

**“Surely a little discretion isn’t too difficult”? The discursive  
construction of discretion in users’ comments on UK  
newspaper articles about public breastfeeding**

Alexandra Kent (Keele University) 0000-0003-0350-8769

Joanne Meredith (University of Wolverhampton) 0000-0001-6834-2005

Kirsty Budds (Leeds Beckett University) 0000-0001-8159-4186

**Corresponding Author**

Dr Alexandra Kent

School of Psychology

Dorothy Hodgkin Building

Keele University

ST5 5BG

A.kent@keele.ac.uk

## Article

# **“Surely a little discretion isn’t too difficult”? The discursive construction of discretion in users’ comments on UK newspaper articles about public breastfeeding**

## **Abstract**

Objective: This paper explores how discourses of discretion are constructed in online discussions about breastfeeding in public.

Method and Measures: We analysed 4204 online newspaper comment threads from 15 UK-based publications using Discursive Psychology. We explored how discretion was constructed and mobilised to facilitate discourses of breastfeeding in public.

Results: Indiscretion was used to construct dispositional traits of mothers typically associated with sexualised, immoral female behaviour and therefore incompatible with ‘good’ motherhood. Responsibility for preventing public upset was placed on breastfeeding mothers, whilst discretion was constructed as easily achievable, and therefore a reasonable expectation. By implication, women who chose not to be discreet, were constructed as deliberately provocative, and so not

entitled to claim or protest negative treatment. Notably, within our data the relevance of discretion when breastfeeding in public appeared discursively difficult to reject or challenge.

**Conclusion:** Our findings confirm empirically that support for public breastfeeding is constructed as contingent on mothers displaying discretion. Our analysis highlights the challenges for mothers and babies for whom breastfeeding is compromised by an unwillingness to feed in public, perhaps due to pervasive constructions of breastfeeding women as selfish, exhibitionist, inconsiderate and unfit mothers in public discourse. Finally, our findings demonstrate the practical accomplishment in everyday life of the type of constructions of breastfeeding women that have been powerfully conceptualised by previous researchers.

**Key words**

UK Online newspaper comments, Discursive Psychology, Public Breastfeeding, Discretion, Discourse

## **“Surely a little discretion isn’t too difficult”? The discursive construction of discretion in users’ comments on UK newspaper articles about public breastfeeding**

Infant feeding is a major global public health issue and a particular challenge in the UK (Victora et al, 2016). UK breastfeeding rates are among the worst in the world; only 1% of UK babies meet WHO recommendations for exclusive breastfeeding for 6 months (McAndrew, 2012). By 12 months only 0.5% of UK babies receive any breast milk, compared to 27%-USA, 35%-Norway, or 44%-New Zealand (Victora et al, 2016).

Managing breastfeeding in the presence of other people is a social / cultural challenge for new mothers on top of the practical / physical breastfeeding challenges for mother-baby dyads. In a Public Health England survey of 500 new mothers, 63% said they would feel embarrassed breastfeeding in the presence of unfamiliar people (Kmietowicz, 2017). This has implications for the likelihood of continued breastfeeding because willingness to breastfeed in public is positively correlated with breastfeeding duration (Prusoff & Cho, 2017; Scott et al, 2015). Indeed, across a range of studies, mothers report that discomfort when breastfeeding in public contributed to decisions to reduce or end breastfeeding sooner than otherwise intended (e.g., Boyer, 2012, 2018; Scott & Mostyn, 2003; Hauck, 2004; Leeming et al, 2013; Li et al, 2008). Mothers whose experiences of breastfeeding did not meet their antenatal expectations were particularly vulnerable to negative mental health outcomes (Borra et al, 2015; Brown, 2018).

Research about public breastfeeding typically explores the experiences of mothers (and sometimes partners, friends and families) either through direct elicitation of personal experiences (Henderson, McMillan, Green & Renfrew, 2011; Owens, Carter, Nordham & Ford, 2018; Primo, Mocelin, Zavarize, Lima & Brandao, 2019; Sheehan, Gribble & Schmied, 2019; Zhao, Ouyang & Redding, 2018), or ethnographic-style work exploring the spaces and places for public breastfeeding (Boyer, 2011 & 2018; Dykes, 2006). A smaller body of research has drawn on textual documents, public health material, and public commentaries relating to public breastfeeding (Bresnahan, Zhu, Zhuang & Yan, 2019; Grant, 2016; Norwood & Turner, 2013; Morris, de la Fuente, Williams & Hirst 2016; Wall, 2001). Such work has yielded compelling personal narratives (both positive and negative) and has consistently identified entrenched and persistent themes and barriers limiting public breastfeeding. These include prioritising the infant's need (Zhao et al, 2018); doing what is 'natural'/primary (Callaghan & Lazard, 2012; Henderson et al, 2011; Tăut, 2017; Whitemore, 2019); sexualisation of female breasts (Acker, 2009; Dykes, 2006; Grant, 2016; Henderson et al, 2011; Hauck et al, 2021; Norwood & Turner, 2013; Tăut, 2017; Whitemore, 2019); managing other people's discomfort (Dykes, 2006; Henderson et al, 2011; Hauck et al, 2021; Sheehan et al, 2019); being a 'good' mother (Callaghan & Lazard, 2012; Norwood & Turner, 2013; Wall, 2001); and exhibitionism versus discretion ('covering up') (Bresnahan et al, 2019; Callaghan & Lazard, 2012; Grant, 2016; Hauck et al, 2021; Morris et al, 2016; Owens et al, 2018; Primo et al, 2019; Sheehan et al, 2019; Tăut, 2017; Woollard, 2019).

There is strong conceptual and theoretical work on breastfeeding, often from within a feminist perspective (e.g., Whiley et al, 2022). Such accounts offer powerful theoretical

explanations for the themes and barriers to public breastfeeding summarised above and situate them within broader concerns about women's rights to freely inhabit and engage with public life. In contrast, our study is theoretically rooted in discursive psychology, and takes as its starting point, the language used for the practical and social accomplishment of everyday life (Stokoe & Tileaga, 2016). With this study we offer an empirical triangulation by demonstrating how public breastfeeding is talked about: What understandings about public breastfeeding are produced, reproduced and sustained within everyday discourse?

