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CHRISTINA G. BOBEL
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What is This?
BOUNDDED LIBERATION
A Focused Study of
La Leche League International

CHRISTINA G. BOBEL
University of Cincinnati

Combining participant observation with in-depth interviewing, this small-scale, focused study examines the philosophies and practices promoted by La Leche League International (LLLI), the foremost international breast-feeding support organization. In particular, the study examines four linked conceptual paradoxes related to reconceptualizing women’s bodies, validating motherhood, staying home, and living with baby, each representing an internal contradiction of liberation and constraint for League members. While LLLI’s prescriptions for “good mothering through breast-feeding” may encourage women to reclaim their bodies, boost their sense of competence as mothers, and resist conventional authorities, at the the same time, the League’s conception of what it means to be a good mother pushes women into socially prescribed and limiting roles rooted in biological determinism.

It is 1956. Although the ideology of maternity and domesticity is in full bloom, the practice of breast-feeding is not. Breast-feeding rates have dropped to nearly 20 percent (La Leche League International 1996). But at a picnic in that same year, two women uniquely committed to nursing their babies conceive an idea. Committed to debunking the “mystery” of breast-feeding, they join with five other nursing mothers and found La Leche League.

The name La Leche League was derived from a shrine in Florida, Nuestra Senora de La Leche y Buen Parto, which translates literally as “Our Lady of Milk and Good Delivery.” The founding mothers of La Leche League commiserated about the dearth of breast-feeding information and support available to mothers. In response, they created the organization to provide the sort of informal networks of relatives, neighbors, and friends that had been available to nursing moms

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REPRINT REQUESTS: Christina G. Bobel, Women’s Center, University of Cincinnati, P.O. Box 210179, Cincinnati, OH 45221-0179; e-mail: bobelcg@email.uc.edu.

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before physician-directed bottle feeding became the norm in the United States (Apple 1987).

Today, the organization, called La Leche League International (LLLLI) since 1964, reaches 200,000 people every month in 66 countries with breast-feeding information, education, and support through its network of trained volunteers. It is estimated that 750,000 American mothers call LLLLl with questions and concerns annually. It distinguishes itself as the only organization with the sole purpose of helping breast-feeding mothers and is widely regarded as the driving force behind breast-feeding education and support in the United States and throughout the world (see Andrews 1991; Apple 1987; Blum and Vandewater 1993; Weiner 1994). LLLLl information is available in 27 languages. Through a dues-paying membership of 27,000 mothers around the world (16,424 in the United States) and its network of 3,000 local groups and 8,000 leaders in the United States alone, LLLLl (1996, 1997) considers itself the “worldwide authority” on breast-feeding. The fastest areas of expansion are outside the United States (LLLl 1998), where LLLLl has trained breast-feeding counselors in Brazil (in conjunction with United Nations Children’s Fund [UNICEF]), Guatemala, and Honduras. In 1958, LLLLl published The Womanly Art of Breastfeeding. Several editions later, it claims a circulation of more than 2.5 million copies published in 8 languages and in Braille. In addition, LLLLl publishes a catalog of breast-feeding–related books and other resources and their bimonthly member magazine, New Beginnings (LLLl 1996).

During my own pregnancy and throughout my daughter’s infancy, I had multiple contacts with LLLLl through their published literature, attendance at a meeting in my local area, and phone contact with an LLLLl group leader in my hometown. I found the information I received helpful but at the same time, somehow troubling. As a new mother struggling with the adjustment to parenthood demands, I was simultaneously drawn and repelled by LLLLl. As a result, I resolved to discover more about LLLLl. The motto of the organization is “good mothering through breast-feeding.” What, I wondered, constitutes “good mothering” in LLLLl? Members are largely white, married, and middle-class women. Might this demographic profile be the result of LLLLl’s specific prescriptions for good mothering?

**METHOD**

This small-scale focused study presents an in-depth view of one branch of an international organization. It is designed to stimulate thinking and research in an understudied area that I believe theoretically and politically significant. To this end, I employed qualitative techniques, especially participant observation and in-depth interviewing, to explore as deeply as I could a few meaningful cases. This focused, in-depth study provided me an opportunity to delve into the contradictions at stake in my examination—an exploration that produced four interrelated themes that constitute a paradoxical ideology I call “bounded liberation.” In my analysis, I draw heavily on informant words and actions to construct a “thick description” relying
on frequent verbatim quotations that permit readers to draw their own conclusions with greater ease.2

In particular, I attended seven local league meetings in various locations in southern Wisconsin, both urban and rural. The number of women present at each meeting ranged from 10 to 35 (the largest meeting was a “special” meeting that included fathers). Typically, about 20 women were present at a meeting (this number represents a typical meeting size for a League meeting [LLLI 1997]). Six of the meetings covered one of the four “series” topics recommended by LLLI: “The Advantages of Breast-Feeding to Mother and Baby,” “The Art of Breast-Feeding and Overcoming Difficulties,” “The Baby Arrives: The Family and the Breast-Fed Baby,” and “Nutrition and Weaning.” The seventh meeting was “A Special Meeting for Mothers of Toddlers.” As a nursing mother myself, access was easy, although I brought my own baby to only one of the meetings. I took detailed field notes on both the content of the meeting and my observations and interactions before and after the actual meeting. After a preliminary coding and analysis of field notes, I designed an interview guide to probe recurrent issues expressed by League members and leaders, such as sleep deprivation and disapproving in-laws. The interviews were loosely structured but typically began with the open-ended question, “So, tell me why you got involved in [the] League?” Throughout the interviews, I probed the informants on their philosophy of mothering and how the League shaped that philosophy. I also searched for ways the informants both supported and contradicted the League’s recommendations (as articulated in LLLI’s 10-point philosophy [see the appendix]) in both subtle and more overt ways.

I interviewed three League members who exemplified typical League members and leaders. The interviews, which lasted between one and one-half to two and one-half hours were taped with the permission of each informant and later transcribed verbatim. I met Laina through my personal association with my local LLLI. A leader, a mother of five and a recipient of an MBA, Laina had participated in LLLI either as a member or leader in several areas throughout the United States before settling in the small Midwestern college town in which she and her family now reside.

