FEMINISMS AND FLUIDITY: FROM BREASTED EXISTENCE TO BREASTED RESISTANCE IN FEMINIST THEORY AND ACTIVISM

by

MAIGEN SULLIVAN

JENNIFER PURVIS, COMMITTEE CHAIR
NIRMALA EREVELLES
ELLEN SPEARS
HEATHER MIYANO KOPELSON

A THESIS

Submitted in partial fulfillment of the requirements for the degree of Master of Arts in the Department of Gender and Race Studies in the Graduate School of The University of Alabama

TUSCALOOSA, AL

2011
ABSTRACT

Dominant phallocentric norms call on bodies to fit rigid, static molds that do not allow for any flux or fluidity. It is necessary to note that these standards are a fallacy and that no bodies adhere to such strict structures. However, women’s bodies are especially seen as going, and in fact do go, against these standards for what constitutes a proper body. When discussing the ways in which women’s bodies act as sites of resistance against heteromasculine norms, their genitalia are often at the center of the conversation. However, we can take the discourse surrounding the fluidity of female genitalia and move it to a higher region—breasts. In Feminisms and Fluidity: From Breasted Existence to Breasted Resistance in Feminist Theory and Activism, I use the language and discourse typically reserved for women’s genitalia in relation to breasts by looking at them as fluid sites of control and resistance. I discuss the physicality of breasts as being fluid in that breasts shift their shape with age and movement. I examine the way in which women’s breasts are fluid in that they have the potentiality to produce fluids—breast milk. Finally, I expand our understanding of bodily limitations by examining both S/M and Crip Theory as ways to expand the margins of the body.
ACKNOWLEDGEMENTS

I have had the great opportunity to have wonderful guidance and support during the creation of this thesis. I am forever deeply grateful to the following: Jennifer Purvis for her tireless dedication to my work, her ability to stomach revision after revision and still remain positive about the experience, and her unwavering faith in me; Ellen Spears for making me narrow and focus my research with her guidance and insights; Nirmala Erevelles for being my first taste of deep feminist theory and always pushing me to think one step further; Heather Miyano Kopelson for challenging my assumptions throughout my work; Monica Lowery for giving me the inspiration that lead to this thesis and all the time devoted to keeping me focused and of high spirits; Melanie DeMaeyer for a friendship that words could never accurately describe, the phone calls of reassurance, and for being an all around feminist inspiration; Jessica Trull for being a source of open ears for my complaints and grumblings and for your always perfect, if inappropriate, humor; Railey and Calan Sullivan for putting up with me and playing forgoing many a day spent outdoors while I labored away at the computer—may you one day understand.
## CONTENTS

ABSTRACT ................................................................................................................. ii

ACKNOWLEDGEMENTS ................................................................................................. iii

CHAPTER ONE: INTRODUCTION .................................................................................. 1

CHAPTER TWO: HER CUPS RUNNETH OVER: THE FEAR OF FLUIDITY AND THE
POSSIBILITIES FOR FEMINIST RESISTANCE .............................................................. 11

CHAPTER THREE: GOT MILK? MOVING AWAY FROM REPROCENTRIC LANGUAGE
OF BREASTFEEDING TOWARD MORE EXPANSIVE POSSIBILITIES ............................. 30

CHAPTER FOUR: FLUID FLESH: LOOKING TOWARD A QUEER RECONFIGURATION
OF BODILY LIMITATIONS ............................................................................................ 53

CHAPTER FIVE: CONCLUSION ..................................................................................... 74

CHAPTER SIX: WORKS CITED ....................................................................................... 77
Chapter One

Introduction

The entirety of women's bodies is, and has been for quite some time, a site of great social and political contention. To ease what it sees as a troubling tension that acts a marker of the gender divide, phallocentric society attempts to harness and limit women's bodies. The methods employed by a phallocentric and male dominated society to restrain the bodies of women are vast and have in many cases become embedded within the normalizing discourses of U.S. society. These methods can range from determining that sexualities that do not readily and perfectly fit into repro/phallocentric requirements are irrelevant, perverse, or hysterical, to marking certain bodies and the spaces these bodies occupy as places of contamination. These bodies may be physically restrained by the use of medical stirrups, binding bras and undergarments, or needless surgeries designed to either supposedly enhance their physical beauty or remove body parts that are seen as serving no purpose outside of reproduction.1 Because of the prevalence of negative images of non-normative bodies in the mainstream, there is a great need to alter the way both popular culture sees women's bodies and the ways in which feminist discourse engages with women’s bodies. What this project aims to do is examine the constraints associated with breasted existence, acknowledge the transformative power of breasted resistance, and move to a place where we can envision fluid definitions of more general corporeal boundaries.

---

1 Here I mean plastic surgeries as well as medical procedures which remove tissue (breasts, ovaries, uterus) from the body for reasons usually deemed medically necessary. By medically necessary I mean those surgeries done solely for medical conditions related to physical issues with the body, such as breast cancer and breast reduction.
My study demonstrates that a new way to examine women’s bodies can be achieved by using breasts as a trope to signify the discourse surrounding the entirety of women's bodies and beyond and thus be used to further transform corporeal logics. Not only can we expose the ways in which women's bodies are limited by phallocentric norms; we can also, look to the breasts as examples of fluid sites wherein hegemonic attempts to control them are in constant confrontation with lived bodies that resist such physical and conceptual restraints placed on them by dominant phallocentric norms. By first examining these means of control and then resistance, we can then look forward to a new imagined space for bodies to exist outside such limitations, broadening our sense of subjectivities and human existence based on a becoming marked by fluidity, change, flux, and expansion.

I do not seek to promote women's bodies or this particular region of women's bodies as the only bodies that may act as sites of resistance. Nor do I seek to ignore that other parts of bodies constitute sites of resistance in their fluidity and transitionality. Iris Marion Young details this awareness of the versatility of bodies, but she makes it a point to clarify that to recognize the fluidity of women’s bodies and use them as feminist modes of analysis is not to deny the existence of fluidity in other bodies. She remarks on the status of fluidity within female embodiment that is not only biological, but metaphysical:

"The point is that a metaphysics of self-identical objects has clear ties to the domination of nature in which the domination of women has been implicated because culture has projected onto us identification with the abject body. It makes a difference how we think about beings in the world, and we can make choices about it that seem to have political implications. (Young 81)"

This acknowledgment is key to founding a discourse focused on the fluidity of women’s bodies. The dialogue opened up in this thesis by Iris Marion Young does not suggest that there are not other means of resistance within bodies or that only women's bodies are fluid. It is also not
intended to further reinforce a diametric framework of man/woman or male/female. These categories are flawed in their fictiveness and limited in their understanding of lived bodies. Bodies exist within, in-between, and outside of these given options. Though not all women have breasts, and not all those who have breasts are women (and others would not name these body parts as such), breasts are an important site of feminist investigation. It must also be clarified that the term “woman” in this thesis refers not only to those who self-identify as such, but also those who depart from the gendered expectations that are placed on those bodies labeled female from birth, despite any oppositional protests an individual may have. Categories are placed on bodies despite any resistance those bodies may have to such labeling. Keeping this in mind, this thesis explores not only those who take on the category woman, but also those who are understood by others to be breasted subjects. This study is by no means designed to silence or ignore Trans existence. Instead, by exploring the socially constructed category of woman, this thesis challenges and expands our views of gender within a strict binary gender divide and opens up new doors for self expression and understanding.

Even though bodies never do actually conform fully to set standards, it is still advantageous in feminist critique to address women’s bodies as mainstream U.S. society constitutes them daily. As long as the category of “woman” holds real and political implications, it is important to understand its persistence, especially systematic inequalities compel an encounter with itself as an oppressed and marginalized group. For the purposes of this exploration, the term “woman” will be used as a political category to represent bodies are defined by normative cultural logics as filling that category. More specifically, I am not speaking
of those who take the category of woman by living a relatively gender-normative existence.2

Within feminist discourse, fluidity is often a theoretical tool or focal point. Typically, when fluidity is discussed in feminist theory, especially in relation to women’s bodies, the genitals are the most discussed. Women’s genitalia are examined as fluid sites both because of their generative properties as well as being the site of the emission of liquids. Luce Irigaray, in her collection *This Sex Which Is Not One*, addresses the physical characteristics of women’s genitalia that make them so threatening to phallocentric norms:

This organ (women’s genitalia) which has nothing to show for itself also lacks a form of its own. And if woman takes pleasure precisely from this incompleteness of form which allows her organ to touch itself over and over again, indefinitely, by itself, that pleasure is denied by a civilization that privileses phallomorphism. The value granted to the only definable form excludes the one that is in play in female autoeroticism. The one of form, of the individual, of the (male) sexual organ, of the proper name, of the proper meaning…supplants, while separating and dividing, that contact of at least two (lips) which keeps woman in touch with herself, but without any possibility of distinguishing what is touching from what is touched (Irigaray 26).

In this passage, Irigaray is not only pointing out how women’s genitalia are fluid in their physicality, but also the gendered aspects of fluidity. Going by the work of Irigaray, we can see how bodies that are fluid—in that they change or morph—are not inherently viewed as a threat to norms. In fact, if the altering of a body changes it to become more like that of the phallus—rigid, hard, erect—then that change is given great value. For example, a man’s penis changes from a flaccid, dangling wad of flesh to a firm, phallic rod during erection.

The act of erection, the movement, the change, is not viewed in the same way as that of the vulva. When a penis becomes erect it moves from one definable state to another definable state. Women’s genitalia never do fully comply with such static definitions:

She is neither one nor two. Rigorously speaking, she cannot be identified either as one person, or as two. She resists all adequate definition. Further, she has no “proper” name. And her sexual organ, which is not one organ, is counted as none. The negative, the underside the reverse of the only visible and morphologically

---

2 Sisgendered is a term used to describe those who either consciously or without critique mostly adhere to gender norms required of their sexed bodies.
designatable organ (even if the passage from erection to detumescence does pose some problem): the penis (Irigaray, This Sex Which Is Not One 26).

This “none-ness” or difficulty of definition, is a theoretical application that applies not only to the bodies of women, but to their value and position within society. We can see the way in which this plays out by looking at the language surrounding women’s genitalia. Labia minora. Labia majora. Vulva. Clitoris. Cervix. These are words used to describe parts of women’s genitalia. Yet the most common term used when referring to women’s genitalia is vagina. This is inaccurate at best. At worst it is a way for the entirety of women’s genitalia, sexuality and subjectivity to be reduced to a tube that, in patriarchal terms, is fairly insensate (except for its relation to clitoral tissue) and perceived as always waiting to be filled: a penis, a baby. A man’s genitalia, while containing a variety of parts with their own specific names, is most commonly termed by its most apparent feature: the penis, the outward projection, and not the tube which brings semen from the testicles to the head. This inability to name women’s genitalia is both what makes women’s bodies hold little to no value in scopophilic/phallocentric society but also what makes them such a threat to a system build on rigid boxes and unwavering adherence to one’s “place.”

Another perhaps more obvious way that women’s genitalia are fluid is in the fact that they discharge actual fluids. Irigaray also addresses this point:

And there (women’s genitalia) almost nothing happens except the (re)production of the child. And the flow of some shameful liquid. Horrible to see: bloody. Fluid has to remain that secret reminder, of the one. Blood, but also milk, sperm, lymph, saliva, spit, tears, humors, gas, waves, airs, fire…light. All threaten to deform, propagate, evaporate, consume him, to flow out of him and into another who cannot be easily held on to. The “subject” identifies himself with/in an almost material consistency that finds everything flowing abhorrent (Irigaray, Speculum of the Other Woman 237).

The fluids that flow from women’s bodies are such a threat to phallocentric norms because they are obvious signs of the aqueous morphology of women’s bodies and therefore sex and gender as
Several feminist scholars have written on the issues surrounding menstruation. Simone de Beauvoir, in her groundbreaking work, *The Second Sex*, writes, “It is during her periods that she feels her body most painfully as an obscure, alien thing; it is, indeed, the prey of a stubborn and foreign life that each month constructs and then tears down a cradle within it; each month all things are made ready for a child and then aborted in the crimson flow. Woman, like man, is her body; but her body is something other than herself” (Beauvoir 32-33). Woman’s body is more than merely her body. Woman’s body signified more than herself especially when menstruating. The sight of blood, of menstruation, casts woman as breaking with heterophallic norms in that she has not fulfilled her role of reproduction.

Iris Marion Young in her essay, “Menstrual Meditations,” offers a look at numerous feminist theorists who have addressed issues concerning women’s bodies and menstruation. She examines the work of Simone de Beauvoir, Emily Martin, Julia Kristeva, Elizabeth Grosz, Christine Battersby and many others as it relates to the fluidity of women’s bodies. In defining what an acceptable body is and how women during menstruation so blatantly defy such calls for normalcy, Young writes:

The message that a menstruating woman is perfectly normal *entails* that she hide the signs of her menstruation. The normal body, the default body, the body that every body is assumed to be, is a body not bleeding from the vagina. Thus to be normal and to be taken as normal, the menstruating woman must not speak about her bleeding and must conceal evidence of it. The message that the menstruating woman is normal makes her deviant, a deviance that each month puts her on the other side of a fear of disorder, or the subversion of what is right and proper (Young 107).

She goes on to explain how women must keep signs of their menstruating bodies hidden at all costs so as not to be seen as monstrous, grotesque or falling outside the boundaries of what is

---

3 Morphology being the structural features of a being. Therefore, aqueous morphology would be a structure or structural characteristic that not only changes but changes in a way that is unpredictable and possibly indefinable.
considered normal. It is this idea of fluidity of bodies, expressed so eloquently by Young, which translates from women’s genitalia to women’s breasts. In Iris Marion Young’s essay, “Breasted Experience: The Look and the Feel,” she focuses her attention on the lived realities of women as breasted beings and the impact that has on their value and roles in life. In the remarks at the beginning of this article Young writes:

Considering the vast explosion of women’s-studies literature in the past two decades, there is an amazing absence of writing about women’s experience of breasts, and some of what little there is does not arise from feminist sensibility. One wants to explain why it is that feminists have not written about breasts, even when there is a great deal of writing about sexuality, mothering, the body and medical interactions with women’s bodies. Why this silence about breasts, especially when if you tell women you are writing about women’s breasted experience, they begin to pour out stories of their feelings about their breasts? Women are interested in talking about their breasted bodies and interested in listening to one another. But we almost never do it in conversation, let alone in writing (Young 75).

Inspired by Young’s words, this thesis seeks to answer this call to duty. While we are busy pointing out and breaking down fictive lines of sex and gender, we must also devote time to examining the ways in which these lines, though constructed, have significant impact on women’s lived experiences. Theoretically speaking, we can look at women’s breasted existence to help us acknowledge not only the constraints on women’s existence, but also how they become such effective sites of breasted resistance.