This is important because the language used to talk about public breastfeeding has power to curtail and limit breastfeeding. Fear of being challenged or disparaged for public breastfeeding leads many women to avoid attempting it, even if they have not personally experienced a negative reaction (Morris et al., 2016; Zhao et al, 2018). Even non-verbal affective signals from strangers can cause stress (Boyer, 2012, 2018). Even when trying to advocate for public breastfeeding, Woollard's (2019:1) philosophical analysis argues that discourses of nutrition and discretion can reinforce a presumption that "breastfeeding requires justification in terms of health or developmental benefits to the child, and ... that breastfeeding in public is only acceptable if assumed standards of discretion are met". Further work exploring public perceptions towards public breastfeeding is needed, in particular looking at how public perceptions become manifested through discourse.

### **Discretion**

The concept of discretion has emerged from previous work as a particularly powerful discourse drawn on both to support and condemn public breastfeeding (Bartlett, 2002; Bresnahan et al,

2019; Morris et al, 2016). Discretion was often referred to when expressing qualified support for public breastfeeding or making ambivalent, contradictory or mixed claims (Grant, 2016; Owens et al, 2018; Sheehan et al, 2019; Täut, 2017). In their data, Callaghan & Lazard (2012: 949) found that “necessary partial exposure that is discrete [sic] and maternal is represented as acceptable”. It was often presented as the “key to achieving successful breastfeeding in public” (Morris et al, 2016, p477), possibly because it offered a means to treat public breastfeeding as a private act rather than a social performance (Callaghan & Lazard, 2012). These findings point towards discretion being a key feature of talk about public breastfeeding.

Our work extends a small pool of previous studies that have explored online comments discussing public breastfeeding (Bresnahan et al, 2019; Grant, 2016; Morris et al, 2016; Norwood & Turner, 2013). The current study explores how and when the concept of discretion is mobilised and drawn into public discourse about public breastfeeding. In this study we investigate the social actions and descriptions to which discretion contributes, demonstrate how discourses of discretion may mobilise other discourses around public breastfeeding and consider the implications of these discourses for breastfeeding women. In this respect, we present an empirical examination of Woollard’s (2019: 1) claim that there exists a “presupposition that breastfeeding in public is only acceptable if assumed standards of discretion are met”

## **Method**

Previous studies have typically identified a single ‘trigger’ event with media coverage in which a mother was challenged for breastfeeding in public, and then gathered and qualitatively

analysed comments (from a single or small range of outlets. Bresnahan et al (2019) studied 2,441 comments on a Fox News site responding to an incident in a US snack bar at a Target store. Grant (2016) studied 884 comments from a Mail Online article detailing an incident in a Sports Direct clothing store that sparked a subsequent protest. Norwood & Turner (2013) sampled approximately 120 out of 350 comments on [www.people.com](http://www.people.com) in response to an article about a TIME cover featuring a mother breastfeeding her toddler. Morris et al (2016: 472) similarly focused on a single trigger event (an incident at Claridge's, a luxury London Hotel), but they selected 805 comments from a range of "news media websites and parenting forums" rather than a single outlet. Our work is more ambitious, with 97 news articles across 15 publications yielding 4,204 comments for analysis.

The context of online comments lends itself to particularly unrestrained expression (Suler, 2004) and so is more likely to reveal the extremes of discourse that might intimidate new mothers and reduce willingness to attempt public breastfeeding (Erjavec & Kovačič, 2012). When posting online, authorship is often obscured so one can post with reduced personal accountability (Suler, 2004), the audience is amorphous and undefined which leads to reduced recipient design or consideration of hurt, and there is a tradition of trolling – being deliberately inflammatory to try and provoke responses (Sambaraju & McVittie, 2020). The widespread use of online settings for all types of antagonistic speech affords researchers new opportunities to study the "practical and moral organisation of controversy" and antagonistic behaviour in a naturalistic environment (Housley et al, 2017, p587). These factors make online comments a rich source of powerful discourses about public breastfeeding.



### *Data Collection*

We searched National and Regional UK newspapers using Proquest and Advanced Google Search for items related to public breastfeeding between 01/07/2018 – 31/07/2019<sup>1</sup> (see Appendix A). We excluded all articles where public breastfeeding was not the main focus, and all items that did not host comments in the public domain. Our final corpus comprised 4,204 comments posted in response to 97 newspaper articles from 15 different publications (see Appendix B). The number of comments varied considerably (1 - >10,000). We restricted our analysis to the (chronologically) earliest 100 comments posted per article to maximise the number of articles featured in our analysis. In accordance with Keele University ethics committee approval (PS-190045) and guided by the British Psychological Society guidelines for internet mediated research (BPS, 2021), we anonymised all posts by giving posters a pseudonym.

### *Analytic Approach*

Our early observations corroborated prior studies that suggested discretion was a key feature of talk about public breastfeeding. 356 (8.4%) comments referred to discretion, discreet/discrete, covering up or exhibitionist/ism (the most prevalent conceptual antonym of discretion in the data). These terms appeared in comments for 61 of our 97 articles and provided a starting point for our analysis.

Within a general discourse analysis framework (Potter & Wetherell, 1987) we drew on Discursive Psychology (DP) to explore how and when particular versions and descriptions of

---

<sup>1</sup> The 13<sup>th</sup> month enabled us to include items about a breastfeeding incident on a KLM flight (July 2019) that sparked considerable media coverage.

events, objects, and subjects are produced and made relevant within discourse (Edwards & Potter, 1992; Wiggins, 2017). It is particularly well suited to studying interaction and so enabled us to explore replies and discussions within the comments effectively. See AUTHORS (2022) for a more detailed account of the methodological approach adopted for this study.

## **Analysis**

We first explore how discretion was constructed within the newspaper comments, followed by what constructions of discretion were used to achieve within the discourse. We found discretion was used recurrently both to construct dispositional depictions of the mother, and to assign or manage blame and accountability for public breastfeeding.

### *Constructions of discretion*

Within the newspaper comments, a core issue is how discretion is constructed and the implications of those constructions. Extract 1 exemplifies a fairly common use of the term ‘discreet’:

#### **Extract 1**

01 “I don’t understand why anyone would have a problem with someone

02 discreetly breastfeeding. It’s the natural way to feed a child.” (D013\_34)

The comment is relatively positive, and prima facie supportive of breastfeeding. However, the commenter inserts the term “discreetly” (line 2), to caveat their support. There is no definition of ‘discreetly’ breastfeeding, thus we may presume that it is the poster’s definition of ‘discreet’ that

makes public breastfeeding permissible *not* the mother's. 'Discretion' here is a vague term; however, the individual's support for breastfeeding may be withdrawn if discretion is not shown.