Rachel is a former nurse who was referred to me by Laina as “someone good to talk to” because she exuded a certain passion and enthusiasm for the League and was “always willing to share it with others.” Rachel recently became a leader of a local League group. She and her family of six live in a very remote rural area where she homeschools her children.3

Sandy has been affiliated with the League since her first pregnancy six years ago. Very active in childbirth reform efforts, she is a certified Bradley method instructor. (Bradley is a natural childbirth technique.) She is the mother of two children and lives with her family in an urban area. I met Sandy through my association with the local alternative childbirth community and was struck by her self-description as “radical.”

All three informants were white, married, middle-class women in their early to mid-30s, which reflects the demographic profile of the local LLLI groups I
observed. Unfortunately, LLLI has never collected demographics regarding its membership. However, my own observations of the membership as predominately white, married, college educated, and middle-class was shared by LLLI’s public relations director (LLLI 1998). It is probably safe to assume that more diverse regions of the country and large metropolitan areas may have local groups composed of women who do not fit this profile. Nevertheless, the groups I accessed as well as the three women I interviewed appropriately represent my best estimation of the typical League member. A study of the atypical League member and/or group would likely produce an interesting contrast to the analysis presented here. Accordingly, due to the size of my data pool, it is certainly not advisable to generalize my conclusions to all LLLI members but to use my analysis as a catalyst for further study.

**FEMINISM, BREAST-FEEDING, AND LLLI**

In the mid-1970s, Adrienne Rich (1976, 11) observed, “We know more about the air we breathe, the seas we travel, than about the nature and meaning of motherhood.” Since then, the institution of motherhood has attracted feminists who attempt to sort out the complicated ambiguity attached to mothering in the modern age. Theorists, poets, novelists, therapists, and others have tried to rescue motherhood from a pro-natalist ideology that mandates and ghettoizes the institution of motherhood (see, e.g., Chodorow 1978; Cixous 1976; Dinnerstein 1976; Rich 1976; Ruddick 1984). Motherhood is a sticky subject. As Weideger (1980, 205) wrote, motherhood “is a matter with ambiguity built right in at the beginning. Even before the beginning. But the women’s movement (like all other social movements) has yet to be very good about ambiguity.”

As a feature of motherhood, breast-feeding is perhaps the most tangible embodied act a mother performs. Blum (1993, 292) argues, it may present “the most intense experience of conflict over what the late-twentieth-century American mother is ought to be.” Any exploration into the realm of breast-feeding, however, hazards a slip to essentialist, biological deterministic portrayals of motherhood. Breast-feeding, then, perhaps more than any other aspect of motherhood, forces us to reckon with the ambiguities “built into” motherhood.

This limited in-depth analysis attempts to expand and update some of the issues other scholars have addressed in their own research on LLLI. For instance, Merrill (1987) did an ethnographic study of a local LLLI group. Through the League, Merrill found members “learned how to mother.” This process, she contended, is a cyclical process progressing from experienced League mothers to new mothers to pregnant women and so on as the group is repopulated over time. By learning how to mother, she argued, “group members are making motherhood easier and more secure for themselves, and someday for their children as well” (p. 239). Andrews (1991), intrigued by the League’s declining membership (from 12,544 in 1981 to 9,154 in 1984), explored how the League articulated, revised, and extended its
practices to ensure survival. In particular, Andrews looked at the League strategy to prescribe “sympathetic respect” toward women who work outside the home while presenting leaders as role models who demonstrate the benefits of domesticity and the style of parenting that full-time homemaking allows. Andrews argues that LLLI prescriptions to keep up with a changing social structure illustrate “the processual character of social control” (p. 95).

But Blum and Vandewater (1993) found that little about the League’s practical stance changed. In their ethnographic study, they investigate how an organization founded in the 1950s continues to attract new members in the 1990s. They, like Weiner, focused on the League’s philosophy of maternalism, suggesting it both fits and contradicts current feminist discourses. “Exalting women’s capacity to mother has contradictory implications for efforts to end women’s subordination, as some use a woman-centered perspective to empower women while others use biological essentialism to constrain women’s opportunities” (Blum and Vandewater 1993, 297). Weiner (1994, 1381) critiques the League’s philosophy of maternalism, which she argues, “reconstructed mothering in a way that was both liberating and constricting and so ironically offered both prologue and counterpoint to the emerging movement for women’s liberation.”

Although each of these pieces are essential to our understanding of LLLI, a truly comprehensive sense of the League is impossible until we hear from the members and leaders who participate in the daily life of the organization. Andrews’s (1991) study did use member comments, but her work was primarily methodological. Merrill’s (1987) ethnography, although thorough and well grounded, unfortunately omitted the voices of the mothers she observed during several months. Weiner’s (1994) ambitious work was based exclusively on textual analysis of League publications and interviews with founding mothers of LLLI. Only Blum and Vandewater (1993) navigated the complex ambiguities of LLLI in the voice of League members themselves. This study, then, is an attempt to extend and refine Blum and Vandewater’s work by exploring in-depth our current understanding of LLLI’s conception of “good mothering.” To this end, I examine carefully the paradoxical ideology that guides the organization with attention in the later part of my analysis to the particular white, middle-class character of League membership.

**LLLII’s PARADOXES OF MOTHERING**

This study revealed four distinct themes that constitute the paradoxical ideology at the heart of LLLI’s conception of “good mothering.” The themes, which constitute my analytical framework, emerged from analysis of in-depth interview transcripts and field notes collected during the participant observation phase of this research. League-published materials, including books and pamphlets, were used as secondary sources of validation.

Each individual theme represents a contradiction that recalls the mythic beast in *Dr. Doolittle*, the “push me–pull you.” The beast had two heads, each intent on
moving in its own direction. When the left half of the beast pushed left, the right half pulled right, making it quite difficult to get anywhere. LLLI represents a sort of push me—pull you as well. While its “good mothering” ideology and practice may pull women to reclaim themselves and value their life choices, at the same time, it pushes women back into socially prescribed roles rooted in biological determinism. Conceptualizing LLLI ideology and practice as internally contradictory reveals the ambiguity embedded in the data. Paradoxes are perplexing because they are counterintuitive; they defer simple understanding with their confusing web of simultaneous and contradictory truths. The ambiguity heard from League membership is captured nicely in this conceptualization, I think. In it, the mothers show us how their resistance and accommodation coexist.

