the examination of how mothers come to be responsabilized toward multiple labour simultaneously, and with little support, and what exactly these responsibilities now entail. We will see the notion of flexibility take a back seat to another ableist tenet of citizenship that is also distributed unevenly by race and class: the assumption that most women can and should breastfeed.

This chapter will give us more information about the rhetoric used to incite women toward particular care labours, giving more context for the affect of coming undone.

Chapter 3: Scientific Motherhood: Biomedical Research on Breastfeeding

The “best” way has often been scientifically or politically determined. Women have been encouraged to breastfeed because it was their maternal duty, because it was their patriotic duty, because it was good for their baby, because it was good for them, and/or because it was good for society. It has required individual women to make decisions to remedy social problems not of their own making. – Tasnim Nathoo and Aleck Ostry (2009, 219)

Recall from Chapters 1 and 2 that breastfeeding is a central topic in popular media discussion of contemporary motherhood, prompting the joke, “you are what you nurse” (Weiss 2013). Infant feeding has been a hitch for feminist citizenship theorists who have grappled with the implications of infant feeding for women’s social inclusion (Hausman 2004, Reiger 2000, Smyth 2009), and for the cultural construction of women’s citizenship contributions tied to their biological or sexual practices (Young 2005). Infant feeding also invokes tension between care theories from disability and citizenship perspectives, as women’s bodies and newborn and infant bodies are intimately tangled—or not—in moments and practices of infant feeding. To examine infant feeding as a node in the cultural construction of women’s competing citizenship responsibilities, this chapter examines a different set of empirical data: biomedical research. It responds to the specific query of how women are responsabilized to breastfeed—an exceptional form of care work—according to discourses of “scientific parenting,” in order to contribute understanding to the larger underlying question of this dissertation, how are women

responsibilized toward multiple forms of labour simultaneously and to what effect? With this chapter, I move my examination of women's responsabilization from popular cultural representations to the concrete prescriptions of biomedical research and the means through which its findings circulate. In the next chapter, I examine the position and promotion of breastfeeding by state-sponsored health campaigns. As we see in this chapter and the next, women are responsabilized to understand a hierarchy of their labour responsibilities when it comes to the highly specified work of infant feeding, despite the fact that biomedical research is far less conclusive than women are led to believe. This incitement has implications for exclusion from responsible motherhood, particularly for mothers with disabilities, trans mothers, HIV-positive mothers, mothers using drugs, and mothers geographically separated from their infants through mandates like incarceration, migrant labour, or other work in the public sphere.

Breastfeeding represents one way in which responsibility for a healthy society is increasingly downloaded to individual women (Rippeyoung 2009a, Wolf 2010). As reports of its nutritional superiority and centrality to the mother-infant bond circulate, breastfeeding is afforded high status in the bourgeois family (Robyn Lee 2013), with negative implications for those who do not breastfeed due to any number of reasons, which we will see. As the prefatory quote from Nathoo and Ostry informs, incitements to breastfeed have been folded into women's labour responsibilities as citizens, and these have never been value-neutral, even though scientific findings might be deemed politically neutral in the biomedical community and beyond.

Following Nathoo and Ostry's (2009, 2014) argument that we have required women to remedy social problems not of their own making (see also Apple 1995; Parker 2014; Sethna 2011; Wolf 2010) and Rippeyoung's (2009a) parallel argument that health responsibility has been

downloaded from the state to individual women, this chapter shows how scientific research on breastfeeding, an intimate and distinct component of care work, affects women's citizenship responsibility: to cure social ills that are either unrelated or correlatively related to infant feeding, or that intersect with concomitant social factors like low income. A fledgling body of research is shedding light on how the labour of breastfeeding intersects with whiteness and higher socioeconomic status (Ahluwalia, Morrow, Hsia and Grummer-Strawn 2003; Robyn Lee 2013; McCarter-Spaulding 2008; Rippeyoung 2009b; Rippeyoung and Noonan 2012; Ryan, Wenjun, and Acosta 2002), rendering breastfeeding a class and race-based privilege as well as an embodied activity that not all women are able to do. Using the lens of feminist citizenship, I closely examine what exactly the most recent biomedical research on breastfeeding tells us about the subject positions of mothers and their multiple responsibilities to the nation. What do recent biomedical findings on breastfeeding tell us about how we now view women citizens, their bodily functions, and their duty to reproductive labour? What are the implications of this research and its presentation for gendered citizenship responsibilities to care work? Further, how do incitements to breastfeed relate to and nuance women's responsibility to juggle competing labours as in the representations of motherhood that we examined in Chapter 2? I focus on biomedical data to show how the rhetorical construction of "scientific parenting"—the belief that women require expert scientific and medical advice to raise their children (Apple 1995, 161)—as natural and accessible neglects the political economic contexts of women's lives. I further demonstrate that this erasure of women's circumstances presumes women's ability to breastfeed, an ableist assumption that effectively requires mothers to engage in physical, unsupported unpaid labour to be responsible carers.

As Sharon Hays observed in 1996, women's responsibility to reproductive labour and family care has not always been so "child-centered, expert-guided, emotionally absorbing, labor intensive, and financially expensive" (8). Ideals of what Hays (1996) then called "intensive motherhood," which includes breastfeeding, are obviously not followed by all mothers, but have become the "normative standard" (Arendell 2000, 1195) by which mothering practices are evaluated (Hochschild 2003, Warner 2005). In Chapter 2, I noted that representations of women and labour reflect how women's responsibility to care is paramount *if* her family's financial security is intact, and, as in the case of Sana Hassainia, if she is not disrupting the "civility" (and productivity) of a male-centric public space. Here I show how biomedical research on infant feeding—as it is pursued in the name of objectively optimal outcomes for children—regards a mother's multiple and competing labour burdens as peripheral to infant feeding research, even though her body and her bodily fluids are the subject of inquiry. I will show how the *object* of inquiry, breastfeeding, is treated as a disembodied variable that affects infant health.

Decontextualized claims by scientific research assert that most women are able to breastfeed.

Turning back to literature on care to think about the various practices involved in what is conceived as a simple and life-giving act shows the many ableist assumptions involved in who can take responsibility for whose interests (see Fine 2007, Kelly 2013). For example, with breastfeeding as the object of inquiry, it is assumed that mothers are able to breastfeed, which disregards women and transmen whose ducts may be severed during breast reduction surgery, folks who do not lactate due to breast variations or medical illness, and folks for whom breastfeeding is a site of trauma for myriad reasons. It also disregards the various challenges infants might experience, like low muscle tone, cleft affects, autism, or cardiac and neurological diseases. For breastfeeding researchers, breastfeeding is a matter of *competence*—of meeting the

needs and demands of the infant. It is precisely this incoherence that requires individual women to take responsibility, even as it means they come undone with feelings of stress, anxiety, and depression in the face of multiple burdens (like paid labour or inability to breastfeed) and unmet promises of balance in the meantime. Of course this technique of responsabilization is laden with ableist assumptions—where both mother and baby are assumed physically and psychologically “able” to breastfeed—about what women can do and should overcome for their families, as well as misogynist assumptions that women require instruction, and neglect overall for known contributing factors to infant feeding stratifications by class and race.

This chapter is in part a response to a call made by Jacqueline Wolf in a 2006 issue of *Signs*, in which she asserts that “although feminists have been at the forefront of women’s health reform for decades, they have not critiqued prevailing medical thought about breastfeeding the way they carefully examined obstetric practice in the 1970s” (397). Given its wide discussion in investigative journalism, reporting, and editorial pages, biomedical research on breastfeeding—from the experimental design to the language used to discuss results—provides the infrastructure through which mothers come to be responsabilized toward this discrete kind of care work. To understand the complex messages that responsabilize women toward breastfeeding, and thus toward a uniquely embodied, sentient, and vitalizing form of care labour, this chapter proceeds as follows: first, I situate breastfeeding research in the context of “scientific parenting,” extending a discussion of women’s intensified responsibilities for infant and broader social health that have variously been called “intensive mothering” (Hays 1996), “new momism” (Douglas and Michaels 2005), “total motherhood” (Wolf 2010), and the “motherload” (Villalobos 2014). Second, I synthesize a foundational set of scientific interventions on the topic

of breastfeeding in the past decade in order to provide the discussion of feminist citizenship with a deep engagement of the science that comes to responsiblize women. I then gesture toward a few of the major scholarly interventions engaging breastfeeding science to interrogate both how breastfeeding literature can be misinterpreted and how women are positioned with regard to their labour responsibilities. I conclude by yoking this analysis to feminist citizenship with a discussion of how breastfeeding comes to represent more than infant feeding in framing women's duties.

Breastfeeding at the "heart" of scientific parenting

The cultural significance of breastfeeding in Canada and the United States has fluctuated with biomedical research, corporate incentives, and sociopolitical contexts since the turn of the 20th century—when the development of professions in obstetrics and pediatrics gave way to “scientific” understandings of how women should mother (Apple 1987).⁶⁵ Through this development, the fetus became as much an interest to the field of medicine as the woman patient,⁶⁶ and from the popular emphasis on science to determine social and cultural ethics (see Rosenberg 1976), the discourse “for the good of the baby” developed alongside the patriotic discourse “for the strength of the nation” (see Blum 2000). In this early 20th century context of newly established medical experts and a political climate where pronatalist and nationalist

⁶⁵ Wolf (2010, 4) cites the 1938 edition of *Parenting Magazine*, calling mothers to “add science to love and be a ‘perfect mother.’”

⁶⁶ See Wolf (2010) on the tracking of pregnancies and the development of “infant mortality” and “perinatal period” as medical phenomena. This conflict has recently become a rights issue between fetus and mother, as in the legal case of Alicia Beltran, who was arrested when pregnant after confessing a historical addiction to pills to her doctor at a prenatal appointment. Under a Wisconsin fetal protection law known as the “cocaine mom” act, authorities can detain a pregnant woman who is drinking alcohol or using drugs.

rhetoric were commonly linked (Blum 2000; Nathoo and Ostry 2014; Paterson, Scala, and Sokolon 2014; Sethna 2006; Wolf 2010), infant feeding was a uniquely politicized act at the intersection of medical expertise, women's responsibilities to a thriving state, and infant livelihood.

Women were not only responsabilized toward care work primarily, as theorists of feminist citizenship have noted (Lister 2003), but also told by the freshly professionalized institution of medicine that there were scientifically proven “best” ways to care for an infant (Apple 1987, Nathoo and Ostry 2014).⁶⁷ From the “cult of domesticity,” a nineteenth century emphasis on women's special wisdom and the exalted role of the mother as the conduit of family values, and the expansion of pediatrics through the post-WWII era to regulate infant feeding, infant feeding drew medical professionals, formula companies, and mothers—a cycle of correspondence that effectively responsabilized mothers to heed the advice of medical professionals when it came to their unpaid care work (Apple 2006, Douglas and Michaels 2005, Nathoo and Ostry 2014, O'Reilly 2010).

⁶⁷ As Wolf (2010) explains about the US context in her chapter, “Monitoring Mothers: A Recent History of Following Doctor's Orders,” at the turn of the twentieth century, as infant mortality was on the rise between 1850-1900, infant feeding became a morally-charged practice that was seen as key to improving national health. Monitoring infant feeding started to play a significant role in the development of pediatrics as a distinct branch of medicine, with consequences for the consideration of women's health put against infant health, which we will see in a following section. William Arney (1982) wrote about this problem drawing on Foucault's notion of power and governmentality in his book *Power and the Profession of Obstetrics*. In Canada, as Alvin Finkel (2006) traces in his foundational text *Social Policy and Practice in Canada*, the Canadian state took steps to improve child and infant welfare to improve national health in the late nineteenth century and into the twentieth century. Alongside the professionalization of medicine and pediatrics, Children's Aid Society (CAS) developed in Toronto, and the state mandated orphanages be separated from poor houses for sanitation reasons. Workhouses were common, and women were told by reformists not to work outside the home and to focus on childrearing (though, like today, this was not an option for single women or women with unemployed husbands).

In her social history of infant feeding in the United States, medical historian Rima Apple (1987; see also Nathoo and Ostry 2009; Wolf 2010) showed how the medical community has not always counseled women to breastfeed exclusively, contrary to the primacy of that message today. So rather than determining one responsible way to feed an infant, the medicalization of human pregnancy, maternity, and infant feeding established doctors and other medical professionals as experts to whom responsible women should defer. In other words, women were responsabilized to heed the advice of practitioners, not to breastfeed per se. As I explore later in this chapter and the next, reliance on “expert” recommendations underpins current battles between women’s rights versus fetus or infant rights, and the subsequent moralizing and, in some cases, legalizing of mothering practices.

Important to my investigation of breastfeeding through a feminist citizenship lens, in Canada, public discussions of breastfeeding emerged as part of medical policy debates around mothering and infant mortality in the 1920s (Nathoo and Ostry 2009). In 1923, the head of the Division of Child Welfare, Dr. Helen MacMurchy, in the government-sponsored *Canadian Mother’s Book*, described breastfeeding as a national duty. MacMurchy and her contemporary maternal feminists⁶⁸ framed breastfeeding as the medical solution to the problem of infant mortality. Individual mothers were positioned as responsible for the improvement, reproduction, and strength of race and nation (Comacchio 1993, Dodd 1991, Dyck 2013, McLaren 2015, Sethna and Doull 2012). As in the United States, it was common in Canada⁶⁹ to see discourses of “race

⁶⁸ Recall from chapter 1 that maternalist feminist logic fixes the socially constructed gender category woman to her essential female sex traits, often providing the foundation for the argument to exempt or exclude women from public forms of political and labour participation based on their duty or natural ability to provide (unpaid) care work (Lister 2003).

⁶⁹ Finkel (2006) explains various tactics of “child saving” to strengthen the nation. Workhouses were closed to children, volunteer organizations like the Children’s Aid Society were legislated to become

improvement” and “national strength” invoked to responsabilize women toward particular care and reproductive labour (see Comacchio 1993; McLaren 2015; Sethna and Doull 2012). The Canadian government’s newly established department of health released a series of advice literatures in the 1920s called “Little Blue Books” (Dodd 1991, 203). These instructional manuals, echoing the same eugenics sentiment of racial purity and strength, implicated women in their family’s wellbeing, encouraging them to “provide the ultimate in childcare to preserve both the physical and mental health of children, to guard their own precious health, and to continue to have large families—despite serious restrictions on accessibility of medical services” (Dodd 1991, 203). Not unlike contemporary biomedical research that interrogates, for example, maternal smoking as a “risk factor” for childhood obesity (Gorog et al. 2011; Reilly et al. 2005), in the inter-war period, individualist explanations for social ills (such as “eugenic contamination,” “feeble-mindedness” and “degeneracy”) were common in medical advice literature (Comacchio 1993; Dodd 1991). Dodd (1991, 209) explains,

In the heyday of immigration, prior to the First World War, reformers located the source of eugenic contamination in the free flow of immigrants entering the country. By the interwar period, however, reformers were more willing to see the problem as internal, and some began to pin their hopes for racial improvement on the prevention of insanity and feeble-mindedness via healthy childrearing practices. Those who emphasized environmental improvements, as well as those who sought to breed heredity weaknesses out of the human species, advocated a diverse program of reforms, all in the name of race betterment. Eugenics' appeal lay in its "scientific" explanation for the many social problems being experienced by a society in the midst of industrialization, urbanization, and immigration, an explanation [that] provided the rationale experts needed to pursue an ameliorative program of reform that did not challenge the basic socio-economic structures of society.

legal guardians of homeless children or children deemed at “moral” risk in their own homes, the federal government coerced Native children to leave their homes for abusive and culturally genocidal residential and industrial schools, and crèches and orphanages were established throughout Ontario and Quebec to procure children from houses deemed unfit. At the same time, women were targeted for their child-rearing practices. The Victorian Order of Nurses, one of many volunteer societies, visited mothers and children to educate and direct mothers in child-rearing practices.

Women's bodies became targets in an individualist ameliorative program of reform; increasing rates of breastfeeding seemed a feasible goal for health promoters who targeted racial strength. Dr. MacMurchy played a prominent role in idealizing maternity and securing breastfeeding as central to responsible motherhood, as her roles as the province of Ontario's "special inspector of the feeble-minded," as assistant inspector of Prisons and Public Charities, and as a promoter of the Blue Books on maternal health, placed her at what Dodd calls the "forefront of the eugenics-public health alliance" (1991: 209). Prior to her appointment to the head of the Division of Child Welfare, she was appointed to inspect feeble-mindedness in women—an initiative spearheaded by the National Council of Women (Dodd 1991). This framing of women as incapable of properly caring for children and the belief that experts should educate mothers persists today, as we will see in Chapter 4, and is a decisive indicator of women's citizenship responsibilities that still endure. We still see evidence that women are both tasked with protecting the primacy of the mother-child relationship, as well as deemed ill-equipped to appreciate the best caregiving practices, particularly when it comes to infant feeding. MacMurchy focused on the feeble-mindedness of unwed mothers, whose illegitimate children, she believed, "victimized society with their inferior genetic makeup" (Dodd 1991, 210). Compelled by this belief, MacMurchy worked to elevate "healthy" maternity to a nationalistic goal, fettering morality and science and exalting fit mothers as vital instruments for racial and national strength. This ethos echoes the intersection of ableism and misogyny (through neoliberal conceptions of health and productivity) when it comes women's imperative to be flexible and agile, which we saw in Chapter 2. MacMurchy and her contemporary reformists opposed childcare centres and women's employment, exalting the mother-child care relationship as paramount to future health of the nation (Finkel 2006).

This historical moralizing of breastfeeding was also laced with an incoherence that manifests today in advice literatures for women who are self-medicating (using drugs or alcohol) or living with HIV. In the post-revolutionary United States, when infant mortality was around 10% in cities, women who did not breastfeed were considered selfish and unpatriotic (Wolf 2010). However, popular medical literature warned that middle-class women may be too weak and unable to sustain breastfeeding, while lower-class wet nurses (many of whom were single mothers) were deemed morally and physically unsuitable to provide reliable surrogate milk (Wolf 2010). So women were told to breastfeed *and* suspected incapable of meeting their infants' nutritional needs. Cow's milk became a viable, if slightly less nutritious, alternative to breastmilk, but it was often spoiled in transport or as a result of improper storage. With infant mortality a major focus in political rhetoric around national strength, the field of pediatrics developed to regulate "baby feeding" (Wolf 2010). Since pediatricians billed by the patient, their positioning as central to babies' lives was good for business. They worked on developing optimal infant formula and oversaw milk and formula distribution sites, further establishing their role in healthy infant feeding practices. As studies on "artificial feeding" showed little effect on infant health, physicians contended that formula feeding, if administered properly and under a doctor's supervision, could be as healthy as breastfeeding (Wolf 2010). By the 1940s, the field of pediatrics was well established, as was recommended bottle-feeding, and health authorities shifted the rationale behind infant disease and death from inadequate feeding solutions to mothers' failure to follow doctors' orders (Wolf 2010).

Through the twentieth century, infant feeding, whether by breast or formula, remained at the centre of infant health debates and essential to rhetoric of women's national responsibility. In Canada, even known "progressives" responsabilized women to undertake unpaid labour out of concern for racial fitness and explicit eugenics aims. Tommy Douglas, first federal leader of Canada's then-socialist New Democratic Party who is credited with creating the national health service, Medicare, reflected women's responsibility to reproductive labour in his MA thesis entitled "The Problems of the Subnormal Family." In his thesis, Douglas studied twelve women who he believed to be "giving rise to the problems of subnormal families" (1933, ii). Classifying the women as "immoral" or "nonmoral," which he defined as "common prostitutes" and "having no knowledge of right and wrong" respectively, Douglas argued that this morally, mentally, and physically subnormal group of women were responsible for delinquent children, and they tended to overproduce—at a high cost to society in the forms of mental hospitals, reformatories and jails. In addition to sterilizing subnormal women, Douglas recommended that the state increase its regulation of marriage licenses to prevent the "unfit" from reproducing subnormal families. He also recommended that the existing class of degenerates be segregated to remote communities so that they no longer contaminate the greater public. It was not until after the fall of Nazi Germany that the public questioned such explicit eugenics targets for the pursuit of a "master race," but Sexual Sterilization Acts remained in British Columbia and Alberta until 1972 (McLaren 2015).

Douglas' early thinking is misogynist, ableist, and racist, and while his explicit language would not be tolerated today, feminist citizenship theorists know that it remains important to interrogate the ideological system foregrounding contemporary welfare states (Lister 2003). As I noted in

the Introduction, contemporary social contracts are institutionalized in welfare state provision and firmly established in the national imaginary, and while attitudes about women's roles and responsibilities have shifted in some ways since the birth of welfare settlements in the post-WWII period, modern welfare states still presume and prescribe a gendered division of citizenship responsibilities. Misogynist, ableist, and racist sensibilities continue to circulate through both welfare state stipulations and infant feeding mandates, as benefits and support are unevenly distributed by social location, which I will expound upon below and in Chapter 4. As Douglas (1933) advocated for universal health care in the name of national strength based on the explicit exclusion of some mothers on the basis of their "inferiority" and "threat" to future generations, we can understand both expectations of women's labour and the exclusion of some women as foundational in our health care system. Canada's advanced welfare state was formed by a middle-class cluster of physicians, eugenicists, and politicians who routinely undermined women's authority as mothers, moralizing their scientific expertise according to traditional sexual divisions of labour and middle-class, Judeo-Christian values (Dodd 1991, Wolf 2010). Coming forward to present day, in the next section we see that this persistent moralizing is particularly suspect given the insecure state of breastfeeding science.

Recent scientific comparisons of breastfeeding and formula feeding

This section examines some of the most oft-cited systematic reviews of breastfeeding literature from the last decade. The reason I provide such detail about systematic reviews here is so that theorists of care and citizenship can apprehend the messages women receive from the biomedical community (through journalistic reports and public health campaigns), including a deep understanding of the experimental research used to provide the foundations for these messages.

Only in engaging the research from a feminist science studies perspective can we comprehensively observe and problematize the messages women receive about their individual responsibilities to care work for broader social health. Without rigorously engaging scientific method and rhetoric involved in infant feeding research, we will not appreciate the isolation of the object of analysis—breastfeeding—from its context: women’s lives. After outlining the methods of “meta-analyses” of breastfeeding research, I list the common benefits associated with breastfeeding and how these line up with experimental data, before moving to a discussion of how scientific research is misinterpreted in popular media to disciplinary effects. I engage one particularly foundational study in some detail because in doing so, the language of breastfeeding promotion in current research becomes transparent, and the sensibilities underlying the research that come to responsabilize women toward hierarchies of labour—unpaid care labour and paid labour—also become clear.

Systematic reviews of breastfeeding research

As we have seen so far in this chapter, women’s responsibility to care work became embedded in welfare state development at the turn of the twentieth century with the development of pediatrics to cure infant mortality. This section continues this exploration to medical advancements of the present day. Medical researchers have expanded the literature so vastly since then that scientists and medical practitioners have needed to devise ways of organizing and making sense of huge banks of data so that they can be appropriately surveyed. In recent decades of biomedical research, evidence-based studies on a given topic are organized into summaries called “systematic reviews.” Systematic reviews attempt to “collate all empirical evidence that fits pre-specified eligibility criteria in order to answer a specific research question” (Higgins and Green

2011). Following specified methodological guidelines, these reviews synthesize the findings of multiple research studies, providing topic-specific meta-analyses for practitioners and future studies. Understanding the rationale of systematic reviews is important for a feminist engagement with breastfeeding research—which is key to expounding women’s citizenship responsibilities to multiple labours—as we seek to decipher the biases of meta-analyses and their discussion that mimic historical methodological and reporting biases (see early work of feminist philosophers of science Haraway 1989, Harding 1986, Keller 1985, Longino 1990). This side road is key to my feminist thesis on how women are responsabilized toward multiple competing labours because some feminists theorists of breastfeeding, whose work I raise later in this chapter and in Chapter 4, do not always appreciate deep engagement with medical evidence in their fight for women’s rights to breastfeed in public (see Hausman 2013, Van Esterik 2008). The specificities of review data, including the discursive construction of subjects and selection criteria, give way to political understandings of women’s bodies and labour in the biomedical field. It is important for any consideration of the rhetorical construction of women’s bodies and their duties to care work. In what follows, I explain systematic reviews in general to lay the foundation for discussing recent reviews of breastfeeding research. It becomes clear that the findings and recommendations of systematic reviews mirror a persistent problem of androcentricism in science—for *application* of findings to result in furthering women’s marginalization—one that is only significantly improving among already advantaged groups of women (Harding 2011).

As meta-analyses, systematic reviews are more precise—that is, they minimize elements of arbitrariness, resulting in a higher degree of reproducibility and repeatability—than single

studies. Methodologists and statisticians widely agree that systematic reviews succeed at assimilating large amounts of data, and, in doing so, they allow practitioners easy access to a bundle of studies, available for their comparison and review. At a (2011) University of Ottawa conference reviewing the methodological challenges of systematic reviews and their critical appraisal, clinicians reported referring to the conclusion sections of systematic reviews multiple times daily throughout their practice rounds. These reviews have become necessary in the context of an explosion of medical literature and the scarcity of time in practice settings (Gopalakrishnan and Ganeshkumar 2013). Systematic reviews are now also used as a starting point for developing clinical guidelines and determining best practices in health care settings (Gopalakrishnan and Ganeshkumar 2013).

While systematic reviews effectively summarize existing scientific information in order to make evidence-based decisions (Hemingway and Brereton 2009), and in general, they increase practitioner and researcher accessibility to a host of data, scientists are continuously appraising and refining the methodological rigour with which these exhaustive reviews must be conducted. In addition to the methods of conducting reviews evolving, the reviews themselves, which are labour intensive, require frequent updating with the advent of new information on a given topic. We can imagine how dated systematic reviews might be less reliable than the findings of a single new study, given advances in technology or scientific knowledge. Further, like any study, quality standards vary, and biases might be less transparent given the complicated process of selecting studies for review and synthesizing and stratifying their findings.

An early problem of systematic reviews was a selection bias called publication bias, which refers to the “disappearance” of small trials from major publications. Under pressure to be competitive with regard to publishing and career advancement, researchers, editors, and companies have shown a bias toward publishing “significant” positive, rather than negative “non-significant” results (Cochrane Collaboration 2015). Research shows that researchers themselves are the main origin of publication bias, as they are more likely to submit their research for publication when it yields significant results, especially since studies that yield positive results are more often cited, thus attracting more professional clout, than publications with negative results (Dwan et al. 2013; Easterbrook et al. 1991). In breastfeeding studies, for example, researchers may be less likely to publish experiments that show no significant health difference between two groups of adults who had experienced different infant feeding practices. This would lead to a publication bias in systematic reviews of breastfeeding research, as a disproportionate number of cases would show significant positive results.

To address suboptimal reporting in meta-analyses, an international group of methodologists developed the Quality of Reporting of Meta-analyses (QUOROM) in 1996. In 2009, the guideline was updated to reflect improvements in the science of systematic reviews. Now called PRISMA, the Preferred Reporting Items for Systematic Reviews and Meta-Analyses, the guide outlines an “evidence-based” minimum set of items for reporting systematic reviews with the aim of helping authors improve their meta-analyses.⁷⁰ The Cochrane Collaboration concedes that

⁷⁰ Following PRISMA, an international advisory group developed PROSPERO, a free public register for systematic reviews, formed to avoid the duplication of systematic reviews and improve public access to meta-data. PROSPERO registers systematic reviews of the “effects of interventions and strategies to prevent, diagnose, treat, and monitor health conditions, for which there is a health-related outcome” (2012).

there is “good reason to be concerned”⁷¹ about publication bias; the group suggests researchers use a “funnel plot” method to investigate the presence of bias in reviews, and then discuss the estimated degree of bias in the discussion section of research reports.⁷² In a related problem, the industry of scientific publications has recently been a topic of debate among scientists and investigative journalists, as concern about the effect of publish-or-perish pressure on scientists may result in increased rates of fabricating results (Colquhoun 2011). In 2009, Daniele Fanelli performed a systematic review on survey data about scientists fabricating and falsifying their research. She found that up to thirty-four percent of scientists admitted to questionable research practices, and, in surveys asking about the behavior of colleagues, admission rates rose to seventy-two percent. Considering the limitations of self-reporting on these issues, Fanelli suggests these may be conservative estimates. These questionable practices, including fabrications or failing to report on biases or methodological limitations, likely impacts the studies that are gathered into systematic reviews, which would result in overstated significant positive results.

I raise these methodological limitations here to problematize our common reliance on scientific research findings as moral guidelines, particularly when it comes to women’s duty to care work. Thinking back to the development of pediatrics and obstetrics alongside discourses of which maternal labours are best for a thriving nation, we can already see that the stated benefits of breastfeeding intersect with a complicated history of infant feeding, and the benefits of breastfeeding are over-represented in the context of methodological complications in

⁷¹ See “Publication bias,” retrieved June 5, 2014, <http://www.cochrane-net.org/openlearning/html/mod15-2.htm>

⁷² Complicating this further, an empirical evaluation of the funnel plot shows that researchers who assess for publication bias using funnel plots may be misled by its shape (Terrin, Schmid, Lau 2005).

breastfeeding research—a conflation I pull apart in the next chapter. Contrary to Bernice Hausman’s (2013) argument that feminist critique of medical imperatives to breastfeed are only “avowedly feminist claims” that misguidedly “attack” attachment parenting and breastfeeding as a form of women’s subordination, I am clarifying here with this detailed review of methods that it remains as important as ever for any rhetorical unpacking of women’s duties to vigorously engage the evidence debate. Only then can political questions about women’s autonomy and status be accurately considered. Any attempt to frame this engagement with science as antifeminist or against breastfeeding is misguided, as this critique works hand-in-hand with advocacy for state provision and legal reform for breastfeeding rights. It is vital to appreciate how medical evidence, with all of its methodological limitations, is used to discipline women and enforce the gender contract, which stipulates uneven distributions of paid and unpaid labour between men and women (Vosko 2011). Further complicating the methodological limitations of systematic reviews, for example—which are minimized compared to single studies—is the basic problem of low statistical literacy skills among medical residents and practicing physicians. In a survey of US obstetrics-gynecology residents, Anderson, Williams and Schulkin (2011) found that respondents performed poorly on two basic statistical literacy questions, with only twenty-six percent correctly answering a positive predictive value question and forty-two percent correctly defining a P value (in a true-false question). Even though statistical literacy is critical in evidence-based medicine, it is not a major part of medical school curricula (Anderson, Williams and Schulkin 2011). We can imagine how if medical practitioners themselves falter on their interpretation of experimental data, journalists and social science scholars are certainly prone to make mistakes.

One example of how this unexceptional error can affect common knowledge appears on *The Doctors*, an immensely popular syndicated talk-show spin-off from *Dr. Phil* produced by CBS Television. It airs daily in the United States, Canada,⁷³ Mexico, Australia, Ireland, Sweden, and Finland. In a 2011 episode on breastfeeding benefits, the talk-show panel hosted Joan Wolf, a prominent social scientist who is critical of scientific claims to the benefits of breastfeeding over formula feeding. Wolf presented her argument that the benefits of breastfeeding are widely overstated due to a predominant tendency to confuse correlative and causal evidence. Ironically, the lead physician on *The Doctors* responded to her argument using correlative evidence, which she presented as causal. To show how this happens so innocuously to a television audience, and to show how a professor of Women's Studies is dismissed for her "beliefs" about medical evidence, I include a transcript of the exchange below:

Dr. Lisa Masterson (OB/GYN): Now there's another breastfeeding controversy going on right now that has me fired up. A few weeks ago I came across a book called Is Breast Best, which questions whether the health benefits of breastfeeding are being over-hyped. So I just had to bring the author on making these claims. Joan Wolf, here today. She's an associate professor at Texas A&M University. Now tell me what you think about this...Do you think it's really overrated?

Prof. Joan Wolf: My claim is that... once you have ruled out things like class and education, and you've controlled for as many environmental variables as possible, the benefits of breastfeeding tend to get very small.

Dr. Lisa Masterson: There are a lot of us here today that were formula fed, and that's okay. But there are benefits and I know you don't necessarily believe them. Whether it's bonding, whether it's nutritional...there is at least the gastrointestinal. That in itself is a reason to continue.

Dr. Travis Stork (ER physician): It's a huge reason.

⁷³ In Canada, Radio-Canada airs a French version called *Les Docteurs* at the same time as the English version, on a different channel.

Dr. Wendy Walsh (Clinical Psychologist): Professor Wolf, I agree with you on one thing, and that is that breastfeeding mothers are different mothers. But are they different before they begin breastfeeding or after? I believe the hormonal changes that happen in a woman's body change her. There are lots of studies showing that women who are breastfeeding mothers actually relate to their children more empathetically and compassionately. I'll tell you this: I was a hard-driving career woman and when I became pregnant, some of my colleagues said, "Wendy Walsh is pregnant? Does she know who the mother is?" Seriously. So once the oxytocin was flowing in me...and other hormones that get raised... I just never wanted to leave my baby."

Dr. Travis Stork: Oh yeah. I know a lot of moms...

Dr. Lisa Masterson: It does promote bonding, that physical, you know, exchange that's going on. But there's also benefits to the mother as well.

Dr. Travis Stork: Oh yeah.

Dr. Lisa Masterson: It decreases breast cancer, uterine or ovarian, and other estrogen-related cancers, so it's very...it does have a lot of benefits out there and the evidence does support it.

Prof. Joan Wolf: One quick point. I think we have a sense of "yes we all want to do what's best for our babies," and we need to remember that the overwhelming majority of mothers want to do what's best for their babies. But the benefits of breastfeeding, if they're real, and I'm not convinced that they are, are relatively small... If children who live in cities are more likely to get asthma, can you imagine the Surgeon General issuing a call to action to get all families to move out of the cities? We wouldn't do that [other doctors interrupt]. Let me finish. We would say that is ridiculous, it's too big a cost, we'll run the risk. We make those kinds of decisions all the time. Somehow, when it comes to breastfeeding, we don't see the cost because we expect that mothers will shoulder any cost in order to do even something marginally better for their child.

Dr. Wendy Walsh: Professor Wolf, you are a professor of Women's Studies, and I just want to remind you that when a woman has a baby, that is her. That is her happiness. It comes from her. It is her body. Giving to your baby is giving to yourself.

Prof. Joan Wolf: I'm not anti-breastfeeding.

Dr. Wendy Walsh: Okay. On that note, thanks for being with us.

This segment is exasperating for many reasons, including the cursory reference to breastfeeding “benefits” that are actually factors correlatively related to breastfeeding, as well as the essentialist view that all women come to be defined by their motherhood role and collapsed into the identity of their children (with no mention of the modern conditions of parenting). But perhaps the most tiresome effect is that of course we can assume that the majority of the audience was persuaded more by the physicians’ interpretation of scientific data, making Wolf’s “women’s studies” critique of breastfeeding science seem unsubstantiated (and a problem of feminists being antagonistic rather than well-informed critique). This problem is typical of *The Doctors* and a similar medical talk show called *Dr. Oz*. In fact a 2014 study published in the *British Medical Journal* examined the health recommendations made on *The Doctors* and found that thirty-seven percent of evidence presented on the show was unsupported, fourteen percent was contradicted by evidence, and evidence was not found for twenty-four percent of recommendations (Korownyk et al. 2014). On average, *The Doctors* made 11 health recommendations per episode.

The Doctors signals that through no fault of a scientist researcher, scientific findings can be further obscured by the way they are extrapolated from studies to mainstream media for public consumption, even when extrapolated by medical “experts.” As I demonstrate in this chapter and the next, the way medical findings are summarized moves like a game of Telephone, where the scientific message is reinterpreted at every degree of extrapolation from the data until we have an unsupported policy mandate like “breast is best” and an unsubstantiated though popular claim like “breast *milk* boosts IQ” (Hope 2008, emphasis added). As Dr. Stephen Woloshin and Dr. Lisa M. Schwartz, both medical doctors and professors at Dartmouth Medical School, found in

their study of media reports on research presented at scientific meetings, “News stories about scientific meeting research presentations often omit basic study facts and cautions.

Consequently, the public may be misled about the validity and relevance of the science presented” (Woloshin and Schwartz 2006). What is more, we will see how “experts” themselves are prone to decontextualize and depoliticize their results while making political statements in their discussion of the research—a practice that obscures implications for maternal bodies and further entrenches their responsabilization to heed expert advice. I now turn to some of these findings to watch how this happens.

Major findings of breastfeeding science

In 2001, Kramer and Kakuma concluded a systematic review titled, “The optimal duration of exclusive breastfeeding” (published online in the Cochrane Database in 2002), which they updated in 2007 and 2011 (published in 2008 and 2012 respectively). In their comprehensive review, Kramer and Kakuma found that “exclusive breastfeeding for six months (versus three to four months, with continued mixed breastfeeding thereafter) reduces gastrointestinal infection and helps the mother lose weight and prevent pregnancy” (due to expending calories in feeding and delayed return of menstrual periods and ovulation), but “has no long-term impact on allergic disease, growth, obesity, cognitive ability, or behaviour” (Kramer and Kakuma 2012). As a result, they concluded that “the available evidence demonstrates no apparent *risks in recommending*, as a general policy, exclusive breastfeeding for the first six months of life in both developing and developed-country settings” (emphasis added). In other words, exclusive breastfeeding for six months reduces gastrointestinal infection in infants, and fulfills an infant’s

nutritional requirements. It does not appear to have a long-term impact on allergies, growth, obesity, cognitive ability, or behavior. Therefore, health agencies can move forward with this recommendation without *risk*. Note that this does not prove the benefit of breastfeeding for the long-term health of infants, and only suggests that recommendations to breastfeed for six months have not been proven to *negatively* impact infant health. That is, exclusive breastfeeding for six months is recommended based on the fact that it does not appear to have negative health consequences. Important to consider in the Canadian and US contexts is how gastrointestinal infection is not a major cause of infant mortality, rates which are already extremely low.⁷⁴ So where do public health agencies get the idea that breastfeeding is such vital labour?

Michael Kramer is a professor in the Department of Epidemiology, Biostatistics and Occupational Health and the Department of Pediatrics in the Faculty of Medicine at McGill University. He is world-renowned researcher on the causes of adverse pregnancy outcomes and the infant and child effects of breastfeeding who has published extensively (dozens of original articles and several op-eds) on these topics. He was lead researcher on the landmark PROBIT (Promotion of Breastfeeding Intervention Trial), which led to recommendations by the WHO and WHA (World Health Assembly). As a leading researcher on such a popular and controversial topic, Kramer has a high media profile; he has been outspoken on many occasions about the game of Telephone, namely the “press twisting [his] words” when it comes to media reporting his research findings on breastfeeding.

⁷⁴ 4.8 and 6.1 per 1000 respectively (2010, 2011). See <http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/health21a-eng.htm> and <http://datacenter.kidscount.org/data/tables/6051-infant-mortality?loc=1&loct=2#ranking/2/any/true/133/any/12719>

In 2008, Kramer et al. caused a stir in the media and medical community with the publication of, “Breastfeeding and child cognitive development: new evidence from a large randomized trial.”⁷⁵ The experiment was based on the premises of the Baby-Friendly Hospital Initiative, which was developed by the WHO and UNICEF to promote and support breastfeeding (Kramer et al. 2008).⁷⁶ The study set out to “assess whether prolonged and exclusive breastfeeding improves children's cognitive ability at age 6.5 years.” A cluster-randomized trial,⁷⁷ with enrollment from June 17, 1996, to December 31, 1997, and follow-up from December 21, 2002, to April 27, 2005, involved thirty-one Belarusian maternity hospitals and their affiliated polyclinics. In their report, Kramer et al. (2008: 583) note that in industrialized nations, where infant mortality is exceedingly low, cognitive benefits (measured by IQ-type scores) may be “among the most important advantages of breastfed infants.” In summarizing the scientific literature on infant feeding, the team admits that the [IQ] benefits found in the most “robust” meta-analyses of breastfeeding research, though, “are likely to be confounded by other, more subtle differences in mother’s behavior or her interaction with the infant. These differences are extremely difficult to measure and virtually impossible to control for in observational studies” (579). The researchers suggest that the solution to these methodological problems is randomized control trial, but dividing research subjects according to breastfeeding versus artificial feeding is “probably unethical” (579) since one group would be mandated against a behavior that may be found to have resulted in optimal health outcomes for the child. To understand breastfeeding and formula feeding as thoroughly as possible without ethical breach, Kramer et al. (2008) designed a

⁷⁵ See, for example, “Breastfeeding makes kids smarter,” *Montreal Gazette*, 6 May, 2008 accessed March 9, 2014, <http://www.canada.com/montrealgazette/news/story.html?id=a5af49c0-b654-4a4c-ba77-034890f6b501>.

⁷⁶ World Health Organization; UNICEF, *Protecting, Promoting, and Supporting Breastfeeding: The Special Role of Maternity Services*. Geneva, Switzerland: World Health Organization; 1989.

⁷⁷ A trial for which individuals are randomized in groups (as opposed to individuals).

creative experiment that involved a breastfeeding promotion strategy among mothers who had *already* decided to initiate breastfeeding. All study participants had decided to initiate breastfeeding, but only one group was exposed to a breastfeeding promotion campaign.

The PROBIT, the largest ever trial on human lactation, was expansive. It included 17 046 healthy breastfed infants from thirty-one maternity hospitals (and affiliated polyclinics). The two randomized groups were similar in “maternal age, education, number of other children at home, proportion of mothers who had breastfed a previous child for at least three months, cesarean delivery, maternal smoking during pregnancy, birth weight, gestational age, and five-minute Apgar score” (579). At the three-month follow-up, the prevalence of exclusive breastfeeding was seven-fold higher in the experimental group (which had been exposed to the breastfeeding promotion campaign), though low in both groups by six months. Researchers performed follow-up examinations at the age of six-and-a-half, when children were given the Wechsler Abbreviated Scales of Intelligence (WASI) test, designed to measure for aptitude with “vocabulary, similarities, block designs, and matrices.” Children who had begun school were evaluated by their teachers (using a five-point Likert scale) in the subject areas of reading, writing, math, and “other subjects.” Among multiple statistically significant and nonsignificant effects, Kramer et al. found significant correlations between intelligence measures and six months of exclusive breastfeeding, therefore concluding that their findings “strongly suggest that prolonged and exclusive breastfeeding improves cognitive development as measured by IQ and teachers’ academic ratings at age 6.5 years.” However, high inter-pediatrician variability resulted in high CIs (confidence intervals), meaning the magnitude of observed effects is considerably uncertain. This means that because scores varied highly between pediatricians, the ability for the

research to be replicated in another experiment and to return the same findings is uncertain, making this component of the research less reliable. Once adjusted for the high degree of clustering, full-scale IQ was 5.9 points higher in the experimental group, a difference of “intermediate magnitude.” The researchers caution against inferring a selective effect on verbal cognitive development in particular, given the imprecision of their effect and the mixed results reported from observational studies. This particular finding is an example of how the limitations of scientific data are ignored when it comes to public consumption. When this study was released, the *CBC* was among many major media outlets to broadcast that “breastfeeding boosts kids IQ” (Canadian Press 2008), without alluding to these methodological limitations or the fact that these findings are correlative—making “breastfeeding boosts IQ” an unsupported claim.

Feminist Analysis of PROBIT

According to the researchers (Kramer et al. 2008), the major limitation of the study of cognitive development and breastfeeding was the fact that the pediatricians who administered the Wechsler Abbreviated Scales of Intelligence WASI were aware of the subjects in experimental versus control groups. Despite this notable bias, they maintain that their correlative findings “strongly suggest” it is prolonged and exclusive breastfeeding that improves cognitive development. What is most interesting about their discussion, though, and what is less reported, is that the study also indicates that it “remains unclear whether the observed cognitive benefits of breastfeeding are due to some constituent of breast milk, or are related to the physical and social interactions inherent in breastfeeding” (Kramer et al. 2008, 582). For example, increased maternal-infant contact could increase, say, verbal interaction and have an effect on cognitive development. For feminists who attend to issues of women spending long hours in precarious labour, lacking

maternity leave, living in physically unsafe circumstances, having biological barriers to feeding, and living with trauma, this finding that infant-maternal contact may be responsible for thriving infants has the potential to point to structural problems that have little to do with infant feeding. Instead, the research frames this mother-infant bond according to a mother's imperative to breastfeed, and, as I will show in the following chapter, breast *milk* becomes heralded as a super-substance—through no real fault of the researcher, since others are misinterpreting and misrepresenting their correlative data as causal, and extrapolating their findings on breastfeeding to breastmilk.

Even if the methodological limitations could be resolved and a study like the PROBIT were to give irrefutable evidence that exclusive breastfeeding is far superior to bottle-feeding, the PROBIT findings and their use tell a complicated story for feminist theorists of breastfeeding. First, breastfeeding research and promotion, the focus of Chapter 4, is now an industry involving the most powerful international health institutions in the world. As I will explain, breastfeeding promotional material and accouterments are being bought and sold within sites of health promotion. Breastfeeding research and political promotion are also overlapping fields. In fact Kramer advises the WHO and Unicef on breastfeeding promotion and the optimal duration of exclusive breastfeeding (see Kramer and Kakuma 2001). Though beyond the scope here, elsewhere Watson and Mason (2015) present a transnational feminist analysis of WHO breastfeeding promotion in the global south, questioning the implications of the geopolitical relationship between Western scientists and a global health organization, for the campaign targets in non-industrialized areas. For transnational feminists, who seek to examine the sociopolitical and economic conditions for and techniques of imperial, colonial, and national

hegemonies, this relationship of knowledge dissemination might be seen as ethnocentric and imperialist in nature (Mohanty 2003), requiring institutional analysis of their mandates, funding, research strategies, and operationalization of terms like “health” and “benefit” (see Mason 2013). At the same time, feminists can think of the possibilities for social change and justice opened by rigorous scientific research on infant feeding, maternal health, and infant health. If breastfeeding is truly beneficial for mothers and infants, that evidence could be leveraged to demand provisions and time for women’s reproductive labour, work which is not universally supported in Canada or the United States. In Canada, maternity leave is restricted to full-time workers and is included under employment insurance for disability. In the United States, there is no universally guaranteed paid leave. I elaborate on the intricacies of paid leave in the next chapter on state-sponsored breastfeeding promotion.

Adding to the skepticism of feminists is the fact that among industrialized nations, infant mortality is not a significant social problem, so the most socially interesting *potential* benefit for infants is not death, but rather marginally improved cognitive ability as measured by IQ score. Gastrointestinal disease is still mitigated by breastfeeding in the global economic north, but as Wolf (2010) explains, evidence suggests that the difference between bottle-feeding and breastfeeding has little impact on most infants in industrialized states since gastrointestinal health is not a major threat to infant mortality. Considering IQ measures from a critical disability and health perspective (see Rioux 2010), which seeks in part to undo ways of thinking about normal bodies and abnormal bodies according to their societal “functions” (Clare 2007), we might consider whether this degree of “benefit” subscribes to an inclusive health care ethic, or whether slightly improved IQ is a benefit worth such strong promotion in the context of broader health

ecosystems (see Boetzkes and Robert 2000), especially since it may have nothing to do with infant feeding itself. If we could discover that in fact breastfeeding itself improves IQ marginally, what does this mean, if anything, for maternal labour? How would mothers and their responsibilities to paid and unpaid labour be positioned relative to children's "intelligence" then? It could have momentous impact on how women's responsibilities to paid and unpaid labour are viewed socially. It could mean that women are entitled to more social and financial support to breastfeed in public and at work, and it could mean that women should receive universal paid medical leave in order to be able to afford the time and money to breastfeed their children. These findings could also be used to advocate for the importance of women's role in domestic life, perhaps at the expense of their autonomy to pursue paid labour and one form of economic security (through income). In other words, these marginal findings could be taken up by different political projects with drastically different outcomes for women's citizenship responsibilities and gendered labour contracts.

At the same time as we consider these implications, we can critique the mechanisms of the IQ test as a sufficient measure of cognitive wellness (see Kaninchen Zero, October 23, 2009) from a critical disability perspective. What do IQ-type tests tell us, what do they leave out, and how do we relate them to wellbeing, at what cost? As Dr. Alan Leschied cautions in response to the PROBIT findings, IQ score "doesn't accurately predict things like academic achievement, not necessarily. It doesn't predict vocational success. So you don't want to overstate what IQ scores actually mean" (Editorial Board, Ottawa Citizen 2008, n.p.). The PROBIT researchers do not tell us what IQ scores mean, simply folding it into the "benefit" category. A fourth concern is the fact that studies of breastfeeding benefits after prolonged exclusive breastfeeding do not separate

breast *milk* from the *practice* of breast feeding, which contributes to how journalists and policy makers misinterpret and falsely extrapolate findings in their published content. In the next chapter, we see a striking example of how state-sponsored breastfeeding advocacy campaigns, which are relayed through snappy slogans and provocative images, conflate women's labour, breast milk, and suboptimal conditions for mixing infant formula in pursuit of women's responsabilization. For now, it remains key to realize that even if an experimental design could ethically administer a control group of women who were forbidden from breastfeeding, and it were possible for this experiment to find a causal relationship between breastfeeding practice and some improved outcome for infants or children, this would not demonstrate a causal relationship between breast *milk* and infant health. It would instead show that *breastfeeding* benefits infants and children. It would still not be clear if the intimate act of breastfeeding or the milk itself were the cause of improved outcomes. It should give us pause that pointing out this fact is met with hostility from biomedical researchers, academics, policy makers, and breastfeeding advocacy groups. Political theorist Joan Wolf (2010), who has received intense blow back from academics and advocates alike, has found with regard to communicating the minimal benefits of breastfeeding to the majority of infants in the West, "You Can't Say That"⁷⁸ to the biomedical community or breastfeeding advocates. What else does this tell us about how maternal bodies are positioned with respect to their labour? From a citizenship perspective, this represents evidence of the intersection of misogyny, racist ableism, heteronormativity, and capitalist interest at the question of women's responsibilities, since neoliberal thinking about health does not make room for women's disproportionate labour burdens and income inequity to be challenged, nor does it

⁷⁸ See Joan Wolf interview with Jennie Bristow, "I've been likened to a Holocaust denier," *Spiked*, 28 Jan 2013, retrieved from <http://www.spiked-online.com/newsite/article/13300#.VOIuRGTF9ew>

consider the implications of breastfeeding being primarily “afforded” by white, middle class, nuclear families.

Criticism of PROBIT or other breastfeeding research should not be read as a dismissal of the possibility that breastfeeding is more beneficial for infants than bottle-fed infant formula.

Breastfeeding research sits at a complicated intersection of feminist advocacy, policy, medicine, public health, and politics of care, including care ethics and a fiduciary duty to protect infants from harm. Taken together, the multiple findings of PROBIT and the systematic review, “Optimal duration of infant feeding” (Kramer and Kakuma 2012), do suggest that there is something beneficial about maternal-infant contact, if not breast milk itself. Again, feminists could think about what might be made possible by these findings in terms of advocating for adequate economic support for breastfeeding or other techniques of care provided unpaid by so many women. Further to the possibilities suggested by this research, in PROBIT, experimental and control groups both contained at least partially breastfed infants, so it is feasible that if it were ethical to design a trial that controlled for breastfeeding and not breastfeeding, results could be more dramatic—exclusively breastfed babies might show even more pronounced responses to breast milk or maternal-infant contact than exclusively non-breastfed babies. So the point in critiquing PROBIT and other breastfeeding research, then, is not to reject the scientific findings or discredit researchers, and it is certainly not to argue against breastfeeding, breastfeeding rights, or even against breastfeeding advocacy, but to illustrate both the methodological limitations and the ideological premises appearing in current research discussion and findings, and how these come to be (mis)understood in mainstream scientific discourse. The purpose of pulling this apart, of course, is to witness how women’s citizenship responsibilities to care labour

become lodged in common sense discussions of women's health, infant health, and broader public health, and how the state deploys scientific rhetoric to justify the fact that it downloads its responsibility to protect citizens to individual women. This is not just a debate between breastfeeding advocates and scientists (though it contributes to that discussion, absolutely), this is a presentation of the biomedical findings that are used to evaluate gendered responsibility to intimate care work—a labour that is, as Williams (2006b) put so aesthetically, sentient, emotional, and intimate, and as Tronto (1993) explained, entails attentiveness, responsibility, competence, and responsiveness, and as Kelly (2013) would add: is ultimately a social, economic, and political tension. I explore the implications of misunderstood and misrepresented scientific research in the next chapter. From this critique, we can unpack how these studies are conceived (and the degree to which women's labours are depoliticized when it comes to experimental design), the rationale behind the ways in which these particular scientific findings are so staunchly defended. Recall from Chapter 1 Karen Barad's (2007) argument that biomedical data is only presented as politically neutral when its proponents are discouraging us from making political links—that is, depoliticizing scientific work is itself a political act. Only in politicizing breastfeeding research and its implications for promotion, circulation, and common-sense gendered divisions of care work can a feminist politics of breastfeeding reckon with ethics of care, women's rights in relation to infant feeding, and a cultural responsibility to infants who require our labour for their survival. Only then can theorists of feminist citizenship see this discrete labour for its broader implications, and only then can we appreciate how women's responsibility to paid labour according to the myth of the adult worker is compounding with a burden to provide unpaid care labour.