In other extracts, discretion is more explicitly defined:

**Extract 2: D072\_28-30**

01 Julie: Persecution of breastfeeding in the UK is the reason we have the  
 02 lowest breastfeeding rates in the world, the highest infant mortality  
 03 in Europe and three deaths an hour from breast cancer.  
 ...  
 Unrelated comment omitted  
 ...  
 04 Tina3303: Julie - all that would change if they exercised common sense,  
 05 discretion and consideration for others by covering up with a  
 06 lightweight shawl instead of hoisting up their top, opening the bra  
 07 and flopping our a swollen, blue veined boob. Boobs have been  
 08 s ex ua lised <sup>2</sup> and sticking a baby on the end doesn't change that.  
 09 They should cover up for goodness sake.

Tina defines discretion as 'covering up with a lightweight shawl' (line 5-6). In specifying a 'lightweight' shawl it is implied this action requires minimal hassle and is therefore easy and achievable. Tina also defines discretion through contrasting it with 'flopping our [sic] a swollen, blue veined boob' (line 7). In this way, using a lightweight shawl, which is constructed as being

---

<sup>2</sup> We have preserved the poster's original formatting including where they have self censored in a variety of ways, potentially to avoid auto-moderation by the host website.

considerate, is contrasted with mothers exposing their unattractive breasts. Discretion here is defined by both what it is and what it is not.

In the previous two extracts, we see that discretion is defined by the observer and not the mother. In Extract 3, the poster places herself within the category of ‘mother’ and defines discretion based on her own experiences:

**Extract 3: D013\_39-40**

00 Condescending

01 Candice: As a breastfeeding mum myself, it’s great to see celebrities  
02 doing it. Makes it more socially acceptable for all.

02 Theresa: It was always socially acceptable. When done discretely and  
03 with consideration for the sensitivities of others. I always  
04 found it more relaxing to sit with my back to the room, be it  
05 restaurant or other public building than facing the room. I  
06 could concentrate on my baby’s needs without feeling the need  
07 to stare others down! Of course there were times when that  
08 wasn’t possible but I still managed to feed without any fuss!

Condescending Candice expresses appreciation for the publicly breastfeeding celebrity featured in the article using her platform to increase its “social acceptability for all” (line 1). This claim is challenged by Theresa who rejects the idea that public breastfeeding has a social acceptability problem, and therefore any need for it to be addressed or promoted by celebrities. Instead, she suggests that, “when done discretely and with consideration”, it has always been acceptable (line 2). Theresa then exemplifies discretion drawing on her own experience of breastfeeding with her

‘back to the room’. In this way, she self-categorises as a ‘breastfeeding mother’, which establishes category entitlement (Potter, 1996). Category entitlements allow for the fact that in some contexts, people belonging to a certain category have access to particular knowledge. In this context, Theresa’s self-categorisation lays claim to her knowledge entitlement of how to appropriately breastfeed in public. In doing so, she provides an account for why breastfeeding discreetly was not only for the benefit of onlookers but also best for herself and the baby (‘I could concentrate on my baby’s needs’). She draws on the category-bound predicates or characteristics (Stokoe, 2012) that a mother cares for her baby, and in doing so defines herself as a ‘good’ mother. Discretion is defined and accounted for as being the best for observers, and as a predicate of being a good mother.

Theresa goes on to adapt her definition of discretion to account for other contingencies, claiming: ‘I still managed to feed without any fuss!’ (line 8). ‘Without any fuss’ is quite a vague and unspecified definition. Vagueness can be a rhetorical tool which can guard against the undermining of an account (Potter, 1996). Here it is used to defend against possible counter-claims, such as, it is not always possible to sit with your back to the room in public.

In all of the extracts above, we see that the commenters present themselves as being supportive of breastfeeding. However, support is always caveated in some way, which is demonstrated more explicitly in Extract 4:

**Extract 4: D060\_20**

01 I'm all for women breast feeding but surely a little discretion isn't too difficult

At the start of the post, the commenter explicitly states that they are ‘all for women breast feeding’. In this way, the commenter is managing the subject-side of their post; in other words, they are considering the way in which they could be portrayed (Edwards, 2005). They offer a ‘disclaimer’ (Wiggins, 2017) or a ‘stake inoculation’ (Potter, 1996) to present themselves as a reasonable person who supports breastfeeding. Following this support for breastfeeding, there is the caveat that they need to be discreet. The caveat includes minimisation of the request (‘a little’ and ‘isn’t too difficult’; see Wiggins, 2017), which constructs it as easy to achieve. Other extracts in this section do not assert support for breastfeeding as explicitly as in Extract 4, but there is overall support for breastfeeding, yet is always contingent on the breastfeeding mother’s discretion.

This analysis demonstrates how discretion is constructed in posts about public breastfeeding. In the following two sections we show how discretion is used as a vehicle for other actions, including constructions of the mother and assigning blame and accountability. Although we have separated these sections, these are interlinked practices that are used rhetorically to build an overall picture of public breastfeeding.

#### *Discretion and the dispositional traits of mothers*

A lack of discretion was mobilised to construct dispositions of the breastfeeding mother. Here, we are not considering a breastfeeding mother’s personality or character as fixed psychological entities, rather, in line with a discursive approach, dispositions “are available as resources for action, discursively displaying people in favourable or unfavourable ways” (Alexander &

Stokoe, 2020, p. 417). Extract 5 demonstrates how breastfeeding mothers are constructed as selfish, exhibitionist, and inconsiderate for choosing to breastfeed indiscreetly in public.

**Extract 5: D040\_3**

01 IT Makes me feel sick seeing this in public and I am a woman. If mothers  
 02 who chose to breast feed their babies in public were discrete, I have no  
 03 issues at all. What I have experienced with my own eyes is some woman  
 04 using it to expose themselves in public. Im sure there is a name for that type  
 05 of behaviour. There is nothing worse when your trying to have a coffee or a  
 06 bite to eat, a woman is getting her breast out for all to see and then popping  
 07 the uncleaned sweaty lump of flesh into a babies mouth. There are ways of  
 08 feeding your baby without a public performance, but no they want everyone  
 09 to see that it is their right to feed the baby no matter how narcissistic appears  
 10 to others (D040\_3)

The commenter uses discretion to caveat her initial claim that [public breastfeeding] “makes me feel sick” (line 1) with the idea that if breastfeeding mothers “were discrete, I have no issues at all” (lines 2-3). Instead of beginning with a disclaimer, they instead provide an assessment of the behaviour (breastfeeding in public). The evaluation of breastfeeding in public is subjective (Wiggins & Potter, 2003), in that it states how the poster feels (makes me feel sick) as opposed to a more object-oriented formulation such as ‘it is sickening’, which functions to build their account as their personal experience. It is notable that they explicitly place themselves within the category of ‘woman’. This category use challenges the expectation that a category-bound activity of women is defending or being on the side of other women (Stokoe, 2012). It also suggests that due to their category membership, women have more rights to criticise than a man might,

allowing her to contrast herself with other women who choose to ‘expose’ themselves (line 4), as part of a ‘public performance’ (line 8). In this way they start to construct an alternative category of woman, which they do not ascribe to: one who is breastfeeding her baby in public to seek attention. They contrast their own innocuous behaviour ‘having a coffee or a bite to eat’ with this type of woman, who is ‘popping the uncleaned sweaty lump of flesh’ (lines 5-7). As with Extract 2, then, women’s breasts are constructed as unclean or unattractive, as opposed to say, being attractive and sexualised.