In the discourse surrounding breast-milk, for instance, women often become nothing more than a food factory for infants much in the same way gestating beings are falsely viewed as parasitic and women are seen as incubators. These discourses tend to ignore the presence of the lactating woman and center solely on the infant. I do not wish to examine the ways in which breast milk is beneficial for infants, though much of the medical/scientific information presented within this thesis has been gathered from research that has attempted to do just that. Instead, I
explore alternatives that extend to uses of the liquid for the health of adult bodies. It is crucial to note that, while I examine new medical and scientific studies disclosing the health benefits outside of breast milk’s nutritional supplementation, this study does not intend to promote breastfeeding in every setting nor in any and all circumstances. I make a point to step away from a heteronormative, reprocentric model of breastfeeding and instead focus on the possibilities situated outside such a simplistic viewpoint. Slogans such as “the breast is best” present a compulsion for those having recently given birth to breastfeed their children, which is to some extent problematic. Information should always be provided to pregnant persons so they may determine which avenue is correct for their situation—especially when considering current social and workplace limitations on breastfeeding—yet they should not feel pressured into doing with their bodies that which they are not comfortable. Any reason given to withhold from breastfeeding is valid within what is often a complicated decision-making process—from struggling to produce enough milk to simply not wanting one’s breast to alter their shape to lacking the biological capabilities to do so.⁴

When discussing fluidity within my thesis, the intent is not to suggest that bodies have no fixed properties. This is especially true in my final chapter. While I will be looking at the ways leather studies can help blur lines of bodily conformity and through which many transcend bodily limitations, I do not intend to imply that those within the S/M community do not hold certain fixed positions. While there is most certainly fluidity in bodies and identity, individuals do not necessarily flow in and out of certain categories freely. Fixed identities, in themselves, are not the site of concern when discussing problems with bodily limitations. The issue I raise is the

⁴ Of course it is gainful to explore the underlying issues that impact women’s decisions to not breastfeed. Social restrictions placed on women’s bodies in the home, at work, and in public complicate decisions surrounding breastfeeding. However, this is not the focus of this thesis.
compulsion of certain bodies into certain categories, the denial of entry of certain bodies to conform or remain within certain categories (man/woman, male/female, straight/gay, penetrator/penetrated and so on), and the nonexistence of transitional spaces between certain fundamental categories.

I devote chapter two, “Her Cups Runneth Over: The Fear of Fluidity and The Possibilities for Feminist Resistance,” to an examination of the ways in which the physicality of breasts are fluid. I address the language and existing dialogues surrounding women's bodies and shift my focus from the prevalent focus on the fluidity of genitalia within feminist scholarship to breasts. I also lay out the ways in which control is exerted over women's bodies through fluidity, with much-needed attention on breasts. For example, I look at the ways mainstream beauty culture affects the physical state of breasts through a brief look at plastic surgery.

In chapter three, “Got Milk? Moving Away From Reprocentric Language of Breastfeeding Toward More Expansive Possibilities,” I move from the way in which breasts are fluid in their physicality to the ways in which breasts are fluid in that they may produce fluids. Granted, not every breast possesses the biological ability to lactate, and those that can may never do so. Not all women who have given birth can produce milk afterward. On the other hand, some men are able to lactate without hormonal assistance. However, the potentiality of the act is central to normative body discourses. That is, only women's bodies are seen as having such reproduction-centered potentiality. In this chapter, I shift the discourse surrounding breast milk away from an infant-centered one to one that examines other options concerning production and consumption as I explore new medical data regarding benefits of breast milk for adults. I then discuss possible reasons why this research, as well as other forms of adult and erotic lactation, are so taboo.
In the final chapter, “Fluid Flesh: Looking Toward A Queer Reconfiguration of Bodily Limitations,” I look toward the future by opening up our ideas of corporeal boundaries. As Christine Battersby states in the introduction to *The Phenomenal Woman: Feminist Metaphysics and the Patterns of Identity*,

> The ‘self’ is not a fixed, permanent or pre-given ‘thing’ or ‘substance’ that undergoes metamorphosis, but that nevertheless remains always unaltered through change. Instead, we need to think of identity as emerging out of a play of relationships and force-fields that together constitute the horizons of a (shared) space-time. We need a metaphysics of fluidity and mobile relationships; not a metaphysics of fixity, or even of flexibility. (Battersby 7)

I wish to provide a reconfiguration of bodily limitations by opening up the options for bodies and subjectivities toward a recentering of the fluid body. With Battersby’s words in mind, I explore the ways in which Crip Sex and BDSM Studies open up the dialogue for new and fluid ideas about the body.
Chapter Two

Her Cups Runneth Over: The Physicality of Breasts and Attempts to Contain Them

“In our culture that focuses to the extreme on breasts, a woman, especially in those adolescent years but also through the rest of her life, often feels herself judged and evaluated according to the size and contours of her breasts, and indeed she often is. For her and for others, her breasts are the daily visible and tangible signifier of her womanliness, and her experience is as variable as the size and shape of breasts themselves. A woman’s chest, much more than a man’s, is in question in this society, up for judgment, and whatever the verdict, she has not escaped the condition of being problematic.”

Iris Marion Young, “Breasted Experience: The Look and the Feel”

“The absence of my breast is a recurrent sadness, but certainly not one that dominates my life. I miss it, sometimes piercingly. When other one-breasted women hide behind the mask of prosthesis or the dangerous fantasy of reconstruction, I find little support in the broader female environment for my rejection of what feel like a cosmetic sham. But I believe that socially sanctioned prosthesis is merely another way of keeping women with breast cancer silent and separate from each other. For instance, what would happen if an army of one-breasted women descended upon Congress and demanded that the use of carcinogenic, fat-stored hormones in beef-feed be outlawed?”

Audre Lorde, *The Cancer Journal*

******

Systematic mechanisms are inscribed within phallocentric cultures to control women’s bodies. Any fluidity of such bodies is inhibited, both legally and culturally speaking, from societal pressure to conform and strictly adhere to rigid boundaries, both spoken and unspoken, based on male norms. Bodies, from birth, are always already placed into compulsory gender categories despite any protestations the individual may have against such labeling. Phallocentric society calls for proper bodies to resemble unwaveringly that of the phallus—rigid, stiff, constant. Men’s bodies are seen as hard and static in their assumed physicality and the gendered
norms expected of them. Reason, logic, strength are all congealed masculine qualities assigned to male bodies. Women’s bodies are seen as the opposite in both form and function, lacking both in rationality and in a more general sense: emotional, soft, pliable, feminine. Examples of the ways in which women’s bodies are viewed as not only lacking/deficient but also contaminated and in need of control are abundant and extend back to antiquity.

For instance, Aristotle is quoted as saying “the female is a female by virtue of a certain lack of qualities…we should regard the female nature as afflicted with a natural defectiveness” (Beauvoir xviii). Then there are Old Testament biblical laws declaring women’s bodies unclean for the duration of their menstruation. In Victorian birthing practices, a sheet was placed over a woman’s body to keep her hidden even from the doctor in attendance. Even in our present day, legal and social restrictions are placed on public breastfeeding.5

In such a phallocentric context, only bodies that fit neatly into a specific concrete form possess any validity or merit. Those who fall outside these static properties are not only lacking, but are also denied full subjectivity and cast as objects or less than human.6 Bodies that fit such molds, either actually or in assumed adherence, hold value, whereas those who do not have no value, or possess lesser value. The tendency of Western discourse, especially within a U.S. frame, is to place everything within a binary system: male/female, man/woman, White/Black, good/evil, humanity/nature, solid/fluid and so on. These categories not only limit the possibilities of bodies; they set them at diametrically opposite ends where one (the first in each sequence

---

5 The connection between the literal production of fluids and the physical and theoretical fluid properties of breasts will be established further in chapter two.

6 We all have subjectivity. To state otherwise is to ignore agency held by individuals and thereby disregard their strengths and acts of resistance even in situations where the choices they possess are less than desirable. What I mean by full subjectivity is that some people are more compromised within existing dominant frameworks than others.
listed above) works as both the positive and the neutral (or norm) and the other acts as the lacking or the negative (the deviant). As Judith Butler writes in *Bodies That Matter*:

> To speak within these classical contexts of bodies that matter is not an idle pun, for to be material means to materialize, where the principle of that materialization is precisely what ‘matters’ about that body, its very intelligibility. In this sense, to know the significance of something is to know how and why it matters, where ‘to matter’ means at once ‘to materialize’ and ‘to mean.’ (Butler 32)

Moving forward with the ideas presented by Butler, we can see how substantive meaning is given to bodies that are perceived to materialize or become concrete and fixed. We can also begin to see how bodies which are viewed by society as the producers of fluids and can be seen as fluid in themselves (their form) never become stable long enough for materialization, and therefore the development of value, to take place. This is not to suggest that only women's bodies produce fluids. However, the discourses surrounding women's bodies are different and more prevalent than that of other bodies. Menstruation, breast-milk, and vaginal secretions are seen as dirty and something to be corrected and hidden.7

**Variety is The Spice of Life: Fluidity Through Breast Variation and Movement**

Typically, within feminist discourse, when the fluidity of bodies is discussed, the conversations center on the genitals, especially when considering sites of resistance to dominant/phallocentric norms. However, I argue that other sites of the body should be considered when engaging in such aqueous endeavors. Further up on the torso lies yet another site of both control and resistance: breasts. When addressing the fluidity of women's bodies and their lack of adherence to phallocentric norms, women’s breasts become a dual site of condemnation. Breasts, even if they lack the biological ability, are presumed to possess the

---

7 Fluids specific to men's bodies—ejaculate—are seen as holding value. For instance, we can look at pornography and the highly present “money shot” wherein the man ejaculates somewhere on the woman's body to gain insight into how the values of these fluids vary in mainstream culture.
potentiality to create and release liquid in the form of lactation. They are also fluid in their physicality—whether bouncing or sagging, flattening or swelling, their tips hardening or softening.

In order to properly venture down an avenue wherein breasts can be acknowledged for the power of their aqueous properties, it is important to first discuss their biology and physicality. Breasts in their unhindered state are flexible and changing. Independent of their size, if left to their own accord, they sway, jiggle and bounce either rhythmically or sporadically. The shape of a woman’s breasts changes across her lifespan. Certain life events can have considerable impact: among them, pregnancy, weight change, age, lactation, illness, hormones and surgery. All bodies experience at least one of these in their lifetime—changing as they age for example. Given this, it still may be difficult to see, at a quick glance, how breasts symbolize fluidity. The change as a result of age may be limited. What if a woman’s breasts never alter, or change in an imperceptible way, by the circumstance of her existence? The answer lies not only in the actual movement/changing of breasts as the body lives from day to day, but also in the perceived and potential changes of them.

**Blossoming Bosoms: Breasts as Heterosexual Capital**

The appearance of breasts on the body of young girls holds cultural implications that are outside the breasts themselves. In “Menarche and the (Hetero)sexualization of the Female Body,” Janet Lee states, “Menarche (first menstruation) represents the entrance into womanhood in a society that devalues women through cultural scripts associated with the body” (Lee 102). This onset of menstruation ushers a young girl into what is commonly termed womanhood, morphing the agency she possessed as a relatively nongendered being, not as confined by heteronormative/reprocentric discourse, and placing her in a constructed category wherein she
becomes the Other and thereby lesser. If menstruation is the turning point for a female body to enter that status of woman, then breasts are the external signification to the world of what has occurred within her body. Even if a female body never menstruates, the emergence of breasts signifies her entrance into a potentially reproductive state. This physical emergence qualifies her for the indoctrination of compulsory heterosexualization—along with various other oppressions that come along with being seen as a potential source for reproduction.

The development of breasts and the immediate association with the onset of menstruation also acts as a way to objectify women's bodies. If, as was stated earlier, the cultural entrance into the classification of woman is marked by the onset of menstruation, which is visibly signified to the outside through the emergence of the breasts, in many cases, then such bodies are forced into a category ("woman") in which they may not identify. Even if said bodies do identify in such ways, they may not have desired that knowledge to be shared with the outside world. Lee describes this objectification through Irigaray:

The passive, indirect, fragmented language of menarche and menstruation is about sexual objectification and alienation. The sense of bodily alienation is entwined with women's object status in patriarchal societies that allow men subjectivity but construct femininity as a mirror through which men see themselves as human. Adolescence and the journey from girlhood to womanhood involve forms of self-silencing whereby girls become preoccupied with how they are perceived by others. Femininity means moving from assertive actor to developing woman, learning to respond to the world indirectly through the filter of relationships.

---

8 No one fully lies outside heteronormative/reprocentic discourse. We are all constituted by compulsory heterosexuality even before we are born. I simply mean to suggest that women, when they are girls, are often not seen as being as sexual due to their lack of reproductive capabilities. However, no one, despite of their age, is completely free of these corporeal restrictions. This can be seen in the sexualization of young girls through clothing—offering breast padded tank tops and low cut jeans in children’s sizes—and other cosmetic items such as makeup targeted toward preteen girls. It must also be acknowledged that incest occurs on an all too frequent scale. Adding to the idea that women are seen not only as reproductive vehicles, but are also constructed based on male desire, adult women are encouraged to rid their bodies of its hair, especially pubic hair. Shame and embarrassment, long associated with female genitalia, is also surrounded by a cultural disgust of body hair which can disguise itself as a call for hygiene, maintenance or cleanliness. Pressuring adult women to present their vulva like that of a prepubescent girl, which is often times a painful process, further emphasizes how these heteronormative, scopophillic restrictions impact us all.
Women are encouraged to accommodate male needs, understand themselves as others see them, and feel pleasure through their own bodily objectification, especially being looked at and identified as objects of male desire. (Lee 107)

Further on, going from the collection of personal stories she used to compile her research, Lee describes the way that anxieties many young girls feel about their bodies are not rooted in their own self comfort but in the way they feel the world will view them, “for most women, anxieties about their developing bodies at menarche concerned the way these bodies looked and might be interpreted by others, rather than how they looked or felt to themselves. Breast development seemed especially fraught with such anxiety” (Lee 109). Girls/young women believe they are being looked at, and they are. It is evident then that breasts act as a form of objectification in misogynistic culture, signifying agent of the changes occurring not only externally but also internally. These external and internal changes are then defined by culture as the emergence of woman, thereby telling the world that she is ready to be indoctrinated into a system based on heteronorms.

The demand for the restraint of breasts is so engrained within U.S. culture that we see it as a normal and natural occurrence. To not comply with such demands is viewed as inappropriate or even repulsive. Such emphasis on breast containment begins at birth. Not only are women pressured into covering themselves when they breastfeed their children, but the act itself is not typically accepted in public spaces. Children are indirectly taught that breasts are shameful or dirty as they must be hidden. This continues on for young girls as they enter puberty or even before. For many girls, the movement from childhood to adolescence consists of wearing training bras. These devices are not referred to as “training” because girls must learn how to have breasts, which the name may imply. In fact, training bras serve as a stepping stone into a system built on compulsory heterosexuality, rigid gender codes and the subordination of women. Young
girls are not training to become women. They are learning to become capital inside a heterosexual marketplace.

**Dickish Dictation: Phallocentric Restraints in Language and Culture**

In spite of this variety of form and function, the English language suffers greatly from a limited ability to accurately describe the wide range of lived bodies. Yet it most definitely does not lack a vocabulary that objectifies and reduces certain bodies within a limited framework. They are tits. Knockers. Hooters. Jugs. Fun bags. Racks. Boobs. These are just a few of the words within English slang used to describe female breasts. In a strict dichotomy of solidity and fluidity, that which is a proper body and that which is not, is either demonized or viewed as impossible. Language can be used as a weapon of control, restricting bodies and identities with concrete terminology that precludes any transitional possibilities and refuses to allow for anything to exist between or outside the set/normative terms. Breasts, in the dialogue that surrounds them throughout dominant Western thought, are no exception. Breasts, though they are demanded to do so, do not fit so neatly into such predetermined and simplistic categories and as such act as an opposition to what is required of them by patriarchal discourse. Given this, breasts may be read as sites of resistance in that they are always fluid and transitional.