*Playing Telephone: Breastfeeding's "inconsistent associations"*⁷⁹

Following the publication of PROBIT findings on breastfeeding and child cognitive development, various media outlets proclaimed the news that “breastfed babies are more intelligent” (Sample 2008, n.p.) and “breastfeeding makes children smarter” (Highfield 2008, n.p.). Speaking to the *CBC*, Kramer stressed, though, that “women who are unable to breastfeed or choose not to for a variety of reasons should not feel guilty or worry their child will be less intelligent as a result of being formula-fed” (Canadian Press 2008, n.p.). Despite articulating a desire to remain outside of the political implications of the research, Kramer’s presentation of his own team’s findings contains assumptions about women’s feelings, their labour, and their abilities. Kramer also said,

I think this [prolonged, exclusive breastfeeding] is a goal that's achievable by the vast majority of mothers. [...] Those who cannot — and there are some who cannot — and there are some who could but don't want to, have other ways of stimulating their children and improving their IQ, like reading and playing with their children. [...] And it might even be that the effect that we're seeing is not something in the [breast] milk but has something to do with the nature of the contact, the physical contact or with what transpires between the mother and the baby verbally or emotionally at the time of the feeding, and that maybe is transposable to other feeding modes.

Here Kramer suggests both that the “vast majority” of mothers can achieve the goal of prolonged and exclusive breastfeeding *and* that mothers can stimulate their children in ways unrelated to infant feeding to achieve similar IQ results. There are a number of strands here that tie in with a neoliberal ethos of motherhood: both of these assumptions presume women’s duty and aspiration to care work, while at the same time making concessions for women’s choice and legitimately disparate abilities. Though the research findings are meant to operate neutrally in the name of science, here Kramer posits that breastfeeding is a goal that is achievable, though he points to no

⁷⁹ See Hediger et al. (2001) for associations between “infant breastfeeding and overweight in young children.”

sociological evidence about women's labour responsibilities or barriers to breastfeeding. Nor does he say how it is achievable. He also states that *mothers* have other ways of stimulating children, presuming both the primacy of maternal-infant contact over paternal contact and women's ability to overcome the social barriers that restrict this bonding time, like paid work obligations, incarceration or other geographical separation from the infant, and physical insecurity and violence. In these discussions, scientific findings do not operate neutrally. This reflects how scientific research and discussion is tied to political rhetoric and movements, and has political implications. Kramer's unwillingness to see his work as political is an example of obfuscating the link between science and politics, a maneuver against which Barad (2007) and Thompson (2005, 2013) have both cautioned. Though Kramer helpfully reminds the public that breast *milk* may not be the cause of the potentially beneficial relationship between breastfeeding and infant health, his research (finding "no risk in recommending" exclusive breastfeeding for six months) informs global and national campaigns that promote breastfeeding as a surefire way to guarantee infant survival. Responding to this critique, Kramer (2013) admits that "breastfeeding may not do all that public health authorities claim," but he insists that,

Many of its benefits on child health and development are undeniable based on the available evidence. Pretending otherwise ignores tens of millions of years of mammalian evolution and is a disservice to science, mothers, children and society.

This dismissal of feminist engagement with biomedical research on breastfeeding, particularly the suggestion that critique of breastfeeding promotion is "pretending," renders a feminist engagement with the research "unscientific," which is to say untrue and a "disservice" to society. This dismissal is not unique to Kramer.⁸⁰ Drawing together the primacy of evolutionary biology

⁸⁰ As Wolf (2013) explains in an interview about her research, "Those who consider themselves scientists accuse me, sometimes with bemusement, of being completely unqualified to judge breastfeeding research... even though, as a PhD in political science, I have been trained in the very methods

and ethics of a healthy society, breastfeeding researchers who denounce political critique of breastfeeding promotion commit what Carla Fehr (2004) calls “reductionism;” that is, scientific research that privileges close-up examination of biological processes while failing to acknowledge the social aspects of science. Elisabeth Lloyd (2002) and Karen Barad (2007) have similarly argued that when medical research is restricted to biological investigations at the molecular level, these fail to capture culturally sanctioned ways of viewing and valuing data. While PROBIT accounts for social determinants of health in their research design, these discussion comments reveal a strong bias toward biological determinism and a universal ethic that is founded on scientific discovery without concern for the social. What impact does this dismissal of the social context of infant feeding tell us about how we imagine women’s labour responsibilities and the subject position of mothers?

In 2009, Hanna Rosin, a popular journalist for the *Atlantic*, responded to the PROBIT publication, “A Randomized Breast-Feeding Promotion Intervention Did Not Reduce Child Obesity in Belarus,” in her controversial essay, “The Case against Breast-Feeding.” As mentioned above, PROBIT tested various other effects of breastfeeding, resulting in multiple publications. Pertinent to the representation of breastfeeding’s “inconclusive associations” in media,⁸¹ Rosin emphasized her own maternal fear about not breastfeeding when she discovered that Kramer’s study found no significant impacts on weight (“obesity”), blood pressure, allergies, or ear infections, “some of the most commonly cited benefits in the breastfeeding

breastfeeding studies use. Those who write from the humanities dismiss me as part of a broad feminist conspiracy against motherhood. Mostly critics think I’m just plain daft.”

⁸¹ Coming on the heels of a 2005 Australian study, “Breastfeeding and Overweight,” which found an inverse relationship between duration of breastfeeding and risk of being overweight, the mainstream media took interest in PROBIT’s finding that breastfeeding promotion did not reduce child obesity.

literature” (Rosin 2009).⁸² Rosin also cites Hediger et al. (2001) who conclude that breastfeeding may not be as effective at combatting “obesity” as “moderating familial factors, such as dietary habits and physical activity, in preventing children from becoming overweight” (2453). Hediger et al. (2001), who set out to “determine if breastfeeding and its duration are associated with a reduced risk of overweight in a nationally representative sample of young US-born children” conclude that “many of the same factors related to child growth and the development of overweight, such as race/ethnicity, maternal education, maternal size, and birth weight, are also related to the initiation and duration of breastfeeding or the decision to formula-feed” (2453). In several prominent follow-up articles, including pieces in the *New York Times* and the *Chicago Tribune*, Kramer was quoted as saying, “If a woman wants to breastfeed, that’s good but it’s her choice. There are other ways to be a good mother.”⁸³ In his succinct response, Kramer shows that indeed the politics of breastfeeding and the rhetoric of women’s citizenship responsibilities do emerge from the scientific community: “good motherhood” (morality), choice rhetoric, and gendered division of labour contracts through presumed maternal responsibility for infant care. In fact, Kramer’s scientific discussion could politicize results entirely differently. For example, Kramer’s research could be used to advocate for universal paid maternity leave, or for increased time away from work for parent-infant contact, or for sociological inquiry into the intersection of race and low rates of breastfeeding, or for father involvement in infant care and cognitive stimulation, or for the democratization of infant feeding through the technology of breast pumps and bottles. The point I am making is that all discussion of findings are political, and Kramer

⁸² It is important to note that though PROBIT did not turn up evidence linking breastfeeding to overweight, the link may exist. The point is, the science is inconclusive, but promotional literature fails to account for the multi-factorial nature of the relationship between infant feeding and weight.

⁸³ See Judith Graham, “Science promotes breastfeeding but it’s a woman’s choice,” *Chicago Tribune*, 3 Apr 2009, retrieved June 5, 2014, <http://newsblogs.chicagotribune.com/triage/2009/04/tscience-supports-breastfeeding-but-its-a-womans-choice.html>

politicizes his work in specific ways, securing maternal responsibility and the neoliberal ethic of choice. The implications are intersectional, and citizens are unevenly targeted using this data, which I show in Chapter 4.

Implications for Care Work

When feminist citizenship analyses of breastfeeding politics engage biomedical research at this level, it can make sense of incitements toward particular forms of care work, and also situate forms of care in hierarchies of responsabilization. The link between biomedical research, the foundational claims of state-sponsored health promotion (which I examine in Chapter 4), and popular media discussion is tenuous. In appreciating this tenuousness, we can question the *status* of certain forms of care work. Recall Williams (2006a) nuanced discussion of how low-status care work, usually the most physically challenging bodywork, is the most frequently outsourced, often to low-paid racialized or migrant women. Infant feeding seems an exception to this pattern, as breastfeeding is a uniquely embodied form of maternal-infant care, even though at times in Canadian and US history, breastfeeding was commonly outsourced to wet nurses (see Apple 1987). How does contemporary discussion and promotion of scientific research on breastfeeding come to occupy such an emotionally and politically charged space in mainstream discussion of motherhood? In asking this question, we also pursue how women are responsabilized toward this highly specific act of taking care.

In Chapter 1, I noted Tronto's (1993) conceptualization of care as four inter-connected practices: *attentiveness* (recognizing when care is necessary), *responsibility* (responding to those needs by summoning responsibility), *competence* (meeting needs and demands), and *responsiveness*

(recognizing relationship dynamics between giver and receiver). As I mentioned at the start of this chapter, decontextualized claims by scientific research assert that most women are able to breastfeed. Infant feeding rhetoric, conceived as a simple and life-giving act, involves many ableist assumptions regarding who can take responsibility. Neglecting factors that affect mothers' ability to be attentive, responsible, and responsive is also heteronormative and intersects with class and race, elements that I have mostly left for the next chapter on breastfeeding promotion. As a foundation to that chapter, breastfeeding science suggests that most women can breastfeed and that breastfeeding might be marginally beneficial for infants in developed countries. This research, remaining stubbornly depoliticized, makes irrelevant real barriers like paid labour, geographical separation, histories of trauma, affective conditions, and infant behaviour. In allowing correlative findings to result in suggestions like "there is no risk in recommending exclusive breastfeeding," the research embellishes the link between breastfeeding, infant health, and maternal responsibility.

My intention is not to cast aspersions on breastfeeding researchers or to debunk their data, but to show how scientific research on breastfeeding is complicated by social context, the data itself is correlative, and findings are political in the context of positivist, neoliberal health regimes, with implications for women's citizenship responsibilities and their social exclusion. It is commonplace for scientific research to avoid making reference to personal and cultural factors when discussing their findings and recommendations, and breastfeeding research is no exception. Kramer's media statements in defense of breastfeeding promotion are simply evidence of our cultural exaltation of scientific discovery and the tendency to remove findings from the daily lives of research subjects and the politics that shape their material realities. Following Barad

(2007) and Rachel Lee (2013), scientific research is inherently political and colonial, and is only made to seem oppositional to politics and empire in a system that encourages the general public not to see its connections. Feminist philosopher of science Sandra Harding (2014) recently echoed this critique when she called on feminist political theorists to politicize scientific “objectivity.” In a roundtable discussion on transnational feminism and international relations, Harding contended, “racist societies produce racist sciences, which in turn produce racist societies.” For her, we simply must be skeptical of the recommendations in scientific reports since they are exceptionally politicized: they come to dictate human behaviour through policy and law without accounting for the social and structural. To give an example of how subtly this operates when it comes to breastfeeding benefits, the *Montreal Gazette* quoted Kramer admitting that he would “like to hope that it's something in the physical contact rather than in something that the formula manufacturers can manage to put in a bottle. But there's no evidence for that” (Kirkey 2008, n.p.). Put next to another of Kramer’s media statements, “there are lots of ways you can improve your child’s health and intellectual development. I wouldn’t bet a lot of money that breastfeeding was more important than reading and playing with your kid,” Kramer’s “hope” that the contact between mothers and infants during breastfeeding (as opposed to the breast milk itself) is the cause of improved cognitive function in later years is political—it makes the lack of public support for breastfeeding not only incoherent, but his optimism shows that he is only implicitly referring to women who can already afford, in a number of ways, to breastfeed (Rippeyoung and Noonan 2012). As Rippeyoung and Noonan (2012) convey in their quantitative analysis of women’s post-birth earnings, mothers who breastfeed for six months or more suffer more severe and prolonged earning losses than mothers who breastfeed for shorter durations or not at all. Further, the labour of breastfeeding presents a problem of time and money: mothers

who do not breastfeed are more likely to cite not having any paid maternity leave (CLASP 2013). If human contact might play a higher role in improved cognitive outcomes for babies than does a particular substance, and mothers who are not able to take paid maternity leave are less likely than other working mothers to have this contact (CLASP 2013), scientific recommendations are imbued with political implications for mothers, including how mothers are differently positioned with regard to their responsibilities for broader public health.

The science of more than infant feeding

In the introduction to this dissertation, I set out the argument that women are *socially responsabilized*—or encouraged to accept, through a host of cultural texts, a sense of personal responsibility for curing social ills beyond their control. I also argued that women are disproportionately inheriting the emotional burdens of neoliberal capitalism and are in turn encouraged to be flexible and resilient. This chapter has shown that scientific research on breastfeeding, as it is inferentially ableist and lacking structural considerations, is a node that implicates women’s unpaid labour in the maintenance and pursuit of broader social health. As I will show in putting this chapter in conversation with the next, even as the neoliberal state helps mothers adapt to scarce conditions through advocacy campaigns—at best, helping citizens help themselves—it does not protect them with provisions for their labour. In examining the dialectical relationship between state-sponsored advocacy campaigns and scientific and sociological evidence, this case of disciplining mothers supports the notion that citizenship has retreated from providing for and defining a common good (Dardot and Laval 2009), and there is

new pressure on mothers to address social problems and improve the general wellness of citizens.

Research on breastfeeding also contains and reproduces the uninterrupted discourse of pursuing the “life unlimited”—the extension of some life through colonial medicine at the expense of the “curtailment and destruction of other lives” (Rachel Lee 2013, n.p.). The many breastfeeding studies continuing to break ground hypothesize that breastfeeding has benefits for infant and child health. The pursuit of breastfeeding is wholly wrapped in macro, biopolitical concerns with national health, competition, and imperialism. To understand how this complicated nationalist project, mitigated and supported by neoliberal conditions and ideals, affects women’s responsibilities as citizens, here I suggest that we fold affect theorists notion of the “good life” (Ahmed 2010, Berlant 2010) into feminist science critiques of our modern pursuit of the “life unlimited” (Rachel Lee 2013). What I mean is that critical analysis of scientific findings on the benefits of infant feeding reveal a cruelly optimistic relationship between women’s individual labour behaviours to promises of their children’s future wellbeing. Just as Sheryl Sandberg promises that if women change their individual behaviours and lean in to the workplace, they will be rewarded with a seat at the boardroom table, breastfeeding research that presumes women’s physical and financial ability to breastfeed suggests that if women undertake this unpaid labour, they will be rewarded with a healthy family.

The affect of motherhood, characterized by the promise of the “good life,” is tethered to the state’s pursuit of the life unlimited. They are both orientations to a future utopian body and state of being which converge around scientific research on women’s embodied labour. Making these

parallel tracks slightly nebulous is the fact that in biomedical research on breastfeeding benefits, it is the infant's life unlimited (and the healthy future society) which ascertains the good life for the mother. This is a special collision of discourses that helps us understand how women are responsabilized through scientific research to cure social ills outside of their own making or control. Not only that, we can see how pursuit of the life unlimited through technological advancements like new reproductive technologies, or legal and political progress on kinship structures that effectively "make" parents, are remarkably gendered and sexed. We can also imagine how these contribute to an affect of contemporary motherhood. The story of breastfeeding's scientifically supported potential benefits for infants (and for mothers in terms of weight loss goals or perhaps the sentient effects of bodywork), no matter how overstated, teaches mothers to breastfeed to pursue the life unlimited for broader society *in order to secure the good life for themselves*. In other words, this story tells mothers that breastfeeding promises good status and good feelings. It is through this story, which is dramatized in promotional campaigns as I will show, that the woman who fails to breastfeed for any reason is a befuddled subject. She refuses to pursue the good life and in so doing she harms her infant, herself, and society at large. This demonstrates the third component of my three-pronged thesis: that women's particular affective responsibilities to the nation as caring, maternal bodies—what I call *mothers' affective citizenship*—needs to be recognized as labour in order to strategize de-gendering, redistributing, or providing security for care work.

In May 2012, *Time* magazine ignited public competition between women (known as the "mommy wars") with its provocative cover of a white woman breastfeeding her nearly four-year-old child under the heading "Are You Mom Enough?" The cover mom, who appeared like

the popular juggling mom figures we saw in Chapter 2—a thin, blonde Angeleno wearing skinny jeans, ballet flats, and a tank top—became a controversial celebrity mother overnight. Within days of its publication, widespread debate over the merits of attachment parenting or attachment mothering,⁸⁴ how long is too long to breastfeed (Cannon 2012), the value of the shocking cover image,⁸⁵ the rhetoric of choice and breastfeeding (Watson 2012), and whether or not attachment parenting is feminist (Parsons 2012), swarmed parenting websites, local and international newspapers, and social media sites. Some critics took aim at the cover mom herself, mocking her wooden expression and silly posture and blaming her for exploiting her son out of her own lust for fame (Wilson 2012b). Through all of these responses, public commentary contributed to a discourse of responsible motherhood. The most irreverent commentary likened the cover mom to a “child molester” (Pickert 2012), while those exalting her “choices” called her brave (Bradley-Colleary 2012). Cover mom Jamie Lynne Grumet, remembered for her sex appeal,⁸⁶ bizarre parenting choices, and decidedly stoic gaze, became a public persona that we consumed to negotiate the position of women and their reproductive labours. Grumet is not nearly the focus of the “Are You Mom Enough?” cover story. Her name is mentioned only once in the article (entitled “The Man Who Remade Motherhood”) late in the article, when praising Dr. Bill Sears, attachment-parenting guru, as “nonjudgmental and relevant.” Grumet’s name did not capture the headlines because she represented something bigger than her. Her image (sometimes with the breastfeeding child cropped out of it, and once with Grumet replaced by an alien [Reesman

⁸⁴ As KJ Dell’Antonia (2012b) writes, “Make no mistake, this is about mothering. With the breast so central to Time’s coverage, even the most dedicated attachment father must feel, as Nathan Thornburgh puts it in his valiant attempt to bring fatherhood into attachment perspective, “detached.”

⁸⁵ See blogger “Dadcamp” (2012) link the shock value of the cover photo to “flashy” gay pride parades that “do more harm than good,” suggesting advocates of both breastfeeding and queerness be more discreet.

⁸⁶ For lurid commentary on her appearance and sexual preferences, insinuating incest, see “Jamie Lynne Grumet, TIME’s Breastfeeding Mom,” *TMZ*, May 14, 2012, accessed April 1, 2013 at <http://www.youtube.com/watch?v=JjKFzBnd6JI>.

2012] from the *Alien* film series) became renowned as the media, motherhood bloggers, feminist activists, and scholars scrutinized “the *Time* breastfeeding cover.”⁸⁷



Figure 7: *Time*, May 2013.⁸⁸

The way the Canadian and US media iconized, degraded, and generally consumed Grumet’s body in her media moment—whether denouncing her choice to appear on the *Time* cover,⁸⁹

⁸⁷ In my anecdotal discussions with motherhood scholars, her name is unfamiliar, but her image is well known.

⁸⁸ Retrieved on May 1, 2013, from <http://www.time.com/time/covers/0,16641,20120521,00.html>.

⁸⁹ Psychiatrist Dr. Keith Ablow (2012, May 11) for *Fox News* called the image of Jamie Lynne Grumet a “grotesque form of psychological abuse,” claiming “it is not clear who is the parent in the *Time* magazine photograph. [...] Who, we can legitimately ask, is feeding whom?” Dr. Ablow also criticized the *Time* cover for “the parading into public of an intimate moment,” accusing Grumet of “staining the attachment parenting movement” with her “self-centeredness at its worst, sold as good parenting” (retrieved from <http://www.foxnews.com/opinion/2012/05/11/time-magazine-cover-forget-breast-what-about-boy/>). Patrik Jonsson (2012, May 12) of the *Christian Science Monitor* suggests that *Time*’s portrayal inappropriately sexualizes the relationship between mother and son (retrieved from

supporting her responsible labour “choice,” or admiring her MILF⁹⁰ status (Wilson 2012a)—reflects some of the complex criteria upon which maternal bodies are now disciplined, and how new models of new momism, or scientific, intensive, or total motherhood render breastfeeding a steadfast tenet of maternal responsibility. In its pursuit, women’s measureable labour burdens, not to mention their affective labour of prioritizing and juggling labours, are effectively erased. One interesting divergence in this discourse from the juggling mother or c-suite mother from Chapter 2 is how, when it comes to evidence-based best practices, women’s multiple labour burdens are not part of the discussion. Women are represented as peripheral objects of study (in studies of their own bodies and bodily fluid) rather than the managerial subjects of busy lives, mixed feelings, or intense labour choices. Here we can see that the mother’s responsibility to infant feeding, and to breastfeeding so long as she is physically able, trumps her competing labour burdens, at least implicitly. Or to read it another way, individual mothers are responsible to optimize infant health, and their financial security is a different conversation. This is not to say that biomedical researchers on infant feeding are unaware of social context, but that their research is deemed somehow unrelated to women’s labour in the name of infant health, continuing the legacy of pediatrics to destabilize the autonomy of mothers. The *Time* cover, especially its moral question (Belkin 2012, Granju 2012), is just one inflammatory story. But inflame it did, possibly because it so brazenly plays on women’s responsabilization toward a highly specific form of care work—one that is often at the crux of discussion about the hierarchy of mothers’ responsibilities, and one that secures breastfeeding as responsible mothering, key to responsible motherhood—an individualizing process with we are by now familiar. While the story of Jamie Lynn Grumet and attachment parenting did not fall on a complacent audience—in

<http://www.csmonitor.com/USA/Society/2012/0512/Did-Time-sexualize-breastfeeding-with-its-Are-you-mom-enough-cover>).

⁹⁰ Slang for “Mom I’d Like to Fuck,” implying the general de-sexualization of mothers and older women.

fact many media outlets mocked its merciless clickbait⁹¹—the publication and its corresponding mainstream discussion nonetheless signaled that women consume and navigate their labour burdens among representations as moralizing as these.

We see examples of the conflation of moral and scientific assumptions around breastfeeding in real-life labour disputes. In July 2012, US resident Angela Ames filed suit against her employer, Nationwide Mutual Insurance, alleging discrimination on the basis of sex, pregnancy, and nursing.⁹² Her claim listed a series of prejudicial behaviours by her supervisor and director. On the first day that Ames returned to work after an eight-week maternity leave, she needed to pump breast milk, but was prohibited from accessing the company’s lactation room due to a three-day waiting period to process her paperwork. Ames alleged that her Associate Vice President told her, “Maybe you should just stay home with your babies,” upon handing Ames a pen and paper and dictating her letter of resignation. Despite this and other comments, the court found no evidence of gender discrimination against Ames, concluding that her treatment was based on her status as a gender-neutral parent. In a bizarre interpretation of Title VII, protection against discrimination based on pregnancy, Ames was denied discrimination based on sex or gender because she could not prove that lactation was a medical condition related to pregnancy, and she could not prove that only females breastfeed. It was ruled that Ames’ *desire* to breastfeed, not a condition of her gender, provoked the discriminatory action she suffered.

This decision, though certainly bizarre, indicative of deep-seated misogyny, and specific to a particularly conservative region in the mid-western United States, reveals the complicated

⁹¹ Pejorative term to describe internet content whose main purpose is to attract attention or “clicks” to direct traffic to a particular webpage.

⁹² Court decision retrievable from https://www.aclu.org/sites/default/files/assets/ames_trial_ct_op.pdf

intersection of body politics and women's multiple labours that coalesce around the single issue of breastfeeding. Even in other contexts, like the case of Canadian Member of Parliament Sana Hassainia from Chapter 2, we can see how the uniquely medicalized, sexed, embodied, and sentient care act of breastfeeding, one that often emerges at the crux of mainstream discussion of motherhood and responsibility, raises specific demands for the question of women's care work and paid labour. This single issue, especially its medicalization, disturbs the foundation of the Wollstonecraft dilemma—whether to advocate women's equality through “gender neutral” prescriptions of citizenship or gender-differentiated responsibilities and rights of citizenship—requiring feminist care perspectives to take the path in between. Intersectional feminist consideration of the misogynist, ableist, and racist currents of neoliberal health regimes that download responsibility for social health to individual women show that this is a false dilemma to begin with—one that dissolves into essentialist views of women's and workers bodies. Considering the elements of both approaches to advocating citizenship rights—what both Ruth Lister (2003) and Fiona Robinson (2013) argue is necessary for feminist political theory—allows us to see how political systems neglect the provisions required by uniquely maternal bodies to live sustainably. As I noted earlier, in Canada, under the current framework where maternity leave is restricted to full-time workers and is included under employment insurance for disability, women workers who leave paid employment for infant feeding are viewed as temporarily acquiring a legitimate disability that prohibits them from working. To overcome the stigma of hindering workplace productivity, they are framed as requiring and deserving “accommodation,” which, from a critical disability perspective, puts women's maternal bodies as irreconcilable with productivity and the “normal” capitalist worker in ways that relegate differently abled bodies to the margins of society. Their bodies become a hindrance to the natural

operation of workplaces rather than an integral part, even though gender-neutral discourses of the “adult worker” fail to account for women’s bodies in this way. Thinking back to the neoliberal ideal of flexibility from Chapter 2, breastfeeding women are at once exalted for their contributions to health citizenship, and an inflexible impediment to efficient paid work. Breastfeeding is a problem for capitalist productivity, and is thus an unpaid labour downloaded to individual women.

In examining the correlative evidence of breastfeeding research that is made to suggest a causal relationship between breastfeeding and infant wellbeing, we can truly see the myth of the adult worker. As social theorist Mary Daly (2011, 19) argues, even as the most socially progressive European welfare states depict “a movement away from both breadwinning and housewifery,” and shift some care work (namely child care) from families under the auspices of supporting individual “adult workers,” new family policies show no commitment to distributing remaining (unpaid) care work equally between men and women. In the context of Canadian and US public policy, where only the Canadian province of Quebec shows a commitment to unencumber the “adult worker” (though not without valorizing familial ties), the neoliberal “agentic” self is indubitably a myth, and one that burdens underprivileged women the most. If one were to flip the status of women’s position with regard to their gender and responsibilities, where gender would be viewed as constructed and in series and women’s bodies and labours would be viewed as equal in status to men’s bodies *and* potentially requiring disparate provisions, how might mothers be positioned differently in relation to scientific research on breastfeeding? The scientist’s “hope” that there is something inherent to maternal-infant contact over breast milk to which infant bodies are responding is a deeply political sentiment—one which has implications

for the status of mothers culturally and indicates the high status of both breastfeeding and maternal-infant contact in the hierarchy of cis-women's (mostly unpaid) labour responsibilities.

What we see in putting the Ames and Jamie Lynn Grumet examples against the way the scientific community expounds the benefits of breastfeeding is how women's responsabilization lies in a tricky and seemingly unwinnable circuit of prioritizing their family's wellbeing among incompatible choices and labours. In decontextualized and depoliticized biomedical research, women are responsabilized to breastfeed *at all costs*, which is different from the discourse of c-suite motherhood where women are framed as resisting components of their embodied femininity—though not without being sexualized—for corporate gain. Putting Chapters 2 and 3 together, we see that the story of the c-suite mother (who did not take maternity leave) as well as the rise of executive feminism is incompatible with the story of scientifically proven breastfeeding benefits. A new story might emerge: extremely successful corporate women's bodies, as they masculinize their behaviours to succeed within male-centric public environments, might get a pass from prioritizing breastfeeding as they pursue corporate success at the top tiers. However, we could tell another story: that c-suite women who lean in will be continually scrutinized and under constant surveillance for attempting to shed what the scientific community assumes are the trappings of their innate, biological responsibilities to public health. If for “most women” breastfeeding is the ultimate goal, women who do not breastfeed will be interrogated. What I am showing here is how the affective burden required of women to sort through these messages and chart their course of care work behaviours is itself a responsabilizing force. In terms of gendered citizenship, I wish to consider this sorting, emotional, managerial work pertaining to infant feeding *as labour* when it comes to assessing women's labour burdens

(see Hochschild [1983, 2013] on managerial work; Wharton [2009] on emotional labour). The confluence of messages from biomedical recommendations and representations of juggling motherhood show how even the most privileged mothers, positioned as individuals with choices to make, are under intense scrutiny. The affect of this scrutiny and its implications for the belongingness of women with less power comes into focus in Chapter 5.

Conclusion:

In this chapter we have seen that breastfeeding science—as it is inconclusive on the effects of maternal-infant contact versus breast *milk* on babies, and the potential benefits for most infants in industrialized countries appear to be minimal—does not comply with the “labour of love” or “food is love” ethics of citizenship. But neither does scientific literature on breastfeeding distinguish breastfeeding as a care labour *done by women* that is worthy of compensation or provision because the research is designed to assess *infant* potential. The aims of the research are carefully designed to remain outside of discussions of women’s bodily autonomy. The focus of breastfeeding research on best practices for the infant and the aim to remain outside of politics only obscures how the literature positions women and their responsibilities. As we see in the next chapter, health promotion campaigns are enacted accordingly; when popular outlets invoke breastfeeding science, they frequently focus on the wellbeing of babies over the rights of women. For example, Dr. Sears’ enormously popular website on attachment parenting hosts plenty of material under the heading “why breast is best,”⁹³ including a list of its benefits for babies, “nutrient by nutrient.” His articles discuss infant health benefits from “brighter brain” development to their future adult immunity and health. Sears’ attachment parenting site commits what Donna Haraway (1989) calls the language of science, which is rhetoric steeped in

⁹³ See <http://www.askdrsears.com/>.

racialized, religious, and classed ideological systems that is turned into the “hardware” of social values. Harding (2011) has also cautioned that this marginalization of women in science results in furthering women’s marginalization, and we can see that in breastfeeding research, women are simply responsabilized to do something that requires them to sacrifice, in this context, financial independence at the very least. While US and Canadian governments outline breastfeeding benefits and campaign for mothers to choose breastfeeding, biomedical research is not only removed from its methodological limitations and presented as irrefutable causal evidence and therefore moral and true, it is also imagined to operate neutrally in the name of science, torn from the subjective realities of its target audience.

Chapter 4. Responsible Reproduction: What State-sponsored Breastfeeding Promotion Teaches about Citizenship

Promotion should be proactive and not wait for women's questions, because she may not very well ask.

—Deena Zimmerman and Nurit Guttman (2001, 18).

In a study of the breastfeeding beliefs of low-income mothers in the United States, Zimmerman and Guttman (2001, 14) found that both breastfeeding and formula-feeding mothers rated formula feeding as “more likely to enable others to help in infant care, easier in terms of the mother’s time control, and less likely to tie the mother down than breastfeeding.”⁹⁴ And though the formula-feeding mothers’ largely agreed that breastfeeding provides superior nutrition for infants, Zimmerman and Guttman found that most did not “recognize” the benefits of breastfeeding for *mothers*. Zimmerman and Guttman presented this lack of appreciation for breastfeeding benefits as a problem of promotional messaging lacking in persuasion. In response to their findings, rather than addressing the structural factors that result in low-income women lacking the time to breastfeed (e.g., no guaranteed paid maternity leave, no national child care program, income insecurity, or low housing and food security), or reflecting on why the potential benefits of breastfeeding to mothers might “[matter] very little to them in their choice of feeding method,” Zimmerman and Guttman recommended that breastfeeding promotion must address

⁹⁴ The title of their report, the fourteenth most-read article every in the leading breastfeeding journal, *Journal of Human Lactation*, gives way to their assumptions about breastfeeding and the intersection of access to feeding and income level: “‘Breast is best’: Knowledge among low-income mothers is not enough.”

what they termed “lifestyle issues” (18) and must also preempt women’s unspoken concerns. Like Sheryl Sandberg’s emphasis on advocating for women by addressing their individual, self-defeating behaviours, Zimmerman and Guttman stress that women’s perceived barriers to breastfeeding can be solved by prenatal education—ultimately serving to encourage women to change their individual behaviours. Something that is certainly not considered is the fact that women might not wish to breastfeed because they do not want to give themselves over to their children. Bottle-feeding as a technology that might be used to democratize infant feeding is also absent from discussion of why women do not breastfeed.

Within this dissertation’s focus on women being responsabilized toward an accumulating care burden without becoming entitled to increased state provision, the last chapter showed how biomedical research on breastfeeding—as it is inconclusive on the direct effects of breastfeeding on mothers and infants, and it does not distinguish breastfeeding as a care labour *done by women* since infant health is the subject of inquiry—serves to responsabilize women to engage in physical, unsupported unpaid labour to be responsible carers. This chapter takes up the problem of responsabilizing women to breastfeed through state-sponsored campaigns that position infant feeding through the individualist lens of women making the right “choice” for the wellbeing of babies and families. It examines the empirical site of public health campaigning for how it intervenes in care work, and explores the underlying messages that the institution’s campaigns reveal about women’s more or less spoken responsibilities to citizenship. State-sponsored breastfeeding promotion in Canada and the United States has a history of focusing on the education of mothers. This trend affirms the century-old trope that it is the ignorance of individual mothers to blame—not, for example, poverty—for social ills like maternal and infant

mortality.⁹⁵ The tendency for breastfeeding advocacy to take the form of public education campaigning rests on a discomfiting rationale that Cynthia Comacchio (1993) criticized in her book, *Nations are Built of Babies*: that healthy babies are needed for a healthy nation, that breastfeeding is healthier than bottle feeding, that the barrier to breastfeeding is the ignorance of new mothers, and that infants need to be “saved” from their mothers by state regulation. Welfare legislation that targets infants and children and not women continues to reproduce this harmful historical legacy. For instance, historical and contemporary Canadian Children’s Aid Society mandates, giving social workers the power to remove children from homes deemed “unfit,” channels these assumptions (see Finkel 2006), having disproportionate impact on women who fall outside of the national imaginary (Thobani 2007)—for example, women living with disabilities, poor women, women who use drugs and alcohol, women being abused by men, and women with histories of trauma that shape their ability or desire to perform according to normative standards of responsible motherhood. This attitude that the state should intervene to protect children from their mothers, while ethically fraught, is still prevalent in breastfeeding literature and promotional materials. As we saw in the introductory example from Zimmerman and Guttman (2001), even among scholars who purport to be promoting women’s *access* to breastfeeding tend to position their aims within this purview. For example, Kedrowski and Lipscomb (2007, 15), in tracking breastfeeding rights in the United States, emphasize women’s ignorance and their lack of having been breastfed as major “social” barriers to breastfeeding:

For generations, new mothers depended upon the advice of mothers, aunts, older sisters, and midwives to navigate the early weeks when breastfeeding is being established. Yet, many mothers and aunts of today’s new mothers never breastfed, leaving these new mothers without an important source of support and advice.⁹⁶

⁹⁵ See Katherine Arnup’s (1994) *Education for Motherhood*.

⁹⁶ This supposed disconnect between generations of mothers is a common argument in breastfeeding advocacy, and is also supported by feminist scholars who are critical of state-sponsored promotion. For

While it may be true that new mothers have less social support and mentorship for breastfeeding than women in previous generations, and we could imagine that bolstering social support for new mothers might create a less precarious or fearful environment in which they can more peacefully navigate their labours, the authors repeat the historical tendency to cast women as recipients of advice in their argument for increased access. The authors tend not to challenge women's duty to unpaid labour and the ways that women do more paid labour than before, making it doubly hard to breastfeed. Contemporary US and Canadian strategies still focus on advocacy and educating women (see for example "Breastfeeding is a Human Right," Ontario Human Rights Commission [2000]; Latch On NYC [2012]; Ontario Ministry of Health Promotion and Sport's Child Health Program on Breastfeeding [2014]), not on examining mothers' material and social realities, which engenders the question *who* is in the position to heed this advice?⁹⁷ It also provides support for the idea that in the hierarchy of women's multiple labour expectations, breastfeeding is increasingly presented as non-negotiable—making the various components of women's reproductive labour particularly fraught for the juggling mother. As we will see in this chapter, research on why women do not breastfeed shows marked sociocultural differences in women's relationship to breastfeeding—but, like the white liberal "executive feminist" approach to advocating for women in corporate leadership—broad scale advocacy tends to address women's individual behaviours as primary barriers to their own success.

example, Cynthia Comacchio (1993), who is critical of the eugenic undertones of breastfeeding advocacy throughout Canadian history, explains this social isolation as a condition of modernity. She argues that as urbanization eroded traditional neighbourhood and kin support networks, women were encouraged to turn to professionals for parenting expertise.

⁹⁷ Most of the other barriers to breastfeeding mentioned in this introductory section by Kedrowski and Lipscomb (2008) are biological (disease transmission and pain and infection from breastfeeding), with the only other social barrier mentioned being the hostility faced by male partners (and Western culture) who discourage breastfeeding in order to maintain the breast as a sexual object.

The last chapter showed us that there is cause to problematize “success” in infant feeding in the first place. This chapter builds on the interrogation of biomedical research on breastfeeding in the previous chapter to show how state-sponsored breastfeeding promotion responsabilizes women toward a unique form of care work without concern for their multiple competing labours—labours like making lunches, going to a paying job in the public sphere, participating politically through services like jury duty, managing family schedules, taking long trips on public transit, teaching children to read, and, as I mentioned in the introduction with regard to emotional labour expected of women (Hochschild 1983, Wharton 2009), all the while doing the work of keeping emotions and stress hidden from the public sphere. This chapter shifts away from examining breastfeeding in the field of biomedicine to exploring breastfeeding campaigns under the purview of public health. While we might expect scientists to decontextualize infant feeding in their research as they attempt to isolate variables impacting infant health, and to depoliticize their results given their positivist research environments, state-sponsored breastfeeding promotion shows an explicit care paradox that I call “maternal bootstrapping”: the state’s concern for infant health and lack of provision for women, with the expectation that mothers will be not only self-sustaining, but infant-sustaining without guaranteed external support. Unlike representations of the juggling mom and c-suite mother figures of Chapter 2, public health campaigns do not represent women juggling. Instead they represent a singular form of labour—breastfeeding—as dissociated from women, often represented by a baby. So this fractured representation of infant feeding seems to transfer from biomedical research (and a pediatric focus on the effects of infant feeding) to welfare legislation and public health campaigns. The fact that mothers are largely missing from a representation of their care work directives in state-sponsored campaign strategies is telling of their subject position vis-à-vis their

reproductive labour, with huge implications for their citizenship as these directives are coming from the state. This erasure of women's care work is in fact typical of contemporary, mainstream, male-centric citizenship theory, as argued in 2013 in *Social Politics* by Roseneil, Crowhurst, Santos, and Stoilova, so making this erasure plain aligns with the feminist citizenship aim of this project. It is telling of the embedded nature of women's unpaid responsibilities to citizenship when their bodies are missing from public, state-sponsored representations of their labour. Here, I will not only show how public health campaigns around breastfeeding mobilize scientific research in ways that bind individual mothers' care responsibilities (unpaid domestic labour) to women's responsibilities to the state through responsible reproduction. I will also explore who is targeted by breastfeeding promotion, and who might be excluded from its performance and practice—extending the question of who can be responsabilized to breastfeed in the first place? And who is set up to fail? What my question reveals is how motherhood and breastfeeding have become synonymous in contemporary popular representation and in discussion of responsibility and care (including in defense of parental leave). Motherhood and breastfeeding are clearly not the same thing and their conflation, though at times strategic, discredits mothers who do not breastfeed for a number of reasons, and by extension, erases the realities of queer parenting and parenting with disability. In other words, the conflation of breastfeeding and motherhood further establishes marginalized women as underserving mothers. This conflation has implications for how feminist citizenship theorists advance a feminist, critical disability, and critical race ethic of care (see advances by Duffy 2005, Kelly 2013, Mahon and Robinson 2011, Williams 2001).

To interrogate breastfeeding promotion and its implications for women's affective burden of negotiating paid and unpaid labour in precarious circumstances, and to ask what is at stake for mothers who fail to be "persuaded" by this messaging, this chapter proceeds as follows. First, I briefly present La Leche League, one of the first and largest breastfeeding support programs in the United States and Canada that now has a presence in sixty-eight countries, in order to ground contemporary campaigns in this traditional and ongoing advocacy strategy. The mission of La Leche League is to "help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education, and to promote a better understanding of breastfeeding as an important element in the health development of the baby and the mother." I will unpack this rhetoric and consider its implications for citizenship. Next, I introduce three major state-sponsored campaigns: Latch On NYC, EatRight Ontario, and It's Only Natural. The first two were selected based on both their situation in the major urban centres of New York City and Toronto as well as their contentious response from national media (see Belluck 2012, Benzie 2013, Dell'Antonia 2012a, Rose 2012, Watson 2013b). I will present how these two campaigns implicitly target normatively white women by comparing them against the latter campaign, It's Only Natural: the only state-sponsored campaign explicitly targeting African American women. I stage a reading of these three campaigns together to give a nuanced sense of the discourse of contemporary breastfeeding promotion, responding to the guiding question of how women are responsabilized, and what this means for gendered citizenship. Finally, I situate these contemporary campaigns in recent scholarship on breastfeeding promotion to think about how women's responsibility to unpaid reproductive labour is considered (or not) by both promotional strategies and scholarly critiques.

Campaign Rhetoric: Science says, “Breast is Best”

Recall from the previous chapter that scientific research on breastfeeding is extensive and widely circulated, but current findings fail to substantiate that breast *milk* is vital for infants in Global North countries (Kramer and Kakuma 2012). While findings suggest that breastfeeding in global south countries reduces infant mortality as it prevents gastrointestinal disease caused by unsanitary conditions, breastfeeding is only significantly correlatively related to cognitive benefits (as measured by an estimated 5.9 IQ points) in industrialized areas, and in fact this benefit may be the result of increased maternal-infant contact—perhaps not the direct result of breastfeeding or breast milk (Kramer and Kakuma 2012). Nonetheless, state-sponsored campaigns cite from a wide and contested set of complicated data from breastfeeding research (Wolf 2010). Advances in breastfeeding research intersect with renewed support for “attachment parenting”—or “new momism” (Douglas and Michaels 2005), as critics describe it—and a corresponding renewed commitment to breastfeeding advocacy by the state. Key to this dissertation’s focus on women being responsabilized toward an accumulating care burden without becoming entitled to increased state provision, state promotion occurs in the context of no universal provision for this unpaid labour for women in Canada or the United States. There is no state-sponsored maternity leave in the United States, and in Canada, state-sponsored maternity leave is restricted to women who have worked fulltime hours for the past six months. There is mainstream reporting on this contradiction between the state’s emphasis on infant wellbeing and inadequate or nonexistent support for women’s competing labours. As Bonnie Rochman (2012) explains for *Time*, “It’s worth noting that breastfeeding is much more of a public-health concern in countries where there’s not easy access to clean water to mix formula. In the U.S., breastfeeding is more a question of lifestyle as opposed to life-and-death; such a law

would be a long shot here, where infant feeding is — and should remain — a personal decision. What could be helpful stateside, however, is Indonesia’s emphasis on supporting a mother who decides she wants to breastfeed.” Rochman quotes Danielle Rigg of Best for Babes who argues that, “Mandating breastfeeding in the U.S. without adequate cultural and institutional support is like pouring hot sauce on a gaping wound. Instituting a national law like Indonesia’s that would provide breastfeeding moms protection from harassment, humiliation and discrimination for nursing in public and at work, now that would be a giant step in the right direction!” Rochman’s take is more accurate than the claims of state-sponsored campaigns, but still uses the liberal language of choice when framing breastfeeding as a “lifestyle.” This contradiction provides the context for the following critique of breastfeeding promotion strategies.

*La Leche League International (“Happy Mothers, Breastfed Babies”)*⁹⁸

La Leche League prides itself on being a woman-centered breastfeeding support group and the world’s most established non-profit organization for breastfeeding advocacy. The wide-ranging content of its website shows how the League is now part of a breastfeeding industry, where breastfeeding paraphernalia is bought and sold on their promotional website.⁹⁹ La Leche League Canada, for example, has integrated itself into big-box e-commerce in a “LLLC Recommends” section of the website, which includes a link to shop online for any product at Chapters Indigo: “LLLC benefits from ALL your purchases from Chapters Indigo IF you access it via our LLLC.ca website.” La Leche League International (LLLI) provides guided discussion forums and resources for mothers in addition to hosting a “Marketplace”¹⁰⁰ of “valued advertisers” and

⁹⁸ Its mission is to “help mothers worldwide to breastfeed” and promote breastfeeding as “an important element in the health development of the baby and mother.” See <http://www.llli.org/>

⁹⁹ See Brentnal-Compton (2011).

¹⁰⁰ <http://www.llli.org/marketplace?>

an online store consisting of some thirty pages of consumer products including books, designer diaper bags, toys, and household décor.¹⁰¹ Founded in 1956 in the suburbs of Chicago by a group of seven white, married, middle-class, Catholic mothers who touted breastfeeding as “God’s plan for mothers and babies,” LLLI has now expanded its reach to sixty-eight countries.

La Leche League International is a complicated site for feminists, as it aims to fill a gap in support for women in the act of breastfeeding. But it uncritically moralizes the labour by misrepresenting scientific findings, whether intentionally or not, and tying these findings to mothers and babies’ health and happiness. Its explicit and repeated references to happiness in particular call to mind part of the affect of motherhood—the feelings circulating within and between women as a result of their multifarious labour burdens—that I have been building through the chapters so far. In this case of breastfeeding promotion, the promise of the future good life for oneself and one’s children that can be attained through the very specific “happiness object.” I will expand theoretically on this “promise of happiness” (Ahmed 2010) and what it else it might mean for an affect of motherhood, or women’s affective citizenship, in the next chapter. For now I emphasize the rhetorical link drawn by some breastfeeding advocates between breastfeeding, happiness, biomedical evidence, and national wellbeing. Note that by breastfeeding advocates, I mean those who vehemently urge breastfeeding, and usually exclusive breastfeeding. I distinguish these folks from those who advocate for increased *support* for women to breastfeed. It is the first group that tends to illustrate maternal bootstrapping—the state-sponsored tendency to pursue infant health without supporting women.

¹⁰¹ See the LLL public store: <http://store.llli.org/public>.

La Leche League is also tricky for feminists because while its education mandate reproduces the notion that women's ignorance causes poor infant health, it historically resisted the medicalization of maternity and infant feeding and sought to defend mothers' essential expertise (Blum 1993, Ward 2000). As biomedical research on maternal and infant health advanced, the League incorporated new evidence into its curriculum. It now promotes medical evidence alongside women's expertise, seeking to "encourage, promote and provide mother-to-mother breastfeeding support and educational opportunities as an important contribution to the health of children, families and society."¹⁰² La Leche League Canada (LLLC), founded in the 1960s, considers itself a "complementary adjunct to the [national] health care system" and alleges to be "connecting with every expectant mother and accessible in every community."¹⁰³ While this is likely exaggerated, the league enforces its position as a primary breastfeeding resource in Canada with the claim that it is an "integral part of Canadian families' health care," evoking a sort of patriotism with the promise of a good life for baby and mother. Further along this vein, by 1978, LLLC had its own Canadian logo: a nursing mother superimposed on a maple leaf, couching a form of women's unpaid reproductive labour in the ultimate symbol of Canadian patriotism.¹⁰⁴ This appeal to nation also rubs against the affective sense of commonality between women, as the League recreates a community of mothers around the aim of infant health that is, as Kedrowski and Lipscomb (2007) point out, an otherwise fragmented social group. Its presentation of services also evokes the value of flexibility associated with neoliberalism: "LLL is an evolving, dynamic, efficient e-enabled learning organization with a variety of innovative programs and services. It is an organization committed to continuous growth and dynamic

¹⁰² See "About LLLC," <http://www.lllc.ca/about-lllc>.

¹⁰³ See "About LLLC," <http://www.lllc.ca/about-lllc>

¹⁰⁴ See Canadian Heritage: The Maple Leaf, retrieved June 13, 2014, <http://www.pch.gc.ca/eng/1363626184104/1363626227047>

change to meet the needs of all constituents.” This description has absolutely no meaning, except to reveal the likely strategic rhetoric of an organization that needs to attract donors to stay in business. For this reason, it is additionally complex, as LLL is a bough of a philanthropic model that fills a gap that might otherwise be filled by improved welfare provisions.

The League brings this traditional circle of moms into the future with new medical findings, and it makes sense that this forum of support would appeal to women as an attractive alternative to making another doctor’s appointment. The LLLC website holds on to its roots, though, as signified by their statement that while meetings may no longer include lace tablecloths and china teacups, mothers receive the same advice and leadership as they did when the organization started. Remaining critical of its proud affluent, white, heteronormative, Judeo-Christian roots, feminist critique must also consider that for the women it reaches, LLL fills an important role of creating community, opening possibilities for communicating and sharing knowledge that might not otherwise exist.

Without dismissing the value of the major organization, La Leche League provides an example of how modern breastfeeding promotion imbricates the correlative findings of medical research, a sense of moral and national duty, and woman-centred rhetoric. In doing so, the League makes a number of troubling assumptions that are difficult to prove or disprove, insisting that “mothering through breastfeeding is the most natural and effective way,” that “mother and baby need to be together early and often to establish a satisfying relationship and an adequate milk supply,” that “the baby has an intense need to be with his [sic] mother which is as basic as his need for food,” that “breast milk is the superior infant food,” and that “breastfeeding is enhanced and the nursing

couple sustained by the loving support, help, and companionship of the baby’s father.” For LLL, the mother-infant bond, breast milk, and a supportive *father* are central to infant feeding. Its core tenets are not only blatantly heterosexist given the presumption of a nuclear two-parent heterosexual family, they make the ableist and gender-essentialist assumption that women can breastfeed, and the classist assumption that the breastfeeding person can afford the time and money to provide this form of reproductive care. They also purport to be rooted in biomedical evidence when they in fact misrepresent breast *milk* as the elixir of infant health—a problem that creates fear-mongering around what women should do for the health of their babies and children. The fact of the matter remains that even if biomedical research could find support for the message that breast *milk* is vital for infants, the ways in which LLL’s breastfeeding support relies on a gendered moral imperative serves to categorize women as deserving and undeserving mothers based on their infant feeding practices. It also serves to exclude trans men and women from this “most natural and effective way,” as well as those parents who struggle to breastfeed for reasons of living with disabilities, or reacting to the abilities of their babies. In this regard, LLL is particularly stuck to their breastfeeding cause:

Babies born with Down syndrome, cleft lip or palate, cardiac problems, cystic fibrosis, or a neurological impairment need the benefits of human milk even more than other babies. The perfect nutrition and immunological benefits of human milk will keep your baby as healthy as possible, so they are better able to gain weight, and be strong for any surgeries or treatment they may need. Also, the special bond and breastfeeding hormones of the breastfeeding mother will help to keep you calmer and more in touch with your baby as a person first, a challenged baby second.

Often a challenged baby is reluctant to take the breast...In some cases, the challenged baby may never become an avid breastfeeder. Rest assured that any amount of your milk, received at your breast, pumped and given by bottle, or provided by some other method (SNS, syringe, spoon, naso-gastric tube, Habermann Feeder) will greatly benefit your baby's health and development. It's something you alone can provide, which is good for your morale!