A similar structure is evident in the following comment, where the poster initially indicates their own stance towards public breastfeeding, before going on to mitigate this through category distinctions between appropriate and inappropriate behaviour as a breastfeeding mother.

**Extract 6: D019\_22**

01 I find public breastfeeding disgusting. During the breastfeeding period a woman  
 02 loses much of her normal modesty and uncovering herself, and I was amazed to  
 03 find I felt no shyness in breastfeeding when my father was in the same room,  
 04 but NEVER did I consider doing so in the presence of strangers. It embarrasses  
 05 many onlookers, and in restaurants, unsightly swollen breasts and slobbering  
 06 mouths are deadsure appetite killers, but such breastfeeding mothers simply do  
 07 not CARE about the feeling of others. Only their own are important. It's a  
 08 mixture of showing off, smug defiance and self-importance. (D019\_22)

Following her initial assessment of public breastfeeding, the commenter provides a generalisation of the disposition of a breastfeeding mother. In disclosing her own experience, she constructs herself as being reasonable and understanding the experience of breastfeeding. While



discretion is not explicitly mentioned here, it is implied in her description of only feeding in an immodest and uncovered way in front of people she knows. Discretion is constructed as more than simply covering up; it is not feeding in public with unfamiliar people. Through this description she constructs herself as a breastfeeding mother who, although she recognises a change in behaviour of breastfeeding women, is also considerate of onlookers. She is, therefore, constructing and contrasting herself with an alternative category of women who do not care about others (lines 6-7). As with Extracts 2 and 5 there is a description of breastfeeding that implies it is unattractive ('unsightly swollen breasts and slobbering mouths' lines 5-6), indicating that these breasts are perhaps not 'the norm' and this contributes to an account for why women should not publicly breastfeed. In the final line the commenter explicitly states the disposition of women who breastfeed in public as 'showing off, smug defiance and self-importance' (line 8).

Through the construction of two alternative categories, the commenter self-categorises as a breastfeeding mother who is considerate of others, and acknowledges how unappetising breastfeeding mother's breasts and breastfeeding itself is for onlookers. In the alternative category, breastfeeding mothers are constructed as selfish and as breastfeeding in public for their own selfish ends. In this sense, then, they are acting this way because of their indiscreet behaviour *not* because it is a requirement of breastfeeding. Extract 7 shows a similar sequence of practices:

**Extract 7: D015\_28-30**

01	Krtesla	[...]	Seeing a breast feeding mother doesn't bother me in the slightest,
02			but all i would say is maybe do it without flashing the whole b**b
03			about, i feel sorry for mother's these days, they take a load of stick

04                   from prudish people who should know better...

...

Comment omitted

...

04 sagittarius2014 Being prudish has nothing to do with this issue. It is not having an

06                   ounce of class or morals. I breastfed my babies and pumped milk to

07                   feed them with I went out to dinner. If I had to feed the baby while

08                   out I covered up because I had morals and class and it was not

09                   appropriate. A decent woman does not show her body in public and

10                   especially to simple minded men who get a thrill out of seeing a

11                   naked breast....

In line 4 Krtesla suggests that it is 'prudish' to criticise a breastfeeding mother, demonstrating her own support for breastfeeding. As with many of the previous extracts they use discretion to caveat their support by advising that women should 'do it without flashing the whole b\*\*b about' (lines 2-3). This statement is constructed as supportive advice for breastfeeding mothers. The minimiser ('all I would say') and hedge ('maybe') mitigate some of the potential for perceived judgment, but the canonical orientation to normative standards of behaviour associated with advice-giving actions remains (Heritage & Sefi, 1992; Shaw et al, 2015). Thus, although stated gently, Krtesla still orients to a normative expectation for discretion and to onlookers' rights to uphold such expectations.

In response, sagittarius2014 dismisses prudishness and declares 'It is not having an ounce of class or morals' (lines 4-5). It is not their behaviour that is described as immoral (or even just needing gentle advice to remedy), but rather the women themselves. Instead, she constructs

women who do not breastfeed discreetly as indecent (line 9). The extreme case formulation ‘not having an ounce’ casts the breastfeeding mother as completely lacking social acceptability. Extreme case formulations can function to ‘normalise one person’s behaviour and pathologise another’s’ (Wiggins, 2017, p. 128). In this instance, the extreme case presents the writer’s investment in their characterisation of women’s behaviour (Edwards, 2000).

The generalisation about breastfeeding women is evidenced through a personal anecdote in which the poster ‘covered up’ as a consequence of personally having ‘morals and class’ (line 8). Of particular note here is the dispositional nature of these characterisations: the breastfeeding mother is described as intrinsically indecent, immoral, or without class for failing to achieve discretion in public. The poster places themselves outside of this category through their behaviour (covering up) but also constructs their own disposition as someone who has class and morals. Women who do not breastfeed discreetly are not simply constructed as behaving in an inappropriate way, but as having a particular personality or disposition, which would lead them to behave inappropriately whether or not they were breastfeeding.

### *Blame, accountability and discretion*

Newspaper articles were often structured around a headline that a mother was distressed, humiliated, or offended because she was challenged, harassed, or excluded from a public place while breastfeeding:

- Young mum left 'humiliated and embarrassed' by restaurant after being asked to breastfeed in toilet (D011)

- Breastfeeding mum left in tears after being told she was 'putting diners off their teacakes' in cafe (D015)
- Furious teacher is asked to leave Costa Coffee for breastfeeding (D030)
- NOT BREAST PRACTICE Mum 'made to feel ashamed' after being told to breastfeed behind curtain on family day out (D097)

While the newspaper articles often focused on the breastfeeding mother's reaction to being challenged, the comments tended to focus on the offence experienced by the onlookers who observed public breastfeeding. In this final section, we will show how discretion was used to assign blame or responsibility for being offended. In Extract 8, Louise933 adapts the headline complaint of the breastfeeding mother from the newspaper article (that she "felt nervous and embarrassed" when challenged for breastfeeding) to describe her reaction as an onlooker.