No doubt influenced by the limited and phallic English language, one of the most obvious means that heteromasculine society (specifically within the United States) places restrictions on women’s breasts is through the mandatory wearing of bras. While feminism is often stereotyped by stories of bra burning women during the 1960s and 70s, it is not so much the existence of bras themselves that is the feminist issue. In fact, there is a line of thinking within feminism to reclaim such items with pride in an attempt to harness and control one’s own sexuality. Queer burlesque is a great example of ways in which bras may be reclaimed in a safe space and used to
challenge norms and achieve personal empowerment. There is nothing inherently wrong with bras. The real issue lies within the compulsion to wear them and the lack of education surrounding the positives and negatives of wearing such binding devices for extended periods of time around the core of the body. Issue also arises with the lack of options for women outside of donning a bra when entering the public sphere. Not only can they be required at school or in the workforce by mandatory dress codes, but the wearing of bras has become both an unspoken and a spoken social dress code. These official and unofficial codes apply not only to those who posses larger breasts which may be more obvious that they are unbound. “Nipplephobia” is yet another tool of objectification that proclaims an erect nipple on a woman an overtly sexual sight and therefore inappropriate for everyday public life. Cleavage, regardless of its degree, is not as socially forbidden as long as the areola and nipple are covered. A woman’s breasts are considered censored if nothing but the areola and nipple are hidden, furthering the idea of nipplephobia. The wearing of bras is not only mandated by certain patriarical systems, but has become a way for women to be divisive unto one another. Women are often heard making comments on the need for another woman to wear a bra or get a better bra.

Why is there so much emphasis placed on the physical containment of breasts through the bras? Iris Marion Young in her essay, “Breasted Experience: The Look and The Feel,” writes:

Without a bra, a woman’s breasts are also deobjectified, desubstantialized. Without a bra, most women’s breasts do not have the high, hard, pointy look that phallic culture posits as the norm…Without a bra, the fluid being of breasts is more apparent. They are not objects with one definite shape but radically change their shape with body position and movements (Young 83).

It is this visibility of the fluidity of breasts that is seen as a threat to phallocentric society. Breasts, when unbound, can be seen as a trope for the fluidity that is the entirety of not only women’s bodies, but all bodies. If all bodies are fluid and cannot be defined by static principals
of control, then phallocentric culture is seen as false and under threat.

Another, perhaps more violent, way in which society attempts to restrict breasts is through plastic surgery. This chapter looks at two approaches within feminist debate that address plastic surgery: one of false consciousness structured by the male gaze and one of agency and free choice. Of course, these are not the only viewpoints held by feminists in regard to plastic surgery. However, when looking at feminist debates surrounding the subject through a historical lens, these two ideologies—in one form or another—seem to be quite prominent. They are at the very least influential enough that this false binary is worth exposing for further scrutiny. A false consciousness position states that “although women freely choose cosmetic surgery, the standards they seek to achieve have been constructed by men and serve men’s interests” (Gagnè 194). An argument based on validating women’s agency, which is something that we all possess though some are more compromised in this than others, claims that women are “rational decision makers and that they seek cosmetic surgery through free choice” (Gagnè 195). Neither of these positions fully provides an accurate account for the subjugation and prevalence of plastic surgery amongst US women.

A theory that takes on a both/and approach to subjectivity is more appropriate for evaluating the situation such as Patricia Gagnè and Deanna McGaughey do in their essay “Designing Women: Cultural Hegemony and the Exercise of Power among Women Who Have Undergone Elective Mammoplasty.” Gagnè and McGaughey position themselves against such simplistic approaches.

...We assume cosmetic surgery to be a technology drawn on by women in their construction of an embodied self. Therefore, we highlight women’s agency in constructing an embodied self, along with the role of hegemonic gender norms that guide women to meet, and literally embody, those norms. We assume women are both subjects and objects of the designing process. “Designing women” refers
to women’s agency in the process of body/self formation, as well as the ways in which society designs women through hegemonic discourse. (Gagnè 197-198)

Drawing from the ideas of Gagnè and McGaughey, it is not the operations or alterations themselves that are problematic. The issue lies within the reasons behind these surgeries as well as the final product.9

Hegemonic ideas of beauty, which are predominantly White, insist that women be: flawlessly skinned, thin with large breasts, and wear long, flowing hair. These images are what contribute to and determine the reasoning behind much of the elective cosmetic surgeries performed in the United States. These standards can be seen quite clearly when considering elective breast augmentation. Discussions in the media over who has “had their breasts done” occur on a regular, if not daily, basis. Moreover, implants have rapidly become the industry standard now for mainstream sex workers, including strippers and those in pornography. In the world of porn it seems as if “natural breasts” have become a rarity, a fetish. For instance, the website MyFreeImplants.com hosts a large community of women posting half nude photographs of themselves in an effort to raise money for their breast implants. The website details the services it provides for the women and the role of the “benefactor,” “women that have a strong desire to enhance their physical appearance through cosmetic surgery. Benefactors who wish to help these women improve their self esteem and confidence through plastic surgery” (myfreeimplants.com). This could also be said of television and movie stars, where surgery is something that is no longer always kept secret. A recent example is Heidi Montag. “The Hills” (a MTV show loosely based on reality that is targeted at teens and young adults) star verified in People magazine that she underwent ten different cosmetic procedures in one sitting. One of

9 In fact, if we look at the feminist performance artist Orlan, we can see how these can become ways to resist dominant beauty norms and bring attention to the problems women face in mainstream popular culture.
these procedures was to modify her breasts from an A cup to a 32C cup (Ball, “Heidi Montag: Version 3.0”).

The openness and commonness of plastic surgery has moved from Hollywood stars to mainstream society. On November 28, 2010, the cable network E! aired the first episode of a reality television show “Bridalplasty.” In this series, twelve women compete in various challenges as they prepare for their weddings. The award for winning a challenge: plastic surgery. Contestants often choose breast alterations as at least one of their surgeries. The ultimate winner receives a full surgical makeover before her wedding. To further emphasis the inherent imperfection of women’s bodies, the show’s website hosts a banner featuring five women (only pictured from the mouth to the lower torso). Four of the women hold a wedding bouquet of flowers. Instead of flowers, the center woman holds a bouquet made of syringes, scissors, scalpels, medicine vials, and other surgical instruments. (eonline.com). These shows and websites only help promote the idea that women are lacking and in need of repair and must alter themselves in order to increase their heterocapital worth.

**Where’s My Badge of Honor? An Examination of the Pressure for Mastectomy Patients to Hide Their Sites of Survival**

In addition to the often painful and shame-encased mandates placed on women’s bodies, female breast cancer survivors face pressure to replace their lost tissue with artificial implants. If tissue is taken from one breast, patients are often pressured into implants. Failure to accommodate such requests is often met with disbelief. Perhaps one of the more well-known accounts of the experience of a breast cancer patient is Audre Lorde’s *The Cancer Journals*. In 1978, Lorde had her right breast removed due to a malignant tumor. The doctors insisted that she must have the afflicted breast tissue fully removed as soon as possible. After her mastectomy,
Lorde was measured for a bra that was intended to eventually hold a prosthetic that would match, at least to those who viewed her when clothed, the remaining breast. Throughout her hospital stay she was encouraged and instructed on not only how to take care of herself physically—cleaning incisions, monitoring tubes, learning her temporary physical limitations—but how to mentally care for herself by wearing a bra and insert that were supposed to make her feel “normal” again. Once home, Lorde refused to wear the prescribed lambs wool stuffing, a placeholder until she had healed well enough to be fitted for a prosthesis, though she was urged to do so by medical staff as well as other women who had undergone similar procedures. The full recognition of her social violation was apparent at Lorde’s first doctor visit where she went sans lambs wool:

Usually supportive and understanding, the nurse now looked at me urgently and disapprovingly as she told me that even if it didn’t look exactly right, it was “better than nothing,” and that as soon as my stitches were out I could be fitted for a “real form.” “You will feel so much better with it on,” she said. “And besides, we really like you to wear something, at least when you come in. Otherwise it’s bad for the morale of the office.” (Lorde 59)

Not only was the obvious lack of one breast declared a serious offense by the nurse, but Lorde’s ability to define her own body was taken from her by those whose sole job should be to care and heal.

Further, Lorde comments on the gendered aspect of breast removal, thus offering readers insight into the ways in which body parts that are thought of as only belonging to females hold different value than those of male bodies:

When Moishe Dayan, the Prime Minister of Israel, stands up in front of parliament or on TV with an eye patch over his empty eye socket, nobody tells him to go get a glass eyes, or that he is bad for the morale of the office. The world sees him as a warrior with an honorable wound, and a loss of a piece of himself which he has marked, and mourned, and moved beyond. And if you have trouble dealing with Moishe Dayan’s empty eye socket, everyone recognizes that it is your problem to solve, not his. (Lorde 60)
Here Lorde is pointing to the fact that women are seen as responsible for the comfort of others, even if it comes at a loss of their own comfort, whereas men’s bodies are allowed to declare the stories of their lives and are often praised more for doing so. Missing body parts that are neutral or belong to the male sex do not face the same compulsions to be replaced. A missing eye for example becomes a badge of honor especially if on the body of a man. The loss of an eye might say to the world “I have overcome something great and difficult and am stronger for it.” Those who are offended by such lacking are told to adjust their way of thinking and value his struggle and bravery to triumph over such devastation. The absence of one or both breasts on the body of a woman does not receive the same response. Women do not receive respect and honor for lopsided or sunken chests. Instead, women are pressured by both society and the medical establishment to wear burdensome bras and inserts or have painful “chest reconstruction” surgery not in order to make themselves more comfortable but in order to make those who gaze upon them more comfortable.\footnote{Here I say “chest reconstruction” because that is the procedure is medically termed. Yet this phrase is misleading. Reconstruction suggests that whatever is being constructed once more will be something closely resembling the original structure. However, most chest reconstruction surgeries do not reconstruct breasts resembling those which were removed. Instead, they plop down two full, hard, round orbs that sit unmoving on the woman’s chest taking her chest from a direct visual threat to the male gaze to the phallocentric ideal.}

Continuing with an assessment of how women’s bodies are viewed differently than men’s bodies, Lorde describes the seeming need for breast padding conveyed to her by her own doctors after a mastectomy.

Attitudes toward the necessity for prostheses after breast surgery are merely a reflection of those attitudes within our society toward women in general as objectified and depersonalized sexual conveniences. Women have been programmed to view our bodies only in terms of how they look and feel to others, rather than how they feel to ourselves, and how we wish to use them...The insistence upon breast prostheses as ‘decent’ rather than functional is an additional example of that wipe-out of self in which women are constantly encouraged to take part. I am personally affronted by the message that I am only acceptable if I
look “right” or “normal,” where those norms have nothing to do with my own perceptions of who I am. Where “normal” means the “right” color, shape, size, or number of breasts, a woman’s perception of her own body and the strengths that come from that perception are discouraged, trivialized, and ignored. (Lorde 65)

In this passage, Lorde aptly describes the way in which women’s bodies are always seen as existing for others. When looking at Lorde’s account, we can see how such a severe difference from a full breast to a flat, if not sunken, chest makes the fluidity of women’s bodies so obvious that it becomes utterly appalling. Such a defiance of norms must be quickly corrected as to not offend the status quo of not only the male gaze but also constructions of modern medical procedures.

Lorde’s tale, though extremely powerful, is now over thirty years old. But when we examine our current social climate we see that things have not changed that much. In the 1970s, lambs wool and insertable prostheses were commonplace. Now silicone implants and additional “corrective” surgeries have become the norm. In the 2002 collection of personal stories within the book, *That Takes Ovaries! Bold Females and Their Brazen Acts*, Lynda Gains describes her experience as a breast cancer patient. After being told by her doctor that she, after multiple tests, has a malignant form of cancer in a single breast, she began to question if having only one removed was the right option for her. “Once I had accepted the inevitable, I felt strongly that I didn’t want to have only one breast. To me, it was out of balance, and more shameful…No, one breast just didn’t feel right. If I have to remove one, I decided, then I’ll remove both” (Gaines 52). Once she made her decision it became an ordeal to find an unnamed surgeon who would remove both breasts. Eventually, she found a doctor that agreed only because he reasoned she, “could always opt for reconstruction later” (Gaines 52). Gaines never did return for such a surgery. Instead, she now educates other women in similar situations:

When I talk to women now facing a mastectomy, I know the chances are slim they
will follow in my footsteps. I talk about how free I feel, and they listen politely. Then they tell me they will reconstruct. I keep telling my story, however, hoping that someday, when another woman makes the choice I did, she will know she isn’t alone. (Gaines 53)

This may seem like an odd decision, and statistically speaking, it is. Most women have either only one breast removed and/or have reconstructive surgery to give them the appearance of two matching breasts. The surgeries often do not stop with an implant placed in the space where the cancerous breast tissue once was. As Barbara Ehrenreich observes in her essay, “Welcome to Cancerland:”

As for that lost breast: after reconstruction, why not bring the other one up to speed? Of the more than 50,000 mastectomy patients who opt for reconstruction each year, 17 percent go on, often at the urging of their plastic surgeons, to get additional surgery so that the remaining breast will “match” the more erect and perhaps larger new structure on the other side. (463)

These surgeries not only lead to further scarring and pain for the patient, but also remove the unevenness that typically occurs between breasts. Phallocentric norms, as can be readily seen in pornography, lingerie ads or most any television channel, call for breasts to be round, perky, no more than slightly moving and even. Of course, perfect symmetry is rarely seen in unaltered breasts. There will usually be some variation in size and positioning between the two breasts. Having one breast removed and the other still on the chest, brings to light this fact that most breasts do not fit the phallic ideal. The fact that breasts are often not identical is a violation of phallic rules and therefore must be “fixed.”

Hegemonic and heteronormative beauty ideals which effect women's motivations for body altering surgeries provide cause for feminist investigation of this issue. Gagnè and McGaughey performed multiple interviews of women who have undergone elective mammoplasty. In their questioning they found a general consensus amongst the interviewees: By accepting the hegemonic culture, the women we interviewed believed they had
learned the rules of the game and thus how to compete and achieve the social opportunities and rewards they desired. Moreover, they looked on cosmetic surgery as a logical technology implemented to achieve rewards that every woman wants. All of the women we interviewed talked about cosmetic surgery as a normal procedure that nearly all women would choose if they had the means to do so. Every one of them explained that all women are dissatisfied with their bodies and that given the opportunity, almost all would change something. (Gagnè 201)

It is clear from this passage that the women undergoing these surgeries often ascribe to the idea that women’s bodies are inherently flawed. Breasts then are a symbol of that imperfect nature as they shift and change throughout a woman’s lifetime. It may seem to these women that by electively molding their own breasts, changing them as they will—regardless of why or how they are doing it—allows them to exert some control over their own body. It is important to note here that opting for surgery is not, in itself, anti-feminist or anti-woman. Everyone has the right to alter and modify themselves in ways they feel necessary regardless of their reasoning for doing so. We are all, to some extent, affected by the aesthetic ideals of our time. Recently, there has been a watered-down version of feminism that has crept into mainstream culture that suggests that having a choice and then choosing from whatever the selections may be is feminist in itself.11 Without an in-depth critique of the historical situations surrounding options, choice in itself is not feminist. The critique here is not of the woman who chooses to undergo such procedures; the critique is of the systems of oppression and control that tell women they are inherently flawed and in order to fit what is normal, beautiful, and desirable, and they must alter their bodies in some way. Breast augmentations have become one of many popular ways of altering the physical form to more closely fit the ideal.