Setting aside the above discourses of “challenged babies” and women’s “morale” for a moment, even if we could discover that breastfeeding has enormous health benefits for women and children, La Leche League’s promotion of breastfeeding to women with infants with disabilities obviously creates enormous pressure to do the right thing by breastfeeding at all costs. For LLL, the maternal-infant relationship is imperative (though they do not give context for this claim), which shows either an unwillingness to reflect on the fact that most women have multiple labours, or an unwillingness to politicize the barriers to breastfeeding that many women face. Even though breastfeeding benefits in industrialized areas are likely relatively minor, and may be influenced by numerous factors outside of the act of breastfeeding itself, breastfeeding promotion focuses on the superiority of breastfeeding at the expense of considering the structural factors that shape infant feeding and the wellbeing of families (Wolf 2010). Breastfeeding promotion, as we will continue to see, tends to operate through short catch phrases, which necessarily skirt structural issues, framing breastfeeding as something that women might become compelled to choose as an option. Depicting what is “natural” and woman-focused as apolitical—which feminist scientists have long problematized (see Haraway 1991; Haraway and Goodeve 1999; Keller and Longino 1996; Nicholson 2013) and queer theorists continue to reject (Butler 2011, Grosz 1995, Halberstam 2005)—LLL affirms support for a gendered division of labour, heterosexism, and ableism, excluding women who are single or in queer relationships, who are unable to breastfeed for physical and psychological reasons, and who are most precariously tied to the labour force, who, in the United States and Canada, are most likely to be racialized and poor women (ESDC 2013). This incitement to breastfeed, which is more generally an incitement to undertake specific unpaid reproductive care labours, is a node in the affect of motherhood. It contributes to women’s not-so-subtle responsibility to do an invisible kind of

labour: to navigate what seems to be best and what seems to be possible to pursue wellness for themselves and their offspring. Its disciplinary effects are clear. This affective burden, which tracks through multiple forms of labour, culminates around the site of breastfeeding promotion. It is a multi-faceted burden that includes the expectation for women to be rational, responsible actors who negotiate high-stakes decisions: decisions about organizing and prioritizing their labours around the work of infant feeding. So breastfeeding promotion, as it excuses the question of women's multiple labours, reveals a technique of women's responsabilization; through this affective burden of "choosing" something so "natural," "intense," and laced with "love"—an historical framework for designating unpaid labour to women, as we saw in Chapter 1—women are asked to keep themselves from coming undone without reasonable provisions to sustain them.

In "The case against breastfeeding," Rosin (2009, n.p.) provides a contemporary popular critique of LLL's major publication, *The Womanly Art of Breastfeeding*, which scholars have variously problematized and supported over the decades of its circulation (see Blum 2000, Hausman 2013, Hays 1996, Kukla 2005, Wolf 2010). In Rosin's editorial, she deploys a critique of its misrepresentation of biomedical findings as she underscores how the manual relies on the "expert testimony" of medical professionals to establish breast milk as the "arsenal against illness." She declares that whereas the first edition, published in 1958, may have read like "a bossy but charming neighbour, who had some motherly advice to share," the latest edition "is like being trapped in the office of a doctor who's haranguing you about the choices you make" (Rosin 2009, n.p.). Rosin echoes many scholars who challenge the ideologies underlying LLL advice, and its foundational implication that infant feeding is mothers' private work (Robyn Lee

2013). But Rosin's critique does not escape choice rhetoric, and LLL uses choice rhetoric strategically.

La Leche League's strategy to infuse women-centred rhetoric with the language of "best practices" reflects a familiar slippage of women-centred advocacy and medical literature in feminist organizations that endeavor to resist medicalization and subsequent depoliticization while supporting women's health (see Haraway and Goodeve 1999). To give example outside of the context of infant feeding and health, British Columbia's Rape Relief Shelter outlines this ongoing problem in a report by Willats, Bonisteel, and McLean (n.d.),¹⁰⁵ specifying that due to medicalization and the necessity for women seeking services to present identifying information like health cards or proof of citizenship, using community-based services results in institutionalized surveillance under which women "weigh their need for support against their fear of surveillance" (4). In the context of funding cuts for grassroots organizations, organizations that seek to provide support for women in the most precarious circumstances must strategically adopt the language of "best practices" in order to survive. As it strives to be woman-centred and rooted in promoting women's expert knowledge over the medical model,¹⁰⁶ LLL has been a

¹⁰⁵ See "The struggle to maintain grassroots feminist responses to male violence," retrieved June 13, 2014,

http://www.rapereliefshelter.bc.ca/sites/default/files/imce/Struggle%20to%20Maintain%20Grassroots%20Feminist%20Responses_A%20Willats,%20M%20Bonisteel%20%26%20M%20McLean.pdf

¹⁰⁶ Anecdotally, two of my colleagues who struggled with breastfeeding found contradictory advice from LLL meetings after a number of unhelpful doctors visits. In the case of one of these women, her newborn was rapidly losing weight and a LLL advocate noticed that he had a cleft tongue and would not be able to latch without emergency surgery. No doctor had examined the baby's mouth, simply telling the mother to keep trying, and to "maybe try a quiet room." The second mother found that her newborn was unable to latch and was also losing weight, and a LLL advocate warned her not to supplement with formula or the latch might never form. After weeks of struggle, her doctor recommended she switch to formula immediately as her baby's weight had dropped dangerously low. I mention these here to elucidate the complicated and inconsistent relationship of LLL and health professionals for mothers struggling with feeding.

tough nut for feminists who seek to support women breastfeeding while critiquing LLL's moral imperative.

Like how Sandberg's *Lean In* strategy neglects to radically alter existing power structures in corporate leadership, La Leche League refrains from calling for social change or justice initiatives, instead locating women's breastfeeding in scientific research and their individual behaviours. Given what we know about the unsettled claims to breastfeeding's superiority within biomedical research from Chapter 3, the League's claims are particularly far removed from the initial message in the game of Telephone. For instance, in *The Womanly Art*, authors claim that, "breastfed babies have a decreased likelihood for allergies and dental caries. They also benefit from appropriate jaw, teeth and speech development as well as overall facial development. This means that people who were artificially fed may experience more trips to doctors and dentists." This kind of claim reflects the intensity of women's affective citizenship—women's particular affective conditions and responsibilities to the nation as caring, maternal bodies—which I explore in the next chapter. Since the idea that children will develop inappropriate jaws and may need medical intervention down the line, all resulting from their mother's decision not to breastfeed, these statements generate fear and provocation, however strange they are. The rhetoric gets even more intense: because "there is almost nothing you can do for your child in his [sic] whole life that will affect him both emotionally and physically as profoundly as breastfeeding" (5). Despite Kramer's (2013) reminder that breast *milk* may not be the source of improved infant health outcomes in industrialized countries, the authors assert that, "there's no formula that comes even close to the milk your body creates" (6). It is true that human milk is different from formula, but it is not necessarily true that human milk is causing enormous

benefits in breastfed children, so the fact that it is promoted so unreservedly while meagre welfare provisions remain unchallenged is curious. This information is presented so persuasively that it is no stretch to imagine this literature's disciplinary effects on women's infant feeding. La Leche League firmly establishes breastfeeding as the right thing to do under the banner of supporting women. Simply, to the question of which women is the League serving, the answer is women who are the least encumbered by paid labour. This example alongside the previous chapter show that when it comes to literature advocating the sentient and unique care work of breastfeeding, the juggling woman's hierarchy of labours is not a factor. In the next section, as I transition to examining state-sponsored public health campaigns that promote breastfeeding over formula feeding, we see the same logics—including misrepresentation of scientific findings from Chapter 3, explicit neoliberal individualization of health and social issues, the "right" of women to breastfeed without stigma, and the moralization of pursuing optimal health of infants based on scientific knowledge—making this a tricky resistance project for theories of feminist citizenship. If, for example, a feminist citizenship project induces men to provide more unpaid care labour (see Kershaw 2005), or positions care at the centre of theories of democracy (see Tronto 2013), the moral imperative to breastfeed is an expressly gendered responsibility with gendered consequences. The imperative is not only ableist and presumptive of a two-parent nuclear family situation, it assumes class and time privilege and geographical proximity, and in the context of both Canada and the United States, is a uniquely gendered incitement to provide unpaid labour.

Latch On NYC

In the summer of 2012, New York City Mayor Michael Bloomberg came under media criticism for advancing a "nanny state" with his initiative to encourage breastfeeding by preventing

hospitals from displaying and promoting breast milk substitutes (see Stone 2012b). Typical of breastfeeding advocacy, the campaign, Latch On NYC, cites the significant medical reasons why breastfeeding is most beneficial for babies. An MTA subway advertisement prominently displays the campaign's simplified mantra, "Breast *milk* is best for your baby" (emphasis added), despite the scientific findings discussed in Chapter 3 that suggest that breast milk may not be the cause of observed correlative benefits of breastfeeding, but correlative benefits in developing countries may be the result of parent-infant bonding and cognitive stimulation (see Kramer 2013, Wolf 2010). In doing so, Mayor Bloomberg's campaign serves as another case study for the collision of moral, scientific and neoliberal values: the moral imperative to do what is "best for your baby," determined, putatively, by scientific findings, all undergirded by the neoliberal ethic of individual responsibility for health. In these ways, Latch On NYC parallels the LLL strategy in its focus on infant health alongside claims to being woman-centered. The question becomes if this promotion is not coinciding with support for breastfeeding, what are the implications of this promotion for gendered expectations of citizenship?

Latch On NYC requires hospital staff to explain the benefits of breastfeeding over formula feeding to new mothers. In addition to hiding infant formula from patient view, the hospital only offers a "goody bag" of formula if women ask for it (how would they know to ask for it?), and only if medically indicated and documented on the infant's medical chart that it is required. This approach to enforcing breastfeeding—eliminating women's sense of option by hiding formula feed from view, quitting formula distribution, and keeping formula under lock and key—is normal in public health, which I will problematize below (Apple 2006, Blum 2000). It also reflects the ongoing and insidious link between health and morality: Latch On NYC insists there

is one good, scientifically-supported way, and that we should therefore eliminate the wrong choice so that presumably ignorant women cannot falter. The logic continues that if we train women according to this evidence, all they will know to do is the responsible thing. In the New York case, a municipal mayor is the new Dr. Spock,¹⁰⁷ instructing hospital staff to become the directors of early motherhood, with new mothers framed as the receiver of the mayor's and health professionals' expert knowledge. While it is certainly important to criticize the manipulative practices by formula manufacturers that promote their products by sending brand representatives into delivery wards,¹⁰⁸ Mayor Bloomberg's campaign goes further to obstruct women's sense of possibility when it comes to infant feeding, denying their multiple labours (recall from Chapter 3: the most-cited reason for not breastfeeding by women in the United States is working for pay and not having paid leave) and fixing infant feeding decisions in the affect of motherhood. Here is an example of the second part of the two-pronged affect of motherhood: new mothers are encouraged to sort out their feelings about and manage any structural barriers regarding infant feeding and simply receive and perform according to expert advice.

The New York City campaign and its critical reception, alongside other campaigns that mobilize similar "best for baby" sentiments, use the discourses of risk that adhere to the neoliberal sense of individual responsibility for health and wellbeing—a discourse that Joan Wolf (2010)

¹⁰⁷ Dr. Spock was an influential US pediatrician in the 1940s who became known as a parenting expert. However, contrary to contemporary strategies, he told women "you know more than you think"—falling in line with a maternalist view of mothering based on innate expertise. Still, he was the "expert" to assure them of this. See <http://www.drspock.com/>.

¹⁰⁸ This longstanding practice is still a pressing issue: see Carey Biron, "Infant formula manufacturers urged to stay out of delivery wards," 31 May 2014, retrieved June 13, 2014, <http://www.mintpressnews.com/infant-formula-manufacturers-urged-to-stay-out-of-delivery-wards/191705/>

challenged in her academic book *Is Breast Best?* and Parker (2014) used to frame his theory of maternal responsabilization. However, most popular criticism of Latch On NYC focuses on the way the campaign moralized one feeding “choice” over another and took the power away from women to make their own “choices,” a critique that holds weight, but once again fails to challenge the paradigm of individual choice. This critique still puts the onus on individuals to make responsible decisions to maximize their health outcomes and minimize their reliance on the state. It also resounds the neoliberal, and thus liberal feminist, discourse “giving women the power to make their own decisions” at the expense of understanding what influences infant feeding. Journalist Laura Stone (2012b) for the *Toronto Star* sees this line of thinking embodied in Bloomberg. Stone links his “crackdown” on formula feeding to curb the risk of ignorant mothers with his crackdown on supersized sodas to curb obesity, calling Latch On a “different but equally corporeal cause.” Ignoring the links between fatness, class, race, and ablebodiedness, Bloomberg connects “obesity” to soft drinks and the faceless individuals who buy soft drinks, who cannot be trusted to make the right choice when it comes to their health. Encouraging breastfeeding and combating obesity can be seen as parallel anti-risk strategies, in which Bloomberg affirms the neoliberal tendency to combat social ills by reforming individuals based on medical evidence. As Ana Villalobos writes in her 2014 academic book *Motherload*, in these times of extreme insecurity, women are encouraged to maintain a laser-focus on their children’s health—undertaking what Villalobos calls “security strategies”—as a way of protecting infants from pending risk, even if these external risks have little or nothing to do with individual women’s provision of care. With regard to security, Villalobos argues that the cultural expectation that the mother-child relationship can produce security—an expectation she calls the “motherload”—has intensified as women are expected to invest in their relationship with their

child to secure protection from perceived external threats, from environmental risk to employment insecurity, in a general climate of anxiety. Villalobos' work dovetails nicely with Wolf's (2010) argument that the intensification of breastfeeding as a "false elixir" is symptomatic of a society that is anxious about the future. Employing Ulrich Beck's thinking on risk society, Wolf (2010) contends that the intensification of breastfeeding promotion reflects increased cultural moralism around individuals making the best choices to avoid potentially negative future events.

Aligning with LLL's strategy mentioned above, the New York City Department of Health and Mental Hygiene issued a press release in May 2012 calling the Latch On NYC campaign launch an "initiative to support breastfeeding mothers." A week later, the Health Department began its subway and hospital poster campaign with the subheading, "It's your right to feed your baby only breast milk and get the support you need." Already this campaign is not about material support. And with breastfeeding increasingly framed as a reproductive *right*,¹⁰⁹ as in something that women have the right to do (in public, in the workplace, et cetera) and something that infants have the right to receive, the implication that women have the autonomy to choose how to feed their infant needs to be complicated in the same way that the framework of autonomy and reproductive justice complicates the pro-choice movement (Smith 2005). I mean that when breastfeeding is framed as a right, it is implicitly categorized as a duty—one that women are obliged to fulfill in order to grant rights to infants or themselves. Feminists could refer to reproductive justice movements for examples of how to pursue bodily autonomy and accessibility for individuals, including reproductive autonomy and access to reproductive health services, without couching the efforts in neoliberal ideals of choice and freedom.

¹⁰⁹ See Kedrowski and Lipscomb (2008).



Figure 8: Latch On NYC campaign¹¹⁰

Noting the distinction between having the choice to breastfeed or formula feed and the way this “choice” is manifest in the everyday lives of women shows how the state fastens women’s responsibility to unpaid labour and implicitly stigmatizes mothers who do not breastfeed. We can see similarities in public health discourse around other “risks,” as in the obesity rhetoric from above, but also the obesity rhetoric that links the fatness of parents to the fatness of children, blaming parents, specifically mothers, for their children’s threat to themselves and broader public safety.¹¹¹ “Individual-blaming” is unremarkable in mainstream media coverage of scientific reports on health (Saguy and Almeling 2008), so I raise it here to first draw the connection between breastfeeding promotion and women’s responsibility to citizenship, but further to

¹¹⁰ See “Press Release,” <http://www.nyc.gov/html/hhc/html/news/press-release-20120509-breastfeeding.shtml>

¹¹¹ E.g., Christopher Hope, “Fat parents to blame for childhood obesity epidemic by over-feeding under-fives,” *Telegraph*, 31 Jan 2010 retrieved June 13, 2014, <http://www.telegraph.co.uk/news/uknews/7103587/Fat-parents-to-blame-for-childhood-obesity-epidemic-by-over-feeding-under-fives-study-finds.html>

initiate the question of inclusion and exclusion—which women are targeted by these campaigns. In the introduction to this dissertation, I suggested that even the most privileged women are experiencing the affect of “coming undone”—struggling with feelings of anxiety and sadness in the face of multiple labours—in pursuit of the good life where they successfully juggle or “balance” their competing labours. What Chapter 3 and 4 together are showing is how part of the affect of motherhood is *aspirational* and even threatens the good feelings of “c-suite” mothers—recall from Chapter 2 the cis-women of “executive feminism” who climb the corporate ladder while having children—who pursue what they have been told guarantees the good life. The incoherence between social ills or threats and individual mothers’ labours goes largely unchallenged in breastfeeding promotion, requiring individual women to take responsibility, even as it means they come undone with feelings of stress, anxiety, and depression in the face of multiple burdens (like paid labour obligations or inability to breastfeed) and unmet promises of balance in the mean time.

Mayor Bloomberg’s approach to breastfeeding advocacy is not unique,¹¹² and is part of a US national aim to get hospitals promoting breastfeeding. The US National Initiative for Children’s Healthcare Quality’s (NICHQ) “Best Fed Beginnings”¹¹³ campaign—reflecting no need to retain

¹¹² See the *Washington Post*, “‘Latch On NYC’ breastfeeding campaign draws attention, but is hardly unique” (retrieved on March 27, 2013 from http://www.washingtonpost.com/blogs/the-checkup/post/latch-on-nyc-breastfeeding-campaign-draws-attention-but-is-hardly-unique/2012/08/13/57700cf4-e591-11e1-9739-eef99c5fb285_blog.html).

¹¹³ Best Fed Beginnings is a “first-of-its-kind, nationwide quality improvement initiative to help hospitals improve maternity care and increase the number of ‘Baby-Friendly’-designated hospitals in the United States.” To become designated, hospitals must implement the American Academy of Pediatrics-endorsed Ten Steps to Successful Breastfeeding, as established in the WHO/UNICEF Baby-Friendly Hospital Initiative and complies with the International Code of Marketing for Breast-Milk Substitutes. The Best Fed Beginnings report states that “one of the most highly effective preventative measures a mother can take to protect the health of her infant and herself is to breastfeed,” and “the more Baby-Friendly designated hospitals there are, the greater the likelihood of improving the success rate for mothers who want to breastfeed.” Within 15 months of the initiative, reviewers found the percent of

the word “breast” when it is clearly the “best” way—promotes breastfeeding by designating hospitals “Baby-Friendly” when their maternities are externally reviewed as successfully promoting breastfeeding according to the Global Criteria. The NICHQ’s campaign to promote breastfeeding has the potential to assist women in their desire to breastfeed by helping mothers to initiate and maintain lactation, and connecting them to breastfeeding support groups in their communities. The problem for theorists of feminist citizenship is the campaign’s depoliticizing of infant health issues and maternal labour, which results in uneven support for women. Mainstream critique of these promotional campaigns uses the neoliberal, individualist rhetoric of choice: they are “sucking the choice out of parenting” (Skenazy 2012). For example, linking Bloomberg’s hospital policy to his earlier pro-choice statements, journalist Katherine Stone (2012a) argues that Bloomberg is “nowhere near as pro-choice as he’d have us believe.” Stone’s is a valid assessment, but I am more concerned with the way that campaigns promoting breastfeeding are part of an elaborate public discourse on what motherhood now entails: unpaid care work that requires many women to sacrifice financial security, even as they are simultaneously responsabilized toward paid work. Since roughly 70 percent of mothers with children under the age of 18 work in paid labour in both Canada and the United States (57 percent of mothers with infants in the United States¹¹⁴ compared to 64 percent in Canada¹¹⁵), breastfeeding requires most women to rely on a partner or relative for income support (either entirely, or by supplementing EI payments that women working fulltime receive in the Canadian context). There is obvious overlap between working mothers and breastfeeding, as 79 percent of

infants exclusively breastfed from birth through the hospital stay had increased in all three regions of the study. The initiative is partnered with the Center for Disease Control (CDC) and Baby-Friendly USA. See <http://breastfeeding.nichq.org/Projects/Best%20Fed%20Beginnings/Overview.aspx>

¹¹⁴ “Latest Annual Data: Women of Working Age,” *United States Department of Labor*, retrieved from <http://www.dol.gov/wb/stats/recentfacts.htm>

¹¹⁵ “Women in Canada: Paid work,” *Statistics Canada Catalogue*, retrieved from <http://www.statcan.gc.ca/daily-quotidien/101209/dq101209a-eng.htm>

US women¹¹⁶ and 89 percent of Canadian women¹¹⁷ report breastfeeding for some amount of time. As Rippeyoung and Noonan (2012, 244) expertly demonstrated in their quantitative examination of the costs associated with breastfeeding labour, mothers who breastfeed for six months or longer “suffer more severe and more prolonged earnings losses than do mothers who breastfeed for shorter durations or not at all.” Time out for breastfeeding contributes to what Grimshaw and Rubery have called the “motherhood pay gap” (2015, n.p.). Not surprisingly, their top recommendations for narrowing the motherhood pay gap include job-protected parental leave (of adequate duration and income-related pay, with specific provision for mothers and fathers), accessible and affordable childcare, flexible working arrangements for all paid workers, and tax and benefit rules which treat mothers as economically independent adults.

It is not simply that state-sponsored promotional campaigns overstate breastfeeding benefits for most women in the United States and Canada, which they do, but the fact that discussion of women’s multiple labours are nowhere to be found in the exhaustive and sensitively-worded national promotional materials around breastfeeding. Breastfeeding is not deemed a form of uniquely gendered labour requiring provision, simply presumed a natural function of the maternal body. The only reasonable takeaway is that breastfeeding is by far the responsible thing to do. Through examining the remaining breastfeeding campaigns, we see support for the idea that the daily lives of women in precarious circumstances who face a number of barriers to their families’ wellness are not accounted for by these state-sponsored strategies, thus contributing to a scenario whereby women who are in the most need of provision for unpaid labour are set up to

¹¹⁶ “Breastfeeding Report Card, United States/2014” *CDC*, retrieved from <http://www.cdc.gov/breastfeeding/pdf/2014breastfeedingreportcard.pdf>

¹¹⁷ “Health at a glance: Breastfeeding trends in Canada, 2011-2012” *Statistics Canada Catalogue*, retrieved from <http://www.statcan.gc.ca/pub/82-624-x/2013001/article/11879-eng.htm>

fail by the state itself. Worse, women living in poverty or racialized women who do not breastfeed appear as though they are choosing to fail.

EatRight Ontario.

Breastfeeding campaigns in Canada are likewise indefatigable about promoting the one best way and downplaying formula feeding as an alternative, and they also employ medicalized and individualized rhetoric to fight perceived social ills and prevent “risky” bodies. In 2004, the Canadian Institute for Health Information, in its report *Improving the Health of Canadians*, listed five strategies to prevent obesity, led by breastfeeding. Again we see a health agency link bottle-feeding to obesity by a causal relationship, with breastfeeding poised as a viable solution despite breastfeeding research not succeeding in providing support for this causal link (Kramer 2012). Melissa Bartick, Professor of Medicine at Harvard, and Nathan Nickel, a postdoctoral fellow at the Manitoba Centre for Health Policy compare the results of PROBIT to a 2013 study by Casazza et al. called “Myth, presumptions, and facts about obesity.” Examining these two studies, neither of which suggested a causal relationship between breastfeeding and “obesity,” Bartick and Nickel conclude that the mechanism by which breastfeeding may be linked to lower rates of “obesity” may be multi-factorial, and thus we simply do not know if there is an independent relationship between breastfeeding and obesity. Casazza et al. (2013, n.p.) conclude that, “false and scientifically unsupported beliefs about obesity are pervasive in both scientific literature and the popular press.” This confirms concern by health experts about correlative findings in biomedical research being frequently misrepresented as causal in popular media *and scientific literature itself*. Ontario policy-makers who are engaging biomedical research, then, are

bound to be confused about the extent to which breastfeeding impacts weight. What is more, the foundational assumptions of breastfeeding promotion that point to both preventing childhood obesity and assisting women in returning to their pre-pregnancy weight have been severely discredited by critical fat studies and disability theorists who disrupt weight-related belief systems and propaganda, and reject the stigmatizing of fatness by popular health rhetoric (Ernsberger 2009, Solovay and Rothblum 2009, Wann 1998). As fat studies theorist Wann (2009) writes, efforts to wipe out "obesity" are prescriptive: they assume that human weight is mutable and negotiable, that human weight diversity is unwanted, and that fatness and fat people should be targeted. In this light, breastfeeding promotion participates in the stigmatizing of fatness and fat people by promising and moralizing thinness to those who breastfeed and their offspring.

Beyond being misleading about breastfeeding and weight, the Latch On NYC campaign uncritically positions "obesity"—a term that is rejected within the fat acceptance movement as a clinical categorization that is both arbitrary and fatphobic (see Rothblum 2011)—as an individual problem that threatens "body-is-able" national health ideals (see Cherney 2011). Through these campaigns, weight and unpaid gendered labour both become the government's business, but only insofar as the future health of society is concerned—not when it comes to treating breastfeeding as a labour done by women that might entitle them to the coffers of the state. Linking breastfeeding to public health presumes women's responsibility to unpaid labour so irrefutably that any notion of the "adult worker" is, though prevalent, an unhelpful myth for mothers.

Canadian campaigns, while not currently as integrated into formal political offices as the New

York City example,¹¹⁸ invoke parallel promotional strategies, including the Best-Fed Beginnings hospital accreditation that provided the foundational pillars for Latch On NYC. As recently as 2013, Ontario Health Minister Deb Matthews announced a \$2.5M plan to boost breastfeeding. In her press release at a health clinic in Toronto’s Liberty Village, she proclaimed,

Breast is best for baby, breast is best for mom, and the evidence is very clear that breast is best for a healthy society... We know that we can get more women doing what we want them to do — breastfeeding — if we provide the right supports for them.¹¹⁹

This rhetoric is distinctly similar to historical breastfeeding promotion for “national strength” by eugenicists in Canada as we saw in Chapter 3, a rhetoric that is frivolous and frankly reckless given current epidemiological research that details the intersection of breastfeeding rates, maternity leave, and socioeconomic status. In Canada, for example, breastfeeding rate is directly related to income quintile: from the lowest to the highest income quintile, the breastfeeding rates are 81.0, 88.7, 88.4, 90.2, and 92.6 respectively. The rates are also stratified by education level, as women who have graduated from post-secondary education have the highest rate at 90.5 percent. Women in urban areas are more likely to breastfeed than women in rural areas, and married or common-law women are far more likely to breastfeed than single/widowed/divorced mothers (88.5 percent to 80.6 percent). Ontario’s rate of breastfeeding is slightly higher than the Canadian national average at 88.5 percent. The Ontario campaign, which is almost singularly devoted to starting up a breastfeeding hotline, does little to acknowledge the material factors influencing infant feeding in Ontario like income, region, and family status. Instead, an online

¹¹⁸ Recently (2010), the Breastfeeding Committee of Canada has urged Toronto hospitals to adopt similar restrictions on formula samples. See Laurie Monsebraaten Noor Javed, “Free formula spoils breastfeeding,” 16 Mar 2010, *Toronto Star*, retrieved June 13, 2014,

http://www.thestar.com/life/parent/2010/03/16/free_formula_spoils_breastfeeding.html

¹¹⁹ Robert Benzie, “Ontario launches \$2.5M plan to boost breastfeeding,” *Toronto Star*, 30 Sept, 2013, accessed March 15, 2014,

http://www.thestar.com/news/queenspark/2013/09/30/ontario_launches_25m_plan_to_boost_breastfeeding.html

dietician service available free to Ontarians called EatRight Ontario promotes breastfeeding as “the best choice for your baby and you.”¹²⁰ It reports on “optimal nutrition,” echoing the WHO and NICHQ claim that, “breast milk is the best food you can offer your baby for the first six months of life,” and “you can continue to breastfeed until your child is two years and beyond.” It states that breast milk protects from illness: “your baby benefits from colostrum - the special ‘first milk’ that you produce,” and “unique antibodies and other immune factors in your breast milk help to protect your baby from illness and digestive system infections.” As I explain elsewhere (see Watson and Mason 2015), colostrum is generally lower in fat and higher in protein than breast milk so it facilitates newborn digestion. As Meier et al. (2010, 4) explain, during the first few days of life, an infant’s gastrointestinal tract “becomes colonized almost immediately with an array of commensal and potentially pathogenic bacteria.” Colostrum is therefore particularly beneficial for extremely premature infants, since it contains “a profile of growth factors, anti-inflammatory and anti-infective components similar to amniotic fluid,” and thus serves as the “transitional nutritive that facilitates the transition from intrauterine to extrauterine nutrition in mammals” (2010, 4). In full-term babies, the simple laxative effect of colostrum promotes the baby’s first stool, meconium (Joshi, Barakoti, and Lamsal 2012), which helps to clear bilirubin—waste caused by the natural breakdown of post-birth red blood cells—and prevent jaundice. This medical research provides support for promoting the use of colostrum by debunking myths around its uselessness or waste (though not without cultural biases and imperialist attitudes about cultures who “do not know better”) but colostrum’s reputation as a super immune booster of infant health is not contextualized, and its causal relationship to infant health is not supported by scientific evidence. This is partly due to the fact that there is no ethical

¹²⁰ <https://www.eatrightontario.ca/en/Articles/Breastfeeding-Infant-feeding/Breastfeeding-%E2%80%93-the-best-choice-for-your-baby-and-you.aspx>

method of isolating colostrum as a material from its significant confounding variables during newborn feeding. In the context of most, though not all, women in Ontario having access to clean water and advanced medicine, colostrum is less vital than in contexts where gut infection is a major threat to infant survival. Gut infection is a major threat to the survival of infants living without access to water, and there have been prominent cases in Ontario, like Attawapiskat First Nation in 2012, where toxic trihalomethanes have made water undrinkable even after boiling. EatRight Ontario could focus a campaign on educating around gut infection and access to clean water, and could follow Health Canada's advisory with outreach for mothers and infants, but this is not the strategy we see.

EatRight Ontario also claims that breast milk protects against allergies: “breast milk will provide your baby with immune factors such as immunoglobulin A that help to protect against allergies and asthma,” and “breastfed babies are less likely to have problems such as eczema and respiratory infections”—correlations that are of course impressive, but do not signify causal relationships. Last, the campaign cites how breastfeeding benefits mothers through a “bonding experience”:

Breastfeeding is a special time for you and your baby to bond and has been shown to have a unique calming effect on both baby and mother. You and your baby will get the opportunity to be close to one another, look into each other's eyes and get to know one-another. Breastfeeding is a special way that only you can nurture your baby and will give you a chance to relax and enjoy each other.

I quote this passage because I am intrigued by how this claim opens up the potential that breastfeeding itself might not be the determining factor of child-mother attachment and infant stimulation. Being close to one another and looking into each other's eyes is surely not precluded by bottle-feeding, but that is overlooked in the campaign. This component of breastfeeding

advocacy seems the most important for feminist citizenship given the possibilities that could arise if women were deemed deserving of state provision for this putative crucial time. Instead, women are homogenized as having the time, desire, and physical ability to do this bonding, and they are promised something immeasurably good as a result of their individual behaviour.

The EatRight Ontario campaign also cites “convenience” as a reason to breastfeed since “breastfeeding requires no bottles, refrigeration, sterilization or extra equipment” and “breast milk is always clean, at the right temperature and ready whenever your baby is hungry.” In this section on convenience, the site provides a “tip”: “need flexibility in your schedule? If you need to be away from your baby for an extended period of time, you can use a breast pump to help you express your milk. Breast milk can be stored in the refrigerator or freezer so someone else can feed baby.” Given the time constraints on women working in precarious labour and performing more than their share of domestic labour, that extra step does not sound so convenient. It is also impossible for women who are separated from their children for many reasons, including incarceration, hospitalization, migrant work, many forms of shift labour, or other care obligations. This recommendation also mimics meal preparation that women disproportionately do for their families, implying that this is not an added labour, just a natural one within the gender contract. Still, the planning labour, prohibitively expensive equipment, and accompanying physical commitment (and pain, discomfort, and stress) required to pump, store, and distribute milk to caregivers is demanding of time, money, body, and proximity and only a possibility for women who can afford all. But framed as a suitable and even handy alternative to breastfeeding, women learn that they should, at minimum, be pumping their milk. Especially in the context of breast *milk* showing indiscernible benefits for babies whose feeders have access to

sanitary equipment and water, this part of the campaign seems particularly out of touch, and gives a sense of how women are responsabilized toward sentient and unpaid care work through a questionable set of rationales. Last, the campaign secures itself as classic in the public health genre by reminding women of what the good life of breastfeeding might *feel* like for them:

Some studies show that women who breastfeed may have a reduced risk of female type cancers such as breast and ovarian cancer later in life. Breastfeeding may help you return to your pre-pregnancy weight more quickly because producing breast milk uses lots of calories. The hormones prolactin and oxytocin that your body produces when you breastfeed can contribute to your emotional well-being. Thanks to these hormones, breastfeeding mothers experience a special calmness and feeling of well-being.

What sticks out here is the direct appeal to the affect of new motherhood—calm and wellbeing—through health discourse, which I will expand upon in Chapter 5. I raise it here though to give additional context for the affect of motherhood, as it becomes clear how state-sponsored tactics know to appeal to the good feelings so desperately sought by new mothers. Special calmness serves to contrast frantic and desperate feelings upon having an infant, keeping them alive, and juggling labours for survival. Characteristic of responsabilization rhetoric that pins social problems on individual behaviour, women are taught that the act of breastfeeding is a responsible choice for reducing their individual health risks, but even more than that, if they can pursue this “choice,” they will be rewarded with good feelings. This simple statement from the campaign comes so near to recognizing the challenges faced by mothers of newborns that might imbue this time with bad feelings, yet it falls short of advocating or promising anything meaningful.

Recalling the professionalization of pediatrics and medicalization of childbirth and infant feeding, which shifted the focus of maternity from women’s health to infant health, breastfeeding promotion intersects with human rights discourse even though women are not universally guaranteed provision for their labour. Prior to EatRight Ontario, the Ontario Human Rights

Commission (OHRC) released a conspicuous breastfeeding campaign that insisted that “Breastfeeding is a human right,”¹²¹ and breastfeeding in public is “not a crime.” The campaign featured ads that were papered over municipal transit vehicles across the province and a platform poster in high traffic subway stations in Toronto. I briefly note it here even though it is from 2000 to highlight the intersection between breastfeeding and rights discourse—a contemporary concern for feminist citizenship theorists who wish to strategically retain the language of rights (see Lister 2003) to make necessary strides for women’s and minorities’ access to power. Of course this campaign is advocating destigmatizing breastfeeding in public, which is surely constructive, but notice in the below two campaign images how children’s rights eclipse women’s rights, as well as how describing breastfeeding through criminalization rhetoric intimates that *not* breastfeeding might be considered an offense.



Figure 9: Ontario Human Rights Commission (2000)¹²²

In posters of baby mug shots depicting unhappy babies in front of height charts reminiscent of the liquid unit measures of bottles, breastfeeding is located as a human right through its link to

¹²¹ http://www.ohrc.on.ca/en/news_centre/breastfeeding-human-right-new-campaign-launched#sthash.gtMOXe4A.dpuf

¹²² <https://infactcanada.ca/WBW2000.htm>

storied scientific support. The OHRC campaign belongs to the abovementioned tradition of advocating for breastfeeding through legal frameworks, which are tricky for feminists since they require strategic positioning of breastfeeding as essentially gendered labour. Through such legal frameworks and strategies, children's rights can receive primacy over women's rights when it comes to infant feeding or fetal care. Women's citizenship, therefore, can swing from infant autonomy. At the same time, this campaign makes the helpful incursion to make public spaces more welcoming to women and babies, and to open up more spaces for women to breastfeed in public. One of the negative implications of this strategy comes from the same campaign, when the OHRC presents the below image of a baby's face and a partial breast, again urging us to flip the script from a woman's right to feed in public toward a child's right to eat in public. The way this image features only a woman's partial breast and partial arm falls in line with the now classically sexist and racist tendency to dismember women in media representations (Greening 2011, Kilbourne 2010). Here we only see a black woman's breast and hand; her child's face is in the centre of the frame. The caption tells women "don't think of [breastfeeding]" the way you might think you should—as your right to perform unpaid labour—but instead think of your baby's right that you are charged with protecting. By removing women's autonomy, and in fact the woman's face from the image, in favour of highlighting optimal child health outcomes, breastfeeding is the only legitimate option. Here is an example of a strategy that explicitly circumvents feminist discourse on breastfeeding advocacy by focusing on children's rights—which are less contentious and less explicitly feminist.

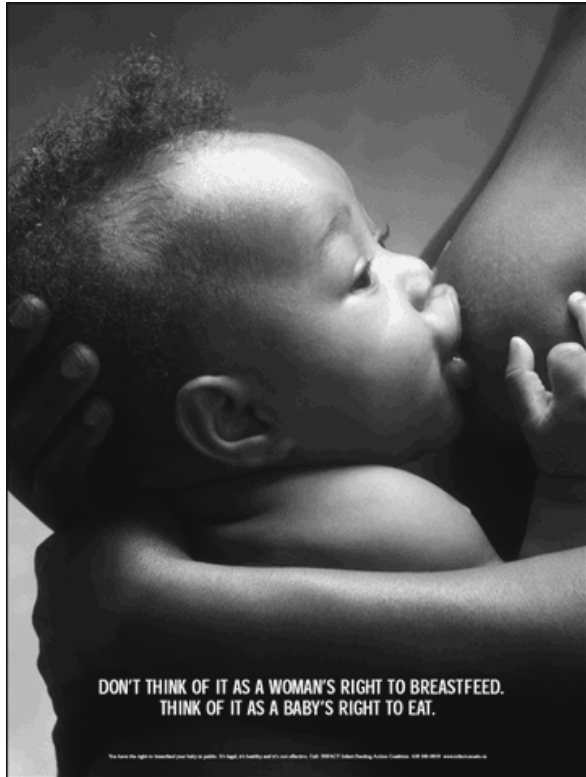


Figure 10: Ontario Human Rights Commission campaign (2000)¹²³

The logical conclusion of the advice from both EatRight Ontario and the OHRC campaign is that if mothers forego breastfeeding, they are personally threatening the rights and well-being of their babies. Here, the Government of Ontario ties a child's right to a woman's obligation but negates discussion of women's provisions for fulfilling a duty, telling mothers that their care work is the key to the physical health babies, to their own physical health, to losing weight in a culture where thinness is privileged (see Ridgway 2012), and even to reaching peaceful feelings (a maternal affect that I explore in Chapter 5). It is no stretch to think about how, for example, housing and food security might also contribute to women's peaceful feelings. In failing to mention how breastfeeding requires provisions for women that are not universally guaranteed in either Canada or the United States, the campaign implicitly targets women who have their major security needs met.

¹²³ <https://infactcanada.ca/WBW2000.htm>

It's Only Natural: "Mother's love, mother's milk"

Perhaps the most engrossing breastfeeding campaign from an intersectional feminist perspective is called "It's Only Natural," hosted by the Women's Health Office, U.S. Department of Health and Human Services. Unlike the previous two campaigns, in this campaign, race is central to the story of breastfeeding promotion. The campaign reads empathetically:

Every woman's journey to motherhood is different. But usually, the first decision you'll make as a mom is how to feed your child. *It's Only Natural* helps African-American women and their families understand the health benefits of breastfeeding—not just for babies, but for moms too. Here, you'll find facts about breastfeeding and get practical tips on how to make breastfeeding work for you while getting the support you need. Are you worried that you won't be able to breastfeed? Some moms can't breastfeed, but most can. You may also have lots of other concerns about this new experience. Explore our articles and watch videos featuring expert advice and personal stories from moms just like you.

The campaign header appears in brown typeface:



Figure 11: Screen shot of It's Only Natural¹²⁴

This campaign, unlike most, expressly targets African American women with the understanding that this group of women breastfeeds at the lowest rate in the United States. In a video called "Uncovering breastfeeding misconceptions: Find out how moms got past the *tall tales* about breastfeeding commonly told in their communities" (emphasis added),¹²⁵ the presumed

¹²⁴ <http://www.womenshealth.gov/itsonlynatural/>

¹²⁵ <http://womenshealth.gov/itsonlynatural/addressing-myths/breastfeeding-misconceptions.html>

ignorance and infantilizing of African American women is unmistakable. Eerily invoking and simultaneously condemning oral tradition with a paternalistic colonizer tone, the narrator of this video identifies “myths that they’ve been passed out through their generations and upbringing.” In 1995, British scholar Pam Carter’s foundational intersectional critique of breastfeeding as institution and practice showed that class and race are significant factors in receiving professional intervention, with black women less likely than white women to follow doctor’s orders. Carter framed pro-breastfeeding policies as instruments of social control of women’s bodies, especially allowing authorities to police the bodies of black, uneducated, working-class women. She emphasized racialized women’s relationship to words like the “natural” that connote associations with primitivism and colonial legacy, calling for more complicated analyses of infant feeding practices. In her critique of state promotion, she advances alternative considerations around infant feeding including accounting for the cultural sexualization of breasts, the working conditions under which women breastfeed, scientific intrusion into motherhood, and women’s embodied experiences, concluding that breastfeeding promotion fails to account for women’s needs. Alison Bartlett (2005) pushes Carter’s critical race analysis in *Breastwork*, particularly her chapter, “Black breasts, white milk?” in which she traces the ideological links between maternity and nation throughout the 20th century in Australia. Invoking Jacobus’ work tracing the ‘patriotic uses of milk’ during the French Revolution and Sichtermann’s work on the obligations and celebration of women to breastfeed in Nazi Germany, Bartlett offers that breastfeeding in Australia is rooted in nation-building history similar to Canada’s: where breastfeeding promotion was folded into women’s duties as ‘mother of the race’ to reproduce fit, healthy, white babies. Conceiving breastfeeding as more cultural practice than natural process, Bartlett argues that the ways in which breastfeeding circulates prominently

through contemporary media should be read as a “critical cultural moment in the contestation and renegotiation of social values” (2005, 341). In the aftermath and continued legacy of Indigenous assimilation projects in Australia, a 1998 study showed that “Indigenous Australians have lower rates of breastfeeding than non-Indigenous Australians, except where they live a traditional lifestyle” (2005, 145). As part of the stereotype of native women’s ‘failure to comply,’ Indigenous mothers are educated to comply with medical advice, while the systemic criminalization of poverty and its intersection with racism and colonialism is not addressed in this discourse (Bartlett 2005). Extending these critiques to “It’s Only Natural,” which I continue to elaborate below, we can see that the campaign glosses over racism, colonialism, and poverty tending instead to portray the “myths” of a presumably ignorant black culture as the cause of decreased rates of breastfeeding and reduced infant health outcomes.

The video spot by “It’s Only Natural” mentions the “oversexualization of the breasts in the American culture,” but it does not consider how black women’s recent historical and ongoing oppression in particular may influence black women’s desire to resist the colonial positioning of black female bodies as primitively tied to their reproductive function or sexuality. Cultural theorist Stuart Hall might explain this impulse as the desire to reject the Mammy stereotype,¹²⁶ though this is not expressly mentioned as a cultural myth in this campaign. In the context of colonial and slavery legacies, “It’s Only Natural” shows a familiar lack of attention to cultural specificity by the medical community (see Lykke and Braidotti 1996). The campaign video presents a black woman in a nursing smock advising against “myths,” and follows with black

¹²⁶ Hall (1997) explains that the mammy stereotype—derived from the history of black women as household slaves (personified by images like Aunt Jemima)—ties reproductive care functions to personality traits that are deemed innate to black women. Hall demonstrates how this stereotyping is ongoing in popular representations of black women, continually reinforcing racist ideals in mainstream culture.

women listing myths about breastfeeding, including one educator denying that breastfeeding has an impact on the shape and size of breasts. This appeal to sexual attractiveness is rarely seen in generic campaigns. The video lists the related barrier (which is framed as a myth) that black women's partners "want the breasts back," to which an educator responds with overt heterosexism: "it's not the man, it's not you looking sexy, it's you feeding your child." This comment also denies any consideration of women's sexual pleasure derived from breastfeeding or from a lesbian partner, instead enforcing the idea of a mechanistic, functional, disembodied act of feeding. Similarly, one woman lists the myth of "husbands not being able to participate in the beginning times" if the mother breastfeeds. Another stated misconception that is framed as particular to the African American community is "that the way that you bond is through feeding," and by taking that away from other family members through breastfeeding, other family members will need to be taught how to get a bond with the baby. Surely bottle-feeding must democratize feeding and bonding, but this alternative kinship arrangement and its implications for women's and infants' autonomy is nowhere near the myth-busting campaign. The campaign's approach is potent in the context of promotion targeting the "general population" which states this exact bonding as one of the most important benefits for mothers and babies. This messaging reinforces women's stratified responsibilities to citizenship based on race and class, where women who are deemed more responsible on account of their whiteness and higher socioeconomic status are given different instructions from women whose failure to breastfeed is positioned as inherent to their race and culture.

The nurse in the video assures that the lack of breastfeeding by husbands can be mitigated, as her sons are at least as close, if not closer, to her husband as they are to her. Scientific evidence is

not used here, which, in the context of the other messages in this campaign, gives way to the assumptions being made about black women, their intellect, and their belief systems. Black women who do not breastfeed are repeatedly infantilized; they are seen as a threat to their children and broader society because of their propensity to be tricked by myths and rumours about their own bodies. The campaign counters these supposed myths with gentle and gutless anecdotes. The last stated barrier in “It’s Only Natural” is that some mothers do not like the attachment to their children that breastfeeding requires; they do not want to be “stuck” with their child all the time. To this “myth,” which is not a myth at all but a reported feeling (see Schmied and Lupton 2001), one of the commenters says dismissively, “I’m with my son a lot, but he’s a baby so I want to be with him... We’re together all the time because where else would he be?” Here the campaign stumbles on a barrier to breastfeeding—that it requires prolonged maternal-infant contact—but fails to take it up as a structural concern, instead insisting to black women that it is obvious that babies should be attached to mothers, and they should not feel encumbered by this. It’s only natural. The next speaker reproduces this logic as she says that mothers she spoke to explained breastfeeding as “too much of a commitment;” she dismisses this as a negative misconception, not a factor with structural explanations. The final speaker lists the reported concern with “what you can and cannot eat,” which she says is not an issue, despite the fact that breastfeeding mothers are warned not to ingest various drugs including caffeine, alcohol, nicotine, and marijuana.¹²⁷ The campaign does not address how some black women have reported their disinclination to breastfeed as rooted in reluctance to being associated with “natural” bodily functions via breastfeeding, given histories of wet nursing and the legacy of the mammy stereotype (Blum 2000; Fildes 1986, 1998; Hausman 2003). Some black women have

¹²⁷ See Breast Milk Interactions Chart, *Baby Center: Expert Advice*, retrieved June 14, 2014, http://www.babycenter.com/0_breast-milk-interactions-chart_8788.bc?page=2

highlighted how breastfeeding intersects with the “politics of respectability,” as they report a desire to keep body parts private that were once commodified and viewed as property (Thanyachareon 2010). Black women are encouraged to adopt a number of “respectable” (white) behaviours, like conforming to the dress codes and hairstyles of white Western women, to counter white supremacist assumptions about their bodies and abilities. As such, reminding the public that their bodies are linked to their biological and sexual function through breastfeeding is an entirely different cultural practice for racialized women in a white supremacist culture. Breastfeeding has different citizenship implications for black women—whose bodies are more often sexualized and reduced to biological functions in the public sphere (hooks 1992)—since their cognitive competence and political judgment is something they are constantly required to prove for belongingness and access to power from white leadership.¹²⁸

Applying Stuart Hall’s (1997) work on racism and representation, Hall might call the representational practice of “It’s Only Natural” a form of inferential racism; as we are presented with images of black women discussing prominent breastfeeding myths, we deduce that it is something inherent in their blackness that is causing these problems or “beliefs.” Apart from the intention of the campaign strategists, the video leaves the impression that there is some logic intrinsic to black women that precludes them from doing mothering responsibly. This means that racialized women’s citizenship, particularly black women’s citizenship in the United States, is determined by the way they navigate and prioritize specific mothering acts like breastfeeding.

¹²⁸ For more on the construction of race as a social problem itself in the obstetrics field, Khiara Bridges’ 2011 book *Reproducing Race* explores the role of race in a medical setting through an ethnography of pregnancy and birth at a large New York hospital. She demonstrates how the medicalization of social problems like poverty and illness reproduces racial stereotypes and ultimately disciplines the bodies of poor women of color.

But for black women to be viewed as responsible, entitled mother-citizens, they must also navigate a catch-22 when it comes to the context of white supremacy: they must resist ongoing and historical colonialism that binds racialized women's bodies to both their sexual function and their intellectual inferiority, but they must also perform according to what is "only natural," which in this case is breastfeeding. This calls to mind Hancock's work on the "welfare queen" trope, where black women who receive social assistance are seen as sucking the coffers of the state for reasons of their blackness, rather than reasons of systematic racism and oppression. When it comes to black women not breastfeeding, they are disproportionately and suspiciously making a choice that harms everyone, and state intervention should target and correct their misguided behaviour.

This breastfeeding campaign video is especially remarkable in the context of statistical research identifying the top four cited barriers to breastfeeding in the United States, which include a "rough start" (including pain and exhaustion), worry that the baby is not getting enough nutrients, discomfort with nursing in public, and mothers needing to return to work.¹²⁹ Inferential racism is common in media representations of social ills in particular, including criminality (see Hancock 2004), and poor infant health is no exception. I briefly raise the example of a bizarre campaign by the Children's Hospital of Wisconsin in conjunction with the City of Milwaukee Health Department, where a series of predominantly black babies are shown doing physical labour, intimating a disconcerting slippage between the health of black babies and racist and stereotypical representations of black bodies as the "slave" or "stud" figure in contemporary

¹²⁹ See Claire McCarthy, "The top four reasons moms stop breastfeeding," *Boston Globe*, 4 Jun 2012, accessed March 15, 2014, http://www.boston.com/lifestyle/health/mdmama/2012/06/the_top_four_reasons_moms_stop_breastfeeding--and_what_we_can_do_about_them.html

media (see Hall 1997). In the image below, black babies are shown flexing their biceps, doing one-handed pushups, roundhouse kicking a stack of lego, lifting a large piece of furniture overhead, and performing a muscle-up on gymnastic rings. When representations of black men in media are disproportionately relying on the racist slave-era stereotype of black men as physically muscular, this line of black babies looking stern in a series of hypermasculine exercises shows how the prevalence of this racist stereotype reaches public health campaigning. This reveals how the state imagines black bodies—the babies of black women—as aspiring to a particularly muscular and masculine display of physical strength.