**Extract 8: D020\_65-67**

01 Louise933: "Felt nervous and embarrassed" Exactly how i feel when i see breast  
 02 feeding in public, i don't care about women's rights etc, personally for  
 03 me, its embarrassing and i think there is a time and a place for  
 04 everything, we used to survive without doing it in public in the old  
 05 days!! [...]

...

Comment omitted

...

16 Tiffstalking: Actually women did breast feed in public but they used to do so  
 17 discretely so you would not have noticed, saves both you and them  
 18 embarrassment no enraged indignation by either side required

Louise933 advocates that all breastfeeding should take place in private and suggests that ‘in the old days’ this was achieved without issue (lines 3-5). Thus, the blame for any offence is because of mothers who insist on breastfeeding in public. The poster refers back to a vague concept of ‘old days’, and makes a generalised claim in support of their argument ‘there is a time and a place for everything’, which is somewhat idiomatic (lines 3-4). Idiomatic expressions are typically vague and this can make them difficult to challenge with specific information. They also ‘invoke and constitute the taken-for-granted knowledge shared by all competent members of the culture’ (Kitzinger, 2000, p126). In this extract, the idiomatic expression indicates that there is a known ‘time and place for everything’ which other members of the culture would understand, and implies that ‘in public’ is not appropriate for breastfeeding.

Tiffstalking contests the claim that previous generations did not breastfeed in public. Instead, they suggest that it was done ‘discreetly so you would not have noticed’ and would not have been offended or embarrassed (line 17). Breastfeeding mothers are held accountable for not feeding discreetly as they did in the past. However, the issue is constructed by Tiffstalking as being related to onlookers noticing the breastfeeding, and there being ‘embarrassment’ and ‘enraged indignation’ all round (line 18). This exchange constructs breastfeeding mothers as the architects of their own misfortune by causing the first offence through indiscreet breastfeeding, which leads to them subsequently being hurt by the reaction of offended onlookers.

Discretion was often mobilised to assign responsibility/blame for causing the offence. It was widely used to account for onlookers’ offence on the grounds that the breastfeeding mother could/should have taken steps to cover or remove herself from public view.

**Extract 9 : D072:83 – Headline states that mother tells of ‘embarrassment and shame’ when challenged for breastfeeding in public.**

- 01 This young woman should feel embarrassed: she could always have done it
- 02 somewhere private or covered. (D072\_83)

**Extract 10: D080\_96**

- 01 Mothers cannot understand that breastfeeding in a public bar may offend
- 02 some people and should me more discreet (D080\_96)

In Extract 9, blame is assigned to the ‘young woman’ and she is held accountable for not feeding in private or covering up. The blame is shifted from observers for making her feel embarrassed to her for not being discreet, rendering her accountable for her own embarrassment. In Extract 10, the specific news item is generalised away from the incident in question to assigning blame to *all* mothers. Here the claim is not that they are exhibitionists or immoral, but that they are ignorant and ‘cannot understand’ that their behaviour may cause offence (line 1). The strongly asserted advice that mothers ‘should me [sic] more discreet’ (line 2) positions women as accountable for not recognising how their behaviour impacts others.

Discretion, or lack thereof, became a key bargaining chip in the debate about the acceptability of public breastfeeding. A recurrent approach in the comments was to blame the breastfeeding mother.

**Extract 11: D013\_35**

- 01 if you wanna lob your boobs out in the middle of a cafe then yes you may

02 get a couple of people stare.

**Extract 12: D032\_15**

01 Serves her right for being told off if she hadn't flashed her breasts about

02 and had covered her self then there wouldn't have been this much drama

As with previous extracts we see that these posts formulate the lack of discretion as particularly inconsiderate (e.g., “if you wanna lob your boobs out”, “flashed her breasts about”). This lack of consideration is blamed for the staring or drama that ‘inevitably’ follows; as such the ‘inconsiderate’ breastfeeding mother is blamed for her situation, not the onlookers. Breastfeeding mothers are constructed as deserving any abuse they receive as a predictable consequence of having caused offence. Note how the descriptions here emphasise the mother’s active role in exposing her breasts (lob/flash) whilst omitting both the baby and the act of feeding as mitigating contextual elements. This is one of the ways we see constructions of the mother as dispositionally exhibitionist contributing to their construction as blameworthy, both built from the use of maternal discretion as an expected and accountable precondition for acceptable public breastfeeding.

## **Discussion**

We outlined two of the most recurrent ways in which discretion was used within online newspaper comments: to construct the personal dispositions of mothers, and to assign blame and responsibility for the incidents that were reported in the news articles.

A key feature of the construction of discretion within our data was that it could appear as a minimal insertion within a turn that would otherwise express strong support for breastfeeding. Such insertions caveated and limited the scope of support. Commenters also leave unspecified what counts as discretion and position the onlooker as the legitimate arbiter of ‘successful discretion’, rather than the mother. Where discretion was unpacked within the data, it was defined both by what it was (e.g. covering up with a shawl), and what it was not (e.g. deliberate exposure of breasts). Discretion was typically constructed as easy to achieve by the mother and support for public breastfeeding was recurrently constructed as contingent on the mother displaying an orientation to discretion. This helps to explain the discursive mechanisms underpinning earlier work that suggests discretion is a “key to successful breastfeeding in public” (Morris et al, 2016, p477).

### *Dispositions of the mother*

Our analysis used discursive psychology to explore how discretion was used when talking about public breastfeeding in newspaper comments. Our emic perspective stands in contrast to much of the prior theoretical work in this area and consequently offers a unique empirical triangulation of prior theoretical conclusions.

Owing to research demonstrating the benefits of breastfeeding for infant health, breastfeeding is often seen as the moral infant feeding choice and thus a hallmark of ‘good’ motherhood (Wall, 2001, Williams et al., 2013; Murphy, 1999). However, paradoxically, as our data demonstrate, public breastfeeding can be less celebrated, and this tension has been noted elsewhere in the literature (Bresnahan et al, 2019; Johnson et al., 2009; Stearns, 1999). With



reference to the US context, but relevant in the UK, Stearns (1999) suggests this tension may result from the cultural sexualisation of women's breasts, which is distinctly at odds with expectations that mothers should not be sexual, rendering public exposure of breasts during breastfeeding problematic (Callaghan & Lazard, 2012). Within our data the concept of discretion seemed particularly key to managing this issue, not only representing the path to 'acceptable' public breastfeeding, but also, despite the potentially problematic nature of public breastfeeding, continued access to a 'good' mother identity.