Reconceptualizing Women’s Bodies

The League could be credited for its role in rejecting sexist portrayals of women’s bodies as primarily objects for male consumption. By asserting the natural and functional role of a woman’s breasts as providers of nourishment, a woman’s body resists sexualized male exploitation. The founders of LLLI have described themselves as early feminists, for they believe women should reclaim control of their bodies through natural childbirth and breast-feeding. Mary White, a League founder, stated in 1966 that “feminism was with us long before Betty Friedan” (quoted in Weiner 1994, 1376). With the support of the League, some women commented on the empowerment they experienced as they nursed. Breast-feeding helped them redefine their breasts and their relationship with their bodies. As Rachel, one of my informants, explained,

This entire culture is totally uncomfortable with bodies. Bodies are bad. I view my breasts differently since I started breast-feeding. There is so much more to them. Because I was so big chested, I was always shy about my breasts. Since breast-feeding, I learned they are not just something to be harassed about. Breast-feeding instills appreciation of your body. It forces you to listen to your body. Some people might think breast-feeding is not liberating, but I find just the opposite. Women who breast-feed are proud of themselves. They enjoy their bodies. (Rachel, interview)

During League meetings, I observed women comfortable with their bodies. Although efforts are observed to “nurse discreetly” as the League suggests, breasts are periodically made visible to no one’s apparent chagrin or embarrassment. In this context, League members feel breasts are for feeding. Breasts are a vital, significant part of a woman’s identity; breasts are something of which to be proud.

Indeed, to embrace one’s body is an act of defiance in the technological age. With the glitzy barrage of formula marketing that suggests a scientific, sanitized product is superior to mother’s milk, it takes a firm resolve to choose breast-feeding. The trust in a woman’s body that breast-feeding engenders may well extend to a generalized trust in the power and competence of a woman’s body.
But if breasts are returned to a more functional, less sexualized role, are they returned to women on women's terms? Are breasts only for breast-feeding? Have they been disembodied from women? Comments made during this research revealed a sort of objectification of breasts—not the pornographic sort feminists have decried but a more insidious, internalized objectification associated with breast-feeding. Women talk of “wanting their bodies back” but realizing that until baby weans, they cannot fully own their bodies. Some women feel their children objectify them. Faith explains,

I have a friend who took the advice who tried to wean her baby by going away for a weekend. It didn’t work. As soon as she walked through the door, he came at her like, “The breast is back!” (Faith, meeting observation)

Sometimes, the verbal and nonverbal expressions League mothers use to describe their breasts suggests a sort of objectification. A leader, Colleen, described how her daughter enthusiastically approached nursing sessions. She said, “She goes for the breast like a Big Mac.” A slogan inscribed on a League button reads, “Mother’s Milk: You’ve got the right one, baby . . . now have the left one.” Women refer to their individual breasts as “the breast”; I seldom heard a woman say, “my breast.”

Women freely describe the fullness of their breasts, for instance, with wide and uninhibited gestures. On one hand, this freedom to vividly reference a part of a woman’s body is refreshing and liberating. On the other hand, the expressions appear less a statement of freedom than an expression of a part of a woman’s body that is detached from the larger whole and that has, in a sense, taken on a life of its own. Questions linger: Is the reclamation of the body only partial? Are women repossessing their bodies only to give them over to their children? Is the exploitation experienced by men exchanged for a more subtle exploitation vis-à-vis the demands of breast-feeding?

As League mothers find meaning in their bodies, they simultaneously resist and accept cultural prescriptions. They reclaim their bodies as sources of nourishment and, therefore, personal pride. Through breast-feeding, League mothers report enhanced self-esteem and a growing comfort with their bodies. As one woman quipped in a meeting, “Before I started nursing, I wouldn’t even say the word breast.” Concurrently, as League mothers surrender their bodies to their babies through League-described “on-demand” nursing, they experience yet a different, perhaps more subtle, form of objectification whereby their breasts are not really their own but a disembodied “thing” enlisted to the service of a child.

Validating Motherhood

For many, LLLI is a place of affirmation. Nowhere else, League mothers argue, is motherhood exalted and legitimated like in the League. While Benjamin Spock’s (1945) Baby and Child Care opens with the directive, “Trust Yourself. You know
more than you think you do” (p. 1), his advice comes from a physician, not a peer rendering the mother-to-mother affirmation of motherhood unique, and thus, notable. League mothers credit the League for returning the authority of motherhood to mothers and affirming mothering in general. This is accomplished in several ways. First, LLLI promotes “attachment parenting” (see Sears and Sears 1993), where mother and baby are rarely separated and children are nursed for extended periods of time not only when hungry but also when they need comfort, closeness, or reassurance. Some League children nurse until they are four and five years old. This intensive style of parenting, rooted in prolonged breast-feeding, is considered aberrant in the mainstream, so those who choose it often feel isolated. Laina described how the League met her need to break that isolation:

I think it acknowledges . . . more than any place else I’ve been what I feel my relationship to my children to be—especially when they are babies. I think in the mainstream there is this sense of hurry . . . what’s important is to get them . . . to sleep through the night. Don’t spoil them. Almost: don’t be there too much for them. Get them . . . pushing them toward independence. And I guess I feel like that the League acknowledges that the way to get them to be independent is to let them be dependent while they need to be. And I guess that has sort of been—besides reading—that has been my support in doing that. (Laina, interview)

Sandy, like Laina, found the League a true source of personal identification that affirmed her parenting choices. Identifying extended nursing as an act of rebellion, she explained,