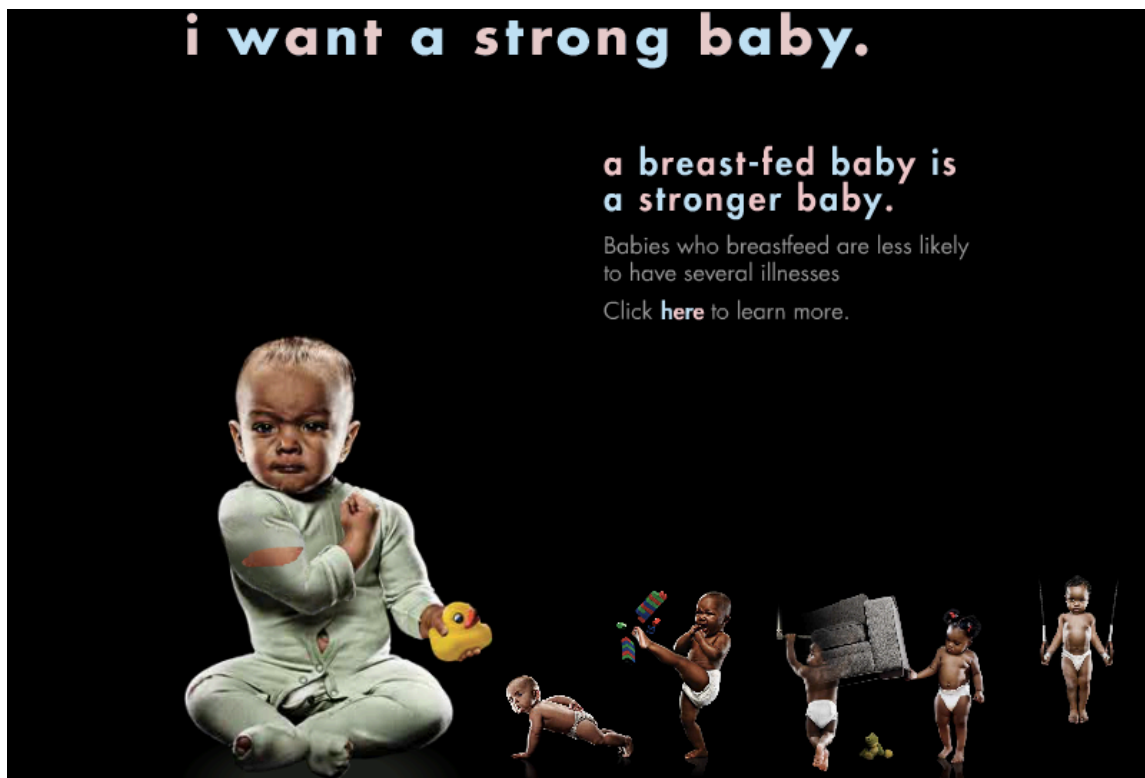


Figure 12: Screen shot, "I Want a Strong Baby," Milwaukee Public Health¹³⁰

As Hancock (2004) documents in her work on the "welfare queen," politically motivated actors routinely mobilize stereotypes to instigate what Hancock calls a "politics of disgust." She extends that this politics of disgust, which is transmitted by elites to the general public through

¹³⁰ <http://www.iwantastrongbaby.com/>

mainstream media circulation among other formal and informal means, relegate the public identities of racialized citizens to the margins of democratic process. The Milwaukee Public Health campaign mobilizes a stereotype about black men, and in doing so, reproduces blackness at the margins power, political engagement, and citizenship. And in confirming that racialized women are different from white women when it comes to responsible infant feeding, these campaigns teach us who is inherently closest to responsible motherhood, and who needs the most protection from their own system of beliefs.

Coming at mothers from all angles

As mentioned, breastfeeding advocacy occurs across the political spectrum, from ultra-rightwing religious extremists who argue that breastfeeding is the only pure way to feed an infant to left-leaning “lactivists” (Faircloth 2013) who insist that the “natural” way is best (Wolf 2010). This is an oversimplification of both camps, which we see when discourses collide over the language of “purity” and what is considered “natural.” For example the website *babypurity.com* sports the tagline, “Complete resource for new parents wanting the natural choice for their children.” On the Baby Purity site, for example, Dr. Nari Pidutti from Springs Eternal Natural Health Clinic in British Columbia¹³¹ insists, “There is no question that breastmilk is the best choice for babies and there is no supplement that comes even close.” Within grassroots breastfeeding advocacy, some women who promote public modesty and privacy have also taken up the cause to promote breastfeeding in public.¹³² Paquette tracks a branch of breastfeeding promotion by some Christian women who are spreading the word that breastfeeding is “part of God’s plan for our

¹³¹ Interestingly, this region has been recently associated with a deadly measles outbreak, the result of an anti-vaccination campaign in this largely Evangelical Christian community in British Columbia.

¹³² See Jennifer Paquette on “How breastfeeding impacts the religious women” for *breastfeed.com* (retrieved from <http://www.breastfeed.com/nursing-mothers-life/breastfeeding-religion>).

bodies and our families.” Citing a metaphor about the fruitfulness of Jerusalem in Isaiah 66: 10-11,¹³³ some people take literally the wish that “you may nurse and be satisfied from her consoling breast.” Of course this breastfeeding mandate is not nearly central to religious conservatism, and as Andrea Smith (2008) reminds us in *Native Americans and the Christian Right*, sectors on the “Left” too easily dismiss conservative Christianity as already always antithetical to political and social transformation. Surely evangelicalism is not responsible nor is it neatly tied to homogenous mothering practices. Even still, this outcrop of support for breastfeeding in Christian blogging and conventions suggests that what used to exist more privately is finding space in some religious communities to support particular mothering practices over others. At a conference of the Jewish Orthodox Feminist Alliance, Mia Diamond Padwa enforced breastfeeding as the one best way despite devotion to modesty, stating that, “the Talmud clearly considers breastfeeding the only way to feed a child.” This assertion could open the potential for discussion of women’s responsibilities to multiple labours. For example, if breastfeeding were the only way to feed a child, it logically follows that women require (or “deserve”) the time and resources to breastfeed. But this notion that breastfeeding is the only way is not only ableist, it also fuses the practice of breastfeeding to religious devotions to disciplinary effects—and can be used to justify women’s relegation to the private sphere and corresponding lack of access to political power.

Before moving on to scholarly interventions on the topic, it is important to recall that while Canadian and US breastfeeding advocacy campaigns mirror each other in themes and tactics, the fact that Canada has paid maternity leave through Employment Insurance, which is commonly taken by women who qualify, makes breastfeeding promotion somewhat more consistent with

¹³³ Holy Bible: English Standard Version.

state policy. However, recall that women must be tied to full-time paid labour to qualify for Employment Insurance, and unemployment rates in Canada are stratified by race, body, and citizenship status. Racialized and migrant residents and folks living with disabilities are more likely tied to precarious employment or unemployed.¹³⁴ Further, women are still more likely than men to work part-time,¹³⁵ and part-time¹³⁶ and casual labour and self-employment are on the rise in Canada¹³⁷ (and the United States¹³⁸), and women of colour and immigrant women are also overrepresented in precarious employment,¹³⁹ making this qualification exceedingly exclusionary. The presumption that women either qualify for maternity leave or can take “time off” work without pay exists in a context where in Canada, poverty is a gendered and racialized problem,¹⁴⁰ especially for Aboriginal women (the unemployment rate among Aboriginal women is 13.5 percent—more than twice that of their non-Aboriginal counterparts¹⁴¹), women with disabilities, immigrant women, single women, trans women, and elderly women, who are also most likely to face housing insecurity or homelessness and suffer adverse health issues as a

¹³⁴ “Canada’s Colour Coded Labour Market,” *Policy Alternatives*, March 2011, retrieved July 8, 2015, http://www.wellesleyinstitute.com/wp-content/uploads/2011/03/Colour_Coded_Labour_MarketFINAL.pdf

¹³⁵ Cara Williams, “Women in Canada: A Gender-Based Statistical Report,” *Statistics Canada*, December 2010 retrieved June 9, 2014, <http://www.statcan.gc.ca/pub/89-503-x/2010001/article/11388-eng.pdf>

¹³⁶ In 2013, almost all job growth in Canada was in part-time employment. Full-time work fell by over 26,000 jobs. See Tavia Grant, “Canada’s job market ‘lacklustre’ as part-time work dominates,” 6 Jun, 2014, retrieved June 9, 2014, <http://www.theglobeandmail.com/report-on-business/economy/jobs/canada-adds-25800-jobs-in-may-jobless-rate-edges-higher/article19039913/>

¹³⁷ See Labour Market Bulletins by province, retrieved June 5, 2014, <http://www.esdc.gc.ca/eng/jobs/lmi/publications/>

¹³⁸ Rob Valetta and Leila Bengali, “What’s behind the increase in part-time work?” *Federal Reserve Bank of San Francisco Economic Letter*, 26 Aug, 2013, retrieved June 9, 2014, <http://www.frbsf.org/economic-research/publications/economic-letter/2013/august/part-time-work-employment-increase-recession/>

¹³⁹ “Canada’s Colour Coded Labour Market,” *Policy Alternatives*, March 2011, retrieved June 5, 2014, <http://www.policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2011/03/Colour%20Coded%20Labour%20Market.pdf>

¹⁴⁰ “The facts about women and poverty,” retrieved June 10, 2014, <http://www.canadianwomen.org/facts-about-poverty>

¹⁴¹ See Elizabeth Fry Society’s 2011 synthesis of census data on Aboriginal women (retrieved on May 29, 2013 at <http://elizabethfry.ca/wwdcms/uploads/Aboriginal%20Women.pdf>).

result.¹⁴² Gendered poverty also intersects with disability, as women with disabilities who are employed earn 65 percent of what men with disabilities earn.¹⁴³ I raise these stratifications of financial insecurity to again examine who can be responsabilized by something as innocuous, or even as celebrated, as state-sponsored breastfeeding promotion. Mothers who face extreme barriers to their own physical security do not see their structural barriers reflected in materials that focus on simply promoting breastfeeding as the best. This means that state-sponsored breastfeeding promotion imagines a woman citizen who is unencumbered by paid labour and financial strain at minimum.

Migrant women, who are often performing care work outsourced by white, middle-class women are paid low wages and are not entitled to benefits or Employment Insurance.¹⁴⁴ It is worth noting that migrant women living in Canada are not considered citizens according to a number of metrics, specifically because they do not have Canadian passports, and certainly state-sponsored breastfeeding promotion is not meant to apply to these women who are often forced to leave their own children at home overseas while they care for the children of middle-class white families. These robust statistics on intersections of labour, poverty, ability, gender, and race suggest that state-sponsored breastfeeding promotion imagines an exalted mother subject (Thobani 2007, 3), who embodies the “quintessential characteristics of the nation,” though campaigns purport to target “women” in general. The fact that, for example, racialized, poor, and migrant women disproportionately fail to qualify for paid maternity leave compared to the “general Canadian

¹⁴² “Women, Housing, and Health,” *Canadian Women’s Health Network*, retrieved June 13, 2014, <http://www.cwhn.ca/en/node/43290>

¹⁴³ “Disability in Canada,” *Employment and Social Development Canada*, retrieved June 10, 2014, http://www.esdc.gc.ca/eng/disability/arc/disability_2006.shtml

¹⁴⁴ See Marika Morris and Tahira Gonsalves, “Women in Poverty, Sixth Edition,” n.d., *Canadian Research Institute for the Advancement of Women*, <http://criaw-icref.ca/WomenAndPoverty>

population,” means that these women are less likely to receive meaningful state support for breastfeeding. Further, their own livability is threatened as a result since poverty undermines health.¹⁴⁵ If politicians were truly interested in what was best for all babies, and by extension all citizens, they might examine the factors that influence who breastfeeds at the lowest rate in Canada and the United States and why. The fact that they do not tells us that only citizens who can help themselves by pursuing health according to “breast is best”-practices are deemed deserving of inclusion in responsible reproduction. Sometimes, as in the case of Canada, these responsible citizens may be entitled to provisions like paid maternity leave. Programs that insist on hiding formula or provide a hotline to encourage breastfeeding are actually refusing some women entry into responsible reproduction, and deserving citizenship by extension.

Scholarly interventions in breastfeeding promotion: Risk versus rights-based critique

A number of cross-disciplinary scholars have challenged the primacy and promotion of breastfeeding as the best and responsible way to feed an infant. Feminist literature on breastfeeding has carefully underscored the ideological link between individual women’s behaviour and risk discourse (Hausman 2011, Knaak 2010, Lee 2008, Nathoo and Ostry 2009, Wolf 2010) though not all literature on ideologies of breastfeeding highlight this connection (Blum 2000, Kedrowski and Lipscomb 2007). Here I signal a few prominent interventions to consider how some arguments provide support for the critique that women are being responsabilized to cure social ills unrelated to infant feeding, whereas some interventions, sometimes the same ones, risk reproducing women’s duty to unpaid labour through advocating

¹⁴⁵ See Income and Women’s Health, n.d, *Canadian Women’s Health Network*, retrieved June 5, 2014, <http://www.cwhn.ca/en/yourhealth/faqs/IncomeandWomen'sHealth>

their right to breastfeed without considering how women are also responsabilized to work for pay by the myth of the adult worker.

Following Pam Carter's (1995) cross-cultural comparisons in *Feminism, Breasts, and Breastfeeding* mentioned in the above analysis of *It's Only Natural*, Sarah Harper (1996) highlighted the way that breastfeeding advocacy in the United States is illogical compared to that in, for example, the Philippines, where women stay at work until child birth at which time they are socially supported in order to establish breastfeeding. As Harper notes, by comparison, the "practical implications for successful breastfeeding by American women are clear. A society that officially encourages breast-feeding cannot... escape the medical/scientific paradigm ... Baby milk substitute and bottle-feeding allows female reproductive bodies to return to the marketplace as economic bodies with speed and efficiency" (1996, 638). In questioning how women are responsabilized toward forms of unpaid work and paid work, this incoherence between promotion and lack of support points to several implications for women beyond the issue of infant feeding. Most evident for my examination of women's contemporary citizenship, women need to do an impossible thing: breastfeed and remain the ever-productive, flexible, agile, neoliberal worker. This impossible tenet of responsible reproduction generates the first component of the affect of motherhood that I have mentioned throughout several chapters now: the feelings of despair and fear that buzz and circulate upon women not being able to hold onto and perform according to the responsibilities of motherhood and the adult worker at once. "Having it all" or not may seem like an old problem now, but the surge in breastfeeding promotion and literature in this precarious, anti-risk, individualist neoliberal moment means new ways to feel excluded and isolated for women who fail at their competing citizenship

responsibilities. And the fact of the matter is, everybody fails, but some exalted subjects garner more sympathy. Carter's cross-cultural work on breastfeeding advocacy laid the foundations for what Law (2000) would later describe as the "inevitable slippage" from "reproductive and social-reproductive issues: between childbearing and child rearing."¹⁴⁶ In "The politics of breastfeeding," Law (2000, 407) asks how did breastfeeding become of singular importance to women—"more potent than education and employment"—and "how did infant feeding decisions come to be associated with consequences of a virtually epic order?" She cites a Chicago-area bumper sticker that reads, "Affordable healthcare begins with breastfeeding." In line with my findings from synthesizing biomedical research in Chapter 3, Law points out that "it is never infant-feeding substances alone but, rather, clusters of infant-care practices and their associated family-management arrangements that are comparatively assessed in the scientific literature on infant feeding, although the results are rarely phrased this way" (2000, 417). The point is that bumper-sticker messages that announce breastfeeding as the seedling of affordable healthcare put an enormous responsibility on individual women. These slogans also have little or nothing to do with evidence, and everything to do with constructing the rhetoric of responsible reproduction and responsible, individualist, health citizenship.

Similarly, Linda Blum (2000), updating Haraway's (1989) analysis of the religious and racial discourses underpinning primatology, demonstrates how the institution of breastfeeding is mired in religious and colonialist rhetoric. Blum puts simply that breastfeeding is not a realistic option for all women and suggests that the medical profession's insistence on the necessity of breastfeeding becomes a way to cast some women as bad mothers while others are celebrated as

¹⁴⁶ This argument can be seen as a precursor to current debates over women's rights versus fetal or infant rights when considering mandated breastfeeding.

entitled to the coffers of the state. I do not mean to suggest that individual physicians are colluding to support a particular political economic order. But as Chapter 3 made clear, health practitioners are not always skilled at interpreting quantitative data, and they can also serve as conduits of a top-down, medical model approach to health where patients everyday lives and needs are viewed as peripheral to the symptom to be treated. Further, nurses and physicians who are mandated to comply with the Baby Friendly Hospital Initiative are forbidden from mentioning any alternative to breastfeeding, and if asked about it in front of other mothers, they must not respond (Anonymous Author, forthcoming). While in the past (and to some extent today) the physician-patient relationship was more dramatically gendered in matters of breastfeeding, the changing gender profile of physicians suggests this is less about gender power and more reflective of an individualist healthcare model where patients must help themselves.

Since breastfeeding has become a way to designate deserving and undeserving mothers, it takes up eighteenth-century dilemmas on equality and the boundaries of citizenship (Blum 2000). If motherhood occurs in the context of citizenship as a “class-marking (and making) racialized moral project” (Blum 2000, 11), breastfeeding serves as a gatekeeper to responsible motherhood. Joan Wolf’s (2010) work extends biopolitical observations to link measures of societal anxiety and risk management to breastfeeding promotion. She describes how the “injunction to breastfeed is rooted in three institutions—science, motherhood, and public health—and in the dynamics of these institutions in a neoliberal risk culture” (2010, 67). For Wolf, breastfeeding has become central to the minimization of risks to infant and child health, especially the management of particular bodies against health risks, or what Geist-Martin, Ray, and Sharf (2003) call “health citizenship.” Health citizenship refers to belongingness that is based on

heeding the advice of medical experts on how individuals should take good care of their bodies (Petersen 1996). Metzl and Kirkland's (2010) collection *Against Health* advances this notion of health citizenship to argue that the notion of health is socially constructed, and should be unpacked for its ideological underpinnings and moral imperatives for individuals. Not only do Metzl and Kirkland (2010) challenge normative ideas about health, they show how pursuing health is made difficult due to its construction as an individual's moral responsibility. For example, when breastfeeding is constructed as best for a child's health, women who bottle-feed are constructed as bad parents. And since individuals learn to understand their own health by comparing it against the health behaviors of others, the pursuit of health involves a system of value judgments and moral assumptions, which work to exclude individuals who are least able to pursue normative health ideals or avoid health risks.

For breastfeeding campaigns, like research on obesity and maternal responsabilization (Parker 2014), research and promotion focuses on a narrow set of questions within a risk-factor paradigm (Wolf 2012). For example, Dr. Sears, attachment-parenting guru we saw in Chapter 3, invokes preliminary scientific research on sudden infant death syndrome (SIDS) to position the choice between breast milk and formula as a simple one of risk management. I include this example in this chapter on public health promotion (instead of the previous chapter on breastfeeding research) to showcase the risk-factor paradigm in popular and commercial breastfeeding recommendations. Dr. Sears is a public figure whose corporation includes a "parenting library" of dozens of books, an extensive educational website and blog, and a Wellness Institute that certifies health coaches. On his website *askdrsears.com*, he goes so far as to call breast milk a "SIDS vaccine," insisting that while we wait for more scientific evidence about the causes of

SIDS, “we can rely on common sense.” This discourse frames the woman who does not breastfeed exclusively or for long enough as simply selfish or ignorant. In the current neoliberal context where societal risk management is personalized, and gendered citizenship includes health citizenship, whether a mother *chooses* to breastfeed becomes one of the bases on which her contribution to society is judged by health professionals, politicians, and fellow mothers (see Valenti 2012).

The abovementioned scholarship critiquing breastfeeding promotion connects promotion to risk culture, biopolitical techniques of discipline, and unequal access. It assists in understanding *how* women are responsabilized toward care labour as a determinant of their responsible citizenship. It is important to note, though, that some criticism of breastfeeding campaigns still imply the primacy of breastfeeding to the detriment of challenging broader structural inequities. Further, these critiques do not necessarily probe how women are required to undertake paid labour at the same time. Further, some of these lines of argument implicitly target “average mothers” who we presume have the desire and biological ability to breastfeed. Kedrowski and Lipscomb (2007), in their comprehensive history of breastfeeding rights in the United States, make a compelling argument that breastfeeding should be considered a reproductive rights issue. Using the language of choice, they extend the right to control whether one becomes or stays pregnant to cover the right to start or continue breastfeeding, arguing that “the decision of whether or not to breastfeed an infant is also a logical consequence of the decision to become a parent” (2008, 7).¹⁴⁷ While using a rights-based approach to breastfeeding is strategic to ensure provisions for women, this

¹⁴⁷ One obvious difference between breastfeeding rights and abortion rights, which Kedrowski and Lipscomb address, is the replacement of the fetus with the baby, who exists as a rights-bearing entity alongside its parents, but they highlight the idea that “breastfeeding, like pregnancy, carries with it biological realities that shape a mother’s daily experiences and differentiate her from her nonbreastfeeding sister” (2008, 7).

framework does not make allowances for the “choice” *not* to breastfeed. Without this concession, their argument reproduces the tendency to frame breastfeeding as far superior to formula feeding without caveat. In their positioning of breastfeeding as both a public policy issue and a civil rights issue, they first discuss health benefits for babies and mothers, with mention of a few (mostly biological) barriers to breastfeeding. Ogbuanu, Probst and Glover (2009, 268), in their summary of the data from the Arkansas Pregnancy Risk Monitoring System (2000-2003), found a set of barriers to and determinants of breastfeeding that might suggest to pro-breastfeeding governments intervention beyond promotion:

Barriers to breastfeeding initiation include work-related issues, personal preferences, having an unsupportive partner, feeling embarrassed, concerns about pain, and physical/medical problems. Determinants of breastfeeding initiation include income, education, nationality, race/ethnicity, region of residence, age, marital status, breastfeeding intent, gestational age, birth weight, and participation in the Special Supplemental Nutrition Program for Women, Infants, and Children. Other determinants of breastfeeding initiation include maternal smoking, whether the pregnancy was intended, and mode of delivery. Hospital support characteristics, such as breastfeeding support from hospital delivery nurses, lactation specialist or peer counselor, or receipt of free formula packets in the hospital, have also been described as important influences on women’s breastfeeding decisions.

The above list provides a much richer picture of women’s circumstances around the practice of breastfeeding. Still, while Kedrowski and Lipscomb (2007) list some barriers, they do not return to the notion of breastfeeding as something a woman has the right *not* to do, instead promoting breastfeeding as the right *choice*. This means that even in sympathetic scholarly analyses of barriers to breastfeeding, responsible reproduction and citizenship entails individual women making the right choice (singular) for their own health and the health of their children. In their in-depth media content analysis, Kedrowski and Lipscomb (2007) find that mainstream US society generally supports breastfeeding and that the media covers breastfeeding in a positive light, but that coverage is not even among target populations. For example, their small sample of

black women's magazines (*Jet*, *Essence*, and *Ebony*) contained remarkably less coverage of breastfeeding compared to publications targeted at white women. The authors also noted that these articles focused more on scientific "evidence" for breastfeeding than on mothers' accounts, and that the pieces were persuasive with "no mixed messages," urging black women to breastfeed. This trend departs from the strategy of the It's Only Natural campaign, which focused more on personal anecdote and dispelling "myths." Kedrowsky and Lipscomb also point out that none of the articles in publications targeting black women mentioned La Leche League—unsurprising given LLL's white Catholic middle-class biases and the fact that the League has only recently included women who "return to work"—but it is telling of the unevenness of breastfeeding advocacy¹⁴⁸ and support that honours women's testimony. Kedrowsky and Lipscomb (2008) treat the racialization of breastfeeding rights as a peripheral finding, but for our ongoing question of who can be responsabilized, thinking about how black women might be presumed less knowledgeable about responsible motherhood by public health authorities certainly signals a chasm between who is seen as having the tools and needing encouragement to breastfeed, and who is seen as already failing. Here black women are seen as vessels for expert advice; they are presumed already irresponsible citizens who require irrefutable facts to incite them to make the responsible "choice."

Kedrowski and Lipscomb (2007) conclude that,

¹⁴⁸ The authors (2008, 60) do mention that stories targeting "elite and male" audiences, as in the *New York Times*, recall predominantly expert testimony, but while Kedrowski and Lipscomb show clear concern for the media and the medical profession's disregard for women's lived experience, though they do not challenge what they see as the "truthfulness" of medical expert testimony. The authors focus their argument on what they see as paradoxical advice. They claim that the newsmedia's tendency to exclude women's daily realities enforces the idea that, "we want you to do it, but we don't want to see it" (2008, 61).

Women who conform to the media's norm of "good mothers"—well-educated, white, middle-class mothers, not employed outside the home—have fewer difficulties with the contradictory social expectations to breastfeed, but to do so in private. It is deviant mothers—the nonwhite, the ill, the polluted, the employed, and those who venture into shopping malls and restaurants—who encounter difficulties. The normalization of breastfeeding as constitutive of good mothering runs the risk of stigmatizing those mothers who may not be able to breastfeed or who reasonably choose not to breastfeed. Given the success of conservative law makers in using the "unfit mother" as a rhetorical device in the pursuit of policies, this normalizations, whatever its benefits, is not cost free (2008, 61).

I quote this entire passage above because it gives an example of critique that considers breastfeeding promotion a state-sponsored biopolitical technique that stratifies women by race, class, and ability, while at the same time, its foundational choice rhetoric folds the right to breastfeed into the duty of the good mother by failing to sufficiently address the non-biological or cultural reasons that influence infant feeding—reasons like inability to breastfeed, desire to be unencumbered by infants for women's own autonomy and subjectivity, trauma histories, geographical separation, lack of time, lack of money, unfriendly public spaces, and lack of public space to breastfeed. In this sense, their reproductive rights framework falls short and is common to white feminist approaches to women's autonomy (Smith 2005). For example, there are myriad reasons a woman might not become pregnant or sustain a pregnancy; the same is true of breastfeeding. There is synchronicity between anti-abortion movements and pro-breastfeeding ones that both reduce women to baby carriers or vessels. Criticism of reproductive rights approaches by postcolonial and transnational feminists argue instead for the pursuit of reproductive *justice* (Smith 2005), which I would extend to practices of infant feeding and care.¹⁴⁹ In the case of infant feeding, fighting for the life and self-determination of marginalized

¹⁴⁹ Smith (2005, 119) argues that the reproductive rights model "reifies and masks the structures of white supremacy and capitalism that undergird the reproductive choice that women make." She calls for women

communities would take centre stage from medicalized reports of “optimal” practices, but this is far from standard in the literature.

Moving beyond rights discourse, Nathoo and Ostry (2009), in their historical study of breastfeeding policy and politics in Canada, argue that current discussions of breastfeeding show only superficial awareness of the major social and cultural institutions informing our current ideas and beliefs about infant feeding. The Canadian government’s treatment of breastfeeding as the cornerstone of good motherhood is not only building on the nationalist roots in eugenics or race-purity movements of state-sponsored breastfeeding promotion. It also falls in line with current trends in Canadian health policy that place responsibility for social problems and health care costs on individuals, usually people of colour, people with disabilities, people living in poverty and queer people, and usually on the basis of science (Nathoo and Ostry 2009). As an ideology of individualism affects health care policy, the correlation between health and morality depicted in public health campaigns has become part of our common sense. As a result, criticizing what is seen as “health promotion” is met with intense backlash from scientists and breastfeeding mothers alike.

Feminist author Jessica Valenti (2012) makes a similar argument in her recent critical memoir *Why Have Kids?* where she details her medicalized experience in a maternity ward to show how incompatible US mothering ideals are with the material realities of women’s lives. Valenti revives Wolf’s (2010) critique of breastfeeding science and “total motherhood” as she describes her guilt, shame, and eventual breakdown—what we can think of as subscribing to the affect of

of colour activists to “develop alternative paradigms for articulating reproductive justice that make critiques of capitalism and criminalization central to the analysis.”

coming undone—after not being able to breastfeed her daughter, a guilt that managed to puncture her feminist consciousness even though she was familiar with Wolf’s critique. Valenti directly ties her sense of bodily discipline to one of societal and moral responsibility as she articulates feeling a three-pronged cultural pressure on mothers to do parenting “for the country,” (48) “for the children,” (50) and “for yourself” (53). Contrary to depictions valorizing the juggling mothers of Chapter 2, Valenti argues that contemporary media messaging around parenting is that if women do not fulfill this, their “natural role” as mothers first, they are doing a disservice to everyone.

Critical scholarly intervention to the issue of breastfeeding promotion acknowledges that women are unsupported to take on this labour. Most recently, sociologist Phyllis Rippeyoung (2014) and Watson and Mason (2015) criticized the way in which breastfeeding promotion as a “silver bullet” solution to global poverty positions infant rights as more valid than women’s rights. This approach echoes reproductive justice scholars who illustrate how consideration for fetal rights comes to overpower women’s bodily autonomy. There are many parallels between reproductive justice debates and breastfeeding promotion debates, and thinking about breastfeeding as reproductive justice brings some clarity to how the practice of infant feeding is understood. These parallels hinge on the liberal notion of choice as it collides with the feminist standpoint discourse of bodily autonomy (see Homanen 2014), vocabulary that echoes disability literature on care (Kelly 2013). This exaltation of choice rhetoric may be interpreted as a response to the demands of consumer capitalism, but it is complicated by women’s desire for control over their own bodies. Rikka Homanen, a researcher of maternal-fetal relations at the University of Tampere, Finland, is working to develop a schema for addressing the complications of choice

rhetoric. Examining the “medical ethical principles of informed choice, autonomy and beneficence” in the care practices of Finnish maternity healthcare, she argues that nurses “remake the institutional demand for choice and autonomy” in ways that risk moralizing, or at least normalizing, particular forms of maternal care over others (2014). Homanen suggests that in order to support pregnant women’s experience-based knowledge and improve maternal care relations, practitioners must acknowledge women’s lives as constantly in a state of flux, and their care decisions emerging from a dynamic process of coming to know their experiences over the course of their pregnancy. If women continue to be positioned as the static recipients of care options, this market model of choice will ultimately fail women’s care needs, because care practices like breastfeeding are just that: practices that are performed in elaborate contexts, not items for one-time purchase. Homanen’s critique echoes Tronto’s (2013) critique of contemporary citizenship, where citizens are “investors” rather than carers, family members, or providers, with implications for how we imagine women’s bodies and functions in relation to their productivity and corresponding worth.

Recall Christine Kelly’s (2013) work on disability and care in Chapter 1 where she defines care as a paradox, and care as tension: a “highly intimate relationship; an institutionalized approach to disability; a transnational supply and demand of feminized labor; a dependency on state-funded programs...” Bringing forward this critical disability lens to consider breastfeeding as tension, it is clear that the contemporary political framing of women’s responsibility to breastfeed is unbalanced and uneven, and imbues a narrow social position with the potential for responsible reproduction. Robinson’s work on resituating maternalist feminist perspectives as feminist political theory is also insightful in the context of breastfeeding promotion, since it gives insight

into the discursive construction of women's bodies, infant and maternal health, and women's labour. And following Tronto's (2013) demand that we think about care in its "broadest and most public form, as a way in which society allocates responsibilities," state-sponsored breastfeeding promotion indicates that responsibility for care is far from the centre of democratic political agendas, though incentivizing women to "take care" through the particular act of breastfeeding is highly valued. With Homanen's (2014) call to move between choice rhetoric and women's decisions for bodily autonomy, these critiques of gendered care work and citizenship compel us to think about how supporting women through reproductive labour is not antithetical to a feminist citizenship theory of increasing women's access to political citizenship. In other words, advocating for provisions for women to breastfeed does not automatically imply their lack of access to the public sphere and political participation as it is traditionally viewed. Rather, staking out these provisions based on the essential needs of reproductive labour is part of supporting their access to power. Examining how women are responsabilized to breastfeed through state-sponsored campaigns shows how breastfeeding advocacy and advocacy for women's representation in the public sphere work best in tandem. Homanen's call, which echoes Robinson's (2013), for honouring the dynamic, experienced-based knowledge of maternal bodies, unsticks both the Wollestonecraft dilemma and debates over (consumer) "choice" versus bodily autonomy when it comes to reproductive labour. Canadian sociologist Phyllis Rippeyoung (2014), in her nuanced critique of breastfeeding promotion, invokes Fiona Robinson (2011) and Joan Tronto (1993) on an ethic of care and citizenship to argue for an extension of the "ethic of care" to what she terms a "politics of humility," where the "one best way" to feed an infant is neither achievable nor desired. Since the debate over breastfeeding and bottle-feeding is often described as at a stalemate, Rippeyoung (2014) suggests we might question the point of finding

the answer, step outside of this either-or debate, and listen to what women have to say about the challenges of infant feeding. Perhaps then we can shift our scholarly focus to who is targeted and excluded from state-sponsored promotion and legal mandates, and how access to political power is stratified along lines of ability, race, gender, class, sexuality, family status, and migrant status.

We see hints of what we could call this *humility ethic*—this generous view of women’s care and citizenship needs that foregoes judgment of their individual behaviours—in current media. In response to Erik Assadourian’s piece on banning infant formula, Emily Maclean (2014), a student midwife at King’s College London, calls for a calling off of the either-or debate and the promotion of “informed choice.”

Breastfeeding seems to polarise us into a particularly nasty kind of mud-slinging rarely seen in child-rearing circles. We live in a rights-based age that generally respects a woman's discretion to decide what she eats during pregnancy, where to give birth, and whether to shave her armpits before she does. Yet when it comes to feeding her baby, there seems less room for manoeuvre. The merits of natural suckling have been evidenced in countless clinical trials. It helps protect infants from infection and other diseases, and reduces mums' chances of developing illnesses including some cancers. Breastfeeding can save up to £45 a month in formula milk shopping, delay menstruation and burn 500 calories a day, allowing women to shed unwanted baby weight. Indeed, if life existed in a textbook, it would be nonsense to argue for any alternative. But here we are in the real world. And here, the suggestion that formula "has no place" in a sustainable future simply won't wash.

I quote the above passage in its entirety to both question Maclean’s optimism around the “discretion” women experience around their bodies when it comes to cultural norms, but also to elucidate how breastfeeding is both part of cultural expectations of women’s unpaid labour as well as just that: *women’s* labour—giving way to a framework for autonomy and generating discussion over how gendered citizenship provisions might be reformulated in between the sides of the Wollstonecraft dilemma: whether to advocate for women’s rights based on their similarities with or essential differences from men.

Maclean's (2014) reference to the "real world" is helpful, and can be put in conversation with Wolf's (2010) risk analysis—that in the real world, children who grow up in urban centres have a higher likelihood of developing asthma, yet we do not expect children to be banned from cities, for example. Yet when considering the possibility that breastfeeding may be related to reduced risk of asthma, it is worth state-sponsorship to persuade women in this direction. As contemporary breastfeeding manuals frighteningly echo the eugenic-laden mothering advice literature of the interwar period in both Canada and the United States, feminist authors must take on breastfeeding "experts"—that is to say, not the scientists or mothers themselves, but politicians and other advocates, including scholars—and challenge their ideological premises based on advocating for increased access to power *during* reproductive labour, which does not mean *through* reproductive labour.

State-sponsored breastfeeding campaigns, when compared to scientific findings on the value of breastfeeding over formula feeding, conform to a longstanding tradition of the state policing women's bodies as a form of controlling the body politic. Under the neoliberal aim of a healthy nation measured in individual fitness, responsibility, and productivity, politicians, scholars, medical professionals, and unlikely activists look to scientific evidence for the benefits of breastfeeding to enforce a message about the best way to mother. To the extent that *not* breastfeeding invalidates the gendered foundation of citizenship obligations to the body politic, the current cultural fixation on breastfeeding testifies to an historical sentiment, "for the good of the baby," "for the good of the nation." We can see this marked preoccupation with

breastfeeding as a tenet of “risk culture,”¹⁵⁰ concerned with the reproduction of babies whose mothers already belong to the national imaginary (see Thobani 2007).

Conclusion: Women’s unpaid labour and risk discourse

This chapter situated women’s contemporary responsibility to an intimate, embodied, and unique form of care work (according to new, empirical measures and “best practices”) in the broader context of health citizenship, where women, whose presumed naiveté or ignorance is viewed as impeding broader social health, are disproportionately shouldering the responsibilities of the state for population health. Because breastfeeding is paid such a premium for mitigating risk, the individual care labour comes to decipher responsible and knowledgeable from irresponsible and ignorant reproductive labour. As Blum (2000, 3) puts it, breastfeeding has become the “measure of the mother,” and as Stephanie Knaak (2010) argues, breastfeeding promotion in the arena of public health is not a “benign communiqué about the relative benefits of breastfeeding, but an ideologically infused, moral discourse about what it means to be a ‘good mother’ in an advanced capitalist society” (345). The moral mother is one who knows to avoid risk by avoiding formula milk (Lee 2008).

Wolf’s (2010) work in the United States, Nathoo and Ostry’s (2009) work in Canada, and Faircloth’s (2013) work in the United Kingdom and France are about women’s constrained choices, and the ways in which state-sponsored breastfeeding promotion serves to discipline women’s bodies toward particular care labour to mitigate risk. Wolf asks, “why, when the science is not compelling, have so many experts and the public come to be persuaded of a breastfeeding imperative?” (2010, 147) She ultimately argues that, “questioning breastfeeding

¹⁵⁰ See Wolf (2010).

science is an integral part of any feminist engagement that seeks to demonstrate how choices are enabled and constrained by gender” (2010, 147). Bridging this detailed critique of how breastfeeding sits at the intersection of science, health and responsibility and therefore presumes maternal responsibility to unpaid care, this chapter has threaded the three-sided argument that 1) scientific evidence of the benefits of breastfeeding are disproportionate to and misrepresented in state-sponsored promotion; 2) state-sponsored breastfeeding promotion is incoherent with (lack of) state support for breastfeeding, and, 3) given that women of colour, poor women, and women with disabilities breastfeed at lower rates than white, middle-class women, that these women are more tied to the labour force and disproportionately perform precarious labour, *and* that white women and black women (in the examples we have seen) are disparately targeted and differently receptive to breastfeeding promotion, the absence of universal state provision for the reproductive labour of minority women is telling of a cleavage of deserving and undeserving citizenship by race and class. The implications of this are, as I outlined earlier in Chapter 1, still encoded in contemporary welfare provisions vis-à-vis social assistance, disability support, maternity leave, and unemployment insurance. In this sense, breastfeeding is conceived both as the individual woman’s choice and as the only path to responsible reproduction. This coercive responsabilizing, a standard feature of biopolitics and “healthism”¹⁵¹ (Crawford 1980; Foucault 1976; Rose 1999; Skrabanek 1994), divides mothers by their infant feeding practices.

If public health was truly the government’s main priority, we might expect to see the focus shift from universal and moralizing promotion to targeted, material support, and even, as Wolf (2010), Law (2000), and Rippeyoung (2014) have suggested, a different kind of risk analysis when it

¹⁵¹ Referring to the neoliberal ideological tying of responsibility for health and disease to the choices of the individual. Critically, healthism is seen to justify forms of segregation and eugenic control (Skrabanek 1994).

comes to infant and child health. This is not to argue for expanded and targeted promotion, but simply to suggest that current promotional strategies reveal much about state priorities as well as one of the ways in which women's bodies are disciplined in relation to unpaid care. Returning to the central thesis of Pam Carter's (1995) oral history, we might further interpret who is not targeted¹⁵² by new state-sponsored promotion in the United States and Canada.

This chapter served to track the game of Telephone back to its original message by highlighting how confounding variables like poverty, disability, racialized access to health outcomes, and legacies of colonialism and slavery are erased in breastfeeding recommendations. Not only are racialized stratifications implied by the ghettoization of poverty when it comes to accessing health care and secure food and housing (see Neuman and Celano 2012), labour precariousness is also stratified by race and migration status, and with no guaranteed universal parental leave subsidy, women who work in precarious labour are unlikely to find breastfeeding a common-sense "choice." Although the moral, patriotic, and eugenic language of breastfeeding advice has softened in some ways¹⁵³ and the key promoters of breastfeeding have varied over time—from individual politicians, feminist activists, scholars, and healthcare workers to the World Health

¹⁵² In terms of who is targeted by state-sponsored health promotion, epidemiological studies show that health information and participation in health promotion and disease prevention activities are by far not the only determinants of health, though these are often the most stated (Richardson and Norris 2010). Empirical research supports the association between access to safe housing, nutritious foods, free exercise space, social support, and quality health care, as well as freedom from violence, and an individual's health (Richardson and Norris 2010). In Canada and the United States, unequal access to these determinants of health result in racial and ethnic disparities in health. Governments, especially like the Harper Conservatives in Canada and the small-government GOP proposals in the United States that promote health and disease prevention without advocating public health insurance or sustainable housing, for example, are hypocritical, and we should question their motives. They are directly reinforcing the stratification of health and vitality along racial lines, demonstrating whose bodies are valued, and whose bodies are seen as less important to a sustainable nation.

¹⁵³ Eugenics rhetoric may be subtler now, but it is still apparent. See, for example, "Our Health, Our Future: A National Dialogue on Healthy Weights Dialogue Report," an individualist government campaign for combating childhood obesity (retrievable from <http://www.phac-aspc.gc.ca/>).

Organization—the “hardware” of breastfeeding promotion repeatedly casts breastfeeding as the best option using the language of competition and hierarchy like “higher performance,” and neoliberal health citizenship frames like “growth outcomes” and “reduced risk.” This promotion operates politically and morally when it comes to prescriptions of infant feeding that fall to women’s citizenship responsibilities, especially when mothers are living in precarious circumstances to begin with. As we will see in the next chapter on mothers’ affective citizenship, insofar as breastfeeding connects the corporeal body¹⁵⁴ to the cultural body through fear and threat of future regret, it serves as a technique of responsabilization that implicates individual mothers’ infant feeding practices in their pursuit of the good life.

¹⁵⁴ As Blum (2000, 4) explains, the contemporary “maternalist model resists separating the embodied process—the mother with baby at the breast—from its product, human milk.” In this vein, the breastfeeding mother is exalted above even the breast-pumping mother, as the pumping mother is masculinized, using a technological crutch to perform in a traditionally male sphere.

Chapter 5: Women's Affective Citizenship: Promises of Wellness, Threats of Regret

As we have seen in the preceding chapters, mothers have long been understood as objects of state action intended to reproduce a healthy society (Albanese 2006, Finkel 2006, Lister 1997, Yuval-Davis 1999) and women's responsibilities to social reproduction are well documented in feminist research (Kanaaneh 2002; McClintock 1995; Robinson 2011, 2013; Tronto 1997; Vosko 2010; Yuval-Davis 1997). We have also seen how mothers and pregnant women are uniquely responsabilized to cure social ills beyond their control through their individual behaviours, including solving problems of infant mortality and "obesity" through breastfeeding (Nathoo and Ostry 2009, Parker 2014). In this final substantive chapter, I map a particular conversation in popular editorial about the emotional toils of women's multiple labours in order to draw out cultural messages that specifically target women's responsibility to navigate competing citizenship responsibilities. This chapter brings my foundational interest in the messages of Sheryl Sandberg's individualist and corporate-friendly brand of "executive feminism" full circle in a popular editorial depiction of the affect of motherhood, or women's affective citizenship, with the necessary help of affect theory.

Popular representations of the "average mother" from Chapter 2 suggest that while women may experience conflict between their paid and unpaid responsibilities, *some* women are nonetheless

reasonably “happy” to juggle their commitments. The juggling mother who manages a smile as she resists coming undone is the exalted mother citizen—the law-abiding, responsible, stable, and committed subject (see Thobani 2007). She pursues responsibilities to paid labour according to the myth of the adult worker, and she performs unpaid care labour for the good of her children. Her responsibility is not just to paid or unpaid work, but to flexibility and resilience (see Martin 1994, Jackson 2014), and while these traits are neoliberal ideals in general (Harvey 1990, Heymann 2000, McRuer 2007, Tronto 2003), we can see how the neoliberal ideals of flexibility and resilience pertain disproportionately to mothers who must take on unfair burdens of low-status work, including unpaid care work, all the while resisting other forms of oppression like domestic violence (Jackson 2014). Navigating conflicting labours and insecure conditions is her responsibility to citizenship, and ability to perform this juggling intersects with class, race, body, size, and sexuality. Chapter 3 illustrated another way women are socially responsabilized: through biomedical research in inciting women to provide an intimate form of care work, specifically breastfeeding. This research gave scant consideration of women’s bodily autonomy, ability, desire, the contexts of their lives, or the political implications of presenting decontextualized research findings. It showed how women’s citizenship responsibilities are laced with empirical research on infant health, though we are meant to view the implications for women’s bodies as apolitical. Adding nuance to the juggling mother figure of Chapter 2, in Chapter 3 I argued that women’s juggling becomes peripheral to the discussion when it comes to providing particular (unpaid) care labours like breastfeeding. In fact women’s bodies disappear from view in discussion of their own breast milk. And Chapter 4 showed how the state imparts contemporary women’s citizenship responsibilities outside of explicit welfare legislation through what I called “maternal bootstrapping”: through widespread state-sponsored breastfeeding

promotion campaigns that moralize the unpaid labour of breastfeeding, without guaranteeing provision (through universal maternity leave or other wages) for this labour. Chapter 4 situated women's contemporary responsibility to an intimate, embodied, and unique form of care work (according to new, empirical measures and "best practices") in the broader context of health citizenship, where women, whose presumed naiveté or ignorance is viewed as impeding broader social health, are disproportionately shouldering the responsibilities of the state for population health. So even though most women with young children are tied to paid labour, responsibility to care implicitly takes priority when it comes to the unique practice of breastfeeding. Women's paid and unpaid labours are rarely represented at all in breastfeeding promotion, making their responsibility to juggling labours and to breastfeeding incoherent. Here, the empirical site of editorial discussion of the emotional toils of women's juggling—and expectations of their responsible reproduction—presents another avenue through which women receive cultural messages about their competing citizenship responsibilities. While this particular popular discussion of the emotional burden of responsible reproduction pertains to a small subset of women and targets a narrow audience, which I will elaborate, it reveals the emotional labours expected of women at the height of privilege, with serious implications for women with less affluence, and less race and bodily privilege.

In this chapter, my analysis of how women's feelings are represented in relation to their fertility responsibilities permits us to consider the affective terrain in the field of citizenship theory. Here the concepts of "women's affective citizenship," the "undone mother," and "responsible reproduction" are given full cogitation using affect theory. I will show that popular editorial representation of the emotional inheritance of responsible reproduction fits well within what

affect theorists have been arguing are the gendered, racialized, classed, sexualized, and bodied inheritance of neoliberal capitalism and its precariousness (Ahmed 2010, 2012; Berlant 2007, 2010; Cvetkovich 2012). To situate the popular story of women's emotional burden of responsible reproduction theoretically and present its meaning for feminist citizenship, this chapter proceeds as follows: First I elaborate the way affect theorists have conceptualized the gendered responsibility to good feelings. I focus on the notions of the "promise of happiness," "happiness objects," (Ahmed 2010), "cruel optimism," (Berlant 2010), "reproductive futurism" (Edelman 2004), and "public feelings" (Cvetkovich 2003), as these ideas directly question heteronormative and gendered responsibilities to human and social reproduction, and the feelings generated by bodies who refuse to be dedicated to securing a normatively healthy future. I then move on to give necessary context for the popular editorial discussion of women's emotional labours by presenting US fertility data from 2000. This data and its mainstream interpretation marked a shift in the discourse around women's labour duties and experiences on both sides of the border that continues in contemporary discussions, though the context for the discussion has changed. The 2000 US census fuelled popular editorial discussion in Canada and the United States, whose fertility rates are similarly below replacement.¹⁵⁵ Next, I thread several editorial essays and books that together form a conversation about women's labours and their affective citizenship from then to now. The editorial pieces that I analyze were chosen based on their repeated appearance in the media content search at the outset of this dissertation, and by the way in which they referenced and built directly on each other, forming an intelligible conversation for unpacking. In doing so, I give a sense of how contemporary mothers—especially "executive feminist" mothers—are imagined to navigate their reproductive and paid labours in this

¹⁵⁵As of 2012, the Canadian fertility rate was 1.61 births per woman compared to the US rate of 1.88 births per woman, which have both prompted popular concern around replacement and aging populations.

discourse. These pieces, by popular journalists and scholars, coined ideas like the “opt-out revolution” (Belkin 2003), the “perfect madness” of motherhood (Warner 2005), and the “end of men” (Rosin 2010), which variously seek to explain women’s feelings about their putatively newfangled responsibilities to citizenship in contemporary conditions. To assist in unpacking this nuanced and at times incoherent conversation about what women should do to navigate their competing labours and secure good feelings, I apply theories of affect to social psychology findings on the relationship between women’s reported wellbeing and childbearing. I conclude by considering the dialectical relationship between women’s responsibilities in popular editorial and social psychology literature in the context of queer theories of affect advanced by Ahmed (2010, 2012), Berlant (2004, 2010), Cvetkovich (2012), as well as Halberstam (2011) and Puar (2007) on the temporal qualifications of feelings, and suggest what a theory of the affect of motherhood—specifically its futurist orientation to the wellbeing of others—has to offer theories of feminist citizenship and gendered labour (Lister 2003, Tronto 2013).

In the introduction to this dissertation, I discussed the affect of motherhood in two ways: in terms of the feelings circulating within and between women as a result of their multifarious labour burdens, and in terms of the specific affective labours that women are encouraged or expected to take on for responsible reproduction. Building on the affect of motherhood developed in the chapters so far, here I unfold a three-part argument for feminist theories of citizenship: 1) that women are responsibilized to cure the social ill of bad feelings—like anxiety and depression—by generating good feelings through their responsible reproduction, 2) that the cultural expectation on women to juggle or balance—by becoming agile or flexible—is a form of affective labour that is disciplinary, and divides women into “deserving” or “undeserving” mothers based on this

ability, and 3) that women are responsabilized toward unpaid reproductive labour vis-à-vis messages that link their reproduction to their future happiness and ability to generate happiness in others, burdening women with invisible unpaid work that becomes frightening to resist. Ultimately, in tracking the affect of motherhood, this chapter maps the subject position of the “undone mother” that we have seen so far—the woman whose cruelly optimistic relationship, to use Berlant’s (2007) phrase (which I further unpack below), to the unwinnable “good life” for herself and her family is revealing itself to be impossible. Because mothers are encouraged to be optimistic about their children’s future health, they come undone at the realization that it is out of their control. That is, the ways in which mothers are induced to hope and strive toward wellbeing and security for their families is cruel because it is unattainable, making their relationship to their reproductive labour stressful, ambivalent, and ultimately depressing. It is also cruel because the more they try to attain it, the busier they become, and the more money they spend, thus moving their goal of happiness with their families even further away. This is the affect of motherhood, which can be helpfully appropriated using the language of citizenship to proffer what I am calling “women’s affective citizenship.”

Affect Theory

Women’s affective citizenship: Leaning in to good feelings

Growing public interest in measures of wellbeing and popular media preoccupation with what leads to physical, emotional, and spiritual wellness, are part of what Sara Ahmed (2010) has termed the “happiness turn.” Ahmed explains that the proliferation of books and courses containing self-help discourses and therapeutic cultures, particularly since 2005, has formed a “happiness industry” where “happiness is both produced and consumed through these books,

accumulating value as a form of capital” (2010, 3). The happiness turn is also seen in changing governance frameworks, as governments report turning to wellbeing indices as assets and goals to supplement, or in some cases supplant, the Gross Domestic Product (GDP) (Ahmed 2010, Kemp 2012). Ahmed is suspicious of this shift toward measuring happiness. In her chapter, “Happy Futures,” Ahmed explains that the quest for happiness is a futurist orientation, as “to pin hopes on the future is to imagine happiness as what lies ahead for us” (2010, 160). It has become a moral guideline for how to live well, with negative consequences for individuals who seem disinclined to reach their potential happy life. It is this futurist and individualist orientation of happiness that pertains well to feminist theories of citizenship. Specifically, individual intentions toward happiness parallel how mothers are incited to secure the future wellbeing of their children through their individual behaviours. As we have seen in the chapters so far, mothers whose individual behaviours are judged as not providing their children the best possible opportunities for future health and wellbeing are viewed as ignorant or naïve. Or, if their devotion to paid labour suffers as a result of their care responsibilities, mothers risk being seen as undeserving of participation in paid labour. Thinking about how the incitement to happiness disproportionately falls on maternal bodies in particular, with potentially negative consequences, is worthwhile when considering their multiple competing responsibilities to citizenship.