I contend that these beauty standards are not only a result of patriarchal beauty standards,

11 For instance, the character Charlotte on Sex and The City, repeats over and over “I choose my choice! I choose my choice!” to convince her friends that her decision to quit her job is feminist and in her best interest.
centered on and for the male gaze, wherein women continue to reinforce these norms by their own participation, but they are also a means to control the fluidity of breasts which so challenge dominant norms of body types and heterophallic ideals. When elective breast surgery is performed, typically the woman wishes for larger, fuller, higher breasts with neatly defined, small areolas. Implants usually make the breasts hard, rigid; they sit high on the body as if saluting the world. Iris Marion Young describes the ideal breasts as set forth by hegemonic standards: “What matters is the look of them, how they measure up before the normalizing gaze. There is one perfect shape and proportion for breasts: round, sitting high on the chest, large but not bulbous, with the look of firmness” (Young 79). These standards take into consideration only male sexual gratification and deny the importance of sensation and touch, but they also act as a way to produce hard, still breasts for the look, not the feel. If breasts are inflated with inorganic material they no longer sway and shift shape as the woman moves. If tendons and skin are removed or tightened, breasts no longer sag as a sign of age. If stretch marks are removed or areolas reduced, then any signs of pregnancy or lactation are removed; this takes away any threat of combining the sexual with the functional and allows for a woman to return to the role of sexualized object which is solid, static and not a blatant threat to phallogcentric norms.

Breasted Resistance: Why Breasts Are Effective Sites of Resistance

Breasts, unless bound in some manner (and even this is an example of change), are always morphing. When standing they gather at the bottom, when lying on one’s back they flatten to the side, when bending over, depending on their size, they may swing like pendulums. Not only do their shapes and sizes vary greatly from body to body, their presence alters within one body depending on the surrounding circumstances. This physical actuality is what defines breasts and therefore women’s bodies as transitional sites, never the same from moment to
moment. Granted, all bodies are transitional; we all fluctuate throughout our lives and experience change in and to our bodies regardless of sexed or gendered embodiment. However, unbridled breasts, uninhibited by a narrative that wishes to contain and control them, act as a symbol of fluidity which blatantly defies dichotomous thinking in a way that challenges heteromasculine norms. It is this symbolic defiance which must be controlled by the phallocentric model because they are seen as a direct threat to norms which call for static beings.

Luce Irigaray, in her classic essay, “The ‘Mechanics’ of Fluids,” opens the feminist debates concerning solids and fluids. She discusses how women are fluid in that they shift, surge and change, “woman never speaks the same way. What she emits is flowing, fluctuating. Blurring. And she is not listened to, unless proper meaning (meaning of the proper) is lost. Whence the resistance to that voice that overflows the 'subject.' Which the 'subject' congeals, freezes, in its categories until it paralyzes the voice in its flow” (Irigaray 112). What Irigaray is saying here is that women are never afforded full subjectivity within existing frameworks. Anything resembling subjectivity, or more likely limited attention and not a true material value, is only achieved through an act of denial or conformity to the subject which is always, in this model, defined as the heteromasculine subject. The limited value that women are allowed often only comes if women adhere to masculinist demands of proper being or if their bodies are used as a means to an end by men, reestablishing the authority of the male form. This act of forced transformation rids women's bodies of their full agency by determining their bodies as inherently flawed and in need of “proper meaning.” Borrowing from Butler, only when women’s bodies alter their matter to fit a phallocentric model do they matter.

Despite all the ways in which society attempts to restrict breasts, they still manage to act as sites of resistance. Breasts defy through their inability to be categorized, or at the very least to
live up to the false categorization placed on them. The placing of breasts within the bodily gives them unlimited potential for defiance of normativity. This further gives them power as a form of transitional resistance. As Mary K. Bloodsworth-Lugo states:

If, rather than being neutral and static, bodies bleed—extend or exceed frameworks—then men, in relegating women to the bodily in an attempt to contain them, have actually placed women in an “unlimited site.” If bodily boundaries are ambiguous (which is not to say arbitrary), then women, like bodies, resist and alter a static definition. Irigaray claims, “[He] places limits on her that are the opposite of the unlimited site in which he unwittingly situates her.” (Bloodsworth-Lugo 21)

As I have stated, breasts, due to their fluid properties—both literally and figuratively—bleed and extend over the lines drawn by phallocentric society. From this, we can see how breasts are always, regardless of constraints placed upon them, sites of resistance. Though breasts do already act as sites of resistance just through their sheer physicality and liquid producing potentiality, as will be examined in chapter three, women can also actively use their breasts as weapons of change. Whether through the ditching of bras, unashamedly breast feeding in public, refusing to succumb to pressures to replace, enlarge or “enhance” your rack, or by reclaiming certain heretofore rejected items and practices (bras, surgery) once seen as nothing but straightforward agents of oppression, women can and do actively defy constraints placed on their bodies.
Chapter Three

Got Milk? Moving Away From Reprocentric Language of Breastfeeding Toward More Expansive Possibilities

“For a minute Rose of Sharon sat still in the whispering barn. Then she hoisted her tired body up and drew the comfort about her. She moved slowly to the corner and stood looking down at the wasted face, into the wide, frightened eyes. Then slowly she lay down beside him. He shook his head slowly from side to side. Rose of Sharon loosened one side of the blanket and bared her breast. “You got to,” she said. She squirmed closer and pulled his head close. “There!” she said. “There.” Her hand moved behind his head and supported it. Her fingers moved gently in his hair. She looked up and across the barn, and her lips came together and smiled mysteriously.”

John Steinbeck, *The Grapes of Wrath*

“Thus, science is made, by and large, by a self-perpetuating, self-reflexive group: by the chosen for the chosen. The assumption is that if the science is “good,” in a professional sense, it will also be good for society...As I said before, to be believed, scientific facts must fit the world-view of the times.”

Ruth Hubbard, “Science, Facts and Feminism”

******

When addressing the ways in which breasts are fluid, one cannot ignore the fluid that is produced from them—breast milk. Of course, not only the tissue identified as breasts can produce milk. Beings that identify themselves outside of the category “woman” can indeed lactate. It is not also a given that all bodies that have breasts have the biological capacity to lactate or, even if they do, ever choose to do so. Yet, breast milk remains an important site of feminist investigation when determining the means of fluidity in breasts, as breasts are associated with heteronormative reproduction and therefore lactation. Besides the fact that breast milk is an actual liquid, it is also seen as a contention against phallocentric norms in that it is never fully
separate from the woman's body. Breast milk, in a U.S. context, is continually and constantly constructed through our views on breasts.

Breastfeeding has changed value in society throughout time. In Western culture, breastfeeding has alternated from being the ordained role of all mothers to a sign of lower class standing to an optional experience with the invention of seemingly satisfactorily nutritional infant formulas. In more recent times, we have seen a push for women who have just given birth to breastfeed their children, encouraged by slogans such as “the breast is best.” Campaigns such as “the breast is the best” have shifted public mentality since the 1960s and 70s when formula was seen as a source of freedom for women.

Lactivists, breastfeeding activists, now use letter writing campaigns geared toward governments and corporations and organize protests and public “nurse-ins” to advocate for accurate breastfeeding information, challenge accepted social norms surrounding breastfeeding and fight for public policy change that impacts breastfeeding. While communities like this are key to changing the way society views not only lactation but women’s bodies by providing both a visual challenge as well as informational literature, some of the ideologies within these groups sound like breastfeeding mandates. Currently, new mothers are pummeled by information from books, television, physicians, magazines, and family members all suggesting that breastfeeding is not only the best nutritional source for infants but also the only way to ensure they grow into healthy adults. For instance, La Leche League International, a world-wide breastfeeding

12 Satisfactory here is used loosely. There are a number of issues with current infant formula standards. One cannot ignore the nutritional disparities of formula, however, this chapter aims to pull away from a discussion situated on infants and focus its attention outside of such a model.

13 This is not to say that all lactivists share the same mindset or values. The community is rich with diversity. It is also not to suggest that pointing out the many flaws with infant formula or bottle feeding is not a feminist endeavor. It most certainly is. It is necessary that those who are able to breastfeed their infants be presented with all the available information about how it the choices surrounding infant feeding will impact both their child and their own body. Without a full gambit of knowledge on the subject saying that women “choose” to formula feed over breastfeed is inaccurate.
advocacy organization, goes beyond presenting accurate information and breaking social boundaries. While they do defy social norms that restrict breastfeeding, they go about this through a language that is binding for women, limited only to reproductive women identified individuals and is blatantly heterosexual. From LLL’s website under their Purpose section:

LLL believes that breastfeeding, with its many important physical and psychological advantages, is best for baby and mother and is the ideal way to initiate good parent-child relationships. The loving help and support of the father enables the mother to focus on mothering so that together the parents develop close relationships which strengthen the family and thus the whole fabric of society. LLL further believes that mothering through breastfeeding deepens a mother's understanding and acceptance of the responsibilities and rewards of her special role in the family. As a woman grows in mothering she grows as a human being, and every other role she may fill in her lifetime is enriched by the insights and humanity she brings to it from her experiences as a mother (lli.org).

After reading this, one might think the words appeared on a far-right, conservative blog not a radical breastfeeding site. Not only does this type of wording privilege heteronormative constructs of what a parent should be, it also sounds as if a woman is not complete until she is a mother or that by becoming a mother and breastfeeding she is fulfilling her ultimate duty. Of course there is also the every present referral to a father. This is not to say that a father should not be mentioned. Men should be encouraged to take active fathering roles. However, this is the only option. It is never suggested that the other person in the relationship is not the father, that the breastfeeding person is not the mother or that the lactating person is in a romantic/coupled relationship. The language used within this section is not limited only to the purpose statement. It is repeated throughout the website.

The discourse surrounding whether or not a woman should (and can) breast feed her infant child is more complicated that a simplistic choice of breast or bottle. Numerous cultural contexts and competing realities must be considered such as the backlash against women's bodies
through a lack of public acceptance of breastfeeding and the limits placed on women's working lives, given public prohibitions and lack of available space and time to do so in public.

Steeped in discourse that resembles a call for dutiful adherence to what nature intended, women attend breastfeeding classes, buy pumps that are now sold at most large chain stores, and register for breastfeeding bras for their baby showers. With all the resources presenting such encouragements to breastfeed, there are still multiple taboos associated with breastfeeding that contradict the simultaneous push to do so. Even considering the borderline mandates for new mothers to breastfeed their children, public breastfeeding, in the United States at least, is seen as something that should be covered/hidden from public view as much as possible or perhaps altogether avoided. Given all the restrictions placed on public breastfeeding, it could be concluded that by not fully addressing these issues, pushing for women to breastfeed their infants is in fact a push for women to get back to the home. In addition, any pleasure found in breastfeeding that is not a mere closeness with the child is also considered taboo. Breasts, during lactation, are to be purely functional in their role as nutritional source for the infant. Women's sexuality (their actual sexuality and not a false one that is constructed to fit the standards of the male gaze) is to be excluded from this context, silenced by the act of feeding her child. Breasts, whether lactating or not, are always seen as for others. When lactating, they are for the nutritional benefit of the child. Outside of lactation, breasts are supposed to be harnessed in a perky tightness designed not for their own comfort but for the desiring male gaze.

It is my intention in this chapter to break that mold and branch out in thinking from such traditional roles. This chapter considers that the aggression towards public breastfeeding may function as a blatant reminder that the nature of women’s breasts is reproductive and any sexuality surrounding them is for men only (the male gaze). Breastfeeding, by my reassessment,
then provides a counterposition to women's breasts as merely sexual objects and resituates breasts as sites of resistance to these norms.

**Breasted Naming: Origins of the Term “Mammal”**

In order to see the ways in which breast milk is always connected to dominant ideas about women's bodies, we must first look at history. In 1758 Europe, Carolus Linneaus introduced the term Mammalia in his work *Systema naturae*. (Schiebinger 405) Mammalia, or mammal, quickly saturated zoological taxonomy and became a commonly known piece of scientific jargon. However, what is curious is not only why Linneaus chose the word mammalia (which literally means “of the breast”) but why the term was so readily and deeply absorbed by the scientific community. Mammals are classified by numerous characteristics: hair covering the body, three ear bones, and a four-chambered heart, for example. Yet Linneaus did not focus on these as the signifiers for the group. Instead, he chose to title this category after a function that was common (though not limited or always present) in only a percentage of the populace (lactation-able females). In “Why Mammals are Called Mammals: Gender Politics in Eighteenth-Century Natural History,” feminist historian Londa Schiebinger states, “Linnaeus venerated the maternal breast at a time when doctors and politicians had begun to extol the virtues of mother’s milk” (383). As Schiedinger further explains, in eighteenth-century Europe there was a major political and social push encouraging breastfeeding by middle and upper class White women which called for them to give up their wet nurses and return to their “natural” roles.

It is important to note the push for middle and upper class European White women during the Eighteenth Century to nurse their own babies was not only a matter relating to gender in which women’s roles were narrowly defined and confined to that of the home. It had many of its roots in racial and class-based prejudices, many of which came out of a public/private binary and
the push to keep White middle class women in the home or send them back to the home as a backlash against women's economic/social independence. It was believed that a suckling child would receive more than nutrients from the milk supplier. Breast milk was thought to pass along a number of qualities and characteristics from the one nursing. Therefore, it became an upper class outcry to not sully one’s offspring with the lesser morality of the working class. Before the mid-Eighteenth Century, wealthy European women hired lower class wet nurses to feed their young children, partly as a means to maintain the shape of their breasts. Schiebinger notes this in her text “the classic aesthetic ideal of the firm, unused breast was realized in the bodies of many upper-class medieval and early modern European women who avoided the burden of suckling their own children” (401). Breast shape, oddly enough, was thought to contribute to healthy milk. Black women in Europe and America were historically used as wet nurses because they were scripted as more animalistic than White women, as Scheibinger explains, and therefore more appropriate for the role of suckling, but this was to change during the time of Linnaeus as White women were thought to have the most suited breast shape for producing high quality milk. Of course, this would shift during the time of American slavery when Black women were forced into roles as wet nurses when those animalistic scripts applied to Black women were once more used as means to justify their forced positions as a food source for wealthy White children. Yet during the time of Linnaeus, it was popular thought by White Europeans that large, pendulous breasts (associated with women of African descent) were not as well designed for healthy nursing. As Schiebinger details, the background for this line of thinking came from what was considered socially fashionable and erotic: “The ideal breast—for all races—was once again young and virginal. Europeans preferred the compact ‘hemispherical’ type, found, it was said, only among whites and Asians. The much-maligned breasts of African...women were dismissed
as flabby and pendulous, similar to the udders of goats” (402). Along these lines it was thought that Black women were not only less likely to produce good, nutritional milk, but that their essential and innate characteristics that made Blackness the Other to Whiteness would be passed along to wealthy and middle class White Europe.14

One might think giving a female-centered title to the category that would come to define all of humankind—mammal—was a positive political and social statement on the importance of women and their bodies. For so long, the male of the species had been considered the definition of humanity and the ideal body. Linneaus’ categorization could then be viewed as an attempt to place value on the female body, giving it merit where before it had been seen as less than man, or as a defective or lacking male body. This interpretation is entirely possible. However, when more closely examined, one can see the way in which this analysis falls flat. Within the same text, Linneaus also coined the term Homo sapien, which means “man of wisdom,” in order to differentiate human beings from animals. When examined collectively, it becomes apparent that the naming of mammals was not a proclamation of the merit of the autonomous female body, but, when compared to the classification Homo sapien, became yet another marker of woman as less than man and of the body, whereas men are of the mind.15

---

14 These ideas are similar to scientific racism which insists that races are biologically based, not socially constructed in any way. It also claims that each race evolved differently and present racist ideology as scientific fact with little to no supporting evidence. Not only does scientific racism claim that races are inherently, structurally and genetically different, it also creates racial hierarchy based on its views on evolution which places White people at the top.