I guess that’s one of the reasons I like the League. I have always been a rebel. It used to be sex and drugs, and now it’s something else. So, I guess I find a lot of kindred souls there. I know there are people who are mainstream, but they are generally not the ones who stay. I don’t know if that’s because they are uncomfortable or because they are mainstream they don’t nurse as long so they don’t need the League. (Sandy, interview)

In addition to the affirmation for aberrant behavior, the League provides a sense of community to mothers that otherwise may be difficult to find. Sandy, feeling alone and a little odd for being the first in her circle of friends to get pregnant, found the League a needed oasis as she sorted out what it meant to mother:

I was just desperate for company. Everyone in my circle of friends now is from La Leche League. It was just really welcoming and friendly. I could really relate to them. It was just really friendly. Everyone was interested in what I was interested in. It was so nice to be in a room with women who wanted to talk about babies. (Sandy, interview)

Having moved a lot, Laina found League meetings a reliable place to connect, a place to feel welcome and at home even in a strange place. She said, “For a lot of people, League can be real social support. A place where I knew I would meet
at least some like-minded people." Similarly, Wanda offered: "I found such incredible friendships in La Leche League. It has been great finding this community of women."

In addition to the League’s philosophical support for the role of mother, meetings, publications, and other resources provide the tools to mother with confidence. Sandy found that

[the League] has been instrumental in me developing as a mother—just being around other mothers and watching how they mother their babies. I learned a lot on how to be good mother because I had never been around other babies. I read a story in New Beginnings [LLLI’s membership magazine] about a human mother who volunteered to nurse her baby in front of a gorilla mother who, for some reason, couldn’t nurse her baby gorilla. So this human mother went every day and just sat and nursed her baby and eventually the gorilla caught on. That’s what League has done for me. Just helped me learn how to be a mother. (Sandy, interview)

In a similar vein, Rachel relayed how her affiliation with the League enhanced her mothering skills:

It helps me with my parenting because it helps me with my priorities. There are so many problems in this world, it feels good to be doing something preventative. It’s a give-and-take. When you build that foundation, you carry it on in other ways. When you breastfeed, you become tuned in to your baby’s needs. You learn to listen to your baby. You listen for signs. I can still sense when my children need a snuggle. It’s the same thing as when they want to nurse. (Rachel, interview)

As Weiner (1994, 1363) pointed out,

Emphasizing the experience and wisdom of mothers rather than the expertise of doctors, the League by the mid-1950s anticipated later feminist calls for a women’s health movement by questioning the medicalization of birth and infant care and challenging the influence of “experts” on changing definitions of motherhood.

Women, as mothers, are their own experts. Members speak of “avoiding the doctor” as much as possible and “being less medical” than friends and neighbors. During a meeting where participants discussed common breast-feeding myths, doctors were cited again and again as the chief purveyors of misinformation about nursing. In the midst of the discussion, one leader interjected, “I am amazed by the stuff I hear over the help line [LLLI information and support phone line]. I can’t believe how misinformed doctors are about breast-feeding.”

Staying Home

Certainly the League’s exaltation of motherhood has affirmed many mothers who find little respect in the mainstream, yet it also can be seen as subtly restricting women’s endeavors outside of motherhood. Rachel’s comment below signifies the
League’s ostensibly “neutral” position on work outside the home. Rather than take a clear position, the League defers to a mother’s “undeniable natural instincts” to guide her.

The League has a philosophy that women and babies have a need for each other to be together. But they don’t come out and say women can’t work. It is just a fact whether people want to recognize it or not. Somehow that need has to be met. (Rachel, interview)

When I asked Rachel to elaborate on a woman’s need for her baby, she paused and replied simply, “That’s a good question.” When Maria inquired during a meeting about how to operate a breast pump more efficiently (a prerequisite to her return to her job), instead of answering her question, the leader, Colleen, challenged her need for a pump:

*Maria:* I am really discouraged because I pump and pump and hardly get anything. What can I do? I have to start back at work soon and I am worried I will never be able to pump enough milk.
*Colleen:* How old is your baby?
*Maria:* Six weeks.
*Colleen:* What are your alternatives to going back to work so soon? Six weeks seems awfully soon.
*Kathy:* Can you extend your maternity leave? How about taking him to work with you?

Use a sling [a cloth baby carrier slung over the shoulder]. I would die without mine.
*Maria:* But I work with the public—in sales—and it would be awkward. I don’t think it would work to carry him around with me.
*Colleen:* Have you considered having your day care provider bring him to your place of work and have you nurse him on the spot?
*Maria:* Well . . . that wouldn’t work, I don’t think. I mean, how could I interrupt a customer and say, “I gotta go in the back for a few minutes?”
*Colleen:* It’s just a shame. Six weeks is so soon. (source: meeting observation)

At the start of any meeting, it is not uncommon to hear a woman introduce herself as a full-time mother and add, “I stay at home with my children, which I think is the most important thing I can do.” LLLI clearly and unabashedly supports a woman’s choice to stay home full-time with her children. In fact, the League encourages full-time motherhood. Flying in the face of cultural expectations, LLLI has at times been the singular voice exalting the necessity of mothers staying home with their babies. Before the League revised its 10-part philosophy in 1985 (see the appendix), concept 3 read, “The baby has a basic need for its mother’s love and presence that is as intense as its need for food. Thus, working outside the home is strongly discouraged” (as reported in Merrill 1987). Today, the same revised concept omits the direct reference to work outside the home, but it appears League philosophy toward work outside the home has changed relatively little (Blum and Vandewater 1993). Still, for those women who do choose to stay at home with their
children, LLLI provides continuous and reliable support and validation of that choice. One mother described her appreciation for the League’s support of stay-at-home moms because, as Sandy said, they “need a place because there isn’t a lot of encouragement for women to stay home with their babies in this culture.”

Women who leave the world of paid work and commit to full-time motherhood find the League a place that validates that choice. Rachel recounted her feelings when she first shifted from a career as a nurse to a full-time mom. Her story is one of guilt transformed into acceptance with the help of the League, which “brings home the priorities time and time again.”