In contrast, a lack of discretion was more often used to construct the breastfeeding mother as dispositionally objectionable. Indeed, there was a marked discursive shift from a focus on behaviour (breastfeeding) when being discreet, to the mother's enduring personality traits (selfish, exhibitionist and inconsiderate) when the onlooker judged that discretion was lacking. Crucially, because discretion was constructed as easy to achieve, indiscretion was presented as a deliberate choice motivated by the mother's personal disposition rather than being borne out of necessity, for example, as a response to the practicalities of breastfeeding. These categorical enactments also worked to construct the onlooker as reasonable and decent in the face of provocation from an indecent woman.

Dispositional traits that were typically discursively linked to a lack of discretion were associated with sexualised, immoral female behaviour and treated as incompatible with 'good' motherhood. Previous research has consistently identified themes relating to the sexualisation of the female breast and the social policing of acceptable femininity as significant for understanding the experience of public breastfeeding (Acker, 2009; Dykes, 2006; Grant, 2016; Henderson et al,

2011; Hauck et al, 2021; Norwood & Turner, 2013; Tăut, 2017; Whittemore, 2019). Lack of discretion appears to be associated with women seeking the male gaze, promoting their own sexuality at the expense of their baby's needs, and subversion of the socially sanctioned practices of respectable women and 'good' mothers. Our analysis sheds light on how such depictions are produced in discourse.

### *Blame and responsibility*

Our findings support the well-reported phenomenon in previous work that women are held accountable for managing other people's discomfort (Dykes, 2006; Henderson et al, 2011; Hauck et al, 2021; Sheehan et al, 2019). For breastfeeding mothers this constitutes a form of emotional labour (Hochschild, 1983) whereby women are expected to regulate their conduct to protect the feelings of others, potentially at the expense of their own comfort whilst breastfeeding (Sheehan et al., 2019). This has implications for women's choices and autonomy around infant feeding, since some are deterred from breastfeeding for fear of being held responsible for others' negative reactions in public. Thus, language promoting considerate, discreet breastfeeding may curtail women's choices and infant feeding practices to the extent whereby the comfort of others is prioritised over the needs of the mother and baby (Amir, 2014).

Our analysis demonstrates how breastfeeding mothers were constructed as responsible for managing the discomfort of onlookers through the discursive use of discretion. Though many of the news articles focused on the distress experienced by breastfeeding mothers caused by reactions to their public breastfeeding, within the corresponding comments the blame was shifted to the mothers themselves for not being discreet. The implication was that they invited rebuke

due to indiscretion and were constructed as undeserving of sympathy for any harassment or discrimination that arose. Since discretion was constructed as easy to achieve, it was presented as a reasonable expectation. By implication, women who chose not to perform the ‘simple’ actions required to be discreet, did so to be deliberately provocative, and so were not entitled to claim or protest negative treatment. The consequence of holding women to account in this way is that women’s protests are effectively silenced, whilst the perspectives of onlookers go unchallenged. Crucially, our analysis reveals how the concept of ‘discretion’ provides a tangible vehicle for this.

### *Resisting the discourse of discretion*

When using discursive psychology, the goal of the analysis is “not to opt for which of a set of actual or possible scripted versions is correct, but to examine how and when such versions are produced” (Edwards, 1995, p347). This is why the analysis presented here can only focus on the constructions of discretion that were present in the data. Nevertheless, we were shocked by the lack of resistance to discourses of discretion within the newspaper comments. From its absence, we can conclude that the relevance of discretion when breastfeeding in public appears discursively difficult to reject or challenge online. The opaqueness of what constitutes discreet breastfeeding, and the use of a ‘minimal effort’ discourse appear to be rhetorically effective. Infrequent voices of mothers describing personal experiences with babies who became distressed when covered, or when latching/position challenges made discretion incompatible with a successful feed, rarely gained traction or prevalence within the comments. Our work thus provides empirical confirmation of Woollard’s (2019) contention that responding to challenges

against breastfeeding often results in supporters conceding and reinforcing the idea that discretion is both normal and easily achievable.

The absence of effective resistance to the discourse of discretion in our data is noteworthy given the UK's low breastfeeding rates (Victora et al, 2016), the high proportion of UK women (80%) for whom breastfeeding ends sooner than they intended (McAndrew et al, 2012), and the link between shorter breastfeeding duration and not breastfeeding in public (Prusoff & Cho, 2017; Scott et al, 2015). Discourses that promote or normalise discretion may be negatively consequential for breastfeeding outcomes. Hauck (2004: 15) lists "ability to be discreet" as a key factor influencing mothers' decisions to breastfeed in public. For many women, breastfeeding discreetly can be difficult to reliably achieve, particularly in the early months. Prioritising discretion over good latching, positioning and effective milk removal can risk maternal pain, infection or injury and can reduce available milk supply over time (Amir, 2014; Khan & Ramirez, 2017; Mohrbacher, 2011), all of which contribute to early cessation of breastfeeding (McAndrew et al., 2012).

### **Next steps**

Based on our findings, it is now important to find ways to problematise the relevance of discretion when breastfeeding in public. Further work is now warranted to explore how challenges to discourses of discretion might be used to head off previously identified damaging constructions of breastfeeding mothers as selfish, exhibitionist, inconsiderate women and unfit mothers. Further work is required to identify where, when and how the omni-relevance of discretion in public breastfeeding can be overturned. Once identified, this could help underpin

action to change the status quo and promote a more welcoming environment for women to breastfeed in public in the UK.

## **Acknowledgements**

We are indebted to the contributions of Emma Harrison and Ellie Cartwright (Keele University) who worked as research assistants on this project and who respectively contributed to reviewing the literature, and collecting/preparing the data.

## **Author Notes**

- This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors. The authors declare that they have no competing interests
- Derived data supporting the findings of this study are available from the corresponding author on request.
- While we do not have space to consider reflexivity in detail, all the authors come from a perspective that barriers to breastfeeding in the UK need to be reduced. During data collection and analysis, the first author was breastfeeding her first child, the second author had no personal experience of breastfeeding, and the third author had breastfed two children previously. During the writing and publication stages the first and second authors gave birth and breastfed their new children. These experiences and our own attitudes to breastfeeding impacted the focus of the analysis, and our own understandings of what it means to breastfeed in public.