15 This classification system also reemphasizes a separation of man from nature through a system of arbitrary characteristics such as “logic and reason,” which were narrowly culturally defined as descriptors of male bodies and means of thinking. Female bodies were more closely related to emotion—the abject of logic, reason, and the body in traditional patriarchal Western thought. In doing so, Linneaus not only equated women with animals, he created a hierarchical binary of human/nature wherein only a specific and limited number of bodies place in the dominant category of human. Of course, it should be questioned why there is such an insistence on the division of animality in the first place. The need to separate humans from animals, while it may seem appropriate when a certain groups have been treated terribly based on their assumed animalistic qualities, only reaffirms the false binary of superiority. If we cannot extend our minds and progressives attitudes outside of such binary logics then we are truly limiting ourselves.
As Schiebinger explains further, “‘man’ had traditionally been distinguished from animals by his reason; the medieval apposition, animal rationale, proclaimed his uniqueness. Thus, within Linnean terminology, a female characteristic (the lactating mamma) ties humans to so-called brutes, while a traditionally male characteristic (reason) marks our separateness” (394). Schiebinger is pointing to the separation of woman from man. The female body, through these naming techniques, is further inscribed as a lesser or tarnished male form, therefore making its connection to animals and nature the only “reasonable” assumption. Many of the ideas established about female characteristics were so engrained within our social understanding of gender that it becomes difficult, if not impossible, to assess what is “natural” and what is constructed. Not only is this a problem found within a social studies context, but such biases that seem to have roots in natural facts can be found within the scientific community and its naturalizing narratives.

It is critical when assessing the origins of biases to explore the historical situation(s) surrounding a medical or scientific topic, especially when that topic relates to the body. A possible reason for pursuing this avenue is to address the conundrum of whom/what exactly, and by what means, define what is and is not medically and scientifically acceptable. Within the collection A Reader in Feminist Science Studies: Women, Science, and Technology, Ruth Hubbard in her essay “Science, Facts, and Feminism,” details exactly who it is that makes up the select group of scientists and researchers that is modern science. She states, “until the last decade or two, mainly upper-middle and upper class youngsters, most of them male and white, have had access to that kind of education (science). Lately, more white women and people of color (women and men) have been able to get it, but the class origins of scientists have not changed appreciably” (Hubbard 153). What is more important to the exploration of this chapter is the
manner in which scientific facts and medical practices are decided. Hubbard notes that science is not merely about discovering facts, it is also an enterprise that focuses on the making of facts. This process is not accomplished inside a bubble that rests outside a historical and cultural context. It is quite the opposite. As Hubbard explains:

One thing is clear: making facts is a social enterprise. Individuals cannot just go off by themselves and dream up facts. When people do that, and the rest of us do not agree to accept or share the facts they offer us, we consider them schizophrenic, crazy. If we do agree, either because their facts sufficiently resemble ours or because they have the power to force us to accept their facts as real and true—to make us see the emperor’s new clothes—then the new facts become part of our shared reality and their making, part of the fact-making enterprise (Hubbard 153).

The issue of who decides what is of scientific merit—and the social, political and cultural realities of why some things are chosen and others left out—are displayed specifically in the exploration of breast milk’s medicinal and overall health benefits, not for infants, but for adults. This is not to say that there are not pressing issues concerning infant centered breastfeeding. A few examples of these issues are questionable formula quality, workplace restrictions on breastfeeding parents, legal and social restrictions placed on public breastfeeding and the taboos associated with extended child breastfeeding. While these concerns are of great importance and feminist investigations and examinations of the subject are critical, an infant centered model of breastfeeding will not be the focus of this work. Instead, I branch out focusing my attention on the issues surrounding adult breast milk consumption. I also examine breast milk in a way that focuses on the body that produces it and not just the body that consumes it.

**Old Wise Tales: Giving Credit to Women Centered Healing**

In “Qualitative Analysis of Cancer Patients’ Experiences Using Donated Human Milk,” an article recently published in the Journal of Human Lactation, a group of researchers assessed whether cancer patients given human breast milk as part of their treatment experienced any
benefit. The patients—men and women in differing stages of cancer and therapy—were asked to evaluate their symptoms before and after beginning a breast milk regime. There was evidence from this study that patients did indeed find positive results from the addition of human milk to their routine. Side effects noted on a generally occurring basis were: reduction of chemo symptoms (nausea, diarrhea, fatigue), drop in PSA (Prostate-Specific Antigen) levels in men with prostate cancer, improved respiratory function, improved appearance, and fewer colds (Rough 211-219). While this study did not find any correlation between breast milk and overall survival nor an ability for breast milk to kill cancer cells, it does hold remarkable evidence of the overall health benefits for adults who are ill. Breast milk may not be a cure-all for cancer, but it can, at a minimum, improve the quality of life for those undergoing chemotherapy treatments.

Several news avenues, including the BBC, have in the last few years presented reports on a man named Howard Cohen. Cohen, then (2005) a fifty-nine-year-old American, had been drinking breast milk for four years to help fight his cancer. After being diagnosed with prostate cancer, Cohen, a doctor of theoretical physics, came across an article detailing work by a Swedish scientist that found evidence of a protein in breast milk that kills cancer in laboratory conditions. At first, Cohen received his milk from a family friend who was nursing a child and was also a cancer survivor. However, once she began to wean her child, Cohen had to look for additional sources. The Mothers’ Milk Bank, through a doctor’s prescription, became his new means of attaining the liquid. Though Cohen does not proclaim that breast milk will save his life, he is convinced it is helping. Refusing surgery, radiation or hormonal treatment, he instead chooses to rely solely on vitamins, minerals, and breast milk. “They will always be available to me if the mother’s milk doesn’t work forever and it comes to that,” Cohen states (bbc.com, “The Man Who Swears by Breast Milk”).
Though Cohen’s belief in the benefits of a breast milk regime to assist in his battle with cancer could very likely be repudiated by a skeptical scientific community, there is new research that shows he, as well as various others (especially women working as midwives and healers) throughout history, may have been on to something. In 1950, at Goteborg University in Sweden, Lars Hanson, an immunologist, discovered antibodies present in breast milk. According to Hanson’s research, the antibodies were derived from the immunities the lactating person had acquired over the course of their life (Rehmeyer, “Milk Therapy: Breast-milk Compounds Could Be a Tonic for Adult Ills”). While indeed key to an understanding of the beneficial properties of breast milk, this alone could not explain the resulting side effects of drinking the fluid.

According to the World Health Organization (WHO), 1.5 million children die from diarrhea every year. It is the second leading cause of death in children under five years of age, as well as the leading cause of malnutrition within the same age group (www.who.int). However, per Julie J. Rehmeyer in her article “Milk Therapy: Breast-Milk Compounds Could Be a Tonic for Adult Ills,” infants who breastfeed “get diarrhea half as often as infants who are fed formula.” The two most prevalent solids within breast milk are lactose and lipids. The third is a sugar known as oligosaccharides. Oligosaccharides use around 10% of the estimated 500 calories per day an average lactating woman needs in order to produce enough breast milk for an average infant (Kemsley, “Unraveling Breast Milk: Analytical Scrutiny Reveals How Complex Fluid Nourishes Infants and Protects Them from Disease”). Although much energy is devoted to the production of these sugars, infant bodies cannot metabolize the compounds. So why then would the body set aside such vast amounts of energy to the production of something which, at first glance, appears to have no beneficial metabolic properties?
The role of oligosaccharides, while clearly important to the health of the consumer due to the amount of energy concentrated in its production, is not based on nutritional value. Instead, as Carlito B. Lebrilla, a chemistry professor at University of California Davis, believes, they are responsible for coaxing certain beneficial microbes to settle within digestive tracts (Kemsley). As Chemical & Engineering News reported in its article “Unraveling Breast Milk: Analytical Scrutiny Reveals How Complex Fluid Nourishes Infants and Protects Them from Disease,” “the sugars in human breast milk, for example, appeal to certain strains of bacteria, called bifodobacteria, that can colonize the gut and appear to be important for the health of infants. Well-established colonies of bifodobacteria can prevent pathogens such as harmful strains of Escherichia coli from getting a foothold.” Basically, these sugars work as stealth decoys, making themselves appear to be a part of the body in order to trap and flush harmful pathogens that could otherwise settle within the digestive tract. While antibodies passed from provider to consumer come directly from pathogens the provider was exposed to during their lifetime, oligosaccharides provide protection from pathogens to which the provider has never been exposed. Rehmeyer explains this in simplified terms, “for a pathogen to infect a person via the digestive tract, it first has to latch on to the sugars that line the gut wall. Oligosaccharides have binding sites that are identical to the ones on the gut-wall sugars, so the pathogens attach to the oligosaccharides instead of to the lining of the gut. Once bound to oligosaccharides, pathogens travel harmlessly through the intestinal tract” (Kemsley). Scientists at UC Davis believe, similar to the recent trend of promoting certain yogurts that contain probiotic bacteria, feeding these specific sugars to adults could be helpful in treating some gastrointestinal diseases (Kemsley). Rehmeyer cites other ways oligosaccharides may be used in adults:

Oligosaccharides might augment elderly people’s weakened natural protection against pathogens. After people have taken strong antibiotics, the sugars could
help them recolonize their digestive tracks with beneficial bacteria. Foreign travelers or military personnel who expect to be exposed to unfamiliar pathogens could take oligosaccharides as a preventive measure (Rehmeyer).

Another positive of oligosaccharides is their ability to withstand permutations in bacteria. David Newburg of Massachusetts General Hospital in Charlestown is fully expecting oligosaccharides to become increasingly important when fighting certain pathogens in both children and adults, especially as bacteria begin to develop resistance to previously prescribed antibiotics. Newburg suggests that “bacteria can’t evolve a resistance to oligosaccharides because if they change in such a way that they no longer bind to the oligosaccharide, they also can’t bind to the cell wall to infect their targets” (Rehmeyer). The notion that a substance exists within the body that can be used to fight pathogens presents a promising outlook especially during a time of news reports filled with grave stories of antibiotic resistant germ strains. Even though it would seem that the primary function of these sugars is to draw away harmful pathogens from the body, the beneficial properties of oligosaccharides are not limited to just such bacterial feeding. As Chemical and Engineering News details, “the epithelial cells that line the intestine are decorated with glycans that mediate communication with the extracellular environment, facilitating cell-cell communication as well as binding to signaling agents” (Kemsley).¹⁶ Basically what this means is oligosaccharides not only work as decoys for harmful bacteria, they also help facilitate basic functional communication amongst cells. This may seem like more than ample information to spark further intense medical research into the properties of breast milk. However, there is still another avenue of research left to address in order to come to a full understanding of the possibilities of breast milk for adult medicinal purposes.

¹⁶ The term "epithelium" refers to cells that line hollow organs and glands and those that make up the outer surface of the body.
A Killer Among Us: When Breast Milk Attacks

In January 1999, a small research facility in Sweden released results showing the ability of breast milk to kill cancer cells (Tichenor, “Mother's Milk Cures Cancer? Researchers Deliberate Over Whether to Publish”). Quite a remarkable find, so remarkable that in June of the same year DISCOVER magazine published an article titled “Got Cancer Killers? Breast-feeding protects babies from cancer, but no one knows quite how. So when biologists in Catharina Svanborg’s lab saw mothers’ milk kill cancer cells, they knew they were onto something big” (Radetsky). It is one of those statements which at first glance, cause many to question its validity. How could breast milk which has so often been defined in passive terminology, be a lethal enemy toward cancer cells?

In December of the following year, researcher Catherin Svanborg of Lund University in Sweden was taken aback when a student working in her lab requested her presence. The student had been working on “the effects of various protein extracts of human breast milk on virally infected tissue cultures and was making good progress toward isolating factors that activated the immune response toward the retrovirus” (Tichenor). Svanborg was hesitant to follow the student, expecting nothing out of the ordinary in his quandary. What she saw took both of them, and eventually the entire medical community, by surprise. Linda Tichenor of the Department of Biological Sciences of the University of Arkansas, Fayetteville describes that day and the results discovered in her essay “Mother’s Milk Cures Cancer? Researchers Deliberate Over Whether to Publish” (Tichenor). Tichenor explains that while the student’s initial research centered around the ways human milk fights certain viruses, his results showed something completely unrelated to his original inquiry.

What he observed—the cancer cells “committing suicide”—wasn’t typical because normally they reproduce forever without dying, a kind of cell-line
immortality. That immortality makes cancer cells a good medium for tissue culture. Normal human cells commit suicide every day. The process of cellular suicide is called apoptosis. What the graduate student found was a protein in the milk that induced the cultured cells to die (Tichenor).

To expound further on apoptosis, DISCOVER magazine describes the process:

All healthy cells have a built-in mechanism for suicide; it’s switched on by signals received from their environment. (In contrast, cancer cells fail to respond to the environmental signals that regulate cell death. In cancer cells, the apoptosis machinery is short-circuited, allowing the cells to grow unchecked. The result can be the chaotic mass of cells called a tumor.) Once activated, the mechanism for programmed cell death shrinks the cell’s nucleus, decreases the cells’ fluid, or cytoplasm, and snips up the cell’s DNA. The cell literally falls apart, fragmenting into its constituent parts (Radetsky).

Once the team discovered the cancer cells going through the process of apoptosis, they began a search to discover what exactly in the fluid was making them do so. The culprit, they found, was a protein called alpha-lactalbumin (Rehmeyer). Alpha-lactalbumin may not be that remarkable on its own, but when introduced to the acid lining the human intestinal tract it becomes a deadly weapon against cancer cells.