I was feeling guilty. There is a lot of pressure on women not to be boring. And as a result, there are a lot of women who think they have to imitate men. Like women are supposed to be embarrassed of who they are. You know that commercial? “I can bring home the bacon.” I think a lot of women are realizing that is ridiculous. (Rachel, interview)

Through the League, mothers are encouraged to challenge the cultural denigration of stay-at-home motherhood. Members politicize their choice to stay at home and breast-feed on demand as “radical,” “revolutionary,” and “alternative.” Mothers who nurse their children for extended periods (beyond the norm of a few weeks to a few months), who forgo paid careers, and who practice a constellation of other atypical behaviors (such as sharing the family bed and birthing babies at home) distinguish themselves from more mainstream stay-at-home mothers (Bobel forthcoming). LLLI members speak of feeling “out of step” with their stay-at-home peers who do not question conventional authority. So for League mothers, the isolation they feel in a culture that sends a classically mixed message to stay-at-home mothers (i.e., you are right to full-time mother, but is that all you do?) is intensified because they choose to mother in a way that set them further apart from the mainstream.

In addition to the support the League provides women who choose full-time mothering, LLLI prescribes relaxed standards of home care that the full-time mothers of Betty Friedan’s era would have considered revolutionary. The expectation that a woman keep an immaculate house, perfectly groomed children, and a hot meal on the table each night is clearly not a part of LLLI’s vision. League members regularly admit the difficulty of getting even the bare necessities done while demonstrating a comfort with their limitations. The standards of “the mainstream” are unrealistic, they contend. The priority of a full-time mother is mothering, not cleaning, cooking, shopping, or any other activity that would detract from a mother’s main focus: her children. At a meeting addressing topic 3: “The Baby Arrives: The Family and the Breast-Fed Baby,” the leader passed around a grab bag filled with various objects selected for their significance during a newborn’s early weeks. One mother drew out a can of furniture polish to the chuckles of the group. She immediately quoted the well-known League slogan, “People before things,” then, with a
smile, relayed, “My house is so dusty that my son wrote his name on the coffee table; I don’t even know when and it is still there!”

For many, LLLI’s relaxed standards liberate women to focus their energies in a more satisfying, more enjoyable way. LLLI is a place where it is okay to “get nothing done,” because, after all, “no one cares but your neighbors if you have a tidy house.” The following exchange is representative of the laissez-faire approach League mothers have to keeping house and preparing meals.

*Carrie:* I am a full-time mom, so I have all the time in the world, right? Yeah, right. I am amazed at how little I get done. I consider it a good day if I get a shower and the dishes done.

*Renee:* Isn’t that the truth. And forget dinner!

*Martha:* I say, throw a pot of water on the stove. It looks good!

*Colleen:* Throw a little oregano in it if you really want to be convincing! (source, meeting observation)

For many mothers, LLLI has enabled them to “get in touch with their priorities.” Spending time with other full-time mothers has made it easier to take a less-traveled path and feel good about it. For some, staying at home has forced them to recognize how demanding full-time child care is and accordingly reconsider more realistic expectations of that role. It may involve some trade-offs.

Still, it may be that the trade-offs involved in full-time motherhood are more severe than a sink of dirty dishes. Although the League empowers mothers to reject notions of being “super women,” it may substitute the role of housewife for one of “babywife.” The couple of husband and wife is replaced by the “nursing couple,” a relationship that obviously takes priority. Furthermore, because the mother is encouraged to nurse her baby “until the baby outgrows the need,” she often finds she must, in the meantime, subordinate her own needs completely. As a result, it is sometimes difficult to discern where the mother ends and the baby begins. Meeting name tags may present a symbol of the merged identity of mother-baby. Worn at each meeting, most mothers wear one tag, naming themselves and their children. During meetings, mothers and babies stay close. It is unusual to see a mother holding someone else’s baby. The sacred space of the mother-child connection is seldom violated. LLLI contends the unbroken bond is best for baby, but what are the implications for mother?

Sandy admitted how she was so attached to League philosophy that she ignored her own needs until it was almost too late:

Baby’s needs come first, but Mother’s needs come before baby’s wants. And I remem-ber I put my needs WAY last and after three years, I had such a deficit in meeting my needs. All I wanted to say was, No. No. No. No. No. I resolved to do things differently this time around. Sometimes she will have to fuss while I eat. That’s such good advice. Basically, I put her needs first, but her wants sometimes have to wait. There is a
rule in my house: Mommy gets to eat. Mommy gets to pee. C’mon guys, Mommy gets to pee. (Sandy, interview)

Nursing “on demand” is an around-the-clock responsibility. Many League mothers sleep with their babies to facilitate frequent nighttime nursings but complain of relentless fatigue. Husbands often sleep elsewhere until the baby weans. Katrina, a mother of two, remarked, “Hal and I haven’t slept together in a—well, let’s say a long time. But that’s okay. It’s not forever.” When Allison mentioned she was beginning to resent her sleepless, nursing nights with her one-and-a-half year-old, a leader asked, “Can you cut back some?” After a thoughtful pause, she replied, “I couldn’t take it away from him. It’s just too important.”

Besides sleep, other maternal needs tend to fall last. Time away from the children on a “date” with the husband is a rarity. Usually, if mom and dad get out, the baby comes along. Laina, a leader, explained,

Well, now we generally don’t go out [alone] until the baby is one year old just because it is difficult and a lot of times not being worth the trouble, and when you have five kids, if you take one with you, it’s not that big of a deal.

During a meeting discussion of “ways to avoid being tied to the house,” each suggestion—going to the movies, a concert, or out to dinner—included bringing baby. Alice said, “We gave the kids (ages 18 months and three years) earplugs and went to see Billy Joel and Elton John.” For some, even if time away from baby is an option, it is unwelcome. Rachel explained, “There is such an intuitive bond between mother and baby when they are little, that I wouldn’t enjoy myself.”