One of Ahmed’s most useful contributions in her 2010 book *The Promise of Happiness* is her notion of “happiness objects,” to which I first made reference in the Introduction. Happiness objects are culturally sanctioned assets or goals that inscribe the correct way to pursue good feelings and a good life. These “objects” might refer to normative values like marriage or the family, and they come to represent the good, moral life. As Ahmed, citing Seligman, notes,

citizens now have “guideposts” for the “good life,” which for Ahmed means the pleasures and sense of gratification promised at the end of a path of striving. The good life might be elusive in that it is always out of reach, but literature in the happiness turn insists that we have indicators of wellness for which to strive. While of course mothers may resist the messages they hear in popular culture that point to guideposts for happy mothers and happy families, and different mothers hear different messages and see different paths to be sure, the good life is always still out of reach. For example, the confluence of conditions resulting from neoliberal welfare policies, general economic instability, and the gendered labour contract that designates unfair burdens of paid and unpaid labour to men and women (Vosko 2010), guarantees that there is no respite from pursuit of *some* version of the good life. Even in the recognition of frenzied pressure toward happiness in the happiness turn, families are insecure and thus they must keep striving for their own wellbeing. Ahmed’s happiness objects also pertain to feminist citizenship as they are couched in choice rhetoric. As Ahmed notes, ideals of “freedom” (to make “choices”) and happiness are commonly linked, so making a “choice” is in fact a happiness object itself. There is evidence of this ideal throughout the happiness industry, as consumers (or citizens) are instructed to make particular choices to guarantee their future happiness. For example, a 2009 cover article in *Psychology Today* asks, “Has the happiness frenzy of the past few years left you sad and anxious? Herein we report the surest ways to find well-being” (Flora 2009). The article includes no surprises as it lists various guideposts for the good life: acting toward goals, confronting negative feelings, practicing mindfulness, living your values, and, in a strangely material twist, having enough money to live comfortably. True to the pattern of the promotional campaigns and the biomedical data we saw in Chapters 3 and 4, happiness objects are offered as simple tasks proven by scientific experiment, without questioning, for example, that “having

enough money” might not be a matter of individual choice. In this literature, if income is a happiness object, we should be able to pursue it. Like the way women who do not breastfeed are deemed ignorant or unskilled, if you do not have an income, or if said income does not measure up to known happiness cutoffs, it must be a result of your personal failing, or perhaps even your personal stubbornness. Labour, even employment, is something that individuals do or get, not something that is structurally determined.

Another of Ahmed’s key tenets from the *Promise of Happiness* that is helpful for a feminist theory of citizenship and labour is the relationship between happiness and productivity. Happiness, she explains, is an individual responsibility and a life project, as well as an instrument for achieving greater happiness: “a way of maximizing your potential of getting what you want, as well as being what you want to get” (2010, 10). If happy people are more optimistic, altruistic, adaptable to change, and physically and mentally healthy, as social psychology studies find (see Ahmed 2010), it follows from a capitalist perspective that happy people are better workers. Not surprisingly, reported happiness intersects with markers of affluence and privilege, or as Ahmed says, “the face of happiness...looks rather like the face of privilege” (2010, 11). For example, happy people are typically: found in wealthy countries, married and have healthy social networks, part of “majority groups,” mentally and physically healthy, and experiencing control of their lives (Veenhoven 1991 as cited in Ahmed 2010). Thinking about happiness as an asset, then, for investor-citizens (recall the discussion about homes as investments in Chapter 1 where Tronto [2013] frames individual citizens as investors rather than carers or family members), it follows that workplaces would not favour mothers’ “coming undone” with feelings of anxiety or depression when pursuing their responsibility to

juggle competing labour burdens. Put another way, mothers who come undone with bad feelings, or simply mothers who “take care” at home, are understood by employers and the state more broadly as liabilities to capitalist productivity. As I first mentioned in Chapter 1, the invisible labour of managing feelings of coming undone partly characterizes the affect of motherhood. As we saw again in Chapter 4, the invisible emotional labour of striving to secure a sense of “calm” or “wellbeing” in oneself and one’s children through the act of breastfeeding is not presented as a burden or a labour at all, but merely a common-sense desire, and thus a responsibility of maternal citizenship.

Thinking back to my introduction where I first mentioned that maternity leave in Canada is included under employment insurance for disability, women workers who leave paid employment for maternity leave are viewed as temporarily acquiring a legitimate disability that prohibits them from working. To overcome the stigma of hindering workplace productivity, they are framed as requiring and deserving “accommodation,” which, from a critical disability perspective, puts women’s maternal bodies as irreconcilable with productivity and the “normal” capitalist worker in ways that relegate differently abled bodies to the margins of society. By comparison, workers who are unhappy and thus might also threaten workplace productivity are also stigmatized, and this stigma applies most severely to racialized women who, in a white supremacist culture, are more likely to be viewed as angry or unpleasant (Ahmed 2010). So mothers, especially mothers with less access to power and privilege, are encouraged to keep private their emotional “coming undone” with feelings of stress or depression. I suggest that this extra energy required to be viewed as a deserving and responsible worker might be seen as an

added citizenship responsibility in itself. Responsibility to juggling includes responsibility to maintaining good feelings while overburdened.

As I reference above, Ahmed's theory of happiness rests on the logic that happiness is the pursuit of something that is always out of reach. It is never something that exists in the present, but something that we are pursuing; even the happiness experienced through nostalgia is past-oriented, leaving the present to be filled with other feelings like anxiety or anticipation. This idea is consistently echoed in popular editorial work on women's fertility, childbearing "choices," and work-life balance maneuvers, which I will soon demonstrate in this chapter. In her chapter "Happy Futures," Ahmed briefly addresses how the pursuit of happiness intersects with maternity and cultural expectations around reproduction. Citing Edelman's (2004) *No Future: Queer Theory and the Death Drive*, she explains how negativity comes to characterize or stigmatize bodies that cannot or will not "inherit the future" through reproduction and the pursuit of (or investment in) future happiness. If women are promised future happiness by having children (at the "right" time under the "right" circumstances), then women who are seen as failing or refusing to reproduce, or mothers who fail at self-care or fail to generate happiness for their children, are in some ways akin to the stigmatized queer or disabled body: queer to this ideal of a neoliberal futurism, thus rendered "unthinkable, irresponsible, inhumane" (Edelman 2004, 4). As popular editorial discussion of women's labour "choices" makes clear, to pursue career ambition at the expense of having children, or to increase maternity and infant risks by "delaying" childbearing, equates to a "refusal to be optimistic about the 'right things' in the right kind of way" (Ahmed 2010, 162). In "Happy Futures," Ahmed goes on to analyze the film *Children of Men*, from which she gathers that if we are not seen as concerned enough about the

future survival of the species, we are seen as stubbornly against it. I would add that women are expected to be concerned about the future of the species through their reproductive labour and not, for example, by campaigning against climate change by boycotting corporate power, or by protesting government inaction on matters of social justice. The right way to invest in the future is through intending toward and identifying with responsible reproduction. Reproductive futurism, which Edelman rightly rejects as homophobic, pins women's belongingness to their fertility, or at least to their family ambitions. Of course this responsibility and corresponding belongingness is unevenly distributed, as the neoliberal ideal of self-sufficient, self-caring nuclear families prefers the reproduction of productive, unencumbered, flexible, agile citizens. It is ableist, heterosexist, and racist, as this myth of the unencumbered individual applies most to the powerful, white, able-bodied cis-man. Folks who require care, provision, or "accommodation" for any reason, including reasons of structural discrimination, hinder productivity and are deemed less valuable. Especially in a climate of precariousness and risk (see Wolf 2011, Villalobos 2014), women's responsibility is to reproduction in the "right circumstances."

Another of Ahmed's (2004) useful concepts for feminist citizenship comes from *The Cultural Politics of Emotion*. There, Ahmed (2004) first presents the futurist orientation toward an ideal "object" (which, like a happiness object, might be a process, status, feeling, or belief) by returning to the psychoanalytic notion of *love* as both *intention* and *identification*. Intention as in something one destines toward, and identification as in something one associates or feels at one with. Both of these concepts are useful when assessing women's unique responsibility to be hopeful and optimistic about the future wellbeing and happiness of their families. In the

psychoanalytic context of yearning toward an object (“intention”) and relating to an object (“identification”), women’s responsibility is judged according to its aspirational and socially binding qualities. In other words, responsible reproduction involves the intention toward an ideal object (coupling or better yet marriage, childbearing, care work, family self-containment), but also as identification; intending toward a happy future through reproduction in particular identifies bodies as “stuck” together in this joint pursuit, requiring others to fail by refusing or being unable to partake in the common venture. Responsible reproduction creates an in-crowd of those whose aspirations and identities align in common pursuit. In citizenship terms, responsible reproduction designates belongingness and deservingness. Those it excludes sustain it: those who do not aspire and those who fail to reproduce responsibly. The “welfare queen” (Hancock 2004), for example, who is constructed as sucking dry the coffers of the state due to some fault inherent to her race and culture, serves as a foil whose failure exalts the mothers who pursue the good life the “right” way. Through racist, classist, and misogynist tropes like this, women receive messages to pursue responsible reproduction for social inclusion, and mothers come to understand their primary responsibility to secure the future wellbeing of their families. As we saw in representations of juggling mothers from Chapter 2, sometimes this identification entails working for pay outside of the home and outsourcing care work, but it always entails securing the needs of the family. It follows that in the context of mothering, mothers who demonstrate their pursuit of happiness and wellbeing for their children through say, first having children “on time” to reduce risk of “birth defects,” and then who cook from scratch or send their children to swimming practice to optimize their adult health and productivity, are tagged as complying with or “stuck to” this pursuit. They belong. Ahmed shows how we become “alienated—out of line with an affective community—when we do not experience pleasure from proximity to objects

that are attributed to being good” (2010, 41), since “to be directed toward such good things is to be directed the right way” (38). This logic is obviously disciplinary. Within this logic, mothers who do not adopt particular individual behaviours, like reading to their children when empirical evidence finds it is correlated to improved IQ scores, are mothers who are not invested in their children’s future cognitive and social outcomes. They are not signing off on the guideposts for the good life. They are willfully “choosing” less than optimal levels of wellness for their families, and they are thus choosing to contribute adults who risk draining state resources.

It is not hard to imagine how small is the subset of mothers who have the time, ability, and desire to secure wellness for their children according to statistically determined happiness objects. In Chapter 2, I told the story of some popular culture artifacts that present the pursuit of work-family balance (and resulting flailing) as both laughable and exalted. I showed how these representations contain and orient positive structures of feeling toward both the juggling mother subject and the executive feminist “c-suite mother.” It is at its foundation the pursuit of a happy future that binds these mothers to each other and to deserving citizenship. Identifying with the happiness and wellbeing pursuit is the gatekeeper for belongingness, and to identify with this pursuit requires some combination of known mothering practices. Mothers who are unwell or unable to choose happiness objects for their children, or privileged women who do not reproduce, are marked as unable or unwilling to identify with this orientation. Queer theorists on failure are helpful to understand how failure to pursue happiness or wellbeing results in stigma and exclusion. “Others”—those who both fail to be happy and refuse to pursue wellness through individual responsibility, orientation toward health and wellness, a uniform metric of career success, and accepted bonding rituals with family, friends, and community—are marked as

outsiders who stubbornly refuse to join in (Ahmed 2010, Halberstam 2011). In this vein, Ahmed gives us the figures of the “unhappy queer” and “feminist killjoy”—both figures who are seen as killing the joy of the room by refusing to go along with the established social hierarchy—to show how figures who refuse to or cannot pursue the common happiness, the national ideal, are designated outsiders who *must* fail for the dominant group to recognize and stabilize themselves. In her 2014 book on willfulness, Ahmed extends this idea to argue that the willful girl, or the “mule,” threatens the social order so fundamentally because she refuses pursuing happiness for its own sake. Ahmed (2010) further argues that “others,” or those who fall outside of the national imaginary (Thobani 2007), are stuck with the negative affect of fear, disgust, or hate—in refusing to pursue the happiness ideal in recognizable ways, they not only fail happiness, they *cause unhappiness*. Drawing on bell hooks, Ahmed (2010) gives the example of how the mere presence of black women in feminist circles is understood as killing the joy of white feminists as their black bodies serve to remind white women of violent colonial legacy and white supremacy. Therefore, the happiness duty disproportionately falls on racialized women as they are seen as already killing the joy of the room through their mere presence. Similarly, Puar (2007), Halberstam (2011), and Cvetkovich (2003), among other affect and queer theorists, theorize the various ways in which bodies become understood as threatening to nationhood at least in part due to their refusal to take on the cultural project of pursuing wellbeing. For Puar, negative and positive affect both infuse and come to define the cultural project of patriotism, as she views good and bad feelings in the context of the “twin mechanisms of normalization and banishment that distinguish the terrorist from the patriot” (2007, 37). In his work on queer temporality, Halberstam imagines negative affect as implicated in a queer temporality where queer bodies threaten futurist orientations to productivity, the reproduction of nuclear family, and the

intergenerational passing of wealth. For Cvetkovich, negative affect is an aftermath of trauma and an ongoing struggle against speed-up and the neoliberal demand to be productive. One common thread here is the understanding that those who do not pursue the ideal, in this case wellness or not-anxiety, are marked as outsiders who threaten the stability of already established ideals.

In the *Queer Art of Failure*, Halberstam argues that there is now one model of success only, and that is pursuing career advancement, and therefore “everything else is a failure.”¹⁵⁶ I would add, though, and Halberstam might as well given his work elsewhere on women’s position as the “beacon” of the American family (2012), that the myth of the adult worker glosses over the care and reproductive labour also required of the futurist, neoliberal mother. Halberstam also forgets that women are exhorted to have children and to love doing so. In any case, building on Halberstam’s model of success argument gives way to the understanding that pursuing career advancement as well as a family that is sufficiently nurtured characterizes women’s responsibility (as mothers). This double duty marks the incoherence of women’s contemporary responsibilities to citizenship. Adding to the guideposts or “right” ways of pursuing this double duty, Ahmed (2010) designates marriage as a known happiness object in our culture, particularly according to positive psychologists. She also positions having children as a happiness object, because in children, individuals bestow their hopes for the future. Echoing Edelman, Ahmed explains that individuals who do not reproduce are seen as refusing to have hope for the future, or unwilling to share in the futurist orientation of modernity. In personal communication (2014), Ahmed discusses this pressure as the “affect of non-regret,” where women experience the

¹⁵⁶ Sinclair Sexsmith, “Jack Halberstam: Queers create better models of success,” *Lambda Literary*, 1 Feb 2012, retrieved July 23, 2014, <http://www.lambdaliterary.org/interviews/02/01/jack-halberstam-queers-create-better-models-of-success/>

incitement to reproduce as a way to secure feelings of not regretting their past decisions. But in psychological studies of marital satisfaction and children, reproduction diminishes marital satisfaction. This incomprehensible contradiction, among other findings that show, for example, how single people might experience higher life satisfaction than married people, reveals something of the fractures between happiness objects and morality, happiness objects and civility, or happiness objects and responsibility. On the one hand, Ahmed argues that,

Becoming civil converts the language of ‘must’ to the language of ‘might’ and eventually to the language of will and choice. We end up with a fantasy of a moral and middle-class subject as the one who is without habit, who will and can choose insofar as they are imagined as free from inclination. Happiness becomes a moral injunction, as a will to will, through the disappearance of its habit. A good habit appears and thus disappears as freedom. Or we could say that freedom becomes a habit (35).

Ahmed is explaining how happiness becomes understood as a choice that individuals can make in the imaginary context of Western democracies. At the same time, particular moral injunctions like heterosexual marriage and responsible reproduction are unsubstantiated by even the most strenuous efforts of “happiness experts.” In popular editorial, this results in an incomplete understanding of cultural anxiety—despite mainstream and highly resourced cognitive economic attempts at a formula—and a subsequent spinning of wheels around what women should or should not be doing to allay this social problem. In the affective economies of contemporary motherhood, all mothers are not created equal. For example, mothers who stay at home can be celebrated as socially productive because their lack of pay cheque does not impede the family’s sustainability. Chronically ill mothers, whose care might not include designated happiness objects like patiently reading to children or making food from scratch, are excluded from participating.

Before moving on to elaborate the demographic context for the contemporary affect of motherhood, it is useful to consider Cvetkovich's (2012) way of thinking about feelings as public rather than private. Cvetkovich thinks about feelings as public, and as generative of intellectual/theoretical activity. Her Public Feelings project seeks in part to provide systematic accounts of power by describing "*how capitalism feels*" (2012, 11). She frames sensation and feeling as "the register of historical experience," in the tradition of British cultural theorists Stewart Hall and Raymond Williams, who conceive of culture and life as "structures of feelings." Taking up "depression" as her keyword, Cvetkovich follows Lisa Duggan who suggests that as neoliberal economic policy shrinks the public sphere, the affective life of the private family bears an increasing burden. This theory describes what neoliberalism feels like from the vantage of everyday life: feelings of despair and anxiety that are barely discernable because they structure "just the way things are" (2012, 14). It is with this appreciation of feelings for holding information about culture and everyday life that I present the affect of motherhood as necessary for theoretical insight into feminist citizenship. Mapping how contemporary motherhood feels, particularly as popular media conversation has taken to reporting on these feelings, serves as a testimony that can help to explain what mothers are currently incited to do and feel, and perhaps how this could change. This next section transitions the above ideas about happiness objects, or the guideposts of the good life, and women's responsibility to pursue responsible reproduction for their social inclusion by giving some context: women's reduced fertility over the last decades, but in particular a relatively recent (2000) shift in their paid labour patterns in the United States. As we will see, the way this notable shift in women's paid labour participation intersected with social position in a way that became a collective concern, with telling messages about women's citizenship responsibilities.

Below replacement fertility and a shift in some women's labour behaviours

In 2001, the United States Census Bureau issued the *Fertility of American Women Population Characteristics*: a report based on data collected as a supplement to the Current Population Survey (CPS) in June 2000. This data was collected from two supplementary questions asked of women ages 15-44: the number of children they have ever had, and the date of birth of their last child. The report, which was based on data collected when the US fertility rate hovered just below replacement (between 2.0 and 2.1), stratified findings according to marital status (“out-of-wedlock childbearing”), “race, ethnicity, and nativity status,” level of education, family income, region and population of residence, and labour force status.

The report found that “non-white Hispanic women” had the highest fertility rate, the only one above replacement. The fertility rate of black women was about the replacement rate, and white women’s fertility was below replacement. The report’s findings were widely circulated in the media (see Little 2002, Rowe 2002), as journalists and popular authors (see Grigoriadis 2002, Hewlett 2002, Walsh 2002) and other social scientists (see Caucutt, Guner and Knowles 2002, Amuedo-Dorantes and Kimmel 2005) editorialized the US “birth dearth,” (Meyer 2004) or tried to explain why it seemed that white women were having fewer children. Among the commonly cited findings of the report was the fact that the labour force participation rate of women with infants had dropped from 59% in 1998 to 55% in 2000, the first drop since it was first recorded in 1976 (31%). The official Bureau report itself outlined the demographic responsible for this drop:

Significant declines in labor force participation rates occurred [from 1998 to 2000] among mothers 30 years old and over, mothers who were White, and mothers who had 1

or more years of college. While the rate for married mothers during this period declined from 60 to 54 percent —back to its 1994 level — the rate for unmarried mothers remained unchanged in 2000 at 57 percent. In contrast, younger mothers, Black mothers, Hispanic mothers, and mothers who had a high school education or less did not experience a decline in their labour force participation rates. Whether these diverging trends are short-lived or will continue depends to a considerable extent on future changes in the economy and the lifestyles of new mothers in balancing their time between work and child rearing activities (Bachu and O’Connell 2001).

Beyond the obvious limitations of demographic data, which attempt to classify and arrange complex identities and circumstances into measurable traits, this short summary subtly indicates an assumption about women’s responsibility to social reproduction, and underscores mothers’ competing responsibilities that we have examined so far. Notice the language of balance in the last phrase. Rather than interpreting the statistical findings about women’s labour participation as suggestive of some structural stratification of women based on poverty, race, or education, the authors of the report list these variables and then insinuate that women’s labour force participation and fertility patterns depend at least in part on individual mothers’ “*lifestyles*” of juggling activities and “*balancing time*” effectively. It is a subtle turn of phrase, but in this case, balance refers to the ability to strike the optimal combination of work and family activities, calling to mind the value of agility that would allow mothers to strike this balance. The authors list changes in the economy alongside the “*lifestyles of new mothers*” in discussion of the influence of race and levels of education on market labour. Balance, then, is not an affect or sense of wellness, but a *lifestyle* that some women have, and perhaps something that different women achieve with various struggle or ease. The reason I draw out this small example of biased attitudes about different groups of mothers and their abilities to show how the gendered citizenship responsibility to “balance” can be detected in an official governmental demographic report. Recalling the feminist science studies critique from Chapters 1 and 3 (Barad 2007,

Thompson 2013), here we can see that even reports that we are encouraged to read as value-neutral can contain meaningful assumptions about citizenship, particularly women's affective citizenship. In linking social reproduction to race and "lifestyle," a discursive process—intentional or not—of imbricating two social markers that, as I mentioned in the previous two chapters, Stuart Hall might call a form of inferential racism, the authors of this objective report align race, women's labour attachment, and education levels without critical analysis. "Younger mothers, Black mothers, Hispanic mothers, and mothers who had a high school education or less" are still reproducing, but other mothers—"mothers 30 years old and over, mothers who were White, and mothers who had 1 or more years of college"—are responsible for plummeting fertility rates below national replacement. In juxtaposing these variables, the reader is permitted to imagine that there might be something inherent to race that determines women's intellectual ability, responsibility, or commitment to functioning citizenry (see Thobani 2007), as well as women's "style" of balancing work and child rearing activities, and their propensity to be tied to certain forms of labour. In other words, the report implies that white women, whose fertility rate seems to be dropping, might be inherently more inclined than racialized women to pursue work-family balance, and thus their fertility rate might rebound if they become more skilled at balancing career and childrearing. To be clear, we do not expect statistical reports to engage these theories, but the report's official discussion is situated in a broader history of racism and birth rates (Davis 2003, McLaren 2015). The authors make a political assessment just following the list of these variables by situating the potential impact of the economy and individual women's "ability to balance" next to labour market trends. In doing so, they make a political inference in a report that we are encouraged to see as apolitical and objective. As we see in the next section where I trace the public conversation following the circulation of this census data,

many authors interpreted this section as evidence that an entire *generation* (of white Americans) is both “delaying” (United States Census Bureau 2011) childbearing as well as “choosing” to stay home with children (Rosenwein 2002).

Popular editorial on fertility data and women’s labour responsibilities

Following the *Fertility of American Women* report, economist Sylvia Ann Hewlett, founding President of the Center for Work-Life Policy in New York, published her landmark book: *Creating a Life: Professional Women and the Quest for Children*¹⁵⁷ (2002a) to largely positive reviews (Grigoriadis 2012). The author and her book were profiled widely, on *Time*, *New York Times*, *60 Minutes*, *Today Show* (Walsh 2002). Hewlett, citing Census Bureau data, framed declining birth rates among wealthy white women as a crisis, and advised women to get married and have children before it is too late and regret takes hold—an incitement which sounds precisely like Ahmed’s “affect of non-regret.”¹⁵⁸ Hewlett (2002b) published a condensed version of her argument in the *Harvard Business Review*, outlining the asymmetry of executive women failing to have it all, while their male counterparts succeed. In examining the “age-old business of having babies,” Hewlett points to the struggles of the “top 10% of women measured in earning power,” and uses emotionally-charged language to illuminate the “painful well-kept secret” of childless, high-achieving women, and their “creeping nonchoice” where “reality and regret” collide (2002b). Throughout her book, which includes data on fertility rates and statistics on fertility risks, Hewlett explains the phenomenon of white women dropping out of the workplace to raise children in affective terms. She uses metaphors to describe experiences of

¹⁵⁷ Released in the United Kingdom as *Baby Hunger: The New Battle for Motherhood* (2002).

¹⁵⁸ Sara Ahmed, in-person conversation with author, March 19, 2014. See also Bryan Caplan, “Childlessness and regret,” *Library of Economics and Liberty*, 16 Apr 2008, retrieved July 15, 2014, http://econlog.econlib.org/archives/2008/04/childlessness_a.html

what we might call stress, anxiety, fear, or sadness: top-earning women who feel a “time-crunch” between their fertility window and career-building stage are filled with “difficult tradeoffs” and “up-or-out pressures,” where the “air is thin.” Her comparisons convey that these women are experiencing the basic emotions of fear and sadness over the decision to have children because they are overwhelmed with irreconcilable career ambition.

Hewlett’s observations pointed to a relatable and potentially worsening social problem, and had the potential to form radical critique of women’s responsibilities to citizenship. Her observations of women’s reported anguish over career-versus-family calculations could have been used to advocate structural change like universal childcare or reduced workweeks. She does address feminist action that focused more on abortion rights than childcare rights. But Hewlett concludes rather unexpectedly with some heterosexist and ableist advice for combatting the “crisis of childlessness,” which we know is implicitly about white women: women should get married and have children to be healthier and happier, and they should do so before the age of 35. Women who do not desire children or cannot have children are effectively erased, and the task to change this fertility “crisis” is again assigned to individual women. Hewlett explicitly presents women’s citizenship duty to responsible reproduction using the “affect of non-regret” (Ahmed 2014).

Though discussions of women’s sense of stress upon juggling paid labour and care work were not new at the time, Hewlett’s presentation of new census data was part of a wider reinvigoration of the public conversation about women’s affective experiences with work-family conflict. It became an important topic in the social sciences, particularly around the issue of work-family conflict for academic and professional women (Armenti 2003, Bassett 2005, Blair-Loy 2005,

Bracken, Allen and Dean 2006, Kelly and Srivasteva 2003, Ward and Wolf-Wendel 2004), and it grew as a common topic in popular media that continues today.¹⁵⁹ In 2003, when well-known *New York Times* columnist Lisa Belkin's "The Opt-Out Revolution" ran to an outpouring of polarized commentary, "career-women-go-home" articles were already fifty years old (Graft 2007), but Belkin's piece (and newly-coined term "opt-out revolution") signaled an energized discussion. By presenting the new (2000) census data and building on Hewlett's take on childless (white) women, as well as the work of other social scientists (Hochschild 1989, Hrdy 2000, Schwartz 1989, Williams 2000), Belkin crafted a compelling cautionary tale about executive women leaving the workforce. Belkin's essay, which cited census data alongside the stories of a few exceptional Princeton graduates who stayed home to raise children instead of pursuing high-income careers, was the most e-mailed piece in the *Times* that year, and the title now returns over 90,000 results on a Google search. Contrasting Sandberg's *Lean In* philosophy that suggests women break through the glass ceiling by masculinizing their career personas (by somehow rejecting imposter syndrome, by being "willing to lead" without being liked, by taking a seat at the boardroom table), the so-called opt-out revolution explained quitting paid work as a choice to prioritize care work for the sake of good feelings. Despite their different takes and the economic differences between 2003 and 2010, both stories remain grounded in choice rhetoric and position (white) women corporate elites at the helm of a national replacement problem.

¹⁵⁹ For an academic review of literature, see Ana Villalobos (2014), *Motherload: Making It All Better In Insecure Times*, Los Angeles: UC Press.

The question of how women should navigate their dual responsibility to their family's wellbeing and the workplace is well worn (Gottlieb 2014, Hattery 2001, Hochschild 1973),¹⁶⁰ but with new evidence of more educated women staying home with children than before, the theme presented women's "choice" to stay home with children in affective terms: as a combined effect of job dissatisfaction and a presumably innate and affective "pull to motherhood." This "pull" is supported by Ahmed's notion of "intention" toward happiness objects for belongingness, as well as her idea that bodies become "stuck" (or pulled) together in joint pursuit. Evoking maternalist feminist assumptions about women's innately female reproductive traits, in a way that echoes what Edelman called reproductive futurism, Belkin's respondents affirmed the emotionally disparate terrains of paid work and unpaid care work, as they connected jobs to power, status, and machismo, while they associated maternity with feelings of grace and escape, as well as "sanity, balance, and a new definition of success." "Sanity" or "balance" sound like perfectly reasonable desires, as does the affective "pull" presumably responsible for a group of exceptionally privileged women prioritizing motherhood. But the way the story is told about this phenomenon is telling for some women's citizenship responsibility to care work, because the narrative relates the desire to quit work and have children to something innately gendered (where are fathers here?), and it also fails to focus the critique on the corporate environment and demands on individual workers. The "pull" to motherhood suggests that women might satisfy their obligations through unpaid care work. Further, the discussion is about the "choice" to quit work, meaning this discussion is about women who are presumably in heterosexual relationships and supported by a high-earning male partner. Instead of pursuing critique of the gender contract

¹⁶⁰ For an example of what popular writing on this same topic looked like in 1986, see George Gilder, "Women in the workforce," *Atlantic*, September 1, 1986, retrieved June 2, 2014, <http://www.theatlantic.com/magazine/archive/1986/09/women-in-the-work-force/304924/>

and gendered desires, the story hones in on individual women's "choices" and their broader social implications.

Thinking back to the Chapter 2 example of NDP MP Sana Hassainia facing backlash for bringing her newborn Skander-Jack into the House of Commons during a vote, the discussion of her responsibility involved the notion that her primary responsibility is to her constituency since she can afford to pay for market child care. In the above story about highly-educated women "opting out" of career, women's competing citizenship responsibilities are similarly pondered only when the family's financial stability is already intact. In the many media stories I read about women's competing labour practices, their bodies and decisions were still scrutinized, but outsourcing domestic labour was rarely questioned if it meant the family remained self-sufficient.

Following Belkin's highly influential piece, award-winning journalist Claudia Wallis (2004) made "the case for staying home" in *Time* magazine.¹⁶¹ Using similar logic to explain the first-ever drop-off of white married women from the workplace and the increase of stay-at-home mothers with graduate degrees, Wallis describes the "reluctant revolt" by professional- and managerial-class women who are "less willing to play the juggler's game," especially under "high-speed mode." We can also hear in Wallis' version the affective sensation of speed-up and the metaphor of juggling, as well as a will, or rather "unwillingness," for mothers to optimize a combination of incongruent activities. For Wallis, this group of mothers chose family responsibilities over career ones as a point of rejecting bad feelings of stress. The women are

¹⁶¹ This essay was widely circulated and is still highly cited. See, for example, Day and Downes (2009), Herr (2009), Smith (2014), Warner (2013).

presented as not regretting leaving the workplace, instead combatting the “affect of non-regret” (Ahmed 2014) by securing happiness through care work: where they find “expected delights” and “enormous relief” on the home front. In line with the broader (neoliberal) tendency to frame women’s labours in terms of individual women’s choices, Wallis does not address the impossibility of responsible reproduction under individualist welfare regimes, or what is at stake for women who cannot afford to reject the incitement to agility (or balance/flexibility/juggling) with regard to career and motherhood. Instead, Wallis concludes by surmising that corporate culture might eventually become more flexible to combat the “brain drain,” allowing women to exit and re-enter the workplace around the time when they are having children. She notes that this generation of women has different priorities than the previous generation of women, and breaking the glass ceiling at all emotional costs is not one of them.

Both the choice refrain and the affect of motherhood echo in Wallis’ perspective: the sensation of being overwhelmed, stressed, or anxious in the pursuit of balance, and a choice to pursue relief. This story about women also desists from challenging the foundations of the capitalist economy, because the market is seen to undergird the choice to opt-out in the first place. Wallis (2004) writes,

This time, perhaps, the numbers may be on the side of working moms—along with many working dads who are looking for options. On-ramps, slow lanes, flexible options and respect for all such pathways can't come soon enough for mothers eager to set examples and offer choices for the next generation (n.p.)

Wallis thinks that due to a gendered brain drain, the market will eventually provide the solution for these high-powered women (and men) to pursue flexible options. These are the women for whom capitalism’s losses are not detrimental to their children’s survival, yet mainstream

conversation is concerned with their labour burdens. Wallis, like many of the eminent voices in this discussion, is not interested in the question of what happens when capitalist ventures fail, nor is she interested in the women and families for whom capitalism consistently fails. The conversation in the early 2000s suggested that women who choose to prioritize family, following the guideposts of the good life, would not regret it. These women who choose to have children would feel relieved. As well, women should have faith that corporate interests will align with their own interests: that corporations will look out for women's future interest as their goals collide—by providing “on-ramps,” or flexible options for upgrading skills and getting back to work, to entice skilled women back to work eventually. The successful individual mother in Wallis, Belkin, and Hewlett's stories might be experiencing negative affect in pursuit of balance, but she is seen as having options within the status quo, so she reproduces its foundation by making a “choice” to the repeated exclusion of other mothers.

This discussion continued in the popular press with Judith Warner's (2005), *Perfect Madness*—a book about maternal affect, though presented in less theoretical terms. Warner distinguishes her book from policy recommendations, self-help, and scholarly histories, calling it an exploration of that “caught-by-the-throat feeling” (3) that mothers are always failing. Following the work of sociologist Pamela Stone (2004) about “fast-track women and the ‘choice’ to stay home,” Warner details her interviews with wealthy women married to men in high-earning positions in Washington before the financial market crash. Through discussions of the minutiae of women's daily lives, Warner and her interviewees arrive at a structure of feelings that they refer to as *this mess*: “It's not depression. It's not oppression. It's a mix of things, a kind of *too-muchness*. An existential discomfort” (4). While the women in the account distinguish their feelings from

depression or oppression, it is helpful to think of this “too-muchness” in the context of Cvetkovich’s (2012) notion of depression as a cultural and social phenomenon where it feels as though things are “no longer working” (1). Cvetkovich further suggests that it might be possible to tarry with structures of feelings like depression in order to understand social problems and pursue political activism. So while the women distinguish their feeling from anger, guilt, and stress, though these are also present for them, I interpret this “too-muchness” as a confluence of fear and despair, where “juggling” is not serving the promised good life, and instead has left a “mess.” The women in Warner’s study question what they call their “neuroses” (38) and general sense of feeling worried and overwhelmed. Noting a combination of maternal “promise with politics, feminism with ‘family values,’ science and sound bites and religion and, above all, *fear*,” (8) it seems increasingly clear that these bad feelings are the direct inheritance of precariousness and the neoliberal intensification of individual citizenship responsibilities. Warner even uses the language of “promise,” illustrating women’s cruelly optimistic (Berlant 2004) relationship to their labours, and the “promise of happiness” through responsible reproduction that ultimately fails to provide good feelings. Warner gives detailed qualitative evidence of how this subset of women feels unable to articulate the affective terrain through which they develop their own subjectivities vis-à-vis mothering and trusting a spouse to provide resources for their survival. This directly calls to mind the tensions of “autonomy” in feminist citizenship, which Lister (2003), following Young (1995), argues is the ability to deliberate and make decisions, but must be considered alongside interdependence as a characteristic of human relationships and care. When women in Warner’s (2005) study report tension coming to terms with their financial dependence on a male spouse, they invoke this knot within republican/liberal theory around interdependence as a deficit model, where depending on a family member or the

state for care is legitimate as a form of charity (Arneil 2009, Orsini 2012). Becoming a recipient of spousal charity in order to stay home, women who have been socialized according to the myth of the adult worker face incongruence between their ability to deliberate and their value as independent citizens. Further, they might experience decreased access to power as unpaid workers, particularly in the case of divorce, which disproportionately leaves women poorer.¹⁶² This might help to explain the affect of “this mess,” wherein women’s subjectivities as carers do not allow the relative clarity of their value and reward and paid workers.

Warner’s review of history is limited as she focuses on the contemporary context of her study, but her exploration of what she calls a “historical blip”—of women leaving the workforce for full-time mothering—points to a public anxiety that is individualized in this small, privileged sample of mothers. Warner argues that this phenomenon is partly the result of individual mothers taking on labour to make up for the state’s lack of family-friendly policies. She promotes childcare subsidies, parental leave, and insurance for part-time workers, familiar amendments to existing labour regulation to assist individual women in finding balance by uploading responsibility back to the state

Many similarly affective stories about women’s competing labours, what Jolynn Shoemaker (2012) dubbed the “new problem with no name,” and what I have been calling the affective process of mothers “coming undone” with feelings of anxiety and depression at failing to secure good feelings and themselves and their families, circulated through the popular press about a similar group of women. Each author theorized the “historical blip” of educated women

¹⁶² For more information on women and poverty, see The Facts About Women In Poverty, *Canadian Women’s Foundation*, retrieved July 14, 2015, <http://www.canadianwomen.org/facts-about-poverty>

returning home in more or less critical ways, and most referred to feelings of anxiety as a shared but private, even secret, experience (see Shoemaker 2012). Caitlin Flanagan (2004) put it plainly in an *Atlantic* article about “staking out her turf” as a stay-at-home mother: “I felt anxious about the whole thing—very, very anxious” (n.p.). Flanagan mentioned the privilege imbued in the notion of choosing to opt out, or choosing to work in a fulfilling job, while others in the conversation criticized or maintained the “conflation of the anxieties of the wealthy and the struggles of the working poor” (2004, n.p.). Still some erased the struggles of mothers outside of the top-earning: Lesley Stahl (2004) devoted an episode of *60 Minutes* to “Staying At Home,” where she presented anecdotes of highly educated and high-earning “career women”—the “first [generation] to achieve success without having to fight for it”—to theorize why the “women of the next generation” are likely to be found “walking home willingly and without regrets” (Leung 2004). Again, a group of educated white women’s shift in labour constituted a major generational shift in mainstream reporting, and the notion of making the choice of non-regret echoed throughout.

In 2007, sociologist Pamela Stone examined the trend of women with graduate degrees leaving the workforce, invoking Belkin’s popular language in her book, *Opting Out? Why Women Really Quit Careers and Head Home* (2007). As is common in nearly all of the popular literature on this theme, Stone’s book opens by setting out a profile of the exalted white mother protagonist of this narrative: in this case, Kate, a star, who was coxswain and captain of her crew team, the first woman president of her Ivy League university, a remarkably successful international business person, and now a full-time stay-at-home mother with three children. The narrative is compelling, as Kate comes to terms with how to fit her ambition, social experiences and needs,

goals, and values into the complicated setting of stay-at-home motherhood (for nuanced looks at the experience, see Macdonald 2014, Boyd and Letherby 2015). Stone's *Opting Out?* departs from the trend, though, when she details constraints in structural terms that are obviously also affective. Contrasting Belkin's and Hewlett's faith in the market to respond to women's new demands, Stone argues that Belkin's "opt-out revolution" is harmful and misleading because women are not opting out of the workforce, they are forced out when their jobs are incompatible with family. Stone reminds us that staying home is by far the exception, no matter the statistical bump among women with graduate degrees. Employing quantitative data to support her extensive qualitative interviews, Stone ultimately argues that choice rhetoric is obscuring our understanding of women's various attempts to find "balance"—to reconcile their identities as mothers after finding their careers unsustainable and incompatible with care work. The nuance of Stone's academic critique, however, was not taken up in the popular press, suggesting that mainstream stories are unlikely to escape individualism and choice rhetoric when it comes to women's citizenship responsibilities.

The debate over women's labour and emotional wellbeing continued along similar analytics—of choice, stress, regret, and "what's best"—through the financial market crash of 2007-2008, with some of the scholarly and mainstream media responding to changes in the demographics of the labour force. For example, Lori Gottlieb intensified the conversation about women's labours with her inflammatory and lesbophobic article and book of the same name, *Marry Him* (2008, 2010), which advised career-successful young women to marry less successful men they do not love in order to reproduce "before it's too late," presumably because, as Ahmed critiques, not regretting not having children is key to women's sense of fulfillment. Clearly lost on Gottlieb's

perspective is the accessibility of sperm banks for lesbians, trans men and women and queer couples, single women, and heterosexually-partnered women whose male partners do not produce sufficient levels of sperm for impregnation.

Making a compatible argument among widespread discussion of new male unemployment, Hanna Rosin's *The End of Men* (2010) contended that since modern economies show preference to women's (piecemeal, part-time, "flexible," precarious) labour over men's labour, traditional gender order is now reversed to the detriment of not only men, but all of society. These arguments about an upside down gender hierarchy are not supported by statistical evidence on metrics like income inequality, gendered violence, access to leadership positions, or bodily autonomy, but they are popular, and they are rooted in a sense of apprehension when conditions are precarious—with respect to labour, the traditional family, and the future of the economy. Rosin expressed discomfort with white women's success in post-secondary education, an influx that is stratified by race, and with middle-class white women pursuing higher education, getting married later, having children later, and having fewer children. But Rosin only invokes race through racism—invoking the common demonization of black men—when she threatens that if this trend continues: "The whole country's future could look much as the present does for many lower-class African Americans: the mothers pull themselves up, but the men don't follow. First-generation college-educated white women may join their black counterparts in a new kind of middle class, where marriage is increasingly rare. These changes are not merely spreading around the fringes; they are fundamentally altering the core of middle-class life" (Rosin 2010, n.p.). On the floundering middle-class institution, Rosin says "Middle America is starting to look like high-school-drop-out America" (2010, n.p.).

As I first presented in the Introduction, when Anne-Marie Slaughter, well-known academic and former Director of Policy Planning for the US State Department, published “Why Women Still Can’t Have It All” (2012) in the *Atlantic* to the magazine’s widest circulation ever, consideration for the complicated structures of women’s feelings around their role in social reproduction—via career, childbearing, and childrearing—was unquestionably mainstreamed. However, these pieces were written by, about, and for a subset of women who are far from representative by race, class, or ability. The pieces are written by affluent white cis-women in positions of power, and circulated in magazines like the *Atlantic*, *New Yorker*, *New York Times*, and *Harvard Business Review*, as well as books in the commercial press that target the resembling business-class readership. “Popular” conversation concerned the “rise of executive feminism” (Williams and Dempsey 2014), and it circulated in a vacuum of wealthy women who struggled to “have it all,” though the competing labour burden they present no doubt applies to many women and families across race and class backgrounds who may have fewer “choices” (Hochschild 1989, 1995; Blair-Loy 2005; Lareau 2003).

Ten years since Belkin’s opt-out revolution, Warner (2013) (author of *A Perfect Madness: Motherhood in the Age of Anxiety* [2005]), published a response to Belkin, arguing that “the opt-out generation wants back in.” In an interview with *WNYC*, Warner again pointed out that the reduced fertility and childbearing delay of some women, which the media insists on establishing as culturally threatening, is still merely a blip. She argued that the increase in the number of mothers who are leaving the workforce and staying home with their children does not represent a “generation” of women:

Generation is a big word. It was a small demographic ten years ago, it's a small demographic today. The larger group of women who always drove those numbers, in fact, were poor women. Poor women with low levels of education, often Latina. We in the media have forever focused on the women at the upper end of the income spectrum with a lot of education—just to be clear who we are talking about.

Warner, representing a critical voice in popular discussion, argues that women's double burden simply became too much for women to manage. She also is one of the only mainstream voices to situate the "small demographic" of higher-income women in broader labour and fertility rate trends, and point out how this story has never been about the struggles of poor women with lower levels of education to balance paid labour and reproductive labour, nor has it considered the affect of "balancing" out of necessity for survival. Still, Warner fails to challenge the foundational assumptions about women's bodies, their desire for (heterosexual) partnership and children, and even simply the desire to "balance" anything. In her book *Perfect Madness* from a popular press, motherhood is a thing that women do—binding women to their sexuality and reproduction—and balance is something that women are aiming for. Examining only class as an indicator of exclusion from pursuing balance, Warner calls for focus-on-the-family legislation—a troubling call considering the sexist, homophobic, and racist Christian charity of the same name—to make workplaces more "flexible" in order to retain women, a call rooted in conservatism and the neoliberal ideal of flexibility. This might be a helpful strategy to start, but her critique does not radically challenge the ways in which women's responsibilities are tied to paid and care labour simultaneously, and in gendered ways. In her 2014 op-ed for the *New York Times* called "To reduce inequality, start with families," Warner presents supporting the nuclear family unit as the answer for women. She argues that policies supporting family leave, paid sick days, early childhood education, child care and workplace flexibility should have cross-partisan appeal, since they do not involve "progressive taxation" (like wealth redistribution to

democratize resource ownership) to combat inequality. She also undergirds her advocacy for women by appealing to the future productivity of individual children, as we saw in breastfeeding discourse in Chapters 3 and 4: “lack of availability of parental time has serious detrimental effects on children’s behavior, ability to learn and emotional development — all of which affect performance in school and, eventually, the workplace” (2014, n.p.). Far from queering kinship structures, problematizing the nuclear family unit as feminists have done for decades (de Beauvoir 1949, Collins 1990, Firestone 1970, Friedan 1963, hooks 1993) or even considering children’s emotional development as important for something other than their future performance as workers, even the most critical voice in popular discussion leaves intact the systems that structure the most basic inequalities, and that exclude alternative families and kinship structures. Warner’s (2014) angle, obviously strategic so likely compromising to a conservative readership, is to advocate for women by advocating for children by advocating for economic growth:

The idea that investing in children is good economic policy has been for some time a rare area in which Democrats and at least some Republicans have been able to find agreement. This understanding has led to the growth of the one form of family policy that’s been gaining solid ground over the past two decades: universal pre-K, an expensive, once highly controversial measure that now enjoys solid success in a number of red states, as well as the support of the United States Chamber of Commerce.

In citizenship terms, Warner’s strategy affirms women’s joint responsibilities to care and paid labour because her recommendation to make workplaces flexible maintains the capitalist organization of labour as well as the gender contract that designates paid and unpaid labour unevenly between men and women. As she criticizes the *conditions* of this juggling and argues for their subtle adjustment within the status quo, she invokes a familiar liberal feminist strategy

that socialist feminists¹⁶³ and transnational feminists (Mohanty 2003, 2013) have long criticized on the grounds that the status quo involves colonial legacy and white supremacist, patriarchal hierarchies of power. For an example of the kind of ethos that Mohanty criticized in *Under Western Eyes*, one could support the status quo while purporting to be “women-centered” by not calling for universal child care but instead supporting Canada’s live-in caregiver program—a program that has a history of trapping migrant workers in potentially dangerous and abusive states of exception while they care for the children of middle-class families in Canada.

Affect of motherhood in demographic transition

There has now been over a decade of making sense of demographic shifts in family formation and social reproduction, which some demographers have termed this generation’s “demographic transition.”¹⁶⁴ Some women’s responsibilities to citizenship through paid and unpaid labour, in light of the emotional burden of their striving for success in both realms, were explicitly discussed in popular venues. But the popularity of the conversation about women “opting out” of paid labour in pursuit of happiness, “relief,” and “balance,” is troubling for both its maintenance of regressive institutions (including the self-sufficient heterosexual nuclear family and unevenly distributed gendered care work) and the fact that authors overstate this “generational” shift, homogenizing women, and ignoring other conversations about labour burdens and the affect of juggling to survive. The fact that the reduced fertility rate among white, college-educated, over-30 women became the catalyst for a discussion about fertility, security, and public feelings gives

¹⁶³ For a recent discussion, see Madeleine Schwartz’s (2013) review of Nancy Fraser’s (2013) *Fortunes of Feminism* for Dissent Magazine. Schwartz opens with a critique of *Lean In*, arguing that “white, professional women’s work is at the center of contemporary feminist discourse” (n.p.) to the detriment of real, progressive, structural change.

¹⁶⁴ <http://www.open.edu/openlearn/society/politics-policy-people/sociology/sexuality-parenthood-and-population/content-section-2>

pause because its recommendations are commonly built on choice rhetoric, the inevitability of corporate infrastructure, and how individual women need to invest in children for the future health of society, even in the more feminist popular literature. In 2002, Hewlett (ix), for example, framed her discussion of women opting out by remarking that in the “post-September 11 world, we may be better able to appreciate how much we need our children.”

The risk rhetoric commonly deployed in breastfeeding promotion appears again in the affect of motherhood. In 2007, Susan Faludi, a feminist scholar and popular author, theorized gender role shifts and fertility panic according to anxiety in “post-9/11 America” and a subsequent desire to return to American traditionalism. Examining popular rhetoric and government policy initiatives, Faludi (2007) argued that the attacks on September 11th, 2001 destabilized US global dominance, resulting in a resurgence of traditional values around masculinity, marriage, and maternity, particularly around eroding women’s access to reproductive justice. In Chapter 1 of this dissertation, I mentioned how care theorist Joan Tronto (2013, n.p.) also situated the responsibility for care in an anxious culture: “the deepening insecurities wrought by terrorist attacks and continued globalization under the conditions of neoliberalism.” In Chapter 3, Joan Wolf (2010) did the same, referring to a “risk culture” that women are induced to navigate through their infant feeding behaviours. Others pointed to structural concerns with women’s “time crunch” between market labour and child bearing (Blair-Loy 2005, Bolick 2011, Dempsey, Williams, and Slaughter 2014, Dowd 2005, Hirshman 2005, Slaughter 2012, Stone 2008, Williams 2000, 2012). Some used demographic data to warn women of childless regret and feminism’s failures (Crittenden 2011, Gottlieb 2008, Rosin 2010), while others still theorized a “new cult of domesticity” (Friedman 2013, Matchar 2013)—where women choose to leave the

workforce to improve their wellbeing. A public conversation about women's affective experiences, particularly related to their ability to strike a balance of activities or "stay sane," ensues among and about upper-middle class white women, apart from the lives of women who are struggling to survive without financial security or access to basic needs such as health insurance or secure housing. For the most part, authors are addressing dual-income, heteronormative families in higher income brackets, or at least are speaking about a demographic of families who are not struggling to meet their basic needs. In fact, their prescriptions work against the struggle of the working poor and unemployed, as the authors strategically distance their critiques from comprehensive progressive taxation or new ways of thinking about labour and sustainability that resist the neoliberal, capitalist model, and involve increased welfare provisions for people whose basic needs and the needs of their children are not met. The perceived causes of a "madness" or "mess" experienced by some mothers—namely, the high demands of high-powered jobs and new intensities of care directives from scientific parenting—do not probe the foundations of what it means to mother in the contemporary moment. They do not consider the "madness" of demanding jobs that pay very little, that are precarious, that are unsafe, and that require long hours and commutes on public transit at irregular hours. They also do not consider what it means to not work for reasons other than choice, like chronic pain, depression, or disability. Instead, their chronicles of maternal anxiety, stress, and "too-muchness" are imbued with whiteness, fitness, heteronormativity, and wealth. These do not only construct an ideal mother-citizen who is positioned to at minimum navigate the demands of capitalism without threatening her children's immediate safety, they indicate that even the mothers with the most race, class, sexual, and bodily privilege are toiling under an affective burden. So the affect of motherhood in popular discussion gives a sense that some women are

coming undone by the promise of happiness. But while some women might be granted the “pass” to rely on a spouse for financial support as a form of charity while they care for children as a form of philanthropy, the competing citizenship demands of mothers who cannot pursue responsible reproduction are left alone, with negative implications for their social inclusion if they fail to pursue and identify with the guideposts for the good life.

Two more recent agents in this discussion are journalistic and scholarly respectively. Brigit Schulte (2014), a successful journalist for the *Washington Post* who is married to Tom Bowman, a Pentagon reporter for *NPR*, authored a partial memoir: *Overwhelmed: Work, Love, and Play When No One Has the Time*. It is a compelling book about women’s paid, unpaid, and emotional labours, in which Schulte describes the specifically temporal sensations of the affect of executive motherhood, characterized by a sense of racing time and corresponding anxiety. She moves in between the Wollestonecraft dilemma—the debate over whether to advocate women’s equality through “gender neutral” prescriptions of citizenship or gender-differentiated responsibilities and rights of citizenship—as she details the chores she seemed to naturally takeover once the couple had children (tying the impetus to care to some essentially gendered trait), yet chalks some of this impulse up to gender socialization and cultural expectations that become internal expectations. In some ways, she resists an essentialist tie to certain unpaid labours. She also describes her inability to measure unpaid labour in increments to be measured by quantitative sociological experiments, complicating the problem of affective burdens as labour that is only sensed, not seen. Her work illustrates the two components of the affect of motherhood discussed throughout this dissertation: the way feelings generate and circulate within and among women

(and men) about their labour responsibilities, and the feelings that characterize contemporary motherhood in general, which she calls depression, anxiety, and stress.