## **References**

Acker, M. (2009). Breast is best...but not everywhere: Ambivalent sexism and attitudes toward private and public breastfeeding. *Sex Roles, 61*, 476-490

- Alexander, M., & Stokoe, E. (2020). Characterological formulations of persons in neighbourhood complaint sequences. *Qualitative Research in Psychology, 17*(3), 413–429.
- Amir, L. H. (2014). Breastfeeding in public: “You can do it?”, *International Breastfeeding Journal, 9*(187)
- Bartlett, A., (2002). Scandalous practices and political performances: breastfeeding in the city. *Journal of Media and Cultural Studies, 16*(1), 111–121.
- Borra, C., Iacovou, M., & Sevilla, A. (2015). New evidence on breastfeeding and postpartum depression: The importance of understanding women’s intentions. *Maternal and Child Health Journal, 19*(4), 897–907. 10.1007/s10995-014-1591-z
- Boyer, K. (2011). “The way to break the taboo is to do the taboo thing” breastfeeding in public and citizen-activism in the UK. *Health & Place, 17*(2), 430-437.
- Boyer, K. (2012). Affect, corporeality and the limits of belonging: breastfeeding in public in the contemporary UK. *Health & Place, 18*(3), 552-560.
- Boyer, K. (2018). *Spaces and Politics of Motherhood*. Rowman and Littlefield International, London.
- Bresnahan, M., Zhu, Y., Zhuang, J., & Yan, X. (2020). “He wants a refund because I’m breastfeeding my baby”: A thematic analysis of maternal stigma for breastfeeding in public. *Stigma and Health, 5*(4), 394–403. <https://doi.org/10.1037/sah0000208>
- British Psychological Society. (2021). *Ethics Guidelines for Internet-mediated Research*. INF206/04.2017. Leicester: Author. Available from: <https://www.bps.org.uk/sites/www.bps.org.uk/files/Policy/Policy%20-%20Files/Ethics%20Guidelines%20for%20Internet-mediated%20Research.pdf>

- Brown, A. (2018). What do women lose if they are prevented from meeting their breastfeeding goals?, *Clinical Lactation*, 9(4), pp200-107
- Callaghan, J., & Lazard, L. (2012). 'Please don't put the whole dang thing out there!': A discursive analysis of internet discussions around infant feeding, *Psychology & Health*, 27(8), 938-955. DOI: 10.1080/08870446.2011.634294
- Dykes, F. (2006). *Resisting the gaze': the subversive nature of breastfeeding*. In M. Kirkham (Ed.). *Exploring the Dirty Side of Women's Health*. London and New York: Routledge, 78-89.
- Edwards, D. (1995). Two to tango: Script formulations, dispositions, and rhetorical symmetry in relationship troubles talk. *Research on Language and Social Interaction*, 28(4), 319–350.
- Edwards, D. (2000). Extreme case formulations: Softeners, investment, and doing nonliteral. *Research on Language and Social Interaction*, 33(4), 347–373.
- Edwards, D. (2005). Moaning, whinging and laughing: The subjective side of complaints. *Discourse Studies*, 7(1), 5–29.
- Edwards, D., & Potter, J. (1992). *Discursive psychology*, Sage Publications.
- Erjavec, K. & Kovačič, M. P., (2012) "You Don't Understand, This is a New War!" Analysis of Hate Speech in News Web Sites' Comments. *Mass Communication and Society*. 15(6), 899-920. DOI: 10.1080/15205436.2011.619679
- Grant, A. (2016) "I . . . don't want to see you flashing your bits around": Exhibitionism, othering and good motherhood in perceptions of public breastfeeding, *Geoforum*, 71, 52–61
- Hauck YL. (2004) Factors influencing mothers' decision to breastfeed in public. *Breastfeed Rev.* 12(1):15-23.
- Hauck, Y. L., Bradfield, Z., & Kuliukas, L. (2021) Women's experiences with breastfeeding in

public: An integrative review, *Women & Birth*, 34 (3) pp217-277

<https://doi.org/10.1016/j.wombi.2020.04.008>

Henderson, L., McMillan, B., Green, J. M., & Renfrew, M. J (2011) Men and Infant Feeding:

Perceptions of embarrassment, sexuality, and social conduct in White low-income British men. *Birth Issues in Perinatal Care*, 38(1), 61-70.

Heritage, J., & Sefi, S. (1992) Dilemmas of advice: Aspects of the delivery and reception of

advice in interactions between health visitors and first-time mothers. In: Drew P and

Heritage J (eds) *Talk at Work: Interaction in Institutional Settings*. Cambridge: Cambridge

University Press, pp. 359–417.

Hochschild, A.R. (1983). *The Managed Heart: The commercialisation of human feeling*.

University of California Press.

Housley, W., Webb, H., Edwards, A., Procter, R., & Jirotko, M., (2017) Membeship categorisation

and antagonistic Twitter formulations, *Discourse & Communication*, 11(6), pp 567-590

Johnson, S., Williamson, I., Lyttle, S. & Leeming, D. (2009). Expressing yourself: A feminist

analysis of talk around expressing milk. *Social Science & Medicine*, 69, 900-907.

Khan, T. V., & Ramirez, M., (2017) Management of common breastfeeding problems: Nipple

pain and infections – A clinical review. *Clinical Lactation*, 8(4), pp181-188

Kitzinger, C. (2000). How to resist an idiom. *Research on Language and Social Interaction*,

33(2), 121–154.

Kmietowicz, Z. (2017) Less than half of new mothers in England breast feed after two months

*British Medical Journal*, 356:j1508



- Leeming D, Williamson I, Lyttle S, & Johnson S (2013) Socially sensitive lactation: Exploring the social context of breastfeeding, *Psychology & Health*, 28(4), 450-468, DOI: 10.1080/08870446.2012.737465
- Li R, Fein SB, Chen J, Grummer-Strawn LM (2008). Why mothers stop breastfeeding: mothers' self-reported reasons for stopping during the first year. *Pediatrics* 122(Suppl 2):S69–76.
- Maternity Action (n.d.). *Breastfeeding while out and about*.  
<https://maternityaction.org.uk/advice/breastfeeding-in-public-places/>
- Meredith, J., Richardson, E., Kent, A., & Budds, K., (2022) Designing Qualitative Research Using online Newspaper Comments, Flick, U. (Ed.) (2022). *The SAGE Handbook of Qualitative Research Design - Two Volume Set*. London: Sage
- McAndrew F., Thompson J., Fellows L., Large A., Speed M. & Renfrew M.J. (2012) *Infant Feeding Survey 2010*, Information Centre, Government Statistical Service, Department of Health, London.
- Mohrbacher, N (2011), The magic number and long-term milk production. *Clinical Lactation*, 2(1), 15-18
- Morris, C., Zaraté de la Fuente, G. A., Williams, C. E., & Hirst, C. (2016). UK views toward breastfeeding in public: An analysis of the public's response to the Claridge's incident. *Journal of Human Lactation*, 32(3), 472-480.
- Murphy, E. (1999). 'Breast is best': Infant feeding decisions and maternal deviance. *Sociology of Health and Illness*, 21(2), 187-208.
- Norwood, K., & Turner, P. K. (2013). The breast is (always) for sex: Breastfeeding discourse in response to May 21, 2012 TIME Magazine cover. *Qualitative Research Reports in Communication*, 14, 79–86.