When women do attempt to separate themselves from their babies, they often meet with resistance at League. Meeting topic number 4 is “Nutrition and Weaning,” but both my own observations and my interviews demonstrated that topic 4 usually centers on nutrition. Weaning is rarely discussed. Sandy remembered,

I do remember another woman on the west side. Her baby was a toddler. She was feeling very challenged. She wanted to wean and the leader gave her no help at all. She wasn’t rude or anything. It was a nutrition-and-weaning meeting and we mostly talked about nutrition. The leader blew her off. I remember thinking, “This woman isn’t getting at all what she needs.” (Sandy, interview)

In retelling this story, Sandy disclosed her own League-congruent thoughts about women ready to wean when she shared, “I didn’t want her to wean. ‘Ah . . . don’t wean,’ I thought . . . I always feel sad when people wean their babies.”

What are the implications for women if, once freed from cultural expectations of being “super women,” they receive League expectations of being “super moms?” Are women simply throwing off one unrealistic role for another? In this regard, LLLL presents a paradox. LLLL values a woman’s choice to mother full-time without doubt or guilt. First, it provides mothers a place to connect with other stay-at-home mothers who similarly place a premium on intensive child care and, second,
the League tempers this validation with a voice of reason. Expectations of immaculate homes and perfect children are replaced with a more realistic prescription for child-centered mothering through a detachment from materialism. Yet, while the League liberates women from oppressive standards of home care and the difficult struggle to combine employment and motherhood, it may well substitute another oppressive prescription, that of the always-available mother for the needy child. As LLLI discourages mother-baby separation and promotes “on-demand” nursing around the clock, father’s role (and other potential caretakers) is minimized. The mother is held up as the only truly suitable, appropriate primary care giver. In many ways, then, one oppressive expectation is exchanged for another.

It is not clear whether the full-time intensive motherhood advocated by the League is a matter of active choice or a default for lack of better alternatives. It is rare to hear a League mother declare, “I am a full-time mother because I find it personally fulfilling, unlike anything else [emphasis added].” Laina, for instance, muses about her reasons for “choosing” her role:

I think if there was something else I wanted to be doing that was very very important to me, then I would have to work harder to balance that. I don’t feel that I would have to give up either one. It has been easy for me because I’ve wanted to be home anyway and I don’t feel like there is something really important I feel like doing otherwise. I went to college and grad school and neither of those things ended up being what I really wanted—or something that was really important to me. And this is why we have as many kids as we do. I mean this is the choice we made. (Laina, interview)

It could be argued LLLI’s zeal for the virtues of motherhood set women up for disappointment. When one’s identity is so dependent on mothering, a woman may well meet a series of upsets and frustrations. The League contends that women nurture their children best when they feel nurtured themselves, but it seems the single-mindedness of the League definition of mother may preclude consistent, committed self-care.

Living with Baby

The fourth conceptual paradox deals with the difficult balance between acceptance born of wisdom and resignation born of passivity and sacrifice. The difference is marked by the presence or absence of power the mother feels relative to the circumstances of her life. In the case of LLLI, mothers are, on one hand, empowered to gracefully accept many of the inherent, unavoidable challenges of motherhood such as sleep deprivation and the loss of spontaneity. Through shared storytelling, League mothers make peace with their new lives as mothers.

Attending a League meeting, one gets the sense that no problem is too large. With enough creative, collaborative problem solving, a solution can be found. A theme runs through each meeting best described as “motherhood is tough work, but it is worth it.” With humor, mothers describe how different their “postbaby” lives are from their “prebaby” days. Sleeping in on the weekends is a thing of the past,
as is reading the paper, using the bathroom alone, or having an uninterrupted conversation.

Still, what is peacemaking to some is surrender to others. Excessive sleep deprivation (beyond a child’s infancy), for example, is often discussed as a mother’s “fact of life,” suggesting that sleep is only for the selfish who subordinate their baby’s needs. Sacrifice is at the center of a good mother’s role. One gets the sense that motherhood is something to be endured; fulfillment is necessarily postponed until the children wean. Kathy, a leader, explained,

Just the other day I was looking through my three-year-old’s baby book and noticed the blank for “sleeps through the night” is still blank. And I have a feeling it always will be . . . but that’s okay. (Kathy, meeting observation)

The sacrifices of motherhood recur throughout the discussions at League meetings. When sleeping arrangements were discussed at one meeting, Allison mused out loud about how nice it would be if her son slept in another room. She rejected the idea, though, because “My son couldn’t sleep in the other room; I’d worry too much.” At another meeting, Katherine, a leader and mother of a two-year-old, shared, “I wish I could go out more. Maybe spend a weekend away.”

How does the League, then, help mothers come to terms with their sacrifices? Laina discussed her strategy in helping new mothers “get to the place” where they recognize “that’s just the way it is.” When it comes to sleep deprivation,

A lot of times people think that everyone else’s baby is sleeping and just letting them know that they are not. It’s not easy but you are in the same boat as a lot of other people and it may seem horrible but just try and keep it in perspective with okay, you are gonna live 70 years average and one year you may not get enough sleep because of this baby, and just trying to let them know it won’t be forever. (Laina, interview)

Leaders and members alike create a discourse of “be thankful for what you’ve got” that discourages mothers from complaining too much. For instance, Sandy related a story about a woman who complained at a meeting that her baby insisted on nursing every hour throughout the day, making it nearly impossible for her to do anything else. When Sandy discovered this avid nurser was, however, sleeping through the night, she remarked, “I don’t think what you’ve got is so bad!” After the meeting, when Sandy expressed her regret for speaking out, the leader informed her, “I wouldn’t worry about it, she needed to hear it.”

When League mothers do challenge the League idea that “no sacrifice is too large,” they are often met with resistance. Obviously, the adoption of League ideology assumes that intensive motherhood is best for baby, and whatever is best for baby is best. The mother who questions this is questioned herself, often ignored, silenced, or trivialized with comments such as “in time you will understand.” In my observations of League meetings, the few times that mothers tried to engage others
in discussions of fatigue about this particular style of mothering or doubt that it was the best, most reasonable approach for her family, responses from leaders and other group members were typically dismissive such as “Yeah. It is normal to feel that way, but it will pass.” Critiques of the League’s philosophy or practice were seldom, if ever, advanced in my observations of League meetings. Rather, the meetings usually functioned as LLLI rallies where the League approaches to mothering were affirmed and celebrated with a string of personal testimonies.