From another angle, sociologist Ana Villalobos (2014) criticizes what she calls the pressure on women to take on a particular way of mothering for national security in her book, *Motherload: Making It All Better In Insecure Times*. Villalobos (2014) argues that since insecurity characterizes modern motherhood, women are encouraged to rely on the mother-child relationship for a sense of security, resulting in a deflection of real threats and mothers becoming preoccupied with how best to structure the mother-child relationship for their own wellbeing and the future health of families. This maternal investment in children can be seen in the myth of the tiger mother, the “Chinese mother” who invests all of her time (away from paid labour in some cases) in training her children for future success, particularly to be competitive in the capitalist labour market.¹⁶⁵ The myth is reinforced by the parallel myth of South Asian students as “model minority youth,” and the subsequent real pressures on South Asian youth to live up to ideals of academic and economic success (Navaratnam 2011). For the mythical tiger mother, if children do not excel academically, Chinese mothers are not doing their jobs. In other words, if mothers do not sufficiently invest in training their children according to neoliberal definitions of success and productivity, regardless of their abilities or mother’s passions or subjectivities, the mother is failing her citizenship responsibilities. This duty pertains to women’s affective citizenship because it is laden with fear of judgment, fear of falling outside of the national imaginary, as well as fear of raising unhappy, unhealthy, unsuccessful, unproductive, or failed future citizens.

¹⁶⁵ See Amy Chua’s *Battle Hymn of the Tiger Mother*. For scholarly critique dispelling and nuancing the racial stereotypes put forward in Chua’s memoir, see Juang, Qin, and Park (2013), “Deconstructing the Myth of the “Tiger Mother”: An Introduction to the Special Issue on Tiger Parenting, Asian-Heritage Families, and Child/Adolescent Well-being.”

Women's affective citizenship is to cope with this fear, and use this fear to fuel their cruelly optimistic relationship to responsible reproduction. What we will see in the next section is how women's affective citizenship—including this fear or the threat of non-regret—is constructed through tall and exclusionary tales about women and their relationship to their own fertility. Now that I have threaded the popular editorial conversation about the affect of motherhood and responsible reproduction, particularly in terms of the promise of maternal happiness and the threat of non-regret, I now briefly elaborate the current conditions of fertility discussion in popular media before moving on to consider how this mainstream discussion women's citizenship responsibilities plays out in social psychology research.

As the above analysis shows, the affective burden of high-profile, high-earning mothers is often cited in conjunction with national fertility statistics, some explicitly pointing to cultural unease around the issue of fertility rates dropping below replacement. In May 2011, the US Census Bureau report, *Fertility of American Women 2010*, once again announced a “delayer boom,”¹⁶⁶ as more educated women were having children later and having fewer children overall than women ten years earlier. The next day, *USA Today* ran the inflammatory heading, “White women more likely to be childless,” (Jayson 2011) breaking down the findings by race before citing an external researcher who explained the potential for this finding to be influenced by levels of education. In 2012, *Yahoo!* news ran the inciting and mathematically puzzling headline, “U.S. Census: Minority babies now majority, surpassing whites for first time” (Stableford 2012). In these stories, reproduction, social and biological, is required for relieving contemporary cultural anxieties derived from threats on several scales. As we saw at the beginning of this chapter, affect and queer theorists have critiqued this futurist investment in social and biological

¹⁶⁶ <http://www.census.gov/newsroom/releases/archives/fertility/cb11-83.html>

reproduction. For example, in Ahmed's critique of the cultural promise of happiness (2010, 184), she argues that children "bear the brunt of this fantasy" for a utopian future, and women who do not have children become the subject of blame for denying cultural hope for this future. Here she echoes Edelman's (2004) critique of reproductive futurism. Ahmed explains that, "however we read this idea of a pointless existence without children, the anxiety expressed is that the future as an idea has been lost" (2010, 184). In this discourse, reproduction (by some) is connected to hope at the same time that women's good feelings are connected reproduction. Public anxiety or insecurity, though tied here to women's responsibility for social reproduction, is hardly a product of reduced fertility alone, though these phenomena are tied in the story of declining fertility rates and other forms of instability.

In the affect theory section at the start of this chapter, I mentioned Cvetkovich's (2012) take on depression as what she calls a "public feeling." Certainly the inflammatory headlines about white women's childlessness incite anxiety, if only for the purpose of selling copy. But as we have seen anxiety, or what might be distilled to fear, characterize responsible reproduction, it is useful to think of women's citizenship and its affects in the context of a broader public feeling of anxiety, and how that might relate to women's citizenship responsibility to pursue good feelings for themselves and others. In 2014, the Institute for Precarious Consciousness with the CrimethInc. Ex-Workers' Collective produced a zine called "We are all very anxious" in which they argued that capitalism is constantly coming into crisis and being recomposed, through resistance, along newly dominant affects. The zine presents recent dominant affects of capitalism, arguing that whereas in the modern (prewar) era, the dominant affect was "misery" as the working class struggled to achieve social minimums, by the mid-twentieth century, the

dominant affect was “boredom,” as job security, welfare provision, and the co-optation of the labour movement served to quell misery for many workers, but repetitive jobs resulted in their lacking a sense of purpose. In contemporary capitalism, they argue, the dominant reactive affect is anxiety. The argument put forward in this activist text complies with measures by the medical model, under which anxiety and depression are now the most common mental illnesses in the United States and Canada, experienced by 18% of adults in the United States¹⁶⁷ and 10% of adults in Canada.¹⁶⁸

I mention this zine here in discussion of the affect of motherhood because this phenomenon is also gendered: women are assessed as twice as likely to experience anxiety/depression than men, and depression/anxiety in women occurs most frequently between the ages of 25 and 44, particularly during childbearing years, with married women more likely to be depressed than single women.¹⁶⁹ Is something going on socially to affect this statistical bump in anxiety among women (a homogenized group in survey data) of childbearing years? For the authors of “We are all very anxious,” anxiety is the combined result of precariousness and omnipresent surveillance—together forming the constant examination and classification of bodies inculcated by neoliberal versions of success. Similarly, Villalobos (2014), whose scholarly work on the “motherload” I mentioned above, critiques the expectation for women to invest heavily in the maternal-infant bond to supplant feelings of precariousness. In terms presented throughout this dissertation: mothers come undone by attempting to manage or “juggle” competing citizenship responsibilities because they are guideposts of the good life in insecure circumstances. Using a different language, the WHO finds that depression and anxiety are “significantly related to

¹⁶⁷ <http://www.adaa.org/about-adaa/press-room/facts-statistics>

¹⁶⁸ http://alberta.cmha.ca/mental_health/statistics/#.U9fZi4BdVy8

¹⁶⁹ http://www.bayridgetreatmentcenter.com/facts_statistics.html

interconnected and co-occurrent risk factors such as gender-based roles, stressors and negative life experiences and events” and gender-specific risk factors include “gender-based violence, socioeconomic disadvantage, low income and income inequality, low or subordinate social status and rank and unremitting responsibility for the care of others.”¹⁷⁰ Precariousness or living with “risk factors” is of course felt, and mental health measures make clear the gendered experiences of multiple forms of insecurity. For the purpose of deciphering the elaborate public discourse that illustrates an affect of contemporary motherhood in relation to women’s citizenship, this literature has the potential to point to, for example, gender as a social determinant of health, or to open possibilities for discussing the structural designation of unpaid labour to women, or to migrant women as low-status work. But this is not the story about motherhood that we hear in the popular press.

Feminist policy research shows that mothers in particular navigate intense precariousness and surveillance due to their overrepresentation in part-time and piecemeal labour, and in low-paying care work, and the fact that they are paid less than men for equal work (Evans 2007). They are culturally sanctioned to provide unpaid domestic labour through the gender contract (Vosko 2010) and, as Silvia Federici (2004) argues, women’s decline in status under capitalism has been aggravated by the neoliberal agenda. Here I extend Federici’s historical work to show how women, as part of this aggravation, are compelled to ease the public’s unrest about the necessities of life being just out of reach (Institute for Precarious Consciousness 2014): by responsabilizing themselves toward family and paid labour simultaneously. As I detailed in Chapter 2, over the last decade, countless popular media and scholarly pieces have maintained a conversation about women’s struggles with how to manage their families (Armenti 2004, Bassett

¹⁷⁰ http://www.who.int/mental_health/prevention/genderwomen/en/

2005, Blair-Loy 2005, Bracken, Allen, and Dean 2006, Gaudet, Cooke and Jacob 2011, Krull and Sempruch 2011), which the media has consistently debased as the “mommy wars,” telling us that women’s competing labour burdens are illegitimate: they are nothing but petty squabbles between carers over such mundane things as how to sleep train or how to make lunches. In popular press, authors defend the choice to stay home (Dell’Antonia 2012a, Friedersdorf 2012, Lovric 2015, Merrick 2013, Walsh 2013, Zelikovsky 2012), defend the choice to work,¹⁷¹ and debunk the myth of choice (Douglas and Michaels 2005), and in recent editions of the conversation about “work-life balance,” authors strategize around or advise women on how best to optimize career success while respecting their fertility (Caucutt, Guner and Knowles 2002). The latter is particularly of interest to women’s affective burden, as women’s work, choices, and fertility share a common thread: a claim to the pursuit of women’s wellbeing. Usually relating women’s good feelings to achieving optimal flexibility to balance work and family life, these conversations are carried on by and about a privileged class of predominantly white women in the United States and Canada (see Watson 2014).¹⁷²

Further, what we see in mainstream discussion of women’s responsibilities is that women’s bodies are under surveillance and responsabilized before they become mothers. For example, Baby Zone, a website hosted by Disney, ensures that, “the idea of consciously preparing for conception and pregnancy is a rather recent phenomenon, but well worth the effort” and as such, “protecting your fertility should really begin in your teens” (Metzger 2014). The article advises

¹⁷¹ For example, see “The mom shift,” a new website celebrating the “normal (non celebrity) working mothers who are achieving greater professional and work success after having their families.” <http://www.themomshift.com/about/>

¹⁷² As Graff (2007) has argued, these popular media discussions about the deliberations of a small group of mothers are marketed to achieve broad circulation by “tugging at the guilt of the privileged.” I would extend that they are also circulated to trigger anxieties of young women who are coming into their fertility in a time of global uncertainty and economic and environmental instability.

attending to pre-conception health if, among a host of reasons, you “want to do the best for [your] babies,” or have “a personal history of birth defects.”¹⁷³ A parenting mega-website, *Parents.com*, similarly advises women to, “eat a good pre-conception diet, be sure to exercise, and follow some important pre-pregnancy dos and don’ts.”¹⁷⁴ *The Examiner*, a fast-growing citizen journalism network, recently published, “The teenage girl’s guide to preventing infertility” (Whelan 2013), which shamelessly targets young girls. Whelan (2013) writes, “you may already know you want to be a mom someday but right now, you’re probably more focused on school, having fun and your social life than you are on future goals. Did you know that many types of infertility can be avoided if you make some easy, pro-health choices during your teen years?” Their suggestions include individualizing health “choices,” slut-shaming, and egg-freezing: “don’t be a toxic beauty queen, respect yourself, skip the sugar, choose healthy habits, put some [eggs] aside for a rainy day” because “no matter what your personal choices are for the future, as a teenager now, protecting your health and safeguarding your fertility will continue to give you every option you have already envisioned and possibly even some that you have not yet dared to dream about.” This recommendation comes despite the fact that neither the American College of Obstetricians and Gynecologists nor the American Society for Reproductive Medicine, a membership organization representing roughly 500 fertility clinics in the United States, endorse egg freezing as a healthy option for circumventing reproductive aging due to the

¹⁷³ The article explains the pregnancy “dos and donts,” claiming that, “three organizations have made significant contributions to defining what needs to be considered before conception. The US Centers for Disease Control and Prevention (CDC) recommendations include at least an 18-month time period between pregnancies, 400 mcg or more of folic acid a day, cessation of smoking, avoidance of alcohol, testing and treatment of sexually transmitted diseases, HIV testing, up-to-date immunizations, assessment of chronic conditions, avoidance of unsafe drugs during pregnancy, and achieving a healthy weight. The March of Dimes, the CDC, and 34 partner organizations are working together to educate health providers, women, and men about the importance of preconception risk reduction and healthcare.”

¹⁷⁴ <http://www.parents.com/getting-pregnant/pre-pregnancy-health/>

potentially dangerous side effects of ovarian hyper stimulation and egg retrieval. Egg freezing is aggressively marketed by private companies (with sponsorship from pharmaceutical companies) as the next best thing for women’s autonomy since the Pill, despite its unknown risks to mothers and babies (Johnston and Zoll 2014). And egg-freezing promotion is another example of how individual women are responsabilized to cure a perceived social ill—in this case, incompatible gendered labours. As Miriam Zoll, author of *Cracked Open: Liberty, Fertility, and the Pursuit of High-Tech Babies* (2013), argues, “in a world where ‘responsible’ women freeze their eggs...the complicated problem of reconciling work and family is theirs alone to resolve” (n.p.). As I mentioned in Chapter 1 of this dissertation, tech giants Apple and Facebook now offer employees elective egg freezing benefits, with Apple citing how it “cares deeply” about women and families. In fact these companies stand to benefit from women devoting themselves to their careers during the years when they might be most fertile, and the risks associated with ovarian hyper stimulation and egg retrieval are absent from discussion of the time savings involved in aiming to have children later in the reproductive cycle.

The myth of women’s responsibility for pre-pregnancy health “decisions” is also perpetrated in mainstream avenues, in stories that are loaded with implications for women’s affective citizenship. *Body Ecology*, a lifestyle website and book that gives dietary advice and has been featured in major sites like the *New York Times*, gives similar advice in the article, “What every girl and woman needs to know NOW if they ever want to have a baby.”¹⁷⁵ The article opens by alarming women—playing to the affect of fear and anxiety over the “guideposts” of health child bearing—that “Autism, Down Syndrome, ADD, childhood obesity and diabetes ... the rate of

¹⁷⁵http://bodyecology.com/articles/woman_needs_to_know_have_a_baby.php#.U9gEB4BdVy9

serious childhood diseases is on the rise,” so women should change their individual “lifestyles” before pregnancy to reduce the incidents of childhood diseases and to guarantee “a bright future for generations of children to come.” It assures women that, “at a time when giving birth to a healthy baby seems more and more difficult, most women are unaware of how their nutrition and lifestyle can positively impact the health of their future child.” Here we see a direct link between women’s individual behaviours, women’s ignorance, and the health of future children, setting up anxious conditions for young women who may or may not be contemplating motherhood. And again we see mention of “lifestyle,” by which the article means the ableist and individualist “lifestyle factors” including “mom’s mood” and the importance of women developing a “vibrant inner ecosystem,” of course with no mention of circumstances affecting prenatal stress. Instead, readers of this article and like articles learn that when women’s adrenal glands are healthy, babies are born with excellent ability to focus, whereas children who experience enlarged adrenal glands “will find it very hard to focus.” Here women are explicitly induced to *feel good feelings*—to curate a “good mood” and a “vibrant inner ecosystem”—in order to secure future wellbeing of their families. Moving beyond tangible guideposts for the good life, the *good feeling is itself the happiness object*. This artefact dovetails smoothly with Ahmed’s (2010) argument that feminized bodies are responsible to generate happiness in others by offering themselves as agreeable, happy subjects as supported by the speech act from a father to his daughter, “I just want you to be happy.” In the *Body Ecology* article, we do not see, nor do we expect to see, the politicizing of situations that lead to a sense of precariousness or bad feelings, like insecure housing, food insecurity, physical insecurity, lack of access to health care, or even what we could call “lifestyle factors” like long commutes to work or prolonged exposure to noise due to living by a highway. Women are instead simply told to have good feelings. Readers are

then advised to pass this article along: “help reduce the incidence of childhood disease” by “sending this article to parents-to-be (even if they are of high school and college age).” Here, even young girls are incited to pursue responsible reproduction under the auspices of safeguarding their future good feelings and wellbeing of their families. While we can not extrapolate a social trend from the few articles I mention, evidence of women’s responsibility to reproduction before they become pregnant is also supported by the industry and rhetoric of egg freezing, meaning the sentiments of the *Body Ecology* article are not limited to explicit nutritional advice publications.

More prevalent than these examples of pre-pregnancy responsabilizing is a wide body of literature around *when* women (in responsible contexts, with enough money and physical security to properly support a child) should conceive to avoid disappointment and regret. The articles are nearly always about women’s pursuit of good feelings, even though a British study recently found that men who do not have children are more likely to suffer depression¹⁷⁶ about the issue than women.¹⁷⁷ From Nancy Gibbs’ (2002), “Making time to have a baby,” in *Time* magazine which opens, “Listen to a successful woman discuss her failure to have a child, and the grief comes in layers of bitterness and regret,” to Jean Twenge’s (2013), “How long can you wait to have a baby?” in the *Atlantic* which claims that the “deep anxiety” about childbearing in later life is unfounded, the affective terrain of social reproduction and gendered responsibility is fraught with contradictory medical findings, overwhelming social expectations, contradictory

¹⁷⁶ Researchers reported that, “One in four men had experienced anger because they did not have any children, compared with 18 per cent of women, while 56 per cent of men had experienced sadness because they did not have any children, compared with 43 per cent of women. However, no men had experienced guilt because they did not have any children although 16 per cent of women had.”

¹⁷⁷ Thirty-eight per cent of men had experienced depression because they did not have any children, compared with only 27 per cent of women. See <http://www.dailymail.co.uk/health/article-2302954/Men-children-depressed-sad-childless-women.html>

testimonials, and myriad statistics. There are many correlations between women's individual behaviours and the wellbeing of their families presented in these articles that demand to be challenged, but the most important meaning of this discourse for this chapter on women's affective citizenship is how they collectively designate the deserving and undeserving mother-citizen through tenets of responsible reproduction and the threat of non-regret. In other words, these stories present having children "before its too late" to secure good feelings, and potentially "opting out" of paid labour to pursue "balance," imbuing gendered citizenship with a responsibility to juggle, to prioritize care work, to follow the myth of the adult worker, and to have good feelings. Moreover, women are encouraged to simply have good feelings in order to secure future good feelings in themselves and their families. Given the fact that women's fertility and responsibility to reproduction is often situated in conditions of anxiety and precariousness and punctuated by happiness objects in popular rhetoric, I now turn to briefly shed light on how the threat of non-regret compares to psychological research on reproduction, fertility, and women's positive affect. As social psychology research reveals, responsible reproduction is a questionable happiness object, making its centrality to contemporary women's citizenship suspicious as well.

The psychology of maternal happiness

In 1981, Nobel-prize winning economist Gary Becker published his influential *Treatise on the Family*, in which he applied the economic theory of "utility" to households, which he conceptualized as "small factories." From this perspective, Becker examined the effects of policies on the functioning of households, including family formation (choosing a [heterosexual] spouse and having children). Seen as a unification of social sciences, his work is still influential,

especially in economic explanations of partnership and child rearing in low-fertility contexts (Kohler, Berhman and Skytthe 2005). From this perspective, if individuals are clear about the benefits of family formation and are able to make informed choices, “partner + children = happiness” (Kohler, Berhman and Skytthe 2005, 407).

This theorizing is not only heterosexist and ableist in its assumptions about family formation, childbearing, and kinship, it is inconsistent with other research in the field. In fact, studies comparing childless adults with parents show “little consistent evidence of diminished subjective wellbeing,” and even having *regrets* about childlessness may or may not influence subjective wellbeing in adults (Koropecyj-Cox 2004, 957). Studies show that while social norms may marginalize women and thus trigger diminished wellbeing, many childless¹⁷⁸ adults report few regrets and no psychological harm in middle and later life (Koropecyj-Cox 2004). Building on these findings, sociologist Tanya Koropecyj-Cox used the *National Survey of Families and Households* to test a typology on both the basis of *attitudes* about childlessness and the connection to negative affect, and the relationship between *quality of parent child relationships* and wellbeing. She found that only mothers with negative parent-child relationships and women whose attitudes were incongruent with their parental state (i.e. those who were childless but reported the attitude that it is better to have children than remain childless) reported experiencing more loneliness and depression than other adults.¹⁷⁹

These studies help to nuance connections between motherhood and happiness that we see in

¹⁷⁸ A feminist movement has reclaimed “childlessness” as “childfree” status to assert the possibility of a full life without reproduction, but I use the language of the corresponding research. Childfree is not yet a common way of referring to women without children in psychological or economic research.

¹⁷⁹ Childless men were not found to be significantly disadvantaged regardless of attitude.

popular editorial, as the findings show that “parenthood does not guarantee less loneliness or depression in middle and old age,” as quality of relationships, personal attitudes, and social pressures factor more (Koropecj-Cox 2004, 967). Further complicating research on the relationship between becoming a mother and psychological wellbeing is the contrasting theory about happiness that is “person-based” rather than “event-based.” For example, “setpoint theory” poses that individuals are already on a “personal treadmill” (Kahneman 1999, 14) of mood, so life events like relationship formation and dissolution or childbearing have little to do with their long-term global life satisfaction (Csikszentmihalyi and Jeremy 2003, Easterlin 2005). In their 2005 twin study, Kohler, Berhman and Skytthe attempted to bridge these hypotheses (event-based or personality-based subjective wellbeing) by purporting to control for genetic and socialized predispositions. Building on an increasing literature probing why women have children in poorer countries if they do not add utility, the researchers found that significant happiness gains are associated with first children, but motivation for second and higher order children is unknown. They concluded that there is a “lower limit to low fertility imparted by the strong happiness gains associated with first children,” but that their evidence does not suggest individual motivation is strong enough to result in replacement-level fertility. They also suggested that family policies aimed at increasingly fertility may not result in increased subjective wellbeing for parents, which seems to suggest that economic explanations of fertility—which frame the impetus to reproduce as a belief in children as beneficial long-term investments—have missed the mark.

In a study on affect and the transition to parenthood among heterosexual married couples, psychologists Twenge, Campbell and Foster (2003) probed the scientific debate over whether

couples experience a decline in partnership satisfaction after childbirth. Seeking to provide “practical value for those who wish to make an informed choice about having children,” (2003, 574) as if informed choice about partnership satisfaction is a common condition of pregnancy, they found that parents report lower relationship satisfaction compared with nonparents, and that there is a significant negative correlation between relationship satisfaction and number of children. The results are most pronounced among women with high socioeconomic status and among parents with infants. The researchers theorize openly in their conclusion, suggesting that the findings might help couples set lower expectations for relationship satisfaction after the birth of a child. In discussion of the unsurprising finding that women report feeling overburdened as new mothers and also dissatisfied and resentful in their partnerships due to an imbalance of care responsibilities, they advise that this decrease in satisfaction should not discourage people from having children, as there might be other happiness gains associated with having children that outweigh relationship satisfaction. They do not advise shifting the burden of care work. They do not challenge existing social structures and they do not discuss gendered access to power.

It is clear that studies on childlessness and childfree women reach contradictory conclusions when it comes to women’s wellbeing. It is also remarkable how far removed are social psychology studies of self-reported feelings and affect theorists examination of public structures of feeling and feelings as the register of historical experience. What emerges in self-reported studies, though, provides insight for considering women’s affective citizenship and how it responsabilizes women toward responsible reproduction. For example, a recent Australian survey found that childfree women aged 73-78 reported few differences in physical and emotional health than those with children (Cwikel, Gramotnev et al. 2006), while a 2008 study found

childfree women in middle and older age reporting lower life satisfaction than mothers (Hansen, Slagsvold et al. 2009). A 2011 study review of the US *National Survey of Families and Households* found that the same proportion of mothers whose marital satisfaction remained stable or increased over time was the same as that of women who did not have children (Dew and Wilcox 2011). A recent executive summary by the well-known *Enduring Love* project at Open University reports that, “mothers are more negative about relationship quality, relationship with partner, relationship maintenance, happiness with relationship/partner than childless women. However, mothers are significantly happier with life than any other group” (2013, 3).¹⁸⁰ The only consistent finding in social science research is that women’s subjective wellbeing across the life course is not neatly tied to having children, which comes as no surprise in the context of affect theorists’ work on the dynamism of affective states, on daily micro-traumas, and how feelings as sensations circulate in messy and nonlinear patterns and repetitions (Cvetkovich 2012, Ahmed 2010). Such variables as voluntary childfree status, involuntary childlessness, attitudes about social responsibility to have children, experience of social isolation, age, personality, health, marital status, socioeconomic status, education level, and geographic region skew results in various and inconsistent directions. The topic is widely and increasingly studied to no firm conclusion. In a comprehensive review of literature (1999-2009) on parenthood, childlessness and wellbeing, Umberson, Pudrovska and Reczek (2010, 613) summarize:

Parents of minor children are more distressed than their childless counterparts (e.g., Nomaguchi and Milkie, 2003). In contrast, parents of adult children report levels of distress and well-being that are similar to those of the childless (Evenson & Simon, 2005; Pudrovska, 2008). [...] Generally, childless young adults report better well-being than

¹⁸⁰ The executive summary of the *Enduring Love* project retrievable at <http://www.open.ac.uk/researchprojects/enduringlove/files/enduringlove/file/ecms/web-content/Final-Enduring-Love-Executive-Summary.pdf>

parents (Nomaguchi & Milkie, 2003), although one study found that childlessness in young adulthood may be stressful in the context of thwarted fertility intentions, especially for women with lower family income (McQuillan, Greil, White, & Jacob, 2003). As for childlessness at midlife, Koropeckyj-Cox, Pienta, and Brown (2007) analyzed national, cross-sectional data to compare the well-being of childless women and mothers in their 50s and found that childlessness was not associated with worse psychological outcomes in midlife. It was women who became mothers early in the life course who experienced lower well-being—largely because of marital disruption and fewer socioeconomic resources.

This literature review lends two things to my conceptualization of women's affective citizenship:

(1) it presents well the antithetical conclusions of social scientists who seek to determine a relationship between life satisfaction and fertility or family formation, particularly in the contemporary context of increased childlessness and below-replacement birthrate among some (highly educated, mostly white) women, and (2) it suggests that there is much more to gendered affective terrain than popular rhetoric around women and fertility suggests, and the fact that women's wellbeing is characterized in these terms has political implications. The above authors find that, "a theme of the 2000s is that parenthood, per se, does not predict well-being in a systematic way" (Umberson, Pudrovska & Reczek 2010, 614). The reviewers conclude that, "in sum, recent research emphasizes that the well-being of new parents cannot be fully understood without considering the timing and context of the transition to parenthood. Becoming a parent may be a profound stressor, with negative long-term consequences for some people and an important source of well-being for others" (2010, 615). They note that future research may explore the theme of "ambivalence" among parents who experience distress and happiness simultaneously.

This lack of relationship between self-reported life satisfaction, gender, and reproduction provides the context for thinking about women's affective citizenship in terms of the "public

feelings” that produce and contain it. Cvetkovich (2012) characterizes a Public Feelings project as being a project about emotions, feelings, and affects in a generic sense, but more specifically being about cultural criticism: about how collections of feelings that exist in the public and private domain and are made expressly public through their articulation and exchange are fountainheads of social critique. In other words, Cvetkovich is interested in how one feels to know how capitalism feels, all in order to launch social critique of systemic injustice. I understand her project as stemming from the desire to forge a renewed understanding of “the personal is political” within what she and her contemporaries have called the affective turn—with the ultimate goal of considering possibilities for new forms of feminist political, intellectual intervention in the public sphere. While *Depression: A Public Feeling* (Cvetkovich 2012) advances feelings of inadequacy and impasse that mark a race and class-privileged professional life, the idea of public feelings remains invaluable for women’s affective citizenship because it enforces the necessity to follow affective content through to its political implications. Cvetkovich’s interest in tracking the relationship between the macro and micro when it comes to feelings provides the foundation for investigating affective public content around women’s labours and reproduction to better understand women’s citizenship responsibilities—particularly how women come to understand their multiple responsibilities to citizenship.

Conclusion

We can see that women, who are encouraged to pursue responsible reproduction, and mothers, who are responsible for the future wellbeing of families, are disproportionately responsabilized toward happiness objects. As such, mothers who fail to be happy must be ignorant or stubborn, so advocating or advising toward happiness objects becomes a legitimate strategy. There are many examples in popular press of how this happens discursively, such as framing young

women as naïve or selfish for failing to reproduce in their twenties (e.g., Crittenden 2010), but we can also think of how the cultural expectation for individuals to pursue happiness figures more materially in terms of how mothers receive formal supports or not. Recall the case of breastfeeding promotion, where mothers who did not breastfeed were deemed in need of information of how breast is irrefutably best. Ability to breastfeed did not factor in promotional campaigns, and as such, women who could not pursue what governmental campaigns deemed best for children were positioned as failing at the pursuit of common wellness by their own ignorance or willfulness. Crittenden (1999) used a similar manoeuvre to present women's "delaying" of childbearing as ignorance in *What Our Mothers Didn't Tell us*, in which she blames feminism for tricking women into finding joy in paid work only. She elaborated this anti-feminist perspective in a homemade Youtube video called "How can I meet the right guy?" where she blames willful women for being unable to find happiness living with another person. This discourse, which is laden with affective content about mothers as threats to their own children, makes possible the continued lack of support for women in the way of social assistance, labour reform, or comprehensive protection from violence. The affective economy of breastfeeding as a wellness object and formula feeding as a social threat erases women's daily lives.

In the current chapter, I have used affect theorists' notions of the "promise of happiness," "happiness objects," (Ahmed 2010), "cruel optimism," (Berlant 2010), "reproductive futurism" (Edelman 2004), and "public feelings" (Cvetkovich 2003) to elaborate what I have called women's affective citizenship. Specifically, I have traced a public conversation about responsible reproduction as a happiness object, and showed how women who do not pursue

responsible reproduction are depicted as naïve about their own fertility or ignorantly rejecting good feelings and the future wellbeing of their families. As Ahmed (2010) argues, by not investing in the future through reproduction, women are implicitly positioned as rejecting happiness. The gendered citizenship responsibility to secure good feelings adds to women's responsibilities I have mapped in previous chapters: to become agile and flexible enough to "juggle" competing labours while prioritizing family wellbeing, to breastfeed exclusively (to perform intensive unpaid care labour without government provision or sufficient social support, regardless of abilities), and now to pursue and generate positive affect through responsible reproduction.

Popular editorial on the emotional burdens of a subset of women struggling to work and provide care work conveys how a subset of women are imagined to navigate their competing labours, and how this takes space in the national imaginary as a "generation of women."

Scholarly social psychology literature on women's reproduction and good feelings paints a complicated and inconclusive picture of the relationship between women's good feelings and reproduction, which calls into question the discourse of responsible reproduction as the ultimate "happiness object" from popular editorial. True to the thread of neoliberal individualism throughout this dissertation, the story of women's reproduction and good feelings in popular representation depict happiness as the result of individual behaviours like "opting out" of paid labour, or getting married before the age of 35. Echoing the individualist approach to health citizenship and labour productivity that we have seen in previous chapters, this chapter's case

studies build on the notion that individual women are made responsible for curing social ills outside of their control, like public anxiety or depression resulting from precariousness.

What also emerges in juxtaposing these fields is the futurist orientation of women's citizenship: to reproduce "before it's too late" in order to secure wellness for themselves and their families, or to avoid risking infertility by "delaying" childbearing so as not to live a life of regret.

Women's "choices" that take centre stage as the determinants of their good or bad feelings.

Popular editorial shows how women receive the message to pursue wellness through "choices" around their reproductive labour so that they might avoid having bad feelings *later*. Affect theorists affirm this orientation: Berlant (2004) describes the relationship to the future "good life" as cruelly optimistic, and Ahmed (2010) challenges the "promise of happiness" for citizens who pursue happiness objects the right way. For Ahmed, good feelings are always oriented to the future, always just out of reach but necessarily pursued for belongingness.¹⁸¹ These notions of cruel optimism and the promise of happiness intersect in discourses of women's responsibility to reproduction through Edelman's (2004) notion of reproductive futurism, where individuals must invest in the future to belong in the present.

The futurist orientation of responsible reproduction and the affect of motherhood intersect with race, class, gender, sexuality, and ability with negative consequences for the social exclusion of folks in the most precarious circumstances. In popular editorial, we saw that discussion of responsible reproduction is, like the presentation of the juggling exalted mother figure in Chapter 2, a story laced with whiteness and affluence. It is also founded on heteronormativity, traditional

¹⁸¹ Ahmed lends that happiness is rarely present, because when it is felt, it threatens to "recede," "becoming the thing that we could lose in the unfolding of time" (2010: 161).

kinship structures that have historically punished women and queer folks, queerphobia, ageism, and ableism, as women's bodies are imagined to function neatly according to a statistically average "fertility window," and other stories related to infertility, the desire to be childfree, and alternative kinship structures are foreclosed. The queer theorists of affect I introduced at the start of this chapter are helpful for unpacking messages women receive about their citizenship responsibilities, and they also help us think about the radical possibilities opened up through the antithesis to this happiness pursuit. In *No Future*, Edelman argues for foregoing hope for a more inclusive social order in favour of refusing the "insistence of hope itself as affirmation" (2004, 4). We see this philosophy in action in political projects that criticize the "it gets better" campaigns for queer teens (see Eichler 2010, Puar 2010, Spade 2010). For Edelman, only in the rejection of futurity can queerness be present. For mothers, this means refusing the responsibility for cultural reproduction vis-à-vis human reproduction before it can be failed. Because to become oriented means to be directed toward and identified with specific objects that are already attributed to being tasteful, *as enjoyable to those with good taste*, the invitations to become mothers in due time are not neutral. In simpler terms, happiness objects are high-status objects, so those who desire them must also have some status. As aforementioned, Ahmed shows how we become "alienated—out of line with an affective community—when we do not experience pleasure from proximity to objects that are attributed to being good" (2010, 41), since "to be directed toward such good things is to be directed the right way" (38). Affects are "contagious" in this sense, because we become good if we feel good and if we cause others to feel good: "when we are affected in a good way by what is attributed as being good, we become the good ones, the virtuous and happy ones." Collecting the messages from this and the preceding chapters, we can discern that mothers who are not made happy by practices like reading to

infants or exclusive breastfeeding—or young women who are childfree—are precluded from becoming the good ones, and excluded from cultural happiness as it is empirically understood. Within this affective economy, or set of contagious affective exchanges, there is a moral path and it is imbricated with pursuing culturally sanctioned happiness objects. As Ahmed makes plain, “the good life is the life that is lived in the right way, by doing the right things, over and over again” (36). Women must continually perform their desire for responsible reproduction and all it entails to be included as deserving citizens.

This chapter also took on the notion that bad feelings, in a similar way to pregnancy and disability, threaten workplace productivity. Thus, the neoliberal ideal of individualism designates those with bad feelings as perpetually threatening and undeserving of provision. In this context, the affect of motherhood is marked by women’s sense of coming undone in pursuit of paid and unpaid labour and responsible reproduction—all to secure good feelings for themselves and their families. However, it is only a small subset of women whose primary needs are met, presumably by male spouses, who can opt out of bad feelings. Even when they do, they find the adjustment to new subjectivities at odd with the myth of the adult worker can become too much itself (see Macdonald 2014). Still, for women’s affective citizenship, we again saw that if families are financially secure, women are permitted to work in unpaid labour only and still be deemed responsible. In fact, since they are then more likely to pursue happiness objects like organic cooking and breastfeeding, they become exalted for their “choice.”

Unlike the foregoing chapters where I traced examples of how women were responsabilized to prioritize paid labour, or unpaid care work, or to juggle both, depending on the context, this

chapter suggests that the process of hierarchizing responsibilities and “choosing” for the sake of wellness provide the conditions women’s feelings, and this process is disciplinary. As I showed in the previous chapter on responsabilizing infant feeding through state-sponsored breastfeeding promotion, the neoliberal state helps citizens adapt to scarce conditions or social ills (e.g., child obesity, anxiety) through advocacy campaigns (e.g., that insist a causal relationship between individual women’s behaviours and children’s future productivity), presumably under the logic that they are helping citizens to help themselves (see Dardot and Laval 2009). But this obviously ableist logic does not protect “citizens” from precarious circumstances, nor does it address root causes of social ills or the structural and institutional conditions that sustain them. As neoliberal definitions of citizenship withdraw from the notion that the state provides for residents and defines a common good (Dardot and Laval 2009), there is new pressure on mothers to address social problems “at home” through their unpaid care, to improve the general wellbeing of citizens.

In this chapter, I demonstrated a three-part argument: 1) that women are responsabilized to cure the social ill of bad feelings—like anxiety and depression—by generating good feelings through their responsible reproduction, 2) that the cultural expectation on women to juggle or balance—by becoming agile or flexible—is a form of affective labour that is disciplinary, and divides women into “deserving” or “undeserving” mothers based on this ability, and 3) that women are responsabilized toward unpaid reproductive labour vis-à-vis messages that link their reproduction to their future happiness and ability to generate happiness in others, burdening women with invisible unpaid work that becomes frightening to resist. The pursuit of wellness—especially the claim to “do what makes you happy” in the context of mothering and empirical research about

when to become a mother—organizes women into those who are willing to be responsible for social reproduction and those who are unable or will not. In the previous chapter, I argued that state-sponsored breastfeeding promotion, as it opens space for only some women to perform mothering best practices, serves to discipline women according to methods of infant feeding and subsequently organizes women into categories of responsible and irresponsible, deserving and undeserving. This chapter showed how even the *pursuit* of maternal wellbeing via responsible reproduction is impossible. While embodying happiness in the present—as affect and physical state—is always out of reach for all, it is “responsible,” affluent, predominantly white women who honour and are honoured by this discourse and are thus further bound together in joint aspiration while poor mothers, migrant mothers, mothers on welfare, while incarcerated mothers who cannot pursue this wellness agenda, are rendered stubborn, threatening to their children, and unworthy of social acceptance.

Conclusion

Responsible reproduction is at the heart of an elaborate public discourse on what motherhood now entails. Under neoliberal conditions and in precarious circumstances, how women appear to juggle their commitments to paid and unpaid labour, and in particular to paid, reproductive, and care labour, determines how mainstream discourses reflect their value as citizens. As women are responsabilized toward unpaid intimate work in newly empirical ways—for example, as women are encouraged to perform the sentient and time-consuming labour of breastfeeding for a minimum of six months to maximize their children’s IQ scores—at the same time that they are encouraged to *lean in* to full-time paid employment by correcting their individual behaviours to achieve success in masculinized spaces, contemporary women in Canada and the United States are encouraged to rise above welfare retrenchment and inadequate provision by juggling “it all.” In a climate of insufficient provision, doing and having “it all,” which frequently manifests in mainstream texts like news headlines, work-life balance editorials, best-selling memoirs, Blockbuster romantic comedies, and short-film advertisements that go viral, becomes a disciplinary rhetoric through which we see some women rising to the pursuit of exalted maternal citizenship and others—and their needs—falling away from responsible motherhood status.

Not only does the cultural expectation for women to balance their labours symbolically rank women according to their juggling abilities. The current welfare scaffolding, broadly speaking, is

insufficient to support women's different reproductive needs while guaranteeing their financial and physical security, so it requires that while some women pursue exalted motherhood, others be permanently excluded. We need only look to the employment requirements for women (and everyone) to qualify for paid parental leave in Canada and unpaid leave in the United States to see who is viewed as entitled to the state's coffers. As mentioned at several points in this dissertation, in Canada, where paid maternity leave is only granted to some women and far fewer fathers than mothers take parental leave, and in the United States, where unpaid maternity leave is not nearly universally guaranteed, state manoeuvres effectively segregate women who can perform expert-recommended best mothering practices from women who cannot: only women who can afford it (and who these policies expect are supported by a male partner) are granted the possibility of pursuing exalted motherhood. On unequal ground, women then come to be viewed as deserving or undeserving of provision based on their ability to juggle, balance, hierarchize, prioritize, and, ultimately, *care about* their multiple competing responsibilities.

But this dissertation is not expressly about maternity leave or policy in general. It has not probed welfare state designations, but has instead examined the symbolic realm of contemporary motherhood—the representations of women's responsibilities to citizenship that are situated in the gendered welfare state that feminist theorists of citizenship have thoroughly studied (Tronto 1993, Lister 2002, Yuval-Davis 1997). As cultural theorists bell hooks (1994) and Stewart Hall (2000) remind us, the symbolic realm through which we construct meaning and values has material consequences on the lives and livelihoods of social groups, and as Susanna Rance argued in 1997, discourses can kill. Symbols of motherhood, which contain and point to multiple discourses of motherhood, have material impacts on mothers, even if embedded affectively and

therefore taken less seriously in mainstream discussion of citizenship. As I have argued, mothers are commonly depicted in the popular representation as coming undone because they have impossible material responsibilities: to work for pay in an economically insecure environment, to reproduce healthy future citizens through specific mothering practices at a time when the dominant cultural affect is anxiety, and to generate wellness in themselves and others amidst individualist welfare retrenchment, environmental uncertainty, and a culture of violence against women. They are encouraged to make “choices”—about events as consequential as having children, as if this is always or almost always a choice, to miniscule negotiations, like what week to stop breastfeeding, as if this is always a choice—to resist coming undone to the detriment of families. A common thread in stories about how or when to mother and how to balance labours, even when the messages are incoherent, as we repeatedly saw, is that women have choices. Among several discursive threads in representation of contemporary motherhood, one persistent message is that motherhood is embedded with responsible and irresponsible choices. Choice feminism is still meant to do the work of liberating women from labour burdens, and even public rhetoric that crowds under the “feminist” umbrella commonly underscores this myth. Through their choices, which are debated publically across myriad mediated sites, women are perpetually ranked and disciplined. Even the most critical voices in mainstream representation tend to avoid challenging existing power structures to interrupt these schemes, falling into a new discourse of feminist women working and caring: what Williams and Dempsey (2013) call “the rise of executive feminism.”

Drawing on Thobani’s (2007) portrait of exalted citizenship, the exalted mother is an able-bodied mother who is free from intellectual disabilities, who conforms to a beauty ideal that is imbued

with whiteness, thinness, fitness, clear skin, strength, femininity, and a sort of busyness and composure that suggests she is doing it all—being productive—while holding herself and others together. Importantly, my analysis showed that the subject position of exalted motherhood is *compatible* with coming undone, but for exalted mothers, coming undone only publically results in blunders like picking the children up late from childcare or accidentally pulling a stuffed toy out of a briefcase at an important meeting. The exalted juggling mother—who is permitted to outsource care work, though not without criticism or emotional effects—is never failing to the detriment of her children’s security or survival. She is droll—she encourages us to laugh at her and with her, and we can, because the kids are all right.

Still, for consideration of contemporary citizenship, the exalted mother, as we see in popular representation, is plagued with the affect of coming undone—a condition characterized by “too-muchness” and messiness—and therefore serves as a lightning rod for this dissertation’s broader argument. If even the most privileged mothers declare that they are coming undone in the face of responsible reproduction, women without their access to power cannot be sufficiently responsiblized to begin with. For women who fall outside of exalted motherhood, which is to say for women for whom the neoliberal ideals of independence, flexibility, and responsibility are far from reach, the conditions that produce an affect of coming undone for the most privileged will induce feelings of sadness and fear at the impossibilities of juggling their labours and generating wellness for their families. For women who are most excluded from power, these conditions can kill, as they threaten their families’ survival.

This dissertation has contributed three major concepts to feminist studies of citizenship: “responsible reproduction”—a notion that exists elsewhere but is here used critically and with reference to women’s labour burden, “women’s affective citizenship,” and particularly the affective state of citizens “coming undone” in neoliberal conditions. Theorizing ethics of care, women’s responsibilities to care globally, and maternal bodies in the context of specific welfare states would benefit from considering how women are induced toward responsible reproduction using newly quantifiable measures of anti-risk childbearing and childrearing. Responsible reproduction, then, is a dynamic concept that will move with cultural notions of maternal responsibility. It is tethered to neoliberal notions of responsibility, which Berlant (2007), Harvey (2007), and Martin (1994), among others, underscore as individualized, ableist, and shared among the dominant group to the exclusion of Others. Women’s affective citizenship, a fledgling notion emerging in sociological studies of care as the third (or even fourth) shift of emotional or administrative/management labour, provides theories of citizenship with a conceptual tool for studying the unwritten, consistently invisibilized, affective nature of gendered and racialized unpaid labour that is *required* of women as a condition of their belongingness. Thus, strategies to induce men toward care (such as Kershaw’s [2005] *Carefair*) would need to reckon with the deeply gendered affective responsibilities that women face both explicitly and implicitly from the time they are socialized as girls (see Ahmed’s [2014] discussion of disciplining the willful girl). They would also need to consider how racialized women are always already working harder to comply with dominant expectations of women’s affective citizenship, as their bodies are historically and continually marked as disruptive, incompetent, and getting in the way of white happiness. Finally, the notion of coming undone is useful for both theories of feminist citizenship and theories of affect. Describing a structure of feelings that is grounded

simultaneously in fear and sadness, coming undone is a way to express the “mess” generated by and circulating between subjects who are faced with precariousness. It pertains particularly to mothers in the case of this dissertation, but could be applied to subjects in similarly fearful and sad conditions. It would be useful to extend this idea to studies of inclusion and exclusion the way Ahmed (2010) has extended ideas of love and belongingness to fear of the other and racism. For citizenship, coming undone also contains the tiring labour of *resisting* coming undone—a labour that has yet to be sufficiently characterized in affective terms.

Thus, a contemporary question for theorists of feminist citizenship and care work in particular is not *who* is burdened with the most responsibility. My study of representation and citizenship and studies of policy and gendered citizenship have noted that unpaid care work is stubbornly gendered and paid care work is gendered and racialized. Based on my research in representation, which demonstrated how women receive messages about their responsibility from the symbolic realm of dominant culture, the question for studies of welfare state designation becomes how can women *resist* their accumulating responsibilities under the myth of the adult worker and the expectation of the nurturant mother? How can women resist the burden of their affective citizenship and the experience of coming undone? Is there room for feminist solidarity and friendship in these conditions that divide women by the notion of choice? Finally, given the material implications of my study of representation, how might women strategize their increased access to power within existing welfare regimes, which seek to silence their needs for increased provision? Tracing representations of resistance through these responsibilities would lend an interesting theoretical perspective to the ideas put forth here.

For feminist studies more broadly, my work contributes a nuanced understanding of contemporary representations of maternal responsibilities—pulling apart the relationship between privileged social location and responsibility to and expectation of reproductive labour. This is a useful nexus of ideas to consider as feminist disability theorists like Rosemarie Garland-Thomson turn their attention toward questions of bioethics, eugenics sentiment, and population control. My work in representation provides crucial hints at the many discursive threads that contribute to ideals about who can reproduce responsibly. It is not simply a question of race, though whiteness seems to infiltrate representations of responsible reproduction, but also a question of ability—through which class and body are conflated. For feminist science scholars examining the relationship between eugenics sentiment and the biopolitical manoeuvres of the state, this work on representation provides several inroads for analysis of the subtlety of population control that emerges and circulates in the symbolic realm to material effects. And for feminist political theory more broadly, my work takes up Fiona Robinson’s (2014) call in “*Maternal Thinking as Feminist Politics*” to politicize motherhood studies or maternal theory as political theory. Robinson argues that using Sara Ruddick’s (1995) work on maternal thinking provides a political lens with which to notice and resist when ideas about “motherhood,” “children,” and “health,” are extracted from their wider political contexts. Just as “mothers have been a powerless group whose thinking, when it has been acknowledged at all, has most often been recognized by people interested in interpreting and controlling” (1995: 6 in Robinson 2014: 105), the masculine academy has relegated “motherhood studies” to the disciplinary fringes of women’s and gender studies, only invoking motherhood in political studies when maternal bodies simply cannot be ignored in discussions of policy and welfare distribution. In general, I have aimed to bridge motherhood studies with feminist theories of science, politics, and affect in

order to centre the meaning of motherhood in male-centric political and cultural thinking about neoliberalism, labour, and discipline.

This dissertation has presented several techniques of contemporary women's labour responsiblization in response to the question: how are women socially responsabilized toward multiple forms of labour simultaneously and to what effects? It has considered the negative consequences of this individualist climate for women—consequences that are even felt among women with the most luxurious “choices.” The consequences of intense responsibility on women to provide for their families in paid labour while engaging in intricate and specific unpaid reproductive and care labour is particularly impossible for women in the most precarious circumstances. Through each chapter, we have seen how even women who are positioned to benefit from white supremacist hetero-patriarchy are coming undone in pursuit of responsible juggling mother ideals.

In Chapter 2, we saw two main representations of exalted contemporary motherhood: the juggling mother, as represented in popular film and advertising, and the executive feminist mother, who juggled mothering with high-level corporate responsibility. In looking at representations of motherhood in popular media, we saw how the juggling mother figure is positioned as both desirable and as good for a laugh. This fetishization of the juggling mother citizen—which involves both admiration and disavowal of her labour conditions—confirms her status as the exalted subject (Thobani 2007), to which mothers should relate and aspire, even as they might resent her labours. In unpacking these representations, we saw how this mother is actually not representative of the “average” woman in Canada or the United States, though she is

discursively positioned as the quintessential modern mom, and in fact she is repeatedly represented as wealthy, white, thin, fit, and conforming to mainstream beauty standards. This representation denotes a good life for mothers that is obviously impossible for most women—childfree women, racialized women, poor and working-class women, women who do not own their homes, queer women, single women, uneducated women, women with disabilities, self-medicating women, fat women, women in any conflict with the law, and women who reject mainstream beauty standards. Still, in the stories presented in Chapter 2, we saw that this incredibly narrow presentation of exalted motherhood, and exalted citizenship more broadly, is at the centre of an elaborate mainstream media discourse of responsible motherhood. In this chapter we also saw a parallel story about motherhood that is in some ways the juggling mother writ large—striving for work-life balance at the extremes of corporate success, where jobs involve frequent travel and high stakes.

In Chapter 3, we saw how biomedical research on breastfeeding, which is yet unable to conclude that breast milk is a vital immunity booster for most children in Canada and the United States, presents correlative findings in ways that we are encouraged to view as apolitical when their discussion is of course political and their representation has major political consequences. Due to methodological limitations, breastfeeding research does not clarify a relationship between breastfeeding and commonly discussed benefits for infants, like reduced risk of allergies, higher IQ scores, higher earning potential, or more secure attachments to others. Yet, the way results are discussed in biomedical literature and then extrapolated in mainstream media, by both journalists and scientists, suggests a primacy of breastfeeding that results in public health policy and international recommendations, and also in women's responsabilization toward this unpaid care

labour. In this chapter, we saw how the communication of biomedical findings moves like a game of Telephone, whereby the message circulated by major health organizations like the WHO and UNICEF are far removed from their scientific origins so that mothers hear “breast is best” incorrectly coupled with dire consequences for infants who are formula fed. The problem for citizenship is not related to whether women should or should not breastfeed, but to the power of biomedical findings to influence ideology without politicizing or making plain this influence and its negative implications for disenfranchised individuals.

In Chapter 4 we saw just how oversimplified and exaggerated are biomedical findings on breastfeeding in political campaigns. Importantly, this chapter showed women’s direct responsabilization by public health campaigns that target their unpaid labour. We saw women represented as both vital to their children’s future health, and as ignorant when it comes to mothering best practices. We saw women’s bodies (and rights) nearly disappear from view in lieu of babies and the rights of the child. We also saw a strange lack of representation of women’s responsibility to care labour, which stood out as stranger than the decontextualization of women’s lives in Chapter 3, since these representations existed outside of scientific research and in public health advocacy—where we know agencies and practitioners are aware of women’s attachment to paid labour.

In Chapter 5, I showed how women’s fertility is commonly discussed in relation to their good feelings, and their subsequent inclusion in responsible citizenship in precarious times. We saw how in popular editorial, women’s wellbeing and good feelings are linked to their unpaid care work and reproduction, despite social psychology literature that suggests no consistent link

between women's reproduction and happiness. Situating this story theoretically using queer theorists of affect, I showed how taken together, these competing discourses present a strain on women's negotiation of their labours, creating conditions for the affect of motherhood—in this case, producing the affective conditions for coming undone. In an anxious sociopolitical climate, women are responsabilized to generate wellness through their responsible reproduction and unpaid labour for their families, and they are incited to do so by *pursuing happiness themselves*.