Alpha-lactalbumin is a specific type of protein. DISCOVER magazine describes proteins as:

Proteins roll off cells’ assembly lines, the ribosomes, as long chains of links called amino acids. Amino acids come in 20 different varieties; proteins typically contain between 100 and a few thousand linked in different sequences. The links function like an alphabet, spelling out the form and function of the protein. Just as the 26 letters in the English alphabet can form a virtually infinite collection of words, the 20 amino acids combine to spell a mind-boggling array of proteins. The human body contains some 50,000 different kinds of proteins (Radetsky).

Proteins are useless in their one-dimensional chain state. In order to perform their specific function, proteins must bend and twist into three-dimensional shapes. Alpha-lactalbumin alter their shape in order to perform various functions. “In its completely folded state it helps produce lactose and nourishes babies, but when it’s partially unfolded, it forces cancer cells to burst open
and die” (Radetsky). This protein is unfolded by the acid present in the human gut. Svanborg named the acid impacted protein HAMLET which stands for Human Alpha-Lactalbumin Made Lethal to Tumors (Rehmeyer). Svanborg has made great leaps in her laboratory research. Her department found that HAMLET destroyed forty different types of tumor cells in lab dishes. It was also discovered that HAMLET also reduces warts in humans. Svanborg is currently undertaking clinical trials with bladder cancer patients. In 2006 she claimed that, “her results ‘look very good’ and that the treatment produced no side effects” (Rehmeyer).

Not only does this discovery provide a new possible way to combat cancer, it also rearranges the way science has thought about the function of cells. According to the old standards of scientific thought, “one DNA sequence produces one amino acid sequence that produces a particular structure that performs one function” (Radetsky). However, this tiny research facility in Sweden led by a woman scientist has helped turn that notion around by showing ways in which one protein, depending on its environment and shape, can perform more than one function. Svanborg states “The accepted scientific rule has been, ‘one structure, one function,’ but having multiple functions would be a very energy-saving, economical way for a protein to operate” (Radetsky).

**Breast Milk Banks: Are They Worth The Effort?**

Human breast milk has great potentiality and possibility in assisting adults with a number of diseases and illnesses. Why then does so little of the general public know about these findings? Why is this information kept to the confines of medical journals and scientific magazines? When it comes time for various cancer awareness programs that unite together over their chosen colored ribbon, why are the observations on breast milk therapy not part of that discussion? Why is it perfectly acceptable, and even encouraged, for adults to consume other
species milk (cows, goats) but the consumption of human milk is seen as unpalatable, if not disgusting and perverted?

According to the Human Milk Banking Association of North America (HMBANA), which sets standards for milk donation, banking, and reception throughout the United States and Canada, there are presently only eleven milk bank sites with one in the process of development (hmbana.org). These banks dispense the milk to patients with prescriptions from their doctors. Premature infants are the first in line with other infants (those having undergone surgery, those with compromised immune systems, and those with digestive difficulties amongst other conditions) being next to receive the substance. Adults, even those suffering from disease or recovering from various surgeries, move to the end of the line. This may seem like a reasonable way of distributing such a scarce resource. However, the issue is that breast milk in these banks is so scarce that once it has been disbursed through the various hierarchical conditions for reception, there is rarely enough for adult consumption regardless of reason requested.

With the more recent influx of research leading toward new possibilities of medicinal breast milk, why are there so few resources for collecting, storing, and dispensing the liquid? One factor to examine is the cost and time it takes to properly prepare, store, and dispense breast milk. In 1985, HMBANA was established to develop standards in breast feeding. Five years later these standards were published and are now considered the only acceptable way in which to accept donated milk (hmbana.org). One of the key processes in conditioning breast milk so that it meets the requirements set forth by HMBANA is pasteurization. The HMBANA website describes this process, “Milk is gently heated in a shaking water bath using the Holder Method of pasteurization. Pasteurization eliminates bacteria while retaining the majority of the milk's beneficial components” (hmbana.org). Samples from the pasteurized milk are then tested for
bacterial growth. Any evidence of contaminated milk will result in that milk being discarded. After the milk has been certified by the testing laboratory, it is then frozen, tested once more, it is disease and germ free, could it not also be destroying some of the invaluable properties of the fluid?

It is known that pasteurization not only kills germs and viruses, it also kills white blood cells, damages cellular walls, and lessens some of the nutritional value. These costs are viewed by the banks as worthwhile in order to keep the possible spread of disease down. If, as was discussed earlier, certain proteins function differently depending on their environment and shape, could this process keep those proteins from operating correctly? In terms of adult consumption, especially for those undergoing cancer treatment, would pasteurization be worth the effort? It is quite possible that the process of pasteurization may damage certain properties of breast milk to the extent that they are no longer as useful for adult consumption. Why are wet nurses not seen as a viable solution to the lacking supply of breast milk for both infants and adults? While there is a need to monitor that which is consumed, especially by those who are already ill, for certain germs and diseases, would our fear of other people’s bodily fluids make a more common collection and distribution of breast milk not worth the effort? It is quite apparent that these germaphobic and narrowly constructed images of acceptable bodily boundary crossings are restricting our ability to expand the capabilities of medical practices.

**Damseled Bodies: What is Science’s Role in All This?**

One plausible aspect of why this silence occurs is the terminology associated with breast milk and the breasts. In dominate U.S. cultural dialogue, it is impossible to separate breast milk from the breast. As such, the qualities typically associated with the breasts, and for that matter the female body, are applied to the fluid that is produced there. Breast milk is persistently
discussed in direct correlation with the female form. As Judith Lorber points out in her essay, “Believing Is Seeing: Biology as Ideology:”

Neither sex nor gender are pure categories. Combinations of incongruous genes, genitalia, and hormonal input are ignored in sex categorization, just as combinations of incongruous physiology, identity, sexuality, appearance, and behavior are ignored in the social construction of gender statuses. Menstruation, lactation, and gestation do not demarcate women from men…Some women breast-feed some of the time, but some men lactate. Menstruation, lactation, and gestation are individual experiences of womanhood, but not determinants of the social category “woman” or even “female” (Lorber 15).

This is not to suggest that there is no difference between, amongst, and within bodies. Lived bodies are constituted daily from birth to death, and that lived experience cannot be ignored even by the most theoretical analysis. As Iris Marion Young details in her article “Lived Body vs. Gender,” “the lived body is a unified idea of a physical body acting and experiencing in a specific sociocultural context; it is body-in-situation” (16). Young continues:

Her specific body lives in a specific context—crowded by other people, anchored to the earth by gravity, surrounded by buildings and streets with a unique history, hearing particular languages, having food and shelter available, or not, as a result of culturally specific social processes that make specific requirements on her to access them. All these concrete material relations of a person’s bodily existence and her physical and social environment constitute her facticity. (Young 16)

However, it is not the acknowledgment of lived bodies’ differences that becomes problematic within discourses surrounding breast milk and those bodies that produce it. It is rather the tightly developed, limited constructions that prohibit breasts and therefore breast milk from the social fluidity that they need in order to move from its status as taboo. It is only through greater social fluidity that the rigid division between public and private, especially concerning women's bodies, will be broken.

The female form is viewed as passive, as a receptacle, always making space for that which should fill it—a penis, a fetus, breast milk. In the collection, The Gender Lens: Gendering
Bodies, the authors state “female bodies have been thought of and treated as vessels or containers” (Crawley 9). In “Throwing Like A Girl,” Iris Marion Young notes the ways in which female bodies are distanced from their own agency: “the modalities of feminine bodily existence have their root in the fact that feminine existence experiences the body as a mere thing—a fragile thing, which must be picked up and coaxed into movement, a thing that exists as looked at and acted upon” (39). Breast milk, within existing frameworks, is regarded as only produced by women and other feminized lactating subjects and therefore takes on the properties of the passive female.

Unlike the female body that functions simply to make space for that which is not herself, breast milk is conceptualized as waiting to be consumed. Its primary function is that of nutrition. Its only purpose is to become the food substance of one outside the lactating body and then promptly used for its worth and flushed as waste. If society were to engage breast milk as anything more than a passive food source, then, by association, the female breasts as well as the female body, would have to be reevaluated in popular thought and major systems of ordering our ideas about existence. Emily Martin, in her essay, “The Egg and the Sperm: How Science Has Constructed a Romance Based on Stereotypical Male-Female Roles,” describes the way science, in its language and value system, has given sexed bodies characteristics that often mirror expected gender norms. Martin details the ways in which science, mainly through text books, presents cells and organs specific to either male or female bodies in either a masculine and feminine manner. Adding to the notion that women’s bodies are passive, eggs are often depicted as being fully formed at birth and merely lying in wait to either die inside the confines of a withering ovary, be discarded as excessive waste through menstruation or be penetrated and
dominated by conquering sperm resulting in fertilization. Even in the descriptions within scientific and medical texts on the movements of eggs and sperms gender traits are applied:

Take the egg and the sperm. It is remarkable how “femininely” the egg behaves and how “masculinely” the sperm. The egg is seen as large and passive. It does not move or journey, but passively “is transported,” “is swept,” or even “drifts” along the fallopian tube. In utter contrast, sperm are small, “streamlined,” and invariably active. They “deliver” their genes to the egg, “activate the developmental programming of the egg,” and have a “velocity” that is often remarked upon. Their tails are “strong” and efficiently powered. Together with the forces of ejaculation, they can “propel the semen into the deepest recesses of the vagina.” For this they need “energy,” “fuel,” so that with a “whiplike motion and strong lurches” they can burrow through the egg coat” and “penetrate” it (Martin 480).

Not only does this wording set up sperm as the dominant and active, it portrays women’s bodies as vacant, lying in wait for penetration and as a terrifying abyss that must be stormed into and conquered.

Sara L. Crawley, Lara J. Foley, and Constance L. Shehan summarize this “one common notion in many Western cultures regardless of the specific of dress and action of the place or time period is the expectation of males as aggressive and females as passive and receptive” (Crawley 9). Suggesting that breast milk is aggressive and voracious, actively attacking that which it deems harmful, calls into question the polarizing binary gender categories socially constructed for men and women. Emily Martin further comments on the ways in which showing women’s bodies as being active agents often times may not see the celebratory language associated with male bodies. Until recently, it was thought that sperm with fierce fighting tails swam courageously through the damp confines of the vagina where the most resilient met and then forcibly, through physical brute or by chemically breaking it down, penetrated the damsel egg just waiting to be rescued from her assured fate as menstruation. However, it is now known that instead of forceful propulsion forward, the tail of the sperm just moves the head back and
forth—an impressive wiggle if you will. During the 1980s, researchers at John Hopkins found during their experiments, that sperm were best not at penetrating and thrusting forward, but at escaping cells. Therefore, it is necessary that sperm, desperate to run away, be captured and held to the egg wall until fertilization is complete. The side-to-side movement of the sperm’s tail is so weak it cannot break even one of the chemical bonds that cause it to stick to the egg. The sperm then releases an enzyme that eventually allows it inside the cell wall (Martin 492-493). Given this newly learned information, one may think that the language used to describe fertilization would have changed. However, these researchers continued to use the same active wording—penetrating, harpooning—when describing sperm but now only implied that these actions were weaker than previously thought (Martin 493). Continuing research has shown that unlike the model wherein one agent acts more than the other, the egg and sperm actually join together in an egalitarian partnership where both must be active in their own right. With this added information, we still do not see a substantial change in descriptions of fertilization in general scientific publishing and in medical textbooks. High school and college anatomy and biology courses around the country still perpetuate the idea that the egg is docile. The egg is described as lacking, with an urgent need of the penetrating sperm in order to keep is from an aqueous death during menstruation, and become whole and valuable as that of a forming embryo.

This type of language within the scientific community is dangerous. Not only does it limit the work of researchers by mass-producing redundant, it also reaffirms the false belief that gender roles and values are “natural” and have little to no basis in social construction. Science and medicine are thought of as being pure and untainted by biases. They present information as facts, not opinions. However, as has been shown, these departments do have their own biases. Since they are held in such high regard within our culture, science and medicine have an
absolutely critical responsibility to both acknowledge and challenge their own viewpoints especially when it comes to that of the human body. It is often difficult to convince those outside of a feminist perspective that all gender roles are socially constructed. To have science and medicine recreating these norms and presenting them as natural and biological law keeps the entirety of women’s bodies in a role of the lesser being. This is vitally important not just for the production of accurate scientific and medical information, but as a way to resist cultural ideologies that insist on gender roles being inherent and based on genetic predispositions. These ideologies not only form the basis for acceptable gender roles but also become the foundation for the values assigned to the category man and woman. Suggesting that women’s bodies are passive and lying in wait for penetration or salvation shifts public perception not only of the specific body parts discussed but of the entirety of women’s bodies allowing them to be seen as always open and in need of a superior man.
Chapter Four

Fluid Flesh: Looking Toward a Queer Reconfiguration of Bodily Limitations

“I listened to her voice and felt my anger melt to grief. It was that same old tone I’d heard before, choked with shame and desperation. She had been doing these things—no, she couldn’t say what exactly—but there was no one she could talk to about it. She had tried to stop herself, stop the fantasies, masturbation, stray thoughts. But it didn’t go away, either her fear or her desire, and finally she had tried to talk to another woman she thought she was close to, someone she had thought would understand. That woman had stared at her, hesitated and then told her she was sick. “Sick,” she said in a very small voice.”

Dorothy Allison, “Public Silence, Private Terror”

“Our constant repetition (Or their presence as ongoing subtexts) reveals more about the able-bodied culture doing the asking than about the bodies being interrogated. The culture asking such questions assumes in advance that we all agree: able-bodied identities, able-bodied perspectives are preferable and what we all, collectively, are aiming for. A system of compulsory able-bodiedness repeatedly demands that people with disabilities embody for others an affirmative answer to the unspoken question, ‘Yes, but in the end, wouldn’t you rather be more like me?’”

Robert McRuer, Crip Theory: Cultural Signs of Queerness and Disability

******

In the previous chapters, I address the physicality of breasts, the potential production of liquids from breasts, the phallocentric cultural means to control them and the ways in which acts as such efficient sites of resistance. In this chapter, I move from breasts as a trope to explore fluidity towards an overarching understanding of fluid bodies. In doing this, I not only seek to find paths of limitations for breasted beings, but also look toward a future wherein bodily limitations are no longer so tightly constructed or compulsory. I aim toward a future where language surrounding not just lactation and breasts is questioned and expanded to reflect feminist insights but language and discourse surrounding the entirety of bodies. I move from breasted existence to breasted resistance to the possibilities of living a breasted resistance existence. Such
an existence is not limited to those who identify as women or have body parts that they label as breasts, but breasted resistance existence can be applied to all bodies that refuse to adhere to phallocentric. Here I will move from merely examining the ways in which women’s bodies are constrained and resist those constraints placed upon them, but also branch out the ways in which we think of greater corporeal boundaries by exploring theoretical avenues that lie outside the majority of feminist texts and academic production. Drawing upon key insights from S/M and Crip Theory, S/M as a feminist theory and avenue of acceptable discussion, can trace its taboos back to the 1980s during the supposed “Sex Wars.”17 Crip Theory, or queer disabilities theory, is devalued by a large part of feminist theory as evidenced by the relative lack of articles and literature produced on the subject. Crip Theory is also marginalized within disability studies as only a small fraction of theorists use this approach in their work.