Still, with probing, I was able to detect some minor resistance (and the counter-resistance that inevitably followed). When asked if she ever found League philosophy difficult to abide, Sandy recollected a meeting that featured a special League speaker. Frustrated and tired, she queried the speaker on how to curb nighttime nursings with her three-year-old.

> There was no understanding of how hard it was. She just kept saying, “You should always put the baby’s needs first.” I wondered, “Should I get a divorce?” I mean, it was really coming down to that. It was really affecting my marriage. I think a divorce would be hard on the baby, too. I know it would be hard on me. (Sandy, interview)

Although the line between necessary sacrifice inherent in any parent’s life and unnecessary sacrifice is fine and intensely personal, LLLI’s approach to mothering as “all or nothing” seems to wear on the women who practice it, even if their expressions of this fatigue are subtle and understated. At the same time, the “we’re in this together” attitude engendered through the League goes a long way in helping mothers come to terms with their lives as mothers. The creative problem solving and group commiserating that happens at meetings clearly eased the mothering experience for the women in this study. In the group, a young mother regularly looks to older, more experienced mothers for their wise assurances that she could and would endure whatever aspect of mothering was challenging her at the moment.

Nevertheless, the subtle line between acceptance and resignation was often crossed for League mothers who were instructed to surrender their power to shape their lives because baby’s needs unequivocally come first in the League’s conception. Although it seems the mothers agree with this belief in theory, they struggled daily with putting it into practice as they work toward a balance that nurtures both mother and child. Learning to nurse on demand, to forgo sleep and privacy, and to subordinate personal needs for the (perception of) familial well-being may be the learned “art” at the root of League-style parenting. Clearly, the support of fellow League mothers and the accessibility of the League’s printed materials and the LLLI hotline all function to keep mothers connected to others committed to translating League philosophy into day-to-day life. When mainstream society questions or one’s internal voice raises criticism or doubt, the mothers seem to turn readily to other League mothers for validation who respond with a chorus of “Yes, you are doing the ‘right thing.’ Yes, this is the best way to mother.” But this begs the question, The best way to mother for whom? Which mothers? Which children?
LLL AND THE CONTEXT OF PRIVILEGE

Any discussion of LLLI would be inadequate without addressing the race and class dimensions embedded in League ideology and practice and how the racialized and class-based understandings of good mothering proffered by the League may impair the organization’s ability to appeal to a more diverse population of mothers. The membership of LLLI appears to be almost exclusively white, middle-class, and married. When League members and leaders account for their homogeneous membership, they cite the demographics of breast-feeding: White women are more likely to nurse than women of color, and middle-class women are more likely to nurse than poor women. As Sandy put it, “If they’re not nursing, they don’t need the league.” In other words, the reason lies outside the League. League mothers are likely referring to Kurinij, Shiono, and Rhoads’s (1988) often-cited research when invoking the “it’s in them” explanation for race-based discrepancy in U.S. breast-feeding rates.

In the mid-1980s, a team of government scientists interviewed 688 Black women and 511 white women in an attempt to discover why Black women were less likely than white women to nurse their babies. The research found that the level of the mother’s educational attainment played a key role (those with a college education were 2.6 times more likely to breast-feed than those with a high school diploma or less), as did employment status. The authors suggest that increasing educational and employment opportunities for Black women will boost breast-feeding rates. But the authors fail to explain why breast-feeding among Black women still lags even when education, age, and income are held constant.

Similarly, the League fails to take responsibility for the underrepresentation of women of color and poor women in its membership. Could more than differential breast-feeding rates explain why white, middle-class (and married) women dominate the organization? Could, perhaps, the League’s definition of “good mothering” predicated on sacrifice be unrealistic for most women? Certainly, League practice assumes an intact, stable family, preferably supported by a breadwinning father. Single mothers, women receiving (now dwindling) federal aid, and others who do not fit the mold of the LLLI mother may well find the organization’s message rings a dissonant chord. Such women were certainly not present in my investigation. And in this way, LLLI simply reflects a larger cultural value system that is differentially relevant to mothers on the basis of class and race.

The paradox of “bounded liberation” theorized here as unique to LLLI is actually symptomatic of a pansocietal view of motherhood—we love mothers in theory, but in practice, mothers must fend for themselves. This is especially true for poor mothers. Clearly, some mothers are more worthy of support and care than others. Maternity, then, is valued if it is attached to privilege. Despite a pro-natalist national rhetoric that purports to celebrate maternity, poor mothers are systemically denigrated and sent prematurely into the workforce if they wish to claim any federal assistance. Furthermore, poor mothers are less likely to access so-called family-friendly workplace benefits such as on-site child care and flex time, suggesting that
“the more you earn, the more you get” (Holcomb 2000). At the individual level, when I probed interviewees about the state of stay-at-home motherhood, especially in regard to women receiving state or federal assistance, they typically responded with dismay, weighing in that it is fundamentally wrong for any mother to be separated from her young children. But where is the activism? One might assume that LLLI would emerge as a voice of resistance to federal regulations that require women to work outside the home. Yet, consistent with League policy to be a “one issue” organization (i.e., to focus only on breast-feeding), it is unlikely that LLLI will take a position against the work requirements of the current welfare system, thereby reifying its position as an organization that serves the interest of the privileged.

If the League, then, appeals only to a small percentage of women, where does everyone else get the kind of breast-feeding information, support, and education they need? Admittedly, the League has made some effort in attracting a more diverse population through outreach, for instance, to mothers receiving Women, Infants, and Children (WIC) federal funds (Hall 1992) and high school students (Rodkin 1994), but I doubt any outreach without a serious revision of League philosophy will ever succeed in attracting a committed diverse membership. Even the most aggressive outreach campaign will simply bring women to a few meetings, who, upon discovering the League criteria for good mothering, will leave. Without the privilege of race, class, and the material support of a male partner, most women will inevitably fall short of League ideals. Then where do they go?