Limitations

The most obvious limitation of this dissertation is that as a study of representation, it did not allow women to articulate their experiences with competing labours. Future work on responsible reproduction and women's responsible citizenship might gauge women's reactions to representations of motherhood, fertility, and labour. It might also ask women to describe their feelings about their reproduction in the context of paid labour expectations. Theorizing the affect of motherhood in particular would benefit greatly from these insights. Future work might also expand on my archive of representations of women's responsabilization by pursuing further the themes presented in each chapter. For example, a deeper examination of the intersection of happiness literature and gender could provide even greater appreciation for the connection between responsibilities to good feelings and public policy, or how public policy serves as a technique of maternal responsabilization to generate a family's sense of wellbeing. Another example is how in tracing further the wide range of breastfeeding advocacy initiatives in local communities, we might understand in greater detail the language of women's responsabilization toward this form of unpaid work, and the extent to which empirical indicators of good mothering feature in local discussion of parenting work. Along these lines, informal media representation like weblogs and discussion forums would be rich for analysis using the theoretical concept

presented here. In preparation for this dissertation, I read hundreds of “mom blogs,” and found that these represent a major resource for understanding how women are responding to mainstream messages about their labours, and how they are resisting them, burdened by them, and reproducing them for each other. Appreciating this great amount of online content produced by and for women would further develop how women are navigating their responsibility to multiple competing labours, and complying with and resisting the themes presented here. Another limitation is related to the genre of the dissertation. Each chapter featured a necessarily truncated review of literature, limiting the scope of each analysis. Future research could pursue any of the four stories told here for their understandings about gendered citizenship expectations and the maternal body in neoliberal governance.

I made at least three major thematic compromises in designing this dissertation, and would suggest that an exploration of women’s competing citizenship responsibilities would benefit from their inclusion. First, the bioethics of new reproductive technologies (NRTs), their health and disability implications for women, their (in)accessibility, and their popular reputation. As I wrote this dissertation, I saw headlines to these effects more and more in the last couple of years. The way governments regulate and subsidize (or not) NRTs are of course value-laden and reflect directly on how the state imagines women’s relationship to her own fertility. As Barad (2007, 2010) has said in both her explication of the metaphors of nuclear physics for feminist scientific research, and as Thompson (2005) remarked in her insightful academic book *Good Parents*, the “human drama” that orchestrates genetic technologies and their “technical, scientific, kinship, gender, emotional, legal, political, and financial aspects” give way to cultural/political understandings of reproduction. These understandings manifest in designating responsible and

irresponsible bodies and citizens. And as Rachel Lee (2013) has also remarked, in pursuit of the “life (un)ltd.,” both reproduction and survival through relations of care have become “medicalized, professionalized, and made clinically experimental as well” such that NRT regulation designates those deserving of the “good life” and conversely “expendable populations.” In Chapter 4, I made reference to the potential implications of egg freezing for women’s health. Taking this body of literature to feminist citizenship may be fruitful for appreciating contemporary biopolitics and its implications for the next generation of women who are encouraged to freeze their eggs by corporate benefits packages.

One thing that I have taken for granted throughout this dissertation is how women are generally expected to want to have children, to embrace their pregnancies, and to love their children. Exploring childfree women and stigma, including the social experiences of trans*women, women with disabilities, and queer and cis-women who do not want to have children, would be another project, but would offer a fresh angle for interpreting the relationship between women’s fertility and reproductive behaviours and their position as citizens. Following the themes presented in my research, we might assume that women who want children but are unable to have children might be less stigmatized than women who do not want to have children to begin with. What this dissertation has shown in examining popular representation is how women’s reproductive capacities and desires for family formation are taken for granted in mainstream discourses about what women should do for social reproduction, which itself is a useful finding for contemporary feminist citizenship.

Final Insights

Emerging from the dissertation as a whole is that the position of the undone mother is a sad one. Even in the most privileged circumstances, we see women struggling to prioritize, hierarchize, and perform their paid and unpaid work according to discourses of responsible reproduction—having the right amount of children at the right time in the right circumstances. For most women who are responsabilized toward competing labours, providing and caring for their children in ways considered responsible is indeed impossible. The good life and their citizenship responsibilities are out of reach, creating conditions whereby most women are striving toward something that does not exist, and most women are deemed undeserving of help. Through this writing, I was struck by how often we see examples—in the media and our own lives—of women disciplining each other as a result of competition for the elusive crown of exalted motherhood. The day I write this conclusion, an article on the *Huffington Post* is going viral. It is about how working mothers are selfish, inciting heated responses from working mothers across major publications in North America. These moments arrive too frequently, reminding us that no matter our feelings about whether or not debates over women’s responsibilities are mostly media-fuelled or actually representative of some women’s arguments with themselves and each other, the terrain for discussing women’s citizenship responsibilities is polarizing. It involves a constant admonishing, resisting, supporting, and insulting again the behaviours and “choices” of individual women. These are sad conditions in which to negotiate fertility, wellness, life passions, and family formation, because time is not afforded anyone.

Bibliography

- Adams, Carole. 2010. *The Sexual Politics of Meat: A Feminist-Vegetarian Critical Theory*. New York, NY: The Continuum International Publishing Group.
- Ahluwalia, Indu, Brian Morrow, Jason Hsia, and Laurence Grummer-Strawn. 2003. "Who is Breastfeeding? Recent Trends from the Pregnancy Risk Assessment and Monitoring." *Journal of Pediatrics* 142: 486-91.
- Ahmed, Sara. 2004. *The Cultural Politics of Emotion*. New York: Routledge.
- Ahmed, Sara. 2010. *The Promise of Happiness*. Durham: Duke University Press.
- Ahmed, Sara. 2012. *On Being Included: Racism and Institutional Life*. Durham, NC: Duke University Press.
- Akass, Kim. 2012. "Motherhood and Myth-making: Dispatches from the Frontlines of the US Mommy Wars." *Feminist Media Studies* 12:137-141.
- Albanese, Patrizia. *Mothers of the Nation: Gender, Families and Nationalism in Twentieth Century Europe*. Toronto: University of Toronto Press.
- Allen, G. (2001, Oct 5) Is the new eugenics afoot? *Science Magazine*. Accessed November 12, 2013, <http://www.blc.arizona.edu/courses/schaffer/182/Eugenics/Garland%20Eugenics.pdf>
- Alphonse, L. (2012, May 30). Military moms breastfeeding in uniform stir controversy. *Yahoo! Shine*. Retrieved from <http://shine.yahoo.com/parenting/military-moms-breastfeeding-uniform-stir-controversey-214500503.html>
- Amuedo-Dorantes, Catalina and Jeanne Kimmel. 2005. "The Motherhood Wage Gap for Women in the United States: The Importance of College and Fertility Delay," *Review of Economics of the Household*, 17-48.
- Anderson, Bridget and Isabelle Shutes. 2014. *Migration and Care Labour: Theory, Policy and Politics*. London: Palgrave Macmillan.
- Anderson, Britta, Sterling Williams, and Jay Schulkin. 2011. "Statistical Literacy of Obstetrician-Gynecology Residents." *Journal of Graduate Medicine Education* 5: 272-275.

- Apple, Rima. 1987. *Mothers and Medicine: A Social History of Infant Feeding*. Madison, WI: University of Wisconsin Press.
- Apple, Rima. 1995. "Constructing Mothers: Scientific Motherhood in the Nineteenth and Twentieth Centuries." *Social History of Medicine*, 8: 161-178.
- Apple, Rima. 2006. *Perfect Motherhood: Science and childrearing in America*. New Brunswick, NJ: Rutgers University Press.
- Arendell, Terry. 2000. "Conceiving and Investigating Motherhood: The Decade's Scholarship." *Journal of Marriage and Family*, 62:1192-1207.
- Armenti, Carmen. 2004. "May Babies and Post-tenure Babies: Maternal Decisions of Women Professors." *Review of Higher Education* 27: 211-231.
- Armstrong, Jo. 2006. "Beyond 'Juggling' and 'Flexibility': Classed and Gendered Experiences of Combining Employment and Motherhood." *Sociological Research Online* 11, n.p.
- Armstrong, Pat & Hugh Armstrong. 1990a. "Lessons from Pay Equity." *Studies in Political Economy* 32: 29-54.
- Armstrong, Pat, and Hugh Armstrong. 1990b. *Theorizing Women's Work*. Toronto: Garamond.
- Armstrong, Pat, and Hugh Armstrong. 2002. "Thinking it Through: Women, Work and Caring in the New Millenium." *Canadian Women Studies* 21/22(4): 44-50.
- Armstrong, Pat, and Hugh Armstrong. 2005. "Public and Private: Implications for Care Work." *Sociological Review* 53(2): 167-187.
- Armstrong, Pat, and Hugh Armstrong. 2010. *The Double Ghetto: Canadian Women and Their Segregated Work, Updated Third Edition*. Wynford Project Edition. Toronto: Oxford University Press.
- Arneil, Barbara. 1999. *Politics and Feminism*. Oxford: Blackwells Press.
- Arneil, Barbara. 2001. "Women as Wives, Servants, Slaves: Rethinking the Public Private Divide." *Canadian Journal of Political Science* 34: 29-54.
- Arneil, Barbara. 2006. *Diverse Communities: The Problem with Social Capital*. Cambridge: Cambridge University Press.
- Arneil, Barbara. 2009. "Disability, Self Image and Modern Political Theory." *Political Theory* 37: 218-242.
- Arney, William. 1982. *Power and the Profession of Obstetrics*. Chicago: University of Chicago Press.

- Arnup, Katherine. 1994. *Education for Motherhood: Advice for Mothers in Twentieth-Century Canada*. Toronto: University of Toronto Press.
- Arnot, Madeline. 1997. "Gendered Citizenry: New Feminist Perspectives on Education and Citizenship." *British Educational Research Journal* 23:275-295.
- Avieli, Nir. 2013. "Grilled Nationalism." *Food, Culture and Society* 16: 301.
- Bachu, Amara and Martin O'Connell. 2001. *Fertility of American Women: June 2000*. Current Population Reports, P20-543RV. U.S. Census Bureau, Washington, D.C.
- Baines, Donna and Bonnie Freeman. 2011. "Work, Care, Resistance and Mothering: An Indigenous Perspective." In *A Life in Balance: Reopening the Family-Work Debate*, edited by Catherine Krull and Justyna Sempruch, 67-80. Vancouver, BC: UBC Press.
- Bakan, Abigail and Daiva Stasiulis. 1997. "Negotiating Citizenship: The Case of Foreign Domestic Workers in Canada." *Feminist Review* 57:112-149.
- Baker, Maureen. 2011. "Maternal Employment, Childcare, and Public Policy." In *A Life in Balance: Reopening the Family-Work Debate*, edited by Catherine Krull and Justyna Sempruch, 47-66. Vancouver, BC: UBC Press.
- Ballon, Amy, Danielle Botterell, and Rebecca Reuber. 2011. "Why moms become mompreneurs." 25 Feb, *Globe and Mail*. Retrieved November 27, 2013, http://gold.globeinvestor.com/servlet/story/RTGAM.20110225.escenic_1919245/APStory/?query=motherhood&pageRequested=all
- Bannerji, Himani. 2000. "Geography Lessons: On Being an Insider/Outsider to the Canadian Nation." In *The Dark Side of the Nation: Essays on Multiculturalism, Nationalism and Gender*, edited by Himani Bannerji, 63-86. Toronto: Canadian Scholars' Press.
- Barad, Karen. 2007. *Meeting the Universe Halfway: Quantum Physics and the Entanglement of Matter and Meaning*. Durham: Duke University Press.
- Bartlett, Allison. 2005. *Breastwork: Rethinking Breastfeeding*. Sydney: University of New South Wales Press.
- Bassett, Rachel. 2005. *Parenting and Professing: Balancing Family Work with an Academic Career*. Nashville, TN: Vanderbilt University Press.
- Bauer, Martin. 2000. "Classical Content Analysis: A Review." In *Qualitative researching with text, image, and sound: A practical handbook*, edited by Martin Bauer and George Gaskell, 131-151. London: Sage.
- Beauvoir de, Simone. 1972 [1949]. *The Second Sex*. Translated by Howard Madison Parshley. London: Penguin Books.

- Becker, Gary. 1981. *Treatise on the Family*. Boston, MA: Harvard University Press.
- Belkin, Lisa. 2003. "The Opt-Out Revolution." *New York Times*, October 26.
<http://www.nytimes.com/2003/10/26/magazine/26WOMEN.html?pagewanted=all>.
- Belkin, Lisa. 2012. "No. I Am Not Mom Enough." May 12, *Huffington Post*. Retrieved May 29, 2013 from http://www.huffingtonpost.com/lisa-belkin/no-i-am-not-mom-enough_b_1507550.html?ref=parents.
- Belluck, Pam. 2012. "Hospitals Ditch Formula Samples to Promote Breastfeeding." October 15, *New York Times*. Retrieved September 6, 2014,
http://www.nytimes.com/2012/10/16/health/hospitals-ditch-formula-samples-to-promote-breast-feeding.html?_r=0.
- Benedict, Allison. 2012. "Yahoo CEO Marissa Mayer is making a huge mistake by cutting her maternity leave short," *Slate*, 2 Oct, retrieved from
http://www.slate.com/blogs/xx_factor/2012/10/02/marissa_mayer_gives_birth_to_baby_boy_yahoo_ceo_s_short_maternity_leave_is_a_big_mistake_.html.
- Benzie, Robert. 2013. "Ontario Launches \$2.5M Plan to Boost Breastfeeding." September 20, *Toronto Star*. Retrieved April 4, 2015,
http://www.thestar.com/news/queenspark/2013/09/30/ontario_launches_25m_plan_to_boost_breastfeeding.html.
- Beratan, Gregg. "Institutionalizing Inequity: Ableism, Racism and IDEA 2004." *Disability Studies Quarterly* 26, n.p.
- Berlant, Lauren. 2004. *Compassion: The Cultural Politics of an Emotion*. London: Routledge.
- Berlant, Lauren. 2007. "Keyword, 'Citizenship.'" In *Keywords of American Cultural Studies*, Edited by Bruce Burgett and Glenn Hendler, n.p. New York, NY: New York University Press.
- Berlant, Lauren. 2010. "Cruel Optimism." In *Affect Theory Reader*, edited by Melissa Gregg and Gregory Seigworth, 93-117. Durham: Duke University Press.
- Berlant, Lauren. 2011. *Cruel Optimism*. Durham, NC: Duke University Press.
- Blair-Loy, Mary. 2005. *Competing Devotions*. Boston, MA: Harvard University Press.
- Blum, Linda. 1993. "Mothers, Babies, and Breastfeeding in Late Capitalist America: The Shifting Contexts of Feminist Theory." *Feminist Studies* 19.2: 291.
- Blum, Linda. 2000. *At the Breast: Ideologies of Breastfeeding and Motherhood in the Contemporary United States*. Boston, MA: Beacon Press.

- Boetzkes, Elisabeth, and Jason Scott Robert. 2000. "Toward an Inclusive Health Ethic for Humans and Ecosystems." *Ethics and the Environment* 5: 143-151.
- Bolick, Kate. 2011. "All the Single Ladies." Nov, *Atlantic*. Retrieved October 30, 2014, <http://www.theatlantic.com/magazine/archive/2011/11/all-the-single-ladies/308654/>.
- Bordo, Susan. 1993. *Unbearable Weight: Feminism, Western Culture, and the Body*. Berkeley, CA: University of California Press.
- Boyd, Elizabeth and Gayle Letherby. 2014. *Stay at Home Mothers: An International Perspective*. Toronto, ON: Demeter Press.
- Buerkle, C. Wesley. 2009. "Metrosexuality Can Stuff It: Beef Consumption as Heteromasculine Fortification." *Text and Performance Quarterly* 29: 77-93.
- Butler, Judith. 1990. *Gender Trouble: Feminism and the Subversion of Identity*. London: Routledge.
- Butler, Judith. 2011. "Bodies in Alliance and the Politics of the Street." *European Institute for Progressive Social Policies*. Retrieved December 2, 2014, <http://www.eipcp.net/transversal/1011/butler/en>.
- Bracken, Susan, Jeanie Allen, and Diane Dean, editors. 2006. *The Balancing Act*. Sterling, Va: Stylus.
- Bradley-Colleary, Shannon. 2012. "In defense of my friend Jamie Lynne Grumet." May 11, *Huffington Post*. Retrieved April 1, 2013, http://www.huffingtonpost.com/shannon-colleary/time-breastfeeding_b_1510510.html.
- Brentnal-Compton, Arie. 2011. "How the Breastfeeding Industry is Destroying Breastfeeding." 3 Oct, post on *Fiercemamas* blog. Retrieved June 13, 2014, <http://fiercemamas.blogspot.ca/2011/10/how-breastfeeding-industry-is.html>.
- Brewer, Rose, and Nancy Heitzeg. 2008. "The Racialization of Crime and Punishment." *American Behavioural Scientist* 51: 625-644.
- Brodie, Janine. 1997. "Meso-discourses, State Forms, and the Gendering of Liberal-Democratic Citizenship." *Citizenship Studies* 1: 223-242.
- Brodie, Janine. 2008. "We Are All Equal Now: Contemporary Gender Politics in Canada." *Feminist Theory* 9(2): 145-164.
- Brodie, Janine. 2009. "From Social Security to Public Safety: Security Discourses and Canadian Citizenship." *University of Toronto Quarterly* 78(3): 687-708.

- Brody, Richard. 2012. “‘This is 40’ and The Meaning of Life.” 21 Dec, *New Yorker*. Retrieved September 27, 2015, <http://www.newyorker.com/culture/richard-brody/this-is-40-and-the-meaning-of-life>.
- Brooks, Xan. 2011. “I Don’t Know How She Does It—review,” *Guardian*, 15, Sept. Retrieved September 25, 2015, <http://www.theguardian.com/film/2011/sep/15/i-dont-know-how-she-does-it-film-review>.
- Canadian Press. 2008. “Breastfeeding boosts kids’ IQ: study.” 6 May, *CBC News*. Retrieved June 5, 2014, <http://www.cbc.ca/news/technology/breastfeeding-boosts-kids-iq-study-1.744262>.
- Cannon, Ellie. “That’s Just Selfish and Wrong.” May 19, *Daily Mail*. Retrieved June 29, 2012, <http://www.dailymail.co.uk/health/article-2146870/Breastfeed-year-old-Thats-just-selfish-wrong.html>.
- Carabine, Jean. 2001. “Unmarried Motherhood 1830-1990: A genealogical analysis.” In *Discourse as Data: A Guide for Analysis*, edited by Margaret Wetherall, Stephanie Taylor and Simeon Yates, 267-310. London: Sage.
- Carniol, Naomi. 2013. “Mompreneurs giving birth to new trend.” 16, Oct, *Toronto Star*. Retrieved November 27, 2013, http://www.thestar.com/business/small_business/2008/10/16/mompreneurs_giving_birth_to_new_trend.html.
- Carroll, William. 2004. *Critical Strategies for Social Research*. Toronto: Canadian Scholars Press.
- Casazza, Krista, Kevin R. Fontaine, Arne Astrup, Leann L. Birch, Andrew W. Brown, Michelle M. Bohan Brown, Nefertiti Durant, Gareth Dutton, E. Michael Foster, Steven B. Heymsfield, Kerry McIver, Tapan Mehta, Nir Menachemi, P.K. Newby, Russell Pate, Barbara J. Rolls, Bisakha Sen, Daniel L. Smith, Jr., Diana M. Thomas and David B. Allison. 2013. “Myth, presumptions, and facts about obesity.” *New England Journal of Medicine* 368: 446-454.
- Caucutt, Elizabeth, Nezih Guner, and John Knowles. 2002. “Why do women wait? Matching, wage inequality, and the incentives for fertility delay.” *Review of Economic Dynamics*, 5: 815-855.
- Charlesworth, Diane. 2014. “Performing Celebrity Motherhood on Twitter: Courting Homage and (Momentary) Disaster—The Case of Peaches Geldof.” *Celebrity Studies* 5: 508-510.
- Cherney, James. 2011. “The Rhetoric of Ableism.” *Disability Studies Quarterly* 31: <http://dsq-sds.org/article/view/1665/1606>.

- Chouliaraki, Lilie and Norman Fairclough. 2004. "The Critical Analysis of Discourse." In *Critical Strategies for Social Research*, edited by William Carroll, 262-275. Toronto: Canadian Scholars Press.
- Chua, Amy. 2011. *Battle Hymn of the Tiger Mother*. New York, NY: Penguin.
- Clare, Eli. 1999. *Exile and Pride*. Brooklyn, NY: South End Press.
- CLASP. 2013. "Paid Family Leave: A Crucial Support for Breastfeeding." Washington, DC: CLASP: Policy Solutions that Work for Low-Income People. Retrieved September 16, 2014, <http://www.clasp.org/resources-and-publications/files/Breastfeeding-Paid-Leave.pdf>.
- Ciccia, Rosella and Inge Bleijenbergh. 2014. "After the Male Breadwinner Model? Childcare Services and the Division of Labor in European Countries," *Social Policy*, 21: 50-79.
- City of New York. 2012. "Latch on NYC." Public health campaign. New York: City of New York.
- Cobb, Shelley. 2008. "Mother of the year: Kathy Hilton, Lynne Spears, Dina Lohan and bad celebrity motherhood." *Genders* 48.
- Cochrane Collaboration. 2015. "Assessing Risk of Bias in Included Studies." *Cochrane Methods Bias*. Retrieved September 15, 2015, <http://bmg.cochrane.org/assessing-risk-bias-included-studies>.
- Collins, Patricia Hill. 1990. *Black Feminist Thought: Knowledge, Consciousness and the Politics of Empowerment*. Boston, MA: Unwin Hyman.
- Collins, Patricia Hill. 1994. "Shifting the Center: Race, Class, and Feminist Theorizing about Motherhood." In *Mothering: Ideology, Experience and Agency* by Evelyn Nakano Glenn, Grace Chang, and Linda Forcey, 45-65. New York: Routledge.
- Collins, Patricia Hill. 1998. "It's All in the Family: Intersections of Gender, Race and Nation." *Hypatia*, 13: 62-82.
- Colquhoun, David. 2011. "Publish-or-perish: Peer review and the Corruption of Science," 5 Sept, *Guardian*, retrieved March 3, 2014, <http://www.theguardian.com/science/2011/sep/05/publish-perish-peer-review-science>.
- Comacchio, Cynthia. 1993. *Nations are Built of Babies: Saving Ontario's Mothers and Children*. Montreal/Kingston: McGill-Queen's University Press.
- Combahee River Collective. 1977. "A Black Feminist Statement." In *Capitalist Patriarchy and the Case for Socialist Feminism* by Zillah Eisenstein, 13-22. New York, NY: Monthly Review Press.

- Connell, Raewyn. 1995. *Masculinities*. Berkeley: University of California Press.
- Cooperberg, Chaya. 2009. "The high cost of motherhood." 8 May, *Globe and Mail*. Retrieved November 27, 2013, <http://www.theglobeandmail.com/globe-investor/personal-finance/home-cents/the-high-cost-of-motherhood/article4272462/>.
- Cotter, Colleen. 2001. Discourse and Media. In *Handbook of Discourse Analysis* by Deborah Tannen, Deborah Schiffrin, and Heidi Hamilton: 416-436. Oxford: Wiley-Blackwell.
- Crittenden, Ann. 2010. *The Price of Motherhood: Why the Most Important Job in the World Is Still the Least Valued*. Gordonsville, VA: Picador.
- Crittenden, Danielle. 1999. *What Our Mothers Didn't Tell Us*. New York, NY: Touchstone.
- Crittenden, Danielle, "The End of Marriage," interview by Steve Paikin, *The Agenda*. November 3, 2011.
- Crowley, Jocelyn. 2015. "Unpacking the Power of the Mommy Wars." *Sociological Inquiry* 85: 217-238.
- Cuddy, Amy, Susan Fiske, and Peter Glick. 2004. "When Professionals Become Mothers, Warmth Doesn't Cut the Ice." *Journal of Social Issues* 60: 701-718.
- Cvetkovich, Ann. 2003. *An Archive of Feelings: Trauma, Sexuality, and Lesbian Public Cultures*. Durham: Duke University Press.
- Cvetkovich, Ann. 2012. *Depression: A Public Feeling*. Durham: Duke University Press.
- Dadcamp. 2012. "What Does Breastfeeding Have to Do With Gay Pride?" *babble.ca*, 11 May 11, accessed November 14, 2012, <http://www.babble.com/kid/what-does-breastfeeding-have-to-do-with-gay-pride>.
- Daly, Mary. 2002. "Care as Good for Social Policy." *Journal of Social Policy* 7:129-146.
- Daly, Mary. 2011. "What Adult Worker Model? A Critical Look at Recent Social Policy Reform in Europe from a Gender and Family Perspective." *Social Politics* 18: 1-23.
- Dardot, Pierre, and Christian Laval. 2009. Translated 2014. *The New Way of the World: On Neoliberal Society*. London and New York City: Verso Books.
- Davis, Angela. 1998. "Masked Racism: Reflections on the Prison Industrial Complex." *History is a Weapon*. Retrieved September 2, 2015, <http://www.historyisaweapon.com/defcon1/davisprison.html>.

- Davis, Angela. 2003. "Racism, Birth Control, and Reproductive Rights." In *Feminist Postcolonial Theory: A Reader* by Reina Lewis and Sara Mills. 353-367. New York, NY: Taylor and Francis.
- Day, Jennifer and Barbara Downs. 2009. "Are There Common Characteristics Among Women Who Opt Out?" Powerpoint presented at the Population Association of America. Retrieved May 30, 2012, <http://www.census.gov/people/io/files/Opting-Out-presentation.ppt>.
- Dell'Antonia, KJ. 2012a. "The Choice to Stay At Home: No Pressure." 1 May, *New York Times*. Retrieved May 1, 2012, <http://parenting.blogs.nytimes.com/2012/05/01/the-choice-to-stay-home-no-pressure/>.
- Dell'Antonia, KJ. 2012b. "Never Mom Enough." 5 May, *New York Times*. Retrieved June 1, 2013, <http://parenting.blogs.nytimes.com/2012/05/10/never-mom-enough/>.
- Dempsey, Rachel, Joan Williams, and Anne-Marie Slaughter. 2014. *What Works for Women at Work: Four Patterns Working Women Need to Know*. New York, NY: New York University Press.
- Deutch, Jonathan and Megan Elias. 2014. *Barbecue: A Global History*. Chicago: Reaktion Books.
- DiQuinzio, Patrice. 1999. *The Impossibility of Motherhood: Feminism, Individualism, and the Problem of Motherhood*. New York: Routledge.
- DiQuinzio, Patrice. 2006. "The Politics of the Mothers' Movement in the United States: The Politics and Pitfalls." *Journal of the Association for Research on Motherhood* 8: 55-71.
- Dodd, Diane. 1991. "Advice to Parents: The Blue Books, Helen MacMurchy, MD, and the Federal Department of Health, 1920-34." *CBMH/BCHM* 8: 203-230.
- Douglas, Patty. 2010. "The Paradox of 'Care': Disability Studies' Challenge." Paper delivered at Society for Disability Studies Conference. June 2-5. Philadelphia.
- Douglas, Susan and Michaels, Meredith. 2005. *The Mommy Myth: The Idealization of Motherhood and How it Has Undermined All Women*. New York: Free Press.
- Douglas, Tommy. 1933. *The problem of the subnormal family*. Master's Thesis. Retrieved from Open Access Dissertations and Theses (Paper 2993).
- Dowd, Maureen. 2005. "What's a Modern Girl To Do?" 30 Oct, *New York Times Magazine*. Retrieved Sept 1 2013, <http://www.nytimes.com/2005/10/30/magazine/whats-a-modern-girl-to-do.html>.

- Duffy, Mignon. 2005. "Reproducing Labour Inequalities: Challenges for Feminists Conceptualizing Care at the Intersections of Gender, Race, and Class." *Gender and Society* 19: 66-82.
- Duffy, Mignon. 2011. *Making Care Count: A Century of Gender, Race, and Paid Care Work*. Piscataway, NJ: Rutgers University Press.
- Duggan, Lisa. 2004. *The Twilight of Equality? Neoliberalism, Cultural Politics, and the Attack on Democracy*. Boston, MA: Beacon Press.
- Dwan, Kerry, Carrol Gamble, Paula R. Williamson, Jamie J. Kirkham. 2013. "Systematic Review of the Empirical Evidence of Study Publication Bias and Outcome Reporting Bias—An Updated Review." *PLoS One* 8: e66844.
- Dyck, Erika. 2013. *Facing Eugenics: Reproduction, sterilization, and the politics of choice*. Toronto, ON: University of Toronto Press.
- Easterbrook, Phillipa, Roger Berlin, Jesse Gopalan, David Matthews. 1991. "Publication Bias in Clinical Research." *Lancet* 337: 867–872.
- Edelman, Lee. 2004. *No Future: Queer Theory and the Death Drive*. Durham: Duke University Press.
- Editorial Board. 2008. "Breastfed babies have higher IQs, new Canadian study reports," 6 May, *Ottawa Citizen*, retrieved from http://www.canada.com/story_print.html?id=24d70fd0-5421-4767-bf80-d13a820bf3ae&sponsor=.
- Ehrenreich, Barbara, and Deidre English. 1978. *For Her Own Good: Two Centuries of the Experts' Advice to Women*. New York, NY: Random House.
- Ekinsmyth, Carol, Rebecca Elmhirst, Sarah Holloway, and Helen Jarvis. 2004. "Coming Out As Mothers." *WGSJ Geography and Gender Reconsidered*, 95-107. Retrieval <http://eprints.port.ac.uk/12253/1/Ekinsmythetal.pdf>.
- Electricceiling. 2011. Online message board. Retrieved September 15, 2015 from <http://www.theguardian.com/film/2011/sep/15/i-dont-know-how-she-does-it-film-review>.
- Eichler, Leah. 2012. "Who says you can't be a mom and a CEO? 5 Oct, *Globe and Mail*. Retrieved November 26, 2013, <http://www.theglobeandmail.com/report-on-business/careers/career-advice/life-at-work/who-says-you-cant-be-a-good-mom-and-a-ceo/article4591847/>.
- Engelhardt, Elizabeth. 2010. *Republic of Barbecue: Stories Beyond the Brisket*. Austin: University of Texas Press.

- England, Paula. 2005. "Emerging Theories of Care Work." *Annual Review of Sociology* 31:381-399.
- Ernsberger, Paul. 2009. "Does social class explain the connection between weight and health?" In *The Fat Studies Reader* by Ester Rothblum and Sondra Solovay Eds., 25– 36. New York: New York University Press.
- ESDC. 2013. "Snapshot of Racialized Poverty in Canada." National Council of Welfare Reports. Government of Canada. Retrieved September 27, 2015, http://www.esdc.gc.ca/eng/communities/reports/poverty_profile/snapshot.pdf.
- Esping-Andersen, Gosta. 1990. *The Three Worlds of Welfare Capitalism*. Princeton, NJ: Princeton University Press.
- Etzioni, Amitai. 2000. *The Third Way to a Good Society*. London: Demos.
- Evans, Pat, Baines, Carole, and Neysmith, Sheila. 1998. *Women's Caring: Feminist Perspectives on Social Welfare*. Toronto: Oxford.
- Evans, Patricia. 2007. "(Not) Taking Account of Precarious Employment: Workfare Policies and Lone Mothers in Ontario and the UK." *Social Policy and Administration* 41: 29-49.
- Evans, Patricia. 2008. "McJobs, Workfirst, and Lone Mothers: The Canadian Experience." Speaking notes for presentation in the lunchtime series, Brotherhood of St. Laurence, Melbourne, February 14, 2008.
- Everingham, Christine. 2002. "Engendering Time: Gender Equity and Discourses of Workplace Flexibility." *Time and Society* 11: 335-351.
- Faludi, Susan. 2007. *The Terror Dream: Fear and Fantasy in Post-9/11 America*. New York, NY: Metropolitan.
- Faircloth, Charlotte. 2013. *Militant Lactivism? Attachment Parenting and Intensive Motherhood in the UK and France*. Oxford: Berghahn Books.
- Fairclough, Norman. 1992. *Discourse and Social Change*. Polity Press: Cambridge University Press.
- Fairclough, Norman, and Phil Graham. 2002. "Marx as a Critical Discourse Analyst: The Genesis of a Critical Method and its Relevance to the Critique of Global Capital." *Estudios de Sociolinguística* 3: 185-229.
- Fairclough, Norman. 2013. *Critical Discourse Analysis: The Critical Study of Language*. London: Routledge.

- Fanelli, Daniele. 2009. "How Many Scientists Fabricate and Falsify Research? A Systematic Review and Meta-Analysis of Survey Data." *PLoS One* 4: e5738. doi:10.1371/journal.pone.0005738.
- Fausto-Sterling, Anne. 2000. *Sexing the Body: Gender Politics and the Construction of Sexuality*. New York, NY: Basic Books.
- Federici, Silvia. 1975. "Wages Against Housework." Published jointly by the Power of Women Collective and the Falling Wall Press. Retrieval from <https://caringlabor.files.wordpress.com/2010/11/federici-wages-against-housework.pdf>.
- Federici, Silvia. 2004. *Caliban and the Witch: Women, the Body and Primitive Accumulation*. USA: Autonomedia.
- Federici, Silvia. 2012. *Revolution at Point Zero: Housework, Reproduction and Feminist Struggle*. PM Press.
- Federici, Silvia. 2014. "The Making of Capitalist Patriarchy." An interview by Tessa Echeverria and Andrew Sernatinger. Blacksheep: A Socialist Podcast: Retrieval at <http://blacksheepodcast.org/2014/02/23/the-making-of-capitalist-patriarchy-interview-with-silvia-federici/>.
- Fehr, Carla. 2004. "Feminism and Science: Mechanism without Reductionism." *National Women's Studies Association Journal* 16: 136-156.
- Flanagan, Caitlin. 2004. "How Serfdom Saved the Woman's Movement," March, *Atlantic*. Retrieved July 15, 2014, <https://www.theatlantic.com/past/docs/issues/2004/03/flanagan.htm>.
- Flora, Carlin. 2009. "The Pursuit of Happiness." 1 Jan, *Psychology Today*. Retrieved July 29, 2015, <https://www.psychologytoday.com/articles/200812/the-pursuit-happiness>.
- Fildes, Valerie. 1986. "Breastfeeding and Wet Nursing." *Midwife, Health Visitor & Community Nurse* 22: 241-247.
- Fildes, Valerie. 1998. "Infant Feeding Practices and Infant Mortality in England, 1900-1919," *Continuity and Change* 13, 251-80. DOI : 10.1017/S0268416098003166
- Fine, Michael. 2007. *A Caring Society? Care and the Dilemmas of Human Service in the 21st Century*. Houndmills: Palgrave.
- Finkel, Alvin. 2006. *Social Policy and Practice in Canada: A History*. Waterloo, ON: Wilfred Laurier Press.
- Firestone, Shulamith. 1970. *The Dialectic of Sex: The Case for Feminist Revolution*. New York, NY: Bantam Books.

- Folbre, Nancy. 2008. *Valuing Children: Rethinking the Economics of the Family*. Boston: Harvard University Press.
- Foucault, Michel. 1990. [1976]. Translated by Robert Hurley. *The History of Sexuality, Volume One*. [Paris: Gallimard.] New York, NY: Vintage Books.
- Foucault, Michel, and Rabinow, Paul. 1984. "The means of correct training." In *Crime: Critical Concepts in Sociology*, edited by Philip Bean, 188-205. Psychology Press.
- Fraser, Nancy. 1994. "After the Family Wage: Gender Equity and the Welfare State." *Political Theory* 22: 591-618.
- Fraser, Nancy. 2013. "How feminism became capitalism's handmaiden." *Guardian*, 14 Oct, retrieved <http://www.theguardian.com/commentisfree/2013/oct/14/feminism-capitalist-handmaiden-neoliberal>.
- French, Philip. 2013. "This is 40—review," 17 Feb, *Guardian*, retrieved November 20, 2013, <http://www.theguardian.com/film/2013/feb/17/this-is-40-apatow-review>.
- Friedan, Betty. 1963. *The Feminine Mystique*. New York, NY: W.H. Norton and Co.
- Friedersdorf, Conor. 2012. "In Defense of Stay-at-home Moms." 22 Jun, *Atlantic*. Retrieved on June 30, 2012, <http://www.theatlantic.com/politics/archive/2012/06/in-defense-of-stay-at-home-moms/258717/>.
- Friedman, Ann. 2013. "The Economic Logic of the 'New Cult of Domesticity.'" 11 Apr, *New Republic*. Retrieved December 23, 2013, <http://www.newrepublic.com/article/112877/emily-matchars-homeward-bound-reviewed-ann-friedman>.
- Garey, Anita, and Karen Hansen. 2011. *At the Heart of Work and Family: Engaging the Ideas of Arlie Hochschild*. Piscataway, NJ: Rutgers.
- Gaudette, Stephanie, Martin Cooke, and Joanna Jacob. 2011. "Working After Childbirth." *Canadian Review of Sociology* 48: 153-180.
- Glaser, Barney and Judith Holton. 2004. Remodeling Grounded Theory. *Forum: Qualitative Social Research* 5, n.p., retrievable <http://www.qualitative-research.net/index.php/fqs/article/view/607/1315>.
- Giullari, Susy, and Jane Lewis. 2005. "The Adult Worker Model Family, Gender Equality, and Care: The Search for New Policy Principles, and the Possibilities and Problems of a Capability Approach." Program paper for United Nations Research Institute for Social Development. Geneva: UNRISD.

- Gibbs, Nancy. 2002. "Making Time For a Baby." 15, Apr, *Time*. Retrieved December 27, 2013, <http://content.time.com/time/magazine/article/0,9171,1002217,00.html>.
- Giddens, Antony. 1991. *Modernity and Self-Identity: Self and Society in the Late Modern Age*. Redwood City: Stanford University Press.
- Gilmour, Jennifer. Interview with the Editorial Board in "Up front." 7 Sept, 2012, *New York Times*. Retrieved November 27, 2013, <http://www.nytimes.com/2012/09/09/books/review/up-front.html>.
- Giullari, Susy, and Jane Lewis. 2005. "The Adult Worker Model Family, Gender Equality and Care: The Search for New Policy Principles, and the Possibilities and Problems of a Capabilities Approach." Paper No. 19. Geneva: United Nations Research Institute for Social Development.
- Glenn, Nakano Evelyn. 2010. *Forced to Care: Coercion and Caregiving in America*. Cambridge, MA: Harvard University Press.
- Gopalakrishnan, Prakash and Christopher Ganeshkumar. 2013. "Systematic Reviews and Meta-analysis: Understanding the Best Evidence in Primary Health Care." *Journal of Family Medicine and Primary Care* 2: 9-14.
- Gordon, Andrea. 2008. "Mompreneurs boom." 4 Apr, *Toronto Star*. Retrieved November , http://www.thestar.com/life/parent/2008/04/04/mompreneurs_boom.html.
- Gordon, Andrea. 2011. "Mompreneurs: Powerful business network or pink-collar ghetto." 20 Oct, *Toronto Star*. Retrieved November 27, 2013, http://www.thestar.com/life/parent/2011/10/20/mompreneurs_powerful_business_network_or_pinkcollar_ghetto.html.
- Gorog, Krisztian, Sam Pattenden, Temenuga Antova, Emilia Niciu, Peter Rudnai, Salome Scholtens, Anna Splichalova, Katarina Slotova, Zoltan Voko, Renata Zlotkowska, and Danny Houthuijs. 2011. "Maternal Smoking During Pregnancy and Childhood Obesity." *Journal of Maternal and Child Health* 15: 985-992.
- Goss, Kristin and Michael Heaney. 2010. "Organizing Women as Women: Hybridity and Grassroots Collective Action in the 21st Century." *Perspectives on Politics* 8: 27-52.
- Gottlieb, Lori. 2008. "Marry Him!" March, *Atlantic*. Retrieved September 30, 2010, <http://www.theatlantic.com/magazine/archive/2008/03/marry-him/306651/>.
- Gottlieb, Lori. 2010. *Marry Him: The Case for Settling for Mr. Good Enough*. New York, NY: Penguin.

- Gottlieb, Lori. 2014. "Does A More Equal Marriage Mean Less Sex?" 6 Feb, *New York Times*. Retrieved September 30, 2015 from <http://www.nytimes.com/2014/02/09/magazine/does-a-more-equal-marriage-mean-less-sex.html>.
- Graft, Emily. 2007. "The Mommy War Machine." 29 Apr, *Washington Post*. Retrieved June 2, 2014, <http://www.washingtonpost.com/wp-dyn/content/article/2007/04/27/AR2007042702043.html>.
- Granju, Katie. 2012. "Ending the Mommy Wars." May 29, *Huffington Post*. Retrieved May 29, 2013 from http://www.huffingtonpost.com/katie-allison-granju/ending-the-mommy-wars_b_1515188.html.
- Green, Fiona. 2004. "Feminist Mothers: Successfully Negotiating the Tension between Motherhood as 'Institution' and 'Experience.'" In *From Motherhood to Mothering: The Legacy of Adrienne Rich's Of Woman Born* by Andrea O'Reilly (ed.), pp. 125-136. Albany, NY: SUNY Press.
- Grigoriadis, Vanessa. "Baby Panic," 20 May, *New York Magazine*. Retrieved July 14, 2015, <http://nymag.com/nymetro/urban/family/features/6030/>.
- Grose, Jessica. 2012. "Why does the internet hate Marissa Mayer's baby?" *Slate*, 30 Nov, retrieved from http://www.slate.com/blogs/xx_factor/2012/11/30/yahoo_ceo_marissa_mayer_calls_her_baby_easy_cue_the_internet_rage.html.
- Grosz, Elizabeth. 1995. *Space, Time and Perversion: Essays on the Politics of Bodies*. London: Routledge.
- Guilder, George. 1986. "Women in the workforce." 1 Sept, *Atlantic*. Retrieved June 2, 2014, <http://www.theatlantic.com/magazine/archive/1986/09/women-in-the-workforce/304924/>.
- Halberstam, Jack. 1998. *Female Masculinity*. Durham, NC: Duke University Press.
- Halberstam, Jack. 2005. *In a Queer Time and Place: Transgender Bodies, Subcultural Lives*. New York: NYU Press.
- Halberstam, Jack. 2011. *The Queer Art of Failure*. Durham, NC: Duke University Press.
- Halberstam, Jack. 2012. *Gaga Feminism: Sex, Gender, and the End of Normal*. Boston: Beacon Press.
- Hall, Stuart. 1997. *Representation: Cultural Representation and Signifying Practices*. London, UK: Sage Publications.

- Hancock, Ange-Marie. 2004. *The Politics of Disgust: The Public Identity of the Welfare Queen*. New York, NY: New York University Press.
- Hanisch, Carole. 2006. The Personal Is Political. The Women's Liberation Movement Classic with a New Explanatory Introduction. Retrieved from <http://www.carolhanisch.org/CHwritings/PIP.html>.
- Haraway, Donna. 1989. *Primate Visions: Gender, Race, and Nature in the World of Modern Science*. London: Routledge.
- Haraway, Donna. 1991. *Symians, Cyborgs, and Women: The Reinvention of Nature*. London: Free Association Books.
- Haraway, Donna and Thyrza Goodeve. 1999. *How Like a Leaf: An Interview with Donna Haraway*. New York: Routledge Press.
- Harding, Sandra. 1987. *The Science Question in Feminism*. Ithaca, NY: Cornell University Press.
- Harding, Sandra. Ed. 2011. *The Postcolonial Science and Technology Studies Reader*. Durham, NC: Duke University Press.
- Harding, Sandra. 2014. Personal communication. Discussion at annual conference of the *International Feminist Journal of Politics*. Los Angeles, CA.
- Hartsock, Nancy. 1985. *Women, Sex, and Power*. Boston: Northeastern University Press.
- Harvey, David. 1990. *The Condition of Postmodernity: An Enquiry into the Origins of Cultural Change*. Cambridge, MA: Blackwell Press.
- Harvey, David. 2007. *A Brief History of Neoliberalism*. Oxford, UK: Oxford University Press.
- Hattery, Angela. 2001. *Women, Work, and Families: Balancing and Weaving*. Thousand Oaks, CA: Sage.
- Hausman, Bernice. 2003. *Mother's Milk: Breastfeeding Controversies in American Culture*. New York: Routledge.
- Hausman, Bernice. 2004. "The Feminist Politics of Breastfeeding." *Australian Feminist Studies*. 19: 273-285.
- Hausman, Bernice. 2011. *Viral Mothers: Breastfeeding in the Age of HIV/AIDS*. Ann Arbor: University of Michigan Press.
- Hausman, Bernice. 2013. "Breastfeeding, Rhetoric, and the Politics of Feminism." *Journal of Women, Policy, and Politics* 34: 330-344.

- Hays, Sharon. 1996. *The Cultural Contradictions of Motherhood*. New Haven, CT: Yale University Press.
- Hediger, Mary, Mary Overpeck, and Robert Kuczumski. 2001. "Associations Between Infant Breastfeeding and Overweight in Young Children." *JAMA* 285: 2453-2460.
- Hemingway, Pippa and Nic Brereton. 2009. "What is a Systematic Review?" *Evidence-based Medicine*. Hayward Medical Communications. Retrieved October 1, 2010, <http://www.medicine.ox.ac.uk/bandolier/painres/download/whatis/syst-review.pdf>.
- Herr, Jane. 2009. "Why Do Highly Educated Women Opt Out of the Labour Force?" 31 Mar, *VOX: CRP's Policy Portal*. Retrieved April 1, 2010, <http://www.voxeu.org/article/why-do-highly-educated-mothers-opt-out-labour-force>.
- Hesse-Biber, Sharlene Nagy. 2012. *Handbook of Feminist Research, Theory, and Praxis: Second Edition*. Thousand Oaks, CA: Sage.
- Hewett, Heather. 2006. "You Are Not Alone: The Personal, The Political, and the New 'Mommy Lit.'" In *Chick Lit: The New Woman's Fiction* by Susan Ferriss and Mallory Young, 119-139. New York, NY: Routledge.
- Hewlett, Sylvia Ann. 2002a. *Creating a Life: Professional Women and the Quest for Children*. New York, NY: Miramax Books (now Hyperion).
- Hewlett, Sylvia Ann. 2002b. "Executive women and the myth of having it all." Apr, *Harvard Business Review*. Retrieved July 4, 2014, <http://hbr.org/2002/04/executive-women-and-the-myth-of-having-it-all/ar/>.
- Heymann, Jody. 2000. *The widening gap: Why America's Working Families Are in Jeopardy*. New York, Basic Books.
- Higgins, Julian and Sally Green. Eds. 2011. "Cochrane Handbook for Systematic Reviews of Interventions." *The Cochrane Collaboration*. Version 5.1.0. Retrieved September 2, 2012, <http://handbook.cochrane.org/>.
- Highfield, Roger. 2008. "Breastfeeding makes children smarter," *Telegraph*, 5 May. Retrieved March 9, 2014, <http://www.telegraph.co.uk/science/science-news/3341521/Breastfeeding-makes-children-smarter.html>.
- Hirshman, Linda. 2005. "Homeward Bound." 21 Nov, *The American Prospect*. Retrieved August 4, 2015, <http://prospect.org/article/homeward-bound-0>.
- Hochschild, Arlie. 1983. *The Managed Heart: Commercialization of Human Feeling*. Oakland, CA: University of California Press.

- Hochschild, Arlie. 1989. *The Second Shift: Working Parents and the Revolution at Home*. New York, NY: Penguin Books.
- Hochschild, Arlie. 1995. "The Culture of Politics; Traditional, Postmodern, Cold-modern, and Warm-modern Ideals of Care." *Soc Pol*, 2(3):331-46. doi: 10.1093/sp/2.3.331.
- Hochschild, Arlie. 2012. *The Outsourced Self: Intimate Life in Market Times*. New York: Metropolitan Press.
- Hochschild, Arlie. 2013. *So How's The Family? And Other Essays*. Berkeley, CA: University of California Press.
- Hodler, Matthew, and Cathryn Lucas-Carr. 2015. "The Mother of All Comebacks" A Critical Analysis of the Fitspirational Comeback Narrative of Dara Torres, *Communication and Sport* doi:10.1177/2167479515583480.
- Holt, Amanda. 2010. "Managing 'Spoiled Identities': Parents' Experiences of Compulsory Parenting Support Programmes." *Children & Society* 24: 413-424.
- Holton, Judith A. 2010. "The Coding Process and Its Challenges." *Grounded Theory Review* 9: n.p.
- Homanen, Rikka. 2014. "The Boundaries of Choice, Autonomy and Beneficence in Maternity Healthcare Nursing Practice in Finland." Paper presented at *Mother Load: Transnational Perspectives on Maternity, Law and Medicine*, University of Ottawa, March 6th, 2014.
- Hope, Jenny. 2008. "Breast milk boosts IQ: Up to 8 points separate babies fed by their mothers and those on formula," 5 May, *Daily Mail*. Retrieved May 3, 2012, <http://www.dailymail.co.uk/health/article-564172/Breast-milk-boosts-IQ-Up-8-points-separate-babies-fed-mothers-formula.html#ixzz2vISXNL1K>.
- hooks, bell. 1992. *Black Looks: Race and Representation*. Chicago: South End.
- hooks, bell. 1993. *Sisters of the Yam: Black Women and Self-Recovery*. Chicago: South End.
- hooks, bell. 1996. *From Reel to Real: Race, Sex, and Class at the Movies*. New York, NY: Routledge.
- Hrdy, Sarah. 1999. *Mother Nature: Maternal Instincts and How They Shape Human Nature*. New York, NY: Ballantine Books.
- Hussmanns, Ralf. 2004. "Defining and measuring informal employment." *Bureau of Statistics, Geneva, Switzerland*. <http://ilo.org/public/english/bureau/stat/download/papers/meas.pdf>.
- Imrie, Rob. 2004. "Disability, embodiment, and the meaning of home." *Housing Studies* 19: 745-63.

- Jacobs, Margaret. 2009. *White Mother to a Dark Race: Settler Colonialism, Maternalism, and the Removal of Indigenous Children in the American West and Australia 1880-1940*. Lincoln: University of Nebraska Press.
- Jackson, Emily. 2014. "Rethinking Resilience in Violence Against Women Debates." 7 May. *Feminist Wire*. Retrieved September 15, 2014, <http://www.thefeministwire.com/2014/05/re-thinking-resilience/>.
- Jayson, Sharon. 2011. "White Women More Likely To Be Childless." 10 May, *USA Today*. Retrieved February 28, <http://usatoday30.usatoday.com/news/health/wellness/story/2011/05/White-women-more-likely-to-be-childless-Census-says/46992416/1>.
- Jermyn, Deborah. 2008. "Still something else besides a mother? Negotiating celebrity motherhood in Sarah Jessica Parker's star story." *Social Semiotics* 18, no. 2: 163-176.
- Johnston, Josephine and Miriam Zoll. 2014. "Is Freezing Your Eggs Dangerous? A Primer." 1 Nov, *New Republic*. Retrieved August 30, 2015, http://www.newrepublic.com/article/120077/dangers-and-realities-egg-freezing_.
- Joffe, Helene and Lucy Yardley. 2004. "Content and Thematic Analysis." In *Research Methods for Clinical and Health Psychology* by David Marks and Lucy Yardley: 56-68.
- Juang, Linda, Desiree Qin, and Irene Park. 2013. "Deconstructing the Myth of the 'Tiger Mother': An Introduction to the Special Issue on Tiger Parenting, Asian-Heritage Families, and Child/Adolescent Well-being." *Asian American Journal of Psychology* 4, n.p.
- Kanaaheh, Rhoda. 2002. *Birthing the Nation: Strategies of Palestinian Women in Israel*. Oakland, CA: University of California Press.
- Kaninchen Zero. October 23, 2009. "Ableist word profile: Intelligence." *The Feminists With Disabilities for a Way Forward* blog. <http://disabledfeminists.com/2009/10/23/ableist-word-profile-intelligence/>.
- Katz, Jackson. 2013. "Lessons from Steubenville: An Interview with Jackson Katz." *Media Education Foundation*.
- Keck, Wolfgang, and Chiara Saraceno. 2013. "The Impact of Different Social-Policy Frameworks on Social Inequalities among Women in the European Union: The Labour-Market Participation of Mothers." *Social Politics* 20: 297-328.
- Kedrowski, Karen and Michael Lipscomb. 2007. *Breastfeeding Rights in the United States*. Santa Barbara, CA: Praeger.