It is critical that these courses of study are at least generally defined before delving into their potentiality for breaking down bodily barriers. Nikki Sullivan in her collection *A Critical Introduction to Queer Theory*, provides a basic overview of what sadomasochism is:

This term has been used to cover a range of practices some of which are not explicitly sexual—although, of course, in the psychoanalytic imaginary all pleasure is associated with sexual pleasure. Sadomasochism can include spanking, biting, bruising, slapping, burning, cutting, fantasies, various forms of restraint or bondage, domination and submission, discipline, the use of sex toys, uniforms, and so on. (Sullivan 152-153)

Though absent from mainstream culture's perception of S/M (and also from feminist critiques of it), responsible Sadomasochism is based on three tenets: safe, sane and consensual. Though many of the acts may seem violent and cruel to those outside the S/M relationship, it is critical to note that these relationships are built on a framework of consent and trust. Cruelty, force, and

17 Here S/M does not mean just sadomasochist/masochist relationships. I use S/M to stand for a wide variety of specific relationships that highlight and challenge traditional systems of power, domination and submission. This could include but is not limited to: S/M, bondage and discipline, butch/femme, and leather.
coercion are not characteristics of responsible sadomasochist relations. In fact, S/M relations often possess a keen knowledge of power roles and can serve to disrupt and open up questions about these roles—perhaps even subvert them. As Patricia L. Duncan points out in her essay, “Identity, Power, and Difference: Negotiating Conflict in an S/M Dyke Community,” which examines how women of color negotiate power within a S/M framework:

The women I interviewed were much more critical of conceptualization of power and difference than MacKinnon would suggest. The respondents were very aware of s/m as play. Although they recognized the way power differences are based in reality and in our culture, they also made it very clear to me that power, in their s/m practices, is a dynamic process, exchanged between two or more partners within the parameters of a scene. It is not the failure to recognize oppression and structural power differences that has led these women into s/m culture and practices but the constant and everyday reminders of their own positions within a system that often ignores, marginalizes, and exploits them. Many of the respondents choose to explore the concept of difference and the dynamics of power, and attempt to transform these dynamics in their own lives. (Duncan 102)

From this passage, it is clear that most of those within S/M communities are not only hyper aware of structures of power, they often times use that understanding as a way to find personal empowerment through their experiences within S/M. This is not just achieved by taking the role of the dominant and finding power in that position. It can also be achieved by taking the role of the submissive and making a conscious choice to surrender control to another person. This can be especially true if one is in a position where control and power are taken from them without their consent based on their gender, sex, race, sexuality, ability or any other category.

In S/M culture, there are roles played out by the participants. These roles can be described in a number of ways but often are centered on who is in control of the actions taking place (dominant, top) and who is following (submissive, bottom). In this chapter, I sketch out the ways in which dominance, in a S/M framework, does not always active and submissive does not
equal passive, though in most discourse this seems to be the case. In fact, both roles are active.

To be submissive in a certain context is a conscious act and a thought out choice. For example, Amber Hollibaugh in her collection, *My Dangerous Desires: A Queer Girl Dreaming Her Way Home*, describes the confusion associated with the role of the submissive:

> It’s hard to talk about things like giving up power without it sounding passive. I am willing to give myself over to a woman equal to her amount of wanting. I expose myself for her to appreciate. I open myself out for her to see what’s possible for her to love in me that’s female. I want her to respond to it. I may not be doing something active with my body, but more eroticizing her need that I feel in her hands as she touches me. (Hollibaugh 75)

In this passage, Hollibaugh is expressing how the ways we think of not being passive—by being physically active—are false and misleading. Instead, and especially within feminist theory, we should have a more expansive understanding of active/passive and dominant/submissive. One mode of doing this will be to further examine the role of the submissive and look at the complex, and often times overlooked, power they hold in S/M relationships. This fact stands as a way to challenge current norms about gender, sexuality and the body. Not only does this defiance of traditional definitions of domination and submission challenge our ways of thinking, but the roles themselves do as well.

In her astute overview, Sullivan begins to venture into the fluidity of roles within S/M culture. She writes, “one response would be that in an S/M scene power is not connected to privilege. What informs this claim is, first, the belief that S/M roles are not the expression of a true self, and, second, that they are reversible or at least not set in stone as social roles seem to be” (161). While the fluidity of roles within the culture is accurate, Sullivan presents a slightly oversimplified definition. Yes, the roles are fluid and are not mandated to certain bodies; however, not all people move back and forth or exist in-between these roles. Not everyone is a “switch.” Some people hold certain roles firmly and never move beyond them. Given this, we
can still look to S/M roles as models for resistance to normativity by allowing bodies to
determine where they fall instead of handing down firm, unwavering qualifications. An example
of this ability to self define bodily constructs and images is the use of dildos or other sexual
prosthetics. C. Jacob Hale describes this act in his essay “Leatherdyke Boys and Their Daddies:
How to Have Sex Without Women or Men:”

Through leatherdyke SM practice, I was able disrupt the dominant cultural
meanings of my genitals and to reconfigure those meanings. There was already
precedence for such deterritorialization and reterritorialization in the leatherdyke
communities in which I participated. SM practices that decouple genital sexuality
from bodily pleasures provide the backdrop for such phenomena of remapping.
One such phenomenon is that inanimate objects—dildoes—sometimes take on
some of the phenomenological characteristics of erogenous body parts. So, when
Powersurge defined a woman as someone who could slam her dick into a drawer
without hurting it, a common response among some butch leatherdykes and some
ftms was to say that it sure would hurt if their dicks got slammed into a drawer; a
dildo may not be a dick only in the conception, it may be a dick
phenomenologically as well. (Hale 66)

Basically, what Hale is saying here is that within an S/M framework, not only are roles
able to be defined but corporeal boundaries are as well. While a dildo may just be a sex
toy to some, for others it becomes a part of themselves. They may not wear such
appendages at all times, or even most of the time, but they take on a value and definition
that is directly connected to the person’s fleshted body. Dildos and other devices may
begin to act more as a prosthetic—becoming a central and vital part of one’s bodily
existence—and take on significance as a connected part of the body.

Crip Theory is vital in this understanding of expanded corporeal boundaries as it rescripts
our notions of proper bodies and bodily limitations. Crip Theory can be summarized rather
briefly as the intersection of Disabilities Studies and Queer Studies. In *Crip Theory: Cultural
Signs of Queerness and Disability*, Robert McReur explains:
For LGBT communities and for people with disabilities, such subordination in a contemporary context that supposedly values diversity, is often as good as it gets…Queering disability studies or claiming disability itself in and around Queer theory, however, helps create critically disabled spaces overlapping with the critically queer spaces that activists and scholars have shaped during recent decades, in which we can identify and challenge the ongoing consolidation of heterosexual, able-bodied hegemony. (McRuer 19)

Basically Crips Studies looks at disability through a Queer lens while at the same time looking at Queer bodies through a disabilities lens. Instead of making excuses for lived bodies that do not fit the limitations of the norm, Crip theory unapologetically demands space for these bodies. It does not call for bodies to try and fit a mold set forth by heterophallic and able-bodied culture. Crip theory moves away from the compulsion to push bodies into perfection by acknowledging the fictiveness of set corporeal boundaries and defying it through the advocacy of radical disability theory. In basic terms, if Queer is the “fuck you normativity” of sexuality and gender, Crip Theory proposes something similar with regard to ability.

Crip theory states that just like heterosexuality, able-bodiedness is compulsory. Not only are both heterosexuality and able-bodiedness compulsory or repetitive, they are also fictive and thus doomed to fail. Though we may set up systems which highlight, honor and privilege bodies which we declare able, no body ever fully achieves this status. Adapting ideas set forth by and quoting Judith Butler in *Gender Trouble*, McRuer substitutes (in brackets) able-bodiedness for sexuality and gender:

[Able-bodiedness] offers normative…positions that are intrinsically impossible to embody, and the persistent failure to identify fully and without incoherence with these positions reveals [able-bodiedness] itself not only as a compulsory law, but as an inevitable comedy. Indeed, I would offer this insight into [able-bodied identity] as both a compulsory system and an intrinsic comedy, a constant parody of itself, as an alternative [disabled] perspective. (McRuer 10)
McRuer goes on to use Butler’s theories on gender and sexuality with the term “ability trouble” (McRuer 10). It is the fact that no body can reach true able-bodiedness that makes those with apparent disabilities so threatening to dominant frameworks of bodies and sexualities. Not only do those labeled disable defy cultural understandings of acceptable bodily boundaries, they also serve as visual reminders that no one can achieve perfect able-bodiedness. Able-bodiedness, though it is compulsory and constructed as the natural, superior mode of being, is merely an act of failure. Able-bodiedness, therefore, always entails a certain amount of failure. Given this, it is a wise progressive move to begin to view failure not in a negative sense, but in a positive sense. Once we begin to understand failure in this way, we can them begin to see the ways in which we are all connected through this lack of total adherence to norms.

“Who Won?”: The History of the “Sex Wars”

On April 24, 1982, over eight hundred people made their way inside Barnard College in order to attend a conference on sexuality. To enter, the participants had to pass a group of protestors distributing leaflets condemning not only the conference, but also the presenters and those in attendance. Several of these condemnations were nothing more than attacks on individual's sexual activities. One might assume that the protestors consisted of right-wing fanatics or religious fundamentalists. It may not cross one's mind that they were, in fact, feminist scholars/activists protesting feminist scholars/activists. This split in feminist debate would eventually be given the title “Sex Wars.” The split, as it is over simplified at least, was between anti-pornography or anti-sex feminists and pro-pornography or pro-sex feminists. The Barnard Conference is a critical moment in feminist history. Not only did this apparent compulsive need

---

18 This is of course a broad generalization. By no means were these camps drawn down such simplistic lines nor completely segregated. Those labeled pro-pornography were not necessarily advocates of all pornography. Most realized the problems associated with much, if not the majority, of mainstream pornography. It is also false to accuse those labeled anti-pornography as being anti-sex. While there are those that would seem to be more conservative in their approaches toward sexuality, it does not mean that they were completely against all form of sex.
to pick a side create a deep cleft within the feminist community, it costs many of those in
attendance careers, friends, and future opportunities (Vance xvi-xxxv).

In 2011, we are reportedly well past these so called Sex Wars. The line once drawn in
feminist debate is supposedly now shattered. But how far forward have we moved? Are we still
left with the residuals of the tension displayed at Barnard? Have those sexual taboos declared by
the protestors outside the conference been fully removed of the demonized connotations
associated with them? Or as Dorothy Allison put it in her essay “A Question of Class,” “The Sex
Wars are over, I've been told, and it always makes me want to ask who won” (Allison 97). I
argue that, no, the tension surrounding privileged sexualities and their demonized counterparts
within feminist debate from the 1980s still lingers. This lack of in-depth, feminist analysis on
sexualities and bodies well outside the boundaries of mainstream acceptability, not only denies
certain groups their own desires, pleasures and identities, but also reinforces bodily limitations
and compulsory expectations set by hegemonic, phallocentric norms.

**Embracing Kink: Exploring S/M as a Theoretical Tool**

We are beginning to see a shift in mainstream sexual mentality. Sex stores, or as they are
usually called, novelty stores, often found in malls and well-lit, respectable shopping centers,
now readily distribute pink feather ticklers, fluffy fur handcuffs, and faux leather whips in an
assortment of lengths and colors. This transition away from sterile (read “vanilla”) public fronts
of proper sex, seems like a progression away from the sentiments held by the anti-pornography
feminists of the 1980s, especially the attacks directed against sadomasochism. However, I argue
that this watering down of S/M into mainstream consciousness without a critical evaluation of
S/M as it relates to systems of power and desire, does little to reimagine the limits of sexuality
and the body. As Gayle Rubin writes, “A radical theory of sex must identify, describe, explain,
and denounce erotic injustice and sexual oppression. Such a theory needs refined conceptual tools which can grasp the subject and hold it in view” (Vance 275). Rubin elaborates further, “Like gender, sexuality is political. It is organized into systems of power, which reward and encourage some individuals and activities, while punishing and suppressing others” (Vance 309). It is not only the movement of consensual taboo sexual practices into mainstream consciousness that is needed for true sexual revolution, but alongside it a deeper understanding of these practices as they relate to power, desire and the body. It is only in this dual front that we will finally be at a place where we can begin to reconstruct limitations placed on the body and move away from compulsory phallo/reprocentric sexuality.

Nowhere is this critique more needed than within feminism. While recently there have been many scholars discussing Queer sexuality, and more specifically S/M, it still remains on the peripheral, mostly peppered in here and there to describe that which resides outside normative, acceptable sex. A full and in-depth analysis of S/M as a means to challenge hegemonic norms has yet to make it into much of popular feminist discourse.¹⁹ This lack of discussion presents its own set of problems especially when mainstream society has already begun to bring the taboo into itself. Carole Vance writes in the introduction to Pleasure and Danger, “To encourage a mindless expansion of sexual options, without critiquing the sexist structure in which sexuality is enacted and reducing the dangers women face, only exposes women to more danger” (Vance xvii). To this end, it is critical that feminism begin to create a safe space for sexuality—in its myriad forms—to be openly and deeply discussed and examined.

As Rubin instructed, it is first and foremost key that oppressed sexuality be described and explained. This is not to bring it under a voyeuristic microscope nor to make apologies or

¹⁹ This is to say, popular within academic feminist communities. Not that feminism as a theory or movement is popular.
comparisons. Instead, it is needed to lay the groundwork for further expansion into rethinking the limits of sexuality and the body. S/M, as it is seen and practiced by those within the culture and not in the toned down version pawned off in softcore Showtime porn, is still largely misunderstood. For example, if we do not define what S/M is and how the power plays within it function, it could easily be taken out of context as a means to further control women's bodies through violence and restraint. As has already been stated, in S/M culture there are particular roles played out by the participants: dominant/top or submissive/bottom. Though feminism is accustomed to thinking of dominance and submission as negative results of a privileged/oppressed dichotomous society, in a S/M framework, power is not based on the same set of assumptions. Unlike much of feminist discourse which use the terms as a means to outline violent control and oppression, in S/M dominance does not equal active and submission does not equal passive.

In 1980, Pat Califia published a collection of instructional and informational essays titled, *Sapphistry: The Book of Lesbian Sexuality*. This work was an attempt to broaden women’s understandings of their bodies and sexuality, especially if they were lesbian identified. Califia describes within the work how there was such a lack of pertinent information related to sexuality that centered around women, not to mention Queer women. Califia gives a detailed account of what S/M is and how it plays out in reality:

Sadomasochism is defined here as an erotic ritual that involves acting out fantasies in which one partner is sexually dominant and the other partner is sexually submissive. This ritual is preceded by a negotiation process that enables participants to select their roles, state their limits, and specify some of the activities which will take place. The basic dynamic of sexual sadomasochism is an eroticized, consensual exchange of power—not violence or pain. (Califia 118)

This passage is not to suggest that all S/M relationships are merely defined by their sexual aspects or that they are only acted out in the “bedroom” or “playroom.” Many of these
relationships maintain their S/M roles throughout their daily lives or they may only apply them to certain instances which are not necessarily sexual. Not only are the roles fluid, but the way in which and the times that they are engaged in are also. Califia’s words are used here as a way to highlight that S/M is about power—it’s acknowledgment of it and consensual use and exchange of it.

Looking at the role of the submissive inside a S/M framework allows us to explore the ways in which power relations and exchanges are usually more acknowledged within these relationships. The power they (the submissive) hold in S/M relations is complex and oftentimes overlooked. It could be argued, and in fact I do argue, that the submissive is the one with the true control and power within a dominant/submissive frame. This is true because the entirety of a S/M relationship is based on consent. That consent is controlled not by the dominant, but by the submissive in allowing the relationship to take place. This fact stands as a way to challenge current norms about gender, sexuality and the body. Not only does this defiance of traditional definitions of domination and submission challenge our ways of thinking about exchanges of power, but the roles themselves do as well.

When examining the role of the submissive or bottom in a S/M relationship, we can once more look to Califia:

The dominant role in S/M sex is not based on economic control or physical constraint. The only power a top has is temporarily given to her by the bottom. Thus, that power is always limited by the needs and capabilities of the bottom. The dominant role can be expressed by using feminine costume and mannerisms as easily as it can be expressed using a masculine mode of expression; or a top can be androgynous. The same holds true for the submissive. The bottom need not be self-destructive, nor is she genuinely helpless. She is likely to be very aware of her own sexual fantasies and preferences and exceptionally good at getting what she wants. The power she loans to her sexual partner is not permanently lost, nor does it inhibit her ability to maneuver and succeed in the rest of her life. Both partners benefit from and S/M exchange because both of them obtain sexual pleasure from it. (Califia 119)
Again, here Califia is narrowly defining S/M to the sexual. However, we can use this model as a way to look at S/M as a lifestyle or an identity that reaches far outside the boundaries of what we typically think of as sexual. Power, in this model, is the key concept. In order for people to engage in responsible S/M relationships, they must be keenly aware of how power, dominance and submission play out not only within the confines of their lives but throughout mainstream culture as a whole. Califia notes that the power given over by the submissive to the dominant is only temporary. This may or may not be true. A better explanation of the power exchange would be that it is constant but not necessarily temporary. What I mean by this is that even though it is not repeatedly spoken, the submissive’s consent is always the crux of power within the relationship and must be reaffirmed constantly in order for the relationship to continue. While it may appear to those outside this framework that the dominant is the one with power because it is the dominant that is typically associated with being the one doing the action, in reality, it is the submissive that sets the limitations and expectations for the entirety of the relationship.

Of course redefining one’s body within such a context does have its limitations. Even though individuals may resist structural norms by self defining their bodies, no one can ever fully escape the social constructs placed on bodies. Hale explains these limitations in more detail:

Yet some ftm’s who used to be leatherdykes may have found, as I did, that there were limits to our abilities to reconstitute the sexualized social spaces of our bodies. Some of these limits are constituted personally in that we cannot ourselves reconfigure the social meanings of certain bodily zones, and others may be externally imposed in that we cannot manage to communicate our attempts at idiosyncratic rechartings in ways that others are able and willing to read. Leatherdyke practice may help us discern those aspects of our embodied

---

20 I do not mean to suggest that this confirmation is always verbal or obvious, though it very well may be (in the form of a written contract, for example). It is not necessarily a question that is asked by the dominant to the submissive though it very well may be. However, even tacit compliance, or not ending the relationship, specifically within a S/M relationships can be a form of consent giving once the verbal exchanges which set up the rules and boundaries of the relationship have been established.
subjectivities that are susceptible to our own agency, and those parts of our bodies that we must change if we are to live in our own skin. (Hale 66)

What Hale is pointing out here is that though redefinitions of bodies are not limitless and may not necessarily be understood, respected or recognized by larger society, the ability to reconfigure one’s own body has transformative and empowering potential as a way to enact one’s own agency within a restrictive system. The knowledge that self definition may be ignored or rejected by mainstream culture, shows how important that it is to not only expand possibilities of corporeal definitions, but also to still critically investigate categories that are placed on bodies through a feminist lens.

**Defining Disability: What is Normal?**

Previously I asserted that the category able-bodied is a work of fiction that is compulsive yet subject to constant failure. No one is able-bodied in the way we construct it. We are all at certain times lacking in at least some of the attributes that phallocentric norms place on bodies it deems able. As such, disability could also be said to be fictive in its construction. Disability as a category tends to ignore specific difference and lived experience by totalizing and universalizing not only that which is considered “normal,” but also that which constitutes ability. Given this, it is still advantageous to explore disability as a category of analysis in feminist thought. If we were to move completely past analyzing disability due to its fictions, we would further ignore the actualities of people’s lives. Disability, while socially constructed, is still a category that people have to deal with throughout their existence. This present itself as especially troubling when the world in which we live is set up to accommodate and privilege those who are supposedly able-bodied.
Rosemarie Garland Thomson in her work, *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature*, explains the necessity of feminist discourse which takes into account disability:

But if the category “disabled” is a useful fiction, the disabled body set in a world structured for the privileged body is not. Disability, perhaps more than other differences, demands a reckoning with the messiness of bodily variety, with literal individuation run amok. Because disability is defined not as a set of observable, predictable traits—like racialized or gendered features—but rather as any departure from an unstated physical and functional norm, disability highlights individual differences. In other words, the concept of disability unites a highly marked, heterogeneous group whose only commonality is being considered abnormal. As the norm becomes neutral in an environment created to accommodate it, disability becomes intense, extravagant, and problematic. Disability is the unorthodox made flesh, refusing to be normalized, neutralized, or homogenized. More important, in an era governed by the abstract principle of universal equality, disability signals that the body cannot be universalized. Shaped by history, defined by particularity, and at odds with its environment, disability confounds any notion of a generalizable, stable physical subject. The cripple before the stairs, the blind person before the typewriter, and the dwarf before the counter are all proof that the myriad structures and practices of material, daily life enforce the cultural standard of a universal subject with a narrow range of corporeal variation. (Garland Thomson 24)

It is often times feminist fear of creating a universal subject that keeps those within the field from engaging with disability on a critical level. However, as Garland Thomson shows, examining disability as a category of analysis does not create a static subject that is unchanging despite environment and history. In fact, it does quite the opposite. By positing disability as an identity category and then questioning who is placed by society into this category, we can see quite obviously that the category is compiled of those who may share nothing except the label disability. Therefore, using disability as a theoretical lens is an extremely powerful tool. By trying to engage with what bodies are disabled and why they are labeled as such, presents a multitude of problems. As Garland Thomson so accurately points out, disabled bodies can never be fully defined. They are not stable or static. They are instead constructed by the history and
contexts of the time and in that regard are ever changing. Understanding this aspect of disabilities studies allows us to imagine the fluidity of bodies and they ways in which all bodies never fully fit the phallocentric norms expected of them.

Further, McRuer defines the scope of disability studies, he writes in his article “Critical Investments”:

At the same time that this minority identity [disabled] has been shaped, however, theorists/activists have also argued that the division into two neat categories (able-bodied and disabled) is ideological, more about maintaining a particular system of power than about accurately describing reality; they have insisted that, in fact, all of us inhabit different kinds of bodies and have a range of bodily experiences. Disability studies has not only critiqued the able-bodied stereotypes, metaphors, and ideologies that sustain this false division, but has also launched a widespread interrogation of the idea of “normalcy.” Activists/theorists have critiqued the medicalized model of disability and hence demanded that people with disabilities be understood as subjects, not just passive objects, of knowledge. Both the disability rights movement and disability studies have attempted to provide a far-reaching reconceptualization of how contemporary cultures function according to models (of ability, productivity, efficiency, flexibility) that privilege non-disabled (and docile) bodies and identities. (McRuer 147)

It is clear from McRuer’s explanation that not only do disability studies work to improve the political and social lives of those labeled as disabled, at the same time, it seeks to challenge what is considered normal by identifying and labeling what is outside accepted bodily boundaries. This labeling in itself demonstrates how “two neat categories (able-bodied and disabled)” do not adequately describe the realities of all or possibly any lived bodies. Therefore, by using disability as a key category of analysis within feminist thought, we are both breaking down held notion of corporeal limitations and universalizing subjects while at the same time acknowledging real lived experience of bodies and seek practical ways to improve the lives of those who do not benefit from a world based on compulsory able-bodiedness. This is not to say that by labeling categories as fictive or fluid that they automatically lose their weight in society. Just because it is true that
we all experience different levels of able-bodiedness and disability throughout our live (age related for example) does not mean that those seen as fitting bodily norms lose their able-bodied privilege just as insisting that gender is fluid, socially constructed and fictive does not instantly erase male privilege. Systems of power and oppression still exist even if the basis for those systems is inherently flawed.

Crip theory takes the ideas and theoretical platforms of disability studies and combines that with Queer theory. As McRuer once more explains:

Given that disability studies has explicitly critiqued the limitations imposed on people with disabilities by an able-bodied society, and given that queer theory and activism have explicitly probed the limits of the hetero/homo binary (drawing attention to the perhaps unlimited possibilities unleashed by queerness), it might seem problematic to concern myself in this introduction with “the limits of the queer/disabled body.” One could, in fact, quite easily define disability studies as a field exposing the limits of the able body and queer theory as a field exposing the limits of the straight body. (McRuer 147)

Working with this information, we might say that Crip theory is then the exposing of the limits of the straight able body. Crip theory looks at the ways in which disability, sexuality and gender are interconnected. Michael Warner, in his book, Fear of a Queer Planet: Queer Politics and Social Theory, describes Queer as “reject[ing] a minoritizing logic of toleration or simple political interest-representation in favor of a more thorough resistance to regimes of the normal” (xxvi). It is this opposition to the “normal” or refusal to adhere to codes of normalcy, that makes disability studies inherently Queer. Understanding this, Crip theory embraces Queer theory as part of its theoretical lens. It is within this analytical framework that we see great potential for not just Queer studies but all of feminist thought.
Not Just About Kink: How S/M Theory Directly Impacts Women

Not only are S/M and Crip Studies ignored by so many within the feminist community for their taboo sexual ideas and bodily limitations disruption, it is very likely that writers and theorists struggle with ways in which to apply these tools to women’s lives. Here I would like to offer up a few brief examples of how these studies can be directly beneficial to the study of women as an analytical category. Though these examinations will not be the end all of what is needed with regards to these fields of study, they will hopefully act as a springboard for future and more in-depth studies.

S/M even if not practiced by specific individuals can benefit them from a theoretical perspective. S/M with its clear acknowledgement of power structure within individual relationships can act as a trope for power relations throughout the expanse of society. While women, in general, may not be able to pick and choose their roles and value within the whole of society, using S/M as a tool to access power allows women to gain more options within their personal lives. By examining the ways in which women engage in S/M relationships, despite their role, we come to understand the agency these women have in their own lives and may one day hope to expand such possibilities to the broader landscape of gendered relations.

Furthermore, using the role of submissive as a model for the exchange of power, we can begin to reimagine what has been constructed as women’s sexuality in broader terms.

When we speak of sex, especially penile/vaginal intercourse, we speak of it in a specific set of terms. Fucking. Laying. Penetrating. Banging. Doing. Tapping. Riding. Scoring. This is a very limited list drawn from a much more expansive list that is supplanted daily. These terms suggest that in the act of sex, especially heterosexual sex, there is one that is active (doing something) and one that is passive (receiving). In this binary, the physically active participant is
considered the dominant and the passive participant is the submissive. This is not to say that active is defined as physical activity. Active here is used to describe the sexual organs as they are constructed both by social sexual standards as well as by medical and scientific descriptions of reproduction. For instance, while a woman may be more physically active while performing oral sex on a man, it is his sexual organs that become visibly erect, are penetrating her mouth and have an obvious reaction of ejaculation. While all of this may be true of women’s genitalia, they are not seen in the same way. Women’s genitalia are seen as passive, open and always in need of penetration and filling.

If we use S/M as a guideline for determining power relations then perhaps we can move toward a language and culture that values women’s sexuality by defining sex through the role of the one penetrated. Instead of using words like “penetrated” why do we not say “enveloped” or other similar words that show the activity of that which is being penetrated (be it a mouth, a vagina, an anus). Going by the model of S/M, it is the one penetrated and this person’s safety, comfort and consent that are the crux of such an exchange. The focus in Ann Cvetkovich examines this possibility in her essay “Recasting Receptivity: Femme Sexualities:”

The vocabulary of sexual “relation” or “intercourse” often consists of binary distinctions that map the bodies of (usually two) sexual partners onto social hierarchies and vice versa. These include relatively abstract dichotomies, such as “giving/receiving,” which can name a range of physical and psychic exchanges, and more graphic oppositions, such as “fucking/being fucked,” which signifies both more specific physical acts and more specific power relations (although perhaps with no greater precision than “giving/receiving”). Other sexualized dichotomies for describing power relations emerge out of the vocabulary of different sexual subcultures, including “butch/femme” as terms for specific sexual role-playing, and the language of s/m, such as “top/bottom” and “dominant/submissive.” Such terms do not necessarily announce what specific sexual acts constitute a particular role. (Cvetkovich 132-133)
Not only could we expand our ideas to include women centered terminology to define sex, but even provide a vocabulary that is fluid and nonspecific that does not reiterate certain roles or power hierarchies but instead allows for flexibility and self-definition. Even more exciting is the thought of a language that suggests collaboration and mutual pleasure by not just two being, but a nonspecific amount of people involved in the exchange.

**Corporeal Realities: How Crip Theory Directly Impacts Women**

In the previous chapters, I discussed the ways in which women’s bodies are constructed as lacking and tarnished. In looking at this through a disabilities lens, Rosemary Garland Thomson is key at understanding how women’s bodies and disabled bodies are connected:

Many parallels exist between the social meanings attributed to female bodies and those assigned to disabled bodies. Both the female and the disabled body are cast as deviant and inferior; both are excluded from full participation in public as well economic life; both are defined in opposition to a norm that is assumed to possess natural physical superiority. Indeed, the discursive equation of femaleness with disability is common, sometimes to denigrate women and sometimes to defend them. (Garland Thomson 19)

Considering this, it is obvious why taking disability into account within feminist discourse is vital. Not only is it crucial because some women are disabled, but because of the ways in which phallocentric society view both the bodies of women and the disabled. Even to those women who are not labeled as disabled, the constructs and power relations surrounding their bodies are similar. Women’s bodies and disabled bodies are both constructed as being not only different than but less than the norm: phallic, male, hard, bound by set bodily boundaries.

Normal, valuable, able bodies do not leak, they do not fluctuate, they do not spill over corporeal limits. Women’s and disabled bodies defy all of these forms. Margrit Shildrick in her article “Monstrous Reflections on the Mirror of the Self-Same,” comments on the ways in which women’s bodies do not fit standards of corporeal boundaries:
But it is not simply that the feminine is represented only as a lack—the nothing to be seen with nothing of itself to reflect—it is also the site of an unruly excess that must be repressed if the project of emergent subjectivity is to succeed. The conventional model of subjectivity—be it Cartesian or Lacanian—has no room for corporeal being that is either uncontrollable or less than perfect. It is an image that disavows existential vulnerability. The supposedly intrinsic leakiness of women’s bodies is, then, a threat to the well being, a breach in the boundaries of