Perhaps, as Blum and Vandewater (1993, 292) posited, “the League’s maternalism offers a moral justification for emphasizing family over workplace and solace for dampened class and personal aspirations.” But what does it offer other women? What does it offer women less likely, based on their social position, to entertain hopes of a promising, upwardly mobile career? It seems reasonable to encourage the League to distribute the responsibility of “good mothering” so that we as a society are accountable to young children and to women. Burdening women with exclusive parenting does little to improve the conditions of children. Dorothy Dinnerstein (1976, 71) reminds us that “the harsh truth is that no societal compromise which changes other features of woman’s conditioning while leaving her role as first parent will get at the roots of asymmetric sexual privilege.” The notion, proffered by the League, that child care is necessarily the domain of only women and necessarily synonymous with sacrifice is problematic. Above all, the League has yet to reckon with the realities of all mothers.

**CONCLUSION**

What are the implications of the “bounded liberation” paradox at the center of LLLI’s ideal of “good mothering?” Blum (1993) reports that LLLI is second in size to Alcoholics Anonymous (AA) among America’s self-help groups. Like AA and other similar volunteer organizations, members seek the affirmation and support
from others “who have been there.” To LLLI’s credit, the organization works hard to break a mother’s isolation by creating and sustaining community. The organizational culture created through monthly meetings, phone help lines, and a steady stream of publications reaches out to mothers who wish to connect with others similarly motivated to dedicate themselves to intensive mothering (Andrews 1991). Yet, as noted earlier, the community constructed via League outreach is largely homogeneous. The connections forged between the mothers are facilitated by their shared identities as white, middle-class, married women. Would a more racially and economically diverse group gel so well? It is important not to overstate the unifying power of maternity when in this case, the mothers have much more in common than their children.

The League does succeed in constructing a sense of community for some (similarly positioned) mothers—women who, unlike many mothers of an earlier generation, appear conscious of the implications of their particular mothering practice. League mothers intentionally give mothering their highest priority and wrestle daily with external and internal judgments of their lifestyle. Theirs is an informed choice, but no choice is free. All are constrained by gender politics at home, in the paid labor market, and in the culture at large (Hays 1996; Hochschild 1989; Reskin and Padavic 1994). In addition, the specific prescriptions of the League’s good mothering prove unrealistic and excessively self-sacrificing for some. Yet, following the League’s advice may serve as the “admission price” of membership in the community. Member after member spoke of the isolation of motherhood that only the League managed to penetrate. Here, as in Merrill’s (1987, 237) research, many women sought out the League to connect with other mothers and “the idea of natural mothering through complete breastfeeding just ‘grew’ with [them] as [they] did it.” What is not clear is the process of growing. Are women so desperate for a community of like-minded women that they are vulnerable to League philosophy, even if it jeopardizes their own sense of self? Do members adapt to this particular ideology because the alternative—separation—is unbearable and the human need to “fit in” looms large? Accounting for the intragroup conformity common to the League, Rachel offered: “Everyone is trying to fit in with each other. They are afraid to really speak up and say what it is on their mind. I wish moms really talked about how they felt. I am not afraid of their views.” In a culture that ghettoizes and segregates full-time mothers as “less than,” “boring,” and “simple,” is it too hard and too scary to take up Rachel’s challenge?

Even the League recognizes that mothers nurture best when nurtured themselves. But, where is that self-nurturing, including acceptance for non-League ideas and practices, modeled? How can it be reconciled with the kind of parenting any child deserves? Clearly, the societal responsibility for child rearing must be enunciated as should real supports for women who choose to mother. Removing the obstacles that make balancing career and family for all mothers is one way of simultaneously valuing a woman as mother and woman in her myriad other roles. With the support of fathers, governments, bosses, and others, it is possible to bridge the
terrain between a style of mothering that embraces the child and denies the mother and one that embraces the mother and denies the child. We can appreciate the best of LLLI, while encouraging the League to fashion a more complex, holistic, and above all, realistic and inclusive expectation of “good mothering.”

APPENDIX
La Leche League International’s 10-Point Philosophy

1. Mothering through breastfeeding is the most natural and effective way of understanding and satisfying the needs of the baby.
2. Mother and baby need to be together early and often to establish a satisfying relationship and an adequate milk supply.
3. In the early years, the baby has an intense need to be with his [sic] mother which is as basic as his [sic] need for food.
4. Breast milk is the superior infant food.
5. For the healthy, full term baby breast milk is the only food necessary until baby shows signs of needing solids, about the middle of the first year after birth.
6. Ideally, the breastfeeding relationship will continue until the baby outgrows the need.
7. Alert and active participation by the mother in childbirth is a help in getting breastfeeding off to a good start.
8. Breastfeeding is enhanced and the nursing couple sustained by the loving support, help and companionship of the baby’s father.
9. Good nutrition means eating a well-balanced and varied diet of foods in as close to their natural state as possible.
10. From infancy on, children need loving guidance which reflects acceptance of their capabilities and sensitivity to their feelings.


NOTES

2. All informant names are pseudonyms.
3. Both Laina’s and Rachel’s status as LLLI leaders was significant in their selection as interviewees. League leaders are required to complete an intensive study of LLLI, including the philosophy and approach of the organization, as well as very specific information on the mechanics, or in the language of LLLI, the “womanly art” of breast-feeding. League leaders, then, are not only official spokeswomen of LLLI but individuals who clearly embrace League practice and ideology, both requirements of leader status. Hence, interviews with leaders pose an interesting challenge. On one hand, an interview with a leader promises to be very rich, since leaders obviously know LLLI well and have “thought through” many of the issues an interviewer might raise. On the other hand, because a leader is deemed an official representative of LLLI, she may be reluctant to question or contradict LLLI in any way for fear of impugning the organization. Because of the latter, it was my challenge to probe carefully and tenaciously, always mindful of the limitations and hopeful of the possibilities.
4. The average age of weaning appears to be around two or three years of age, but statistics have not been collected by LLLI.

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Christina G. Bobel is the director of the Women’s Center at the University of Cincinnati. Her research focuses on motherhood as a potential site of social change. Her book Natural Mothering: Practices, Politics and Paradoxes will be published by Temple University Press in summer 2001.