- Keller, Evelyn Fox. 1985. *Reflections on Gender and Science*. New Haven and London: Yale University Press.
- Keller, Evelyn Fox and Helen Longino. 1996. *Feminist and Science (Oxford Readings in Feminism)*. Oxford and New York: Oxford University Press.
- Kelly, Christine. 2013. "Building Bridges with Accessible Care: Disability Studies, Feminist Care Scholarship, and Beyond." *Hypatia* 28: 784-800.
- Kelly, Christine. 2014. "Re/Moving Care from the Ontario Direct Funding Program: Altering Conversations among Disability and Feminist Scholars." *Social Politics* 21: 124-147.
- Kelly, Jennifer and Aruna Srivastava. 2003. "Dancing on the Lines: Mothering, Daughtering, Masking, and Mentoring in the Academy." In *The Madwoman in the Academy* by Deborah Schnitzer and Deborah Keahey. 58-76. Calgary, AB: The University of Calgary Press.
- Kellner, Douglas. 2009. "Toward a Critical Media and Cultural Studies." In *Media and Cultural Studies: Critical Approaches* by Rhonda Hammer and Douglas Kellner (Eds.), 5-24. New York: Peter Lang.
- Kemp, Rebecca. 2012. "'Music, kindness, a government that listens to its people.' From a gender perspective, to what extent does the UK Office for National Statistics approach to 'measuring national well-being' meet its aim?" Master's Thesis. London School of Economics.
- Kershaw, Paul. 2005. *Carefair: Rethinking the Responsibilities and Rights of Citizenship*. Vancouver, BC: University of British Columbia Press.
- Kershaw, Paul. 2010a. "McCaregiving for Identity is Political: Implications for Citizenship Theory." *Citizenship Studies* 14: 395-410.
- Kershaw, Paul. 2010b. "The 'Private' Politics in Caregiving: Reflections on Ruth Lister's Citizenship: Feminist Perspectives." *Women's Studies Quarterly* 38 (1&2): 302-311.
- Kilbourne, Jean. 1990. "What are advertisers really selling us?" Web site. Retrieved September 15, 2014, <http://www.jeankilbourne.com/lectures/>.
- Kirkey, Sharon. 2008. "Breastfed Babies Have Higher IQs, Study Finds." *Montreal Gazette*. Retrieved March 15, 2014, <http://www2.canada.com/montrealgazette/health/story.html?id=95ea9a23-09d2-4cf3-8065-ee0449757d70&p=2>.
- Knight, Melanie and Kathleen Rogers. 2012. "The Government is Operationalizing Neoliberalism": Women's Organizations, Status of Women Canada, and the Struggle for

- Progressive Social Change in Canada. *Nordic Journal of Feminist and Gender Research* 20: 266-282.
- Kohler, Hans-Peter, Jere Behrman, Axel Skytthe. 2005. "Partner + Children = Happiness?" *Population and Development Review* 31: 407-445.
- Korownyk, Christina, Michael Kolber, James McCormack, Vanessa Lam, Kate Overbo, Candra Cotton, Caitlin Finley, Ricky Turgeon, Scott Garrison, Adrienne Lindblad, Hoan Linh Banh, Denise Campbell-Scherer, Ben Vandermeer, and, G Michael Allan. 2014. "Televised medical talk shows—what they recommend and the evidence to support their recommendations: a prospective observational study." *British Medical Journal* 349: g7346.
- Koropecjy-Cox, Tanya. 2002. "Beyond Parental Status: Psychological Well-Being in Middle and Old Age." *Journal of Marriage and Family* 64: 957-971.
- Kramer, Michael, Frances Aboud, Elena Mironova, Irina Vanilovich, Robert W. Platt, Lidia Matush, Sergei Igumnov, Eric Fombonne, Natalia Bogdanovich, Thierry Ducruet, Jean-Paul Collet, Beverley Chalmers, Ellen Hodnett, Sergei Davidovsky, Oleg Skugarevsky, Oleg Trofimovich, Ludmila Kozlova, Stanley Shapiro, Promotion of Breastfeeding Intervention Trial (PROBIT) Study Group. 2008. "Breastfeeding and Child Cognitive Development: New Evidence from a Large Randomized Trial." *JAMA Psychiatry* 65: 578-584.
- Kramer, Michael, and Ritsuko Kakuma. 2001. "Optimal Duration of Exclusive Breastfeeding." Department of Nutrition for Health and Development (NHD) World Health Organization. Geneva. Retrieved June 5, 2014, http://www.who.int/nutrition/publications/infantfeeding/WHO_NHD_01.08/en/.
- Kramer, Michael, and Ritsuko Kakuma. 2002. "Optimal Duration of Exclusive Breastfeeding." *Cochrane Database of Systematic Reviews* 1. Art. No.: CD003517. DOI: 10.1002/14651858.CD003517.
- Kramer, Michael, and Ritsuko Kakuma. 2004. "The Optimal Duration of Exclusive Breastfeeding." *Advances in Experimental Medicine and Biology* 554: 63-77.
- Kramer, Michael, and Ritsuko Kakuma. 2012. "Optimal Duration of Exclusive Breastfeeding." *Cochrane Database of Systematic Reviews* 8. Art No.: CD003517. DOI: 10.1002/14651858.CD003517.
- Kramer, Michael. 2013. "Critique of Breastfeeding a Disservice to Society." *Ottawa Citizen*. 7 Oct. B6.
- Krull, Catherine and Justyna Sempruch. 2011. *A Life In Balance?* Vancouver, BC: University of British Columbia Press.

- Kukla, Rebecca. 2005. *Mass Hysteria: Medicine, Culture and Mothers' Bodies*. Lanham, MD: Rowman and Littlefield.
- Kymlicka, Will, and Wayne Norman. 2000. "The Globalization of Culture." In *A Globalizing World? Culture, Economics, Politics* by D. Held, 48-84. London: Routledge.
- Eggsploitation*. Directed and written by Lahl, Jennifer and Rosa, Evan. 2010. California: The Orchard. DVD.
- Lareau, Annette. 2003. *Unequal Childhoods: Class, Race, and Family Life*. Oakland, CA: University of California Press.
- Lazar, Michelle. 2007. "Feminist Critical Discourse Analysis: Articulating a Feminist Discourse Praxis." *Critical Discourse Studies* 4: 141-164.
- Leavy, Patricia. 2007. "The feminist practice of content analysis." *Feminist research practice: A primer*, 223-248.
- Lee, Ellie. 2008. "Living with Risk in the Age of 'Intensive Motherhood': Maternal Identity and Infant Feeding." *Health, Risk & Society* 10: 467-477.
- Lee, Rachel. 2013. "Introduction to Life (Un)Ltd: Feminism, Bioscience, Race." *S&F Online* 11.3, n.p. <http://sfonline.barnard.edu/life-un-ltd-feminism-bioscience-race/introduction/>.
- Lee, Robyn. 2013. "Breastmilk Exchange and New Forms of Social Relation." *MP: An Online Feminist Journal* 4: 36-70.
- Leger, Mark. 2012. "Raising a business and a baby at work." 10 Sept, *Globe and Mail*, Retrieved November 27, 2013, <http://www.theglobeandmail.com/report-on-business/small-business/sb-growth/day-to-day/article4521588.ece#dashboard/follows/>.
- Leung, Rebecca. 2004. "Staying at Home." 8 Oct, *CBS News*. Retrieved July 15, 2014, <http://www.cbsnews.com/news/staying-at-home-08-10-2004/>.
- Lewis, Jane. 1992. "Gender and the Development of Welfare Regimes." *Journal of European Social Policy* 3:159-173.
- Lister, Ruth. 1997. "Citizenship: Toward A Feminist Synthesis." *Feminist Review* 57:28-48.
- Lister, Ruth. 2003. *Citizenship: Feminist Perspectives* (2nd edition). New York: New York University Press.
- Lister, Ruth. 2007. "Inclusive Citizenship: Realizing the Potential." *Citizenship Studies* 11: 49-61.

- Little, Bruce. 2002. "Ethnicity, marriage trends causing fertility disparity with US." 20 Sept, *Globe and Mail*. Retrieved July 14, 2015, <http://www.theglobeandmail.com/report-on-business/ethnicity-marriage-trends-causing-fertility-disparity-with-us/article756959/>.
- Lloyd, Elisabeth. 2002. "Reductionism in Medicine: Social Aspects of Health." In *Promises and Limits of Reductionism in the Biomedical Sciences* by M.H.V. Van Regenmortel and D.L. Hull (Eds.) 67–82. New York: John Wiley & Sons.
- Longino, Helen. 1990. *Science as Social Knowledge: Values and Objectivity in Scientific Inquiry*. Princeton, New Jersey: Princeton University Press.
- Lopez, Lori. 2009. "The Radical Act of 'Mommy Blogging': Redefining Motherhood Through the Blogosphere." *New Media & Society* 29: 729-747.
- Lorde, A. 1996. *The Audre Lorde Compendium: Essays, Speeches, and Journals*. Introduction by Alice Walker. London: Pandora.
- Lovric, Lydia. 2015. "Dear Daughter, Here's Why I Don't Work." 24 Apr, *Huffington Post*. Retrieved May 24, 2015, http://www.huffingtonpost.ca/lydia-lovric/stay-at-home-mom_b_6925826.html.
- Lykke, N. and Braidotti, R. (1996). *Between Monsters, Goddesses and Cyborgs: Feminist Confrontations with Science, Medicine and Cyberspace*. London: Zed Books.
- Macdonald, Ann-Marie. 2014. *Adult Onset*. Toronto, ON: Vintage Canada.
- MacMurchy, Helen. 1930. *Canadian Mother's Book*. Ottawa, ON: King's Printer.
- Mahon, Rianne and Fiona Robinson. 2011. *Feminist Ethics and Social Policy: Towards and New Global Political Economy of Care*. Vancouver, BC: UBC Press.
- Mainiero, Lisa A., and Sherry E. Sullivan. 2005. "Kaleidoscope careers: An alternate explanation for the "opt-out "revolution." *The Academy of Management Executive* 19: 106-123.
- Mann, Patricia. 1994. *Micro-Politics: Agency in a Post-Feminist Era*. Minneapolis: University of Minnesota Press.
- Marcotte, Amanda. 2013. America Is Doomed Unless Women Start Having More Babies. How Convenient. *Slate*, February 4. Accessed September 11, 2015, http://www.slate.com/blogs/xx_factor/2013/02/04/america_s_declining_fertility_rate_it_is_not_up_to_the_female_reproductive.html.
- Martin, Emily. 1994. *Flexible Bodies: Tracking Immunity in American Culture from the Days of Polio to the Age of AIDS*. Boston: Beacon Press.

- Mason, Mark. 2010. "Sample Size and Saturation in PhD Studies Using Qualitative Interviews." *Forum: Qualitative Social Research* 11, <http://nbn-resolving.de/urn:nbn:de:0114-fqs100387>.
- Mason, Corinne. 2013. "Manufacturing Urgency: Development Perspectives on Violence Against Women." PhD diss., University of Ottawa, 2013.
- Matchar, Emily. 2013. *Homeward Bound: Why Women are Embracing the New Domesticity*. New York: Simon & Schuster.
- Maycut, Pamela and Richard Morehouse. 1994. *Beginning Qualitative Research: A Philosophical and Practical Guide*. London: Falmer Press.
- Mayo, Marjorie. 2005. *Global Citizens: Social Movements and the Challenge of Globalization*. London: Zed Books.
- Marshall, Thomas Humphrey. 1950. *Citizenship and Social Class and Other Essays*. Cambridge: Cambridge University Press.
- McCarther, Amber. "Wired Women of Canada: Erica Ehm 'momprenuer.'" 26 Apr, *Globe and Mail*. Retrieved November 27, 2013, http://gold.globeinvestor.com/servlet/story/RTGAM.20110426.escenic_1998982/APStory/?query=motherhood&pageRequested=all.
- McLaren, Angus. 2015. *Our Own Master Race: Eugenics in Canada, 1885-1945*. Toronto, ON: University of Toronto Press.
- McCarter-Spaulding, Deborah. 2008. "Is breastfeeding fair? Tensions in feminist perspectives on breastfeeding and the family." *Journal of Human Lactation* 24: 206-212.
- McClintock, Anne. 1995. *Imperial Leather: Race, Gender, and Sexuality in the Colonial Contest*. London: Routledge.
- McRuer, Robert. 2007. *Crip Theory: Cultural Signs of Queerness and Disability*. New York, NY: New York University Press.
- McTavish, Lianne. 2013. "Fitspiration Brouhaha." 31 Oct, post in *Feminist Figure Girl* blog. Retrieved September 15, 2015, <http://feministfiguregirl.com/2013/10/21/fitspiration-brouhaha/>.
- MediaGuardian, "Allison Pearson." *The Guardian*, 9 Jul, 2007, retrieved October 21, 2013, <http://www.theguardian.com/media/2007/jul/09/mediatop1002007.mondaymediasection100>.
- Memcott, Carol. 2009. "Ayelet Waldman: Precipitating the mother of all uproars." 1 May, *USA Today*. Retrieved November 13, 2013,

- http://usatoday30.usatoday.com/life/books/news/2009-04-29-ayelet-waldman-bad-mother_N.htm.
- Metzger, Deborah. 2015. "Prepare to Be Pregnant." n.d. *Babble*. Retrieved September 17, 2015, http://www.babyzone.com/getting-pregnant/ttc-month-by-month/why-prepare-for-pregnancy_67284.
- Meyer, Michael. 2004. "Birth Dearth." 27 Sept, *Newsweek International*. Retrieved September 15, 2013, <http://www.newsweek.com/birth-dearth-127361>.
- Mirzoeff, Nicholas. 2002. "Ghostwriting: working out visual culture." *Journal of Visual Culture*, 1(2): 239-254.
- Mohanty, Chandra. 2003. *Feminism without Borders: Decolonizing Theory, Practicing Solidarity*. Durham: Duke University Press.
- Mohanty, Chandra. 2013. "Transnational Feminist Crossings: On Neoliberalism and Radical Critique." *Signs* 38: 967-991.
- Molina, Hilario. 2014. "The Construction of South Texas Masculinity: Masculine Space, the *pico de gallo*, and the Barbecue Grill." *Identities* 21: 233-248.
- Mukhopadhyay, Samhita. 2008. "Trial By Media: Black Female Laciviousness and the Question of Consent." In *Yes Means Yes: Visions of Female Sexual Empowerment and a World Without Rape*. By Jaclyn Friedman and Jessica Valenti, 151-162. Berkeley, CA: Seal Press.
- Nadeau, Chantal. 2002. *Fur Nation: From the Beaver to Brigitte Bardot*. London: Taylor & Francis.
- Naples, Nancy. 1998. *Community Activism and Feminist Politics: Organizing Across Race, Class, and Gender*. New York: Routledge.
- Nash, Meredith. 2011. "'You Don't Train for a Marathon Sitting on the Couch': Performances of Pregnancy, 'Fitness,' and 'Good' Motherhood in Melbourne, Australia." *Women's Studies International Forum* 34: 50-65.
- Nath, Jemal. 2011. "Gendered Fare: A Qualitative Investigation of Alternative Food and Masculinities." *Sociology* 47: 261-278.
- Nathoo, Tasnim and Aleck Ostry. 2009. *The One Best Way? Breastfeeding History, Politics, and Policy in Canada*. Kitchener, ON: Wilfred Laurier University Press.
- Nathoo, Tasnim and Aleck Ostry. 2014. "Promoting Breastfeeding, Solving Social Problems: Exploring State Involvement in Breastfeeding." In *Fertile Ground: Exploring*

- Reproduction in Canada* by Stephanie Paterson, Francesca Scala, and Marlene Sokolon (Eds.) 280-299. Kingston/Montreal: McGill-Queen's Press.
- Navaratnam, Sangeetha. 2011. "Guild, Shame, and Model Minorities." Masters Thesis, OISE, Retrieved September 16, 2015, https://tspace.library.utoronto.ca/bitstream/1807/30100/1/Navaratnam_Sangeetha_201111_MA_thesis.pdf.
- Neron, Brittany. 2015. "White Skin, Red Meat: Analyzing Representations of Meat Consumption for their Racialized, Gendered, and Colonial Connotations." MA Thesis, *University of Ottawa*, 2015.
- Neuman, Susan, and Donna Celano. 2012. "Worlds Apart: One City, Two Libraries, Ten Years of Watching Inequality Grow." *American Educator* 36:13-19.
- Nicholson, Linda. Ed. 2013. *Feminism/Postmodernism*. New York: Routledge.
- Nisen, Max. 2013. "Mommy bloggers tear Marissa Mayer apart," *Business Insider*, 26 Feb, retrieved from <http://www.businessinsider.com/criticism-of-marissa-mayer-by-moms-2013-2>.
- O'Brien Hallstein, D. Lynn. 2011. "She gives birth, she's wearing a bikini: Mobilizing the postpregnant celebrity mom body to manage the post-second wave crisis in femininity." *Women's studies in communication* 34: 111-138.
- O'Reilly, Andrea. 2010. *Maternal Theory*. Toronto: Demeter.
- Ong, Aihwa. 1999. *Flexible Citizenship: The Cultural Logics of Transnationality*. Durham, NC: Duke University Press.
- Ong, Aihwa. 2006. *Neoliberalism as Exception: Mutations in Citizenship and Sovereignty*. Durham, NC: Duke University Press.
- Ontario Human Rights Commission. 2000. "Breastfeeding is a Human Right." Toronto ON: Government of Ontario.
- Ontario Ministry of Health Promotion and Sports. 2014. "Child Health Program on Breastfeeding." Public health campaign. Toronto, ON: Government of Ontario.
- Orsini, Michael. 2012. "Autism, Neurodiversity, and the Welfare State." *Canadian Journal of Political Science* 45: 805-827.
- Orsini, Michael, and Miriam Smith. 2007. *Critical Policy Studies*. Vancouver, BC: University of British Columbia Press.
- Parker, George. 2014. "Mothers at Large: Responsibilizing the Pregnant Self for the Obesity Epidemic." *Fat Studies* 3:101-118.

- Parsons, Sabrina. 2012. "Time Magazine Asks Are You Mom Enough? Every Mom Should Be Offended." May 12. *Forbes*. Retrieved December 12, 2012, <http://www.forbes.com/sites/sabrinaparsons/2012/05/12/time-magazine-asks-are-you-mom-enough-every-mom-should-be-offended/>.
- Pateman, Carole. 1988. *The Sexual Contract*. Stanford, CA: Stanford University Press.
- Pateman, Carole. 1992. "Equality, Difference, Subordination: The Politics of Motherhood and Women's Citizenship." In *Beyond Equality and Difference*, edited by Gisela Bock and Susan James, 17-31. London: Routledge.
- Pearce, Tralee. 2011. "How to be a mompreneur: From sippy cups to spreadsheets." 31, May, *Globe and Mail*, Retrieved November 27, 2013, <http://www.theglobeandmail.com/globe-investor/personal-finance/household-finances/how-to-be-a-mompreneur/article551831/#dashboard/follows/>.
- Pearson, Allison. 2003. *I Don't Know How She Does It*. New York, NY: Random House.
- Pickert, Kate. 2012. "Q and A with Jamie Lynne Grumet," May 10, *Time*. Retrieved April 1, 2013, <http://healthland.time.com/2012/05/10/q-a-with-jamie-lynne-grumet/>.
- Pitt, Nicola. 2008. "Yummy Mummies": Angelina Jolie and early 21st century representations of motherhood." In *The annual conference of The Australian Sociological Association 2008 (The University of Melbourne 2-5 December 2008)*, pp. 1-13. The Australian Sociological Association (TASA).
- Podnieks, Elizabeth. 2012. *Mediating Moms: Mothers in Popular Culture*. Montreal-Kingston: McGill-Queens University Press.
- Pols, Mary. 2012. "Apatow's This is 40: Way too many scenes from a marriage," 19 Dec, *Time*, retrieved November 20, 2013, <http://entertainment.time.com/2012/12/19/3526129/>.
- Puar, Jasbir. 2006. "Mapping US Homonormativities." *Gender Place & Culture: A Journal of Feminist Geography*, 13(1): 67-88. doi:10.1080/09663690500531014.
- Puar, Jasbir. 2007. *Terrorist Assemblages: Homonationalism in Queer Times*. Durham, NC: Duke University Press.
- Puar, Jasbir. 2013. "Rethinking Homonationalism." *International Journal of Middle Eastern Studies* 45: 336-339.
- Rance, Susanne. 1997. "Safe Motherhood, Unsafe Abortion: A Reflection on the Impact of Discourse," *Reproductive Health Matters* 5(9): 10-19.

- Razack, Sherene. 2008. *Casting Out: The Eviction of Muslims from Western Law and Politics*. Toronto: University of Toronto Press.
- Reesman, Bryan. 2012. Borrowed image from an unknown source. May 21, 2012, accessed April 14, 2013, <http://www.bryanreesman.com/blog/wp-content/uploads/2012/05/Alien-TIME-cover-parody.jpg>.
- Reiger, Kerreen. 2000. *The Politics of Breastfeeding*. London: Pandora.
- Reilly, John, Julie Armstrong, Ahmad Dorosty, Pauline Emmett, Andrew Ness, I. Rogers, Colin Steer and Andrea Sherriff. 2005. "Early Life Risk Factors for Obesity and Childhood." *British Medical Journal* 330: 1357.
- Richardson, Lynne, and Marlaina Norris. 2010. "Access to Health and Health Care: How Race and Ethnicity Matter." *Mount Sinai Journal of Medicine* 77: 166-177.
- Ridgway, Shannon. 2012. "Examples of Thin Privilege." *Everyday Feminism*. Retrieved June 5, 2014, <http://everydayfeminism.com/2012/11/20-examples-of-thin-privilege/>.
- Rioux, Marcia. 2010. "The Right to Health: Human Rights Approaches to Health." In *Staying Alive, 2nd Edition: Critical Perspectives on Health, Illness, and Healthcare* by Toba Bryant, Dennis Raphael, and Marcia Rioux (Eds.). Toronto, ON: Canadian Scholars Press.
- Rippeyoung, Phyllis. 2009a. "Feeding the State: Breastfeeding and Women's Well-Being in Context." *Journal of the Association for Research on Mothering* 11: 36-48.
- Rippeyoung, Phyllis. 2009b. "Is it Too Late Baby? Pinpointing the Emergence of a Black-White Test Score Gap in Infancy." *Sociological Perspectives* 52: 235-258.
- Rippeyoung, Phyllis. 2013. "Can Breastfeeding Solve Inequality? The Relative Moderating Impact of Breastfeeding on Poverty Gaps in Canadian Child Cognitive Skills." *Canadian Journal of Sociology* 38, no. 1: 65-86.
- Rippeyoung, Phyllis. 2014. "Mandated Breastfeeding: Women's Bodies as a Solution to Poverty in Indonesia." Paper presented at *Mother Load: Transnational Perspectives on Maternity, Law and Medicine*, University of Ottawa, March 6th, 2014.
- Rippeyoung, Phyllis and Mary Noonan. 2012. "Is Breastfeeding Truly Cost Free? Income Consequences of Breastfeeding for Women." *American Sociological Review* 77: 244-267.
- Robinson, Fiona. 2010. "After Liberalism in World Politics? Toward an International Political Theory of Care." *Ethics and Social Welfare* 4:130-144.

- Robinson, Fiona. 2011. *The Ethics of Care: A Feminist Approach to Human Security*. Philadelphia, PA: Temple University Press.
- Robinson, Fiona. 2013. "Global Care Ethics: Beyond Distribution, Beyond Justice." *Journal of Global Ethics* 9: 131-143.
- Rochman, Bonnie. 2012. "What the U.S. Can Learn from Indonesia About Breastfeeding." February 1, *Time*. Retrieved July 18, 2014, <http://healthland.time.com/2012/02/01/what-the-u-s-can-learn-from-indonesia-about-breastfeeding/>.
- Rose, Joel. 2012. "New York Officials: Breast Milk May Be Best 'Formula.'" August 3, *National Public Radio*. Retrieved October 19, 2014, <http://www.npr.org/2012/08/03/158097386/new-york-officials-breast-milk-may-be-best-formula>.
- Rose, Nikolas. 1999. *Powers of Freedom: Reframing Political Thought*. Cambridge: Cambridge University Press.
- Rosenberg, Charles. 1976. *No Other Gods*. Baltimore, MD: John Hopkins.
- Roseneil, Sasha, Isabel Crowhurst, Ana Cristina Santos, and Mariya Stoilova. 2013. "Reproduction and Citizenship/Reproducing Citizens: Editorial Introduction." *Social Politics* 17: 901-911.
- Rosenwein, Rifka. "The baby sabbatical." 1 Feb, *AdAge*. Retrieved July 4, 2014, <http://adage.com/article/american-demographics/baby-sabbatical/44450/>.
- Rosin, Hanna. 2009. "The Case Against Breastfeeding." April, *The Atlantic*. Retrieved July 14, 2015, <http://www.theatlantic.com/magazine/archive/2009/04/the-case-against-breast-feeding/307311/>.
- Rosin, Hanna. 2010. "The End of Men." July/August Issue. *Atlantic*. <http://www.theatlantic.com/magazine/archive/2010/07/the-end-of-men/308135/>.
- Rosin, Hanna. 2013. *The End of Men: And the Rise of Women*. New York, NY: Riverhead Books.
- Rowe, Dan. 2002. "'Fertility deficit' on the horizon as birth rate falls: Gap with U.S. widens," 4 Jul, *National Post*. Retrieved July 4, 2014, <http://fact.on.ca/news/news0207/np020704.htm>.
- Rothblum, Ester. 2011. "Fat Studies." In *The Oxford Handbook of the Social Science of Obesity*. By John Cawley. Ed., 173-186. Oxford: Oxford University Press.
- Ruddick, Sara. 1989. *Maternal Thinking*. Boston: Beacon Press.

- Ruddick, Sara. 1995. *Maternal Thinking: Toward a Politics of Peace*. Boston: Beacon Press.
- Ryan, Alan, Zhou Wenjun, and Andrea Acosta. 2002. "Breastfeeding Continues to Increase Into the New Millennium." *Pediatrics* 110: 1103-1109.
- Saguy, Abigail, and Rene Almeling. 2008. "Fat in the Fire? Science, the News Media, and the 'Obesity Epidemic.'" *Sociological Forum* 23: 53-83.
- Salzman, Jill. "Proud to be a 'Mompreneur.'" 21 March, *New York Times*. Retrieved November 27, 2013, <http://parenting.blogs.nytimes.com/2012/03/21/proud-to-be-a-mompreneur/>.
- Sample, Ian. 2008. "Breastfed babies are brainier," *Guardian*, 6 May. Retrieved March 9, 2014, <http://www.theguardian.com/science/2008/may/06/medicalresearch.health>.
- Sandberg, Sheryl. *Lean In: Women, Work, and the Will to Lead*. New York: Random House.
- Saunderson, Karen. 2009. "The Mompreneur—The Local—Fort-Greene Blog." 10 May, *New York Times*. Retrieved August 10, 2013, <http://fort-greene.thelocal.nytimes.com/2009/05/10/the-mompreneur/>.
- Saurette, Paul. 2013. "Conservative MP Mark Warawa's Motion 408 is about abortion, not free speech," *Toronto Star*, 3 Apr, retrieved from http://www.thestar.com/opinion/commentary/2013/04/03/conservative_mp_mark_waraw_as_motion_408_is_about_abortion_not_free_speech.html.
- Saurette, Paul and Kelly Gordon. 2015. *The Changing Voice of the Anti-Abortion Movement: The Rise of Pro-Woman Rhetoric in Canada and the United States*. Toronto: University of Toronto Press.
- Schulte, Brigid. 2014. *Overwhelmed Work, Love, and Play When No One Has the Time*. California: HarperCollins.
- Sarvasy, Wendy. 1992. "Beyond the Difference versus Equality Policy Debate: Postsuffrage Feminism, Citizenship, and the Quest for a Feminist Welfare State." *Signs: Journal of Women in Culture and Society*, 17: 329-62.
- Schmeid, Virginia, and Deborah Lupton. 2001. "The Externality of the Inside: Body Images of Pregnancy." *Nursing Inquiry* 8: 32-40.
- Schult, Brigit. 2014. *Overwhelmed: Work, Love, and Play When No One Has the Time*. London: Bloomsbury.
- Schwartz, Felice. 1989. "Management Women and the New Facts of Life." January. *Harvard Business Review*. Retrieved September 19, 2014, <https://hbr.org/1989/01/management-women-and-the-new-facts-of-life/ar>.

- Schwartz, Madeleine. 2013. "Kicking Back, Not Leaning In." Summer, *Dissent*. Retrieved March 2, 2014, <https://www.dissentmagazine.org/article/kicking-back-not-leaning-in>.
- Scott, Joan. 1988. "Deconstructing equality-versus-difference: Or, the uses of poststructuralist theory for feminism." *Feminist Studies*, 14(1):33-50.
- Segal, Lynne. 1987. *Is the future female?: Troubled thoughts on contemporary feminism*. London: Virago.
- Seigworth, Gregory and Gregg, Melissa. 2010. *The Affect Theory Reader*. Durham: Duke University Press.
- Sethna, Christabelle. 2006. "The Evolution of the Birth Control Handbook: From student peer education manual to feminist self-empowerment text, 1968-1975." *Canadian Bulletin of Medical History/Bulletin canadien d'histoire de la médecine* 23: 89-118.
- Sethna, Christabelle. 2011. "Contraception: Much More than Preventing the Meeting of Ova and Sperm." *The History Education Network* n.p.. Retrieved January 1, 2012 from <http://thenhier.ca/en/content/contraception-much-more-preventing-meeting-ova-and-sperm-christabelle-sethna>.
- Sethna, Christabelle and Marion Doull. 2012. "Accidental Tourists: Canadian Women, Abortion Tourism, and Travel." *Women's Studies* 41: 457-475.
- Shoemaker, Jolynn. 2012. "The New Problem with No Name." 28 Jun, *Centre for Strategic and International Studies*. Retrieved July 1, 2015, <http://csis.org/publication/new-problem-no-name>.
- Skenazy, Lenore. "Sucking the Choice Out of Parenting," 1 Aug, *Daily News*. Retrieved May 29, 2013 from <http://www.nydailynews.com/opinion/sucking-choice-parenting-article-1.1125979>.
- Skrabanek, Petr. 1994. *The Rise of Coercive Medicine and the Rise of Coercive Healthism*. London: Social Affairs Unit.
- Slaughter, Anne-Marie. 2012. "Why Women Still Can't Have It All." Jul/Aug, *Atlantic*. Retrieved January 2, 2015, <http://www.theatlantic.com/magazine/archive/2012/07/why-women-still-cant-have-it-all/309020/>.
- Smith, Andrea. 2005. Beyond Pro-Choice Versus Pro-Life: Women of Color and Reproductive Justice." *NWSA Journal* 17: 119-140.
- Smith, Andrea. 2008. *Native Americans and the Christian Right*. Durham: Duke University Press.

- Smith, Kristen. 2014. "The Ups and Downs of Women's Employment: Shifting Composition of Behavior from 1970-2010?" *Upjohn Institute Working Papers*. 14-211. Retrieved June 1, 2015, http://research.upjohn.org/cgi/viewcontent.cgi?article=1228&context=up_workingpapers.
- Smyth, Lisa. 2009. "Intimate Citizenship and the Right to Care: The Case of Breastfeeding." In *Intimate Citizenships: Gender, Sexualities, Politics* by Elsbietta Oleksy. London: Taylor and Francis.
- Solovay, Ester and Sondra Rothblum. 2009. *The Fat Studies Reader*. New York: New York University Press.
- Stableford, Dylan. 2012. "U.S. Census: Minority Babies Now Majority, Surpassing Whites." 17, May, *Yahoo!* Retrieved March 6, 2014, <http://news.yahoo.com/blogs/lookout/u-census-minority-babies-now-majority-surpassing-whites-144319476.html>.
- Steiner, Leslie. Ed. 2007. *Mommy Wars*. New York, NY: Random House.
- Stibbe, Arran. 2004. "Health and the Social Construction of Masculinity in Men's Health Magazines." *Men and Masculinities* 7: 31-51.
- Stitt, Jocelyn Fenton. 2012. "Or Postpartum Depression as Bad Mothering in Popular Culture." *Mediating Moms: Mothers in Popular Culture*, 339.
- Stoljar, Natalie. 2000. "Autonomy and the Feminist Intuition." In *Relational Autonomy: Feminist Perspectives on Autonomy, Agency, and the Social Self* by Catriona Mackenzie and Natalie Stoljar (Eds.), 94-111. Oxford: Oxford University Press.
- Stone, Katherine. 2012a. "Back Off the Mamas, Mayor Bloomberg." 30 July 30, *Babble.com*. Retrieved on May 29, 2013 from <http://www.babble.com/babble-voices/something-fierce-katherine-stone/2012/07/30/back-off-of-the-mamas-mayor-bloomberg/>.
- Stone, Laura. 2012b. "NYC Mayor Latches On To New Breastfeeding Plan." 1 Aug, *Toronto Star*. Retrieved April 7, 2013, http://www.thestar.com/news/world/2012/08/01/nyc_mayor_bloomberg_latches_on_to_new_breastfeeding_plan.html.
- Stone, Pamela. 2008. *Opting Out: Why Women Really Quit Their Careers and Head Home*. Oakland, CA: University of California Press.
- Stone, Pamela and Meg Lovejoy. 2004. "Fast-track Women and the 'Choice' to Stay Home." *The Annals of the American Academy of American Political and Social Science* 596: 62-83.
- Sudbury, Julia. 2004. *Global Lockdown: Race, Gender, and the Prison-Industrial Complex*. New York, NY: Routledge.

- Sudbury, Julia. 2005. "Celling Black Bodies: Black Women in the Global Prison Industrial Complex." *Feminist Review* 80: 162-179.
- Sydie, Rosalind. 1994. *Natural Women, Cultured Men: A Feminist Perspective on Sociological Theory*. Vancouver: University of British Columbia Press.
- Taylor-Gooby, Peter. 1991. "Welfare State Regimes and Welfare Citizenship." *Journal of European Social Policy* 1: 93-105.
- Terrin, Norma, Christopher Schmid, and Joseph Lau. 2005. "In an Empirical Evaluation of the Funnel Plot, Researchers Could Not Visually Identify Publication Bias." *Journal of Clinical Epidemiology* 58: 894-901.
- Thanyachareon, Angela. 2010. "Mother Work: A Stay-at-Home Mom Advocates for Breastfeeding." In *African Americans Doing Feminism: Putting Theory into Everyday Practice* by Aaronette White. New York: Suny Press.
- Thobani, Sunera. 2007. *Exalted Subjects: Studies in the Making of Race and Nation in Canada*. Toronto, ON: University of Toronto Press.
- Thompson, Charis. 2005. *Making Parents: The Ontological Choreography of Reproductive Technologies*. Boston: MIT Press.
- Thompson, Charis. 2013. *Good science: the ethical choreography of stem cell research*. Boston: MIT Press.
- Todd, Douglas. 2013. "High birthrate among immigrant women has implications for Canada," Vancouver Sun, August 8. Retrieved September 11, 2015, <http://www.vancouversun.com/life/High+birthrate+among+immigrant+women+implications+Canada/8766093/story.html>.
- Torres, Sara, Denise L. Spitzer, Karen D. Hughes, Jacqueline Oxman-Martinez, and Jill Hanley. 2012. "From Temporary Worker to Resident: The LCP and Its Impact through an intersectional Lens." In *Legislated Inequality: Temporary Labour Migration in Canada* edited by Patti Tamara Lenard and Christine Straehle, 227-244. Montreal & Kingston, McGill-Queen's University Press.
- Tronto, Joan. 1993. *Moral Boundaries: A Political Argument for an Ethic of Care*. New York, NY: Routledge.
- Tronto, Joan. 2002. "The Nanny Question in Feminism." *Hypatia* 17: 34-61.
- Tronto, Joan. 2003. "Time's Place." *Feminist Theory* 4: 119-138.
- Tronto, Joan. 2013. *Caring Democracy: Markets, Equality, and Justice*. New York, NY: New York University Press.

- Twenge, Jean. 2013. "How Long Can You Wait to Have a Baby?" July/August, *Atlantic*. Retrieved September 11, 2014, <http://www.theatlantic.com/magazine/archive/2013/07/how-long-can-you-wait-to-have-a-baby/309374/>.
- Umberson, Debra, Tetyana Pudrovska, and Corinne Reczek. 2010. "Parenthood, Childlessness, and Well-Being: A Life-course Perspective." *Journal of Marriage and Family* 72: 612-629.
- United States Census Bureau. 2011. "Census Bureau Reports 'Delayer Boom' as More Educated Women Have Children Later." Fertility Supplement to the Current Population Survey (CPS): *Fertility of American Women 2010*. Retrieved September 15, 2014, <http://www.census.gov/newsroom/releases/archives/fertility/cb11-83.html>.
- Valenti, Jessica. 2012. *Why Have Kids? A New Mom Explores the Truth About Parenting and Happiness*. New York: Houghton Mifflin Harcourt.
- Valenti, Jessica. 2013. "Sheryl Sandberg Isn't the Perfect Feminist: So What?" *Washington Post*, 1 Mar, retrieved March 3, 2013, https://www.washingtonpost.com/opinions/dear-fellow-feminists-ripping-apart-sheryl-sandbergs-book-is-counterproductive/2013/03/01/fc71b984-81c0-11e2-a350-49866afab584_story.html.
- Van Esterik, Penny. 2008. "The Politics of Breastfeeding." In *Food and Culture: A Reader* by Carole Counihan and Penny Van Esterik, 467-481. New York: Routledge.
- Veenhoven, Ruut. 1991. "Is Happiness Relative?" *Social Indicators Research* 24:1-34.
- Villalobos, Ana. 2014. *The Motherload: Making it All Better In Insecure Times*. Oakland, CA: University of California Press.
- Vosko, Leah. 2000. *Temporary Work: The Gendered Rise of A Precarious Employment Relationship*. Toronto, ON: University of Toronto Press.
- Vosko, Leah. 2010. *Managing the Margins: Gender, Citizenship, and the International Regulation of Precarious Employment*. Oxford, UK: Oxford University Press.
- Vosko, Leah, Martha MacDonald, and Iain Campbell. 2009. *Gender and the Contours of Precarious Employment*. New York, NY: Routledge.
- Waldman, Ayelet. 2009. *Bad Mother: A Chronicle of Maternal Crimes, Minor Calamities, and Occasional Moments of Grace*. New York, NY: Doubleday.
- Wall, Glenda. 2004. "Is your child's brain potential maximized?: mothering in an age of new brain research." *Atlantis: Critical Studies in Gender, Culture & Social Justice* 28, no. 2: 41-50.

- Wallis, Claudia. 2004. "The Case for Staying Home." 22 Mar, *Time*. Retrieved April 24, 2012, http://academics.wellesley.edu/Polisci/Han/Pol199/Syllabus/Moms_Staying_Home.pdf.
- Walsh, Joan. 2002. "The Baby Panic." 23 Apr, *Salon*. Retrieved July 4, 2014, http://www.salon.com/2002/04/23/hewlett_book/.
- Walsh, Joan. 2013. *What's The Matter with White People? Finding Our Way in the Next America*. New York, NY: Touchstone.
- Wann, Marilyn. 1998. *FAT!SO?: Because you don't have to apologize for your size*. New York: Ten Speed Press.
- Wann, Marilyn. 2009. "Fat Studies: An Invitation to Revolution." In *The Fat Studies Reader* by Ester Rothblum and Sondra Solovay. Eds., xi-xxv. New York: New York University Press.
- Ward, Julie. 2000. *Le Leche League: At the Crossroads of Medicine, Feminism and Literature*. Chapel Hill, NC: University of North Carolina Press.
- Ward, Kelly and Wolf-Wendel, Lisa. 2004. *Academic Motherhood: Managing Work and Family*. Rutgers, NJ: Rutgers University Press.
- Warner, Judith. 2005. *Perfect Madness: Motherhood in the Age of Anxiety*. New York, NY: Penguin.
- Warner, Judith. 2013. "The Opt-Out Generation Wants Back In." 7 Aug, *New York Times*. <http://www.nytimes.com/2013/08/11/magazine/the-opt-out-generation-wants-back-in.html?pagewanted=all>.
- Warner, Judith. 2014. "To Reduce Inequality, Start With Families." 20 Apr, *New York Times*. Retrieved August 30, 2015, <http://opinionator.blogs.nytimes.com/2014/04/20/to-reduce-inequality-start-with-families/>.
- Watson, Amanda. 2012. "Are We Mom Enough? We Don't Have the Option." May 16, *Ottawa Citizen*. Retrieved May 17, 2012, <http://www.ottawacitizen.com/opinion/enough+have+option/6632953/story.html>.
- Watson, Amanda. 2013a. "Shouting Down Children Won't Help the Pro-choice Movement." 4 May, *Ottawa Citizen*, A4.
- Watson, Amanda. 2013b. "Shaky Science and a Dubious Breastfeeding Strategy." *Ottawa Citizen*, 7 Oct. B6.

- Watson, Amanda. 2014. "Talking about (White) Motherhood." *Ottawa Citizen*, 28 May. Retrieved June 5, 2014, <http://ottawacitizen.com/health/women/amanda-watson-talking-about-white-motherhood>.
- Watson, Amanda and Corinne Mason. 2015. "'Power of the First Hour': Is there a Transnational Breastfeeding Crisis?" *International Feminist Journal of Politics* 17.2: 101-138.
- Wax-Thibodeaux, Emily. 2014. "Why I Don't Breastfeed—If You Must Know." *Guardian*. 18 Oct. Retrieved October 30, 2014, <http://www.theguardian.com/lifeandstyle/2014/oct/18/breastfeeding-mothers-formula-breast-cancer>.
- Weisberg, Jacob. 2013. "Yahoo's Marissa Mayer: Hail to the Chief," *Vogue*, 16 Aug, retrieved from <http://www.vogue.com/865211/hail-to-the-chief-yahoos-marissa-mayer/>.
- Weiss McGolerick, Elizabeth. 2013. "You are What You Nurse." 22 Feb, *She Knows*, Retrieved March 9, 2014, <http://www.sheknows.com/parenting/articles/981477/does-breastfeeding-define-motherhood>.
- Westendorp, Ingrid and Ria Wolleswinkel. 2005. *Violence in the Domestic Sphere*. Morstel: Intersentia Uitgevers.
- Wharton, Amy. 2009. "The Sociology of Emotional Labour." *Annual Review of Sociology* 35: 147-165.
- Whelan, Corey. 2013. "The Teenage Girl's Guide to Infertility." 13, Jul, *Examiner*. Retrieved July 14, 2013, <http://www.examiner.com/list/the-teenage-girl-s-guide-to-preventing-infertility>.
- White, Nancy. 2013. "Two Toronto women up for Mompreneur Award." 27 Feb, *Toronto Star*. Retrieved November 27, 2013, http://www.thestar.com/life/parent/2013/02/27/two_toronto_women_up_for_mompreneur_award.html.
- White, Rebecca. 2005. "I Do Know How She Does It (But Sometimes I Wish I Didn't)." *Wm. & Mary J. Women and Law* 11: 209-220.
- White, Stuart. 2000. "Social Rights and the Social Contract—Political Theory and New Welfare Politics." *British Journal of Political Science* 30: 507-532.
- Willats, Anna, Mandy Bonisteel and Marilyn McLean. N.D. "The Struggle to Maintain Grassroots Feminist Responses to Male Violence." June 13. Retrieved January 14, 2015, http://www.rapereliefshelter.bc.ca/sites/default/files/imce/Struggle%20to%20Maintain%20Grassroots%20Feminist%20Responses_A%20Willats,%20M%20Bonisteel%20%26%20M%20McLean.pdf.

- Williams, Fiona. 1995. "Race/Ethnicity, Gender, and Class in Welfare States." *Social Politics* 2: 127-159.
- Williams, Fiona. 2001. "In and Beyond New Labour: Towards a New Political Ethic of Care." *Critical Social Policy* 21(4): 467-493.
- Williams, Fiona. 2004. *Rethinking Families*. London: Calouste Gulbenkian Foundation.
- Williams, Fiona. 2006a. "'The Personal and Political Ethics of Care', Concept." *Journal of Contemporary Community Education Practice Theory* 16: 3-7.
- Williams, Fiona. 2006b. "Care Work." In *International Encyclopedia of Social Policy* by Tony Fitzpatrick, Huck-ju Kwon, Nick Manning, James Midgley, and Gillian Pascall. London: Routledge.
- Williams, Fiona. 2010. "Claiming and Framing in the Making of Care Policies." Programme paper produced by the United Nations Research Institute for Social Development, Geneva, November 2010.
- Williams, Marjorie. 2002. "A working mom's comedy," *Washington Post*, 2 Oct, retrieved October 21, 2013, <http://www.washingtonpost.com/wp-dyn/articles/A30195-2002Oct1.html>.
- Williams, Joan. 2000. *Unbending Gender: Why Family and Work Conflict and What To Do About It*. Oxford, UK: Oxford University Press.
- Williams, Joan. 2012. *Reshaping the Family-Work Debate*. Boston, MA: Harvard University Press.
- Williams, Joan, and Rachel Dempsey. 2010. "The Rise of Executive Feminism." *Harvard Business Review*, March 28. Accessed September 2, 2015. <https://hbr.org/2013/03/the-rise-of-executive-feminism>.
- Williams, Charmaine and Shirley Chau. 2007. "Notes on feminism, racism and sisterhood." In *Under the Gaze: Centering Black feminist discourse in the Canadian feminist landscape* by Njoki Wane & Natisha Massaquoi (Eds.), 285-295. Toronto: Inanna Publications.
- Wilson, Simone. 2012a. "Jamie Lynne Grumet, L.A. MILF breastfeeding on cover of TIME, sees her blog crash amid controversy." May 12, *LA Weekly*. Retrieved April 1, 2013 from http://blogs.laweekly.com/informer/2012/05/jamie_lynne_grumet_time_la_blog.php.
- Wilson, Simone. 2012b. "Jamie Lynne Grumet, TIME's Breastfeeding Covergirl, Can't Stop Posing for Creepy Magazine Covers." Sept 10, *LA Weekly*. Retrieved May 18, 2013, http://blogs.laweekly.com/informer/2012/09/jamie_lynne_grumet_breastfeeding_magazine_covers.php.

- Wolf, Jacqueline. 2006. "What Breastfeeding Can Do For Feminists and What Feminists Can Do For Breastfeeding." *Signs* 31: 397-424.
- Wolf, Joan. 2010. *Is Breast Best? Taking on the Breastfeeding Experts and the New High Stakes of Motherhood*. New York: NYU Press.
- Woloshin, Steven, and Lisa M. Schwartz. 2006. "Media Reporting on Research Presented at Scientific Meetings: More Caution Needed." *Medical Journal of Australia* 184: 576-580.
- Young, Iris Marion. 1995. "Mothers, Citizenship, and Independence: A Critique of Pure Family Values." *Ethics* 105: 535-556.
- Young, Iris Marion. 1997. *Intersecting Voices: Dilemmas of Gender, Political Philosophy, and Policy*. Princeton, NJ: Princeton University Press.
- Young, Iris Marion. 2000. *Inclusion and Democracy*. Oxford: Oxford University Press.
- Young, Iris Marion. 2005. *On Female Body Experience: "Throwing Like a Girl" and Other Essays*. Oxford, UK: Oxford University Press.
- Yuval-Davis, Nira. 1997. *Gender and Nation*. London, UK: Sage.
- Zelikovsky, Sally. 2012. "In Defense of Stay-at-home Moms." 14 Apr, *American Thinker*. Retrieved July 17, 2015, http://www.americanthinker.com/articles/2012/04/in_defense_of_stay-at-home_moms.html.
- Zimmerman, Deena and Nurit Guttman. 2000. "'Breast is Best': Knowledge among Low-income Mothers is Not Enough." *Journal of Human Lactation* 17: 14-19.
- Zimmerman, M., Litt, J., and Bose, C. 2006. *Global Dimensions of Gender and Carework*. Palo Alto: Stanford University Press.
- Zine, Jasmin. 2012. *Islam in the Hinterlands: Exploring Muslim Cultural Politics in Canada*. Vancouver, BC: University of British Columbia Press.
- Zoll, Miriam. 2013. *Cracked Open: Liberty, Fertility and the Pursuit of High Tech Babies*. Interlink.

APPENDICES

Appendix A: Using Feminist CDA and Concepts of Neoliberal Responsibility and Citizenship to Decipher Motherhood Discourse

Operationalizing Neoliberal Responsibility and Citizenship in Motherhood Discourse	
Concept	Indicators
Neoliberal citizenship	<p>Emphasis on responsibility of individual mothers for infant welfare (Apple 1995, Villalobos 2014, Wolf 2012)</p> <p>Emphasis on flexibility and adaptability (to market forces) (Harvey 2007, Martin 1994, McRuer 2007, Tronto 2003)</p> <p>Emphasis on independence (Clare 1999, Tronto 2013, Young 1995)</p>
General notions of citizenship contract	<p>Reference to individual or group rights (Lister 2003, Ong 2006, Yuval-Davis 1997)</p> <p>Reference to welfare state (policy, government programs, provisions) (Finkel 2006, Lister 2003, Williams 2006)</p> <p>General notions of responsibility for care (Keck and Saraceno 2013, Kershaw 2005, Tronto 2013, Taylor-Gooby 1991)</p> <p>Agency/Autonomy (Douglas 2010, Collins 1998, Hartsock 1985)</p>

Appendix B: Themes from title and content analysis of *Globe and Mail*, *Toronto Star*, *New York Times*, and *USA Today* from May 2007—May 2013. Keyword: motherhood. Ranked in order of saturation.

1. Career-Family Conflict
 - a) Work-life balance
 - b) Social/public/corporate policy
 - i) Child care
 - ii) Pay inequity
 - c) Exceptional careers and motherhood: impact on professional artistic or athletic career after becoming a mother
 - d) Entrepreneurship
 - e) Feminism/gender role politics
2. Representation of Mothers
 - a) Celebrity mothers (politicians, athletes, musicians, artists, writers, actors)
 - b) Fictional mothers (in film, television, fiction, plays)
3. Infant feeding
 - a) Breastfeeding
 - b) Bottle feeding
 - c) Public health campaigns
4. Family Formation
 - a) Fertility
 - i) Maternal Age
 - I) ARTs
 - II) Egg Storage
 - ii) Pregnancy
 - b) Childfree
 - i) Sterilization
 - c) Abortion
 - d) Adoption
 - e) Gay parents
5. Affect
 - a) Happiness
 - b) Post-partum depression
 - c) Humour
 - i) “absurdities” of motherhood/ parenting
6. Parenting
 - a) Tactics/styles
 - b) Age of parents
 - c) Fathers/Fatherhood

7. Maternity
 - a) Delivery/C-section
 - b) Midwifery
8. Mother's Day
 - a) What mothers "really want"
 - b) Honouring mothers' labour
9. Maternal "health"
 - a) Fitness (after baby or with children at home)
 - b) Sex appeal
 - c) Using drugs
 - b) Body image
10. Mother-blaming
11. Single Motherhood
12. Parenting and Disability
 - a) Children with disabilities
 - b) Parents with disabilities

Appendix C: Numerical results of keyword search “motherhood,” and number of titles chosen for in-depth content analysis

Results of keyword search, “motherhood,” May 1, 2007—May 1, 2013		
Publication	Number of Articles including Keyword “Motherhood” (in Title or Body)	Number of Articles Selected from Title Analysis for Close Analysis of Representation of “Motherhood” to Decipher Themes of Case Studies
Globe and Mail	2331	198
Toronto Star	792	144
New York Times	6810	477
USA Today	203	0*

*Following archival research, this publication was eliminated due to its tendency to report on celebrity motherhood, which is widely studied (as I elaborate within).