- Owens, N., Carter, S. K., Nordham, C. J., & Ford, J. A. (2018). Neutralizing the maternal breast: Accounts of public breastfeeding by African American mothers. *Journal of Family Issues*, 39(2), 430-450.
- Potter, J. (1996). *Representing reality: Discourse, rhetoric and social construction*. Sage.
- Potter, J. & Wetherell, M. (1987) *Discourse and Social Psychology*, Sage: London
- Primo, C., C., Mocelin, H., J., S., Zavarize, T., B., Lima, E., dF., A., de Lima, R., O., & Brandão, M., A., G. (2019). Women's perceptions about space for breastfeeding: Support in interactive breastfeeding theory. *Rev Min Enferm.* 29, e-1261.
- Prusoff, S., & Cho, H. W. (2017). The effect of attitudes toward breastfeeding in public on breastfeeding rates and duration: Results from South Korea, *Asian Journal for Public Opinion Research*, 4(4), 208-245.
- Sambaraju, R., & McVittie, C. (2020). Examining abuse in online media. *Social and personality psychology compass*, 14(3), e12521.
- Scott JA, Mostyn T, Greater Glasgow Breastfeeding Initiative Management Team. (2003). Women's experiences of breastfeeding in a bottle-feeding culture. *J Hum Lact.* 19(3), 270-277.
- Scott, J.A., Synnott, K., Bogue, J., Amarri, S., Norin, E., Gil, A., Edwards, C. A., INFABIO Project Team (2015) A comparison of maternal attitudes to breastfeeding in public and the association with breastfeeding duration in four European countries: Results of a cohort study, *Birth*, 42(1), 78-85.
- Sheehan, A., Gribble, K., & Schmied, V. (2019). It's okay to breastfeed in public but.... *International Breastfeeding Journal*, 14(1), 24.
- Shaw, C., Potter, J. & Hepburn A., (2015) Advice-implicative actions: Using interrogatives and

- assessments to deliver advice in mundane conversation, *Discourse Studies*, 17(3), 317-342.
- Stearns, C. (1999). Breastfeeding and the good maternal body. *Gender & Society*, 13, 308-325.
- Stokoe, E. (2012). Moving forward with membership categorization analysis: Methods for systematic analysis. *Discourse Studies*, 14(3), 277–303.
- Stokoe, E., & Tileaga C., (2016) *Discursive psychology: Classic and Contemporary Issues*. Taylor and Francis
- Suler, J., (2004) The online disinhibition effect, *Cyber Psychology & Behavior*, 7(3), 321-326
- Tăut, D. (2017). Breastfeeding (un) covered: narratives of public breastfeeding on Romanian discussion forums. *International Journal of Behavioral Medicine*, 24(6), 815-826.
- Victora CG, Bahl R, Barros AJD, Franca GVA, Horton S, Krusevec J, et al. (2016) Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect. *Lancet*. 387(10017), 475–90.
- Wall, G. (2001). Moral constructions of motherhood in breastfeeding discourse. *Gender & Society*, 15(4), 592-610
- Whiley, L. A., Stutterheim, S., & Grandy, G. (2022) Breastfeeding, ‘tainted’ love, and femmephobia: containing the ‘dirty’ performances of embodied femininity, *Psychology & Sexuality*, 13:1, 101-114,
- Whittemore, A L., (2019) "Breastfeeding Discourse on Social Media" Thesis. Rochester Institute of Technology.
- Williams, K., Kurz, T., Summers, M., & Crabb, S. (2013). Discursive constructions of infant feeding: The dilemma of mothers’ ‘guilt’. *Feminism & Psychology*, 23, 3, 339-358.  
<https://doi.org/10.1177/0959353512444426>
- Wiggins, S. (2017). *Discursive psychology: Theory, method and applications*. Sage.

- Wiggins, S., & Potter, J. (2003). Attitudes and evaluative practices: Category vs. Item and subjective vs. Objective constructions in everyday food assessments. *British Journal of Social Psychology*, 42(4), 513–531.
- Woollard, F. (2019). Requirements to justify breastfeeding in public: a philosophical analysis. *International Breastfeeding Journal*, 14(1), 26.
- Zhao, Y., Ouyang, Y. Q., & Redding, S. R. (2018). Chinese women's experiences, emotions and expectations of breast-feeding in public: a qualitative study. *Public Health Nutrition*, 21(8), 1565-1572.

## Appendix A: Search Terms

<b>ProQuest Search terms</b>	<b>ProQuest Hits for Newspapers, English, UK Location 01/07/2018 – 31/07/2019</b>
Public Breastfeeding *	256
breastfeeding in public *	256
klm breastfeeding	5
baby feeding in public	138
infant feeding	152
swimming pool breastfeeding *	47
car park breastfeeding *	113
restaurant breastfeeding *	147
cinema breastfeeding *	6
feeding babies in public *	55
stacey soloman breastfeeding	6
amy schumer breastfeeding	1
meghan markle breastfeeding	18
bathroom AND breastfeeding	4
toilet AND breastfeeding *	84
against breastfeeding in public	64
lactivism	2
brelfies	55

We then used Google advanced search and individual newspaper websites direct search functions to conduct secondary searches using the terms that had yielded the most *relevant* articles from the ProQuest search (marked \* in table above):

## Appendix B: List of publications

<b>Publication</b>	<b>Articles</b>
Bristol Post	1
Daily Express	2
Daily Mail	35

Daily Mirror	18
Daily Telegraph	2
Evening Gazette	4
Evening Standard	1
Express	2
Grimsby Times	1
Herald	1
Independent	7
Manchester evening news	1
Northern Echo	1
Stoke Sentinel	1
The Sun	20
<b>15 Publications</b>	<b>97 Articles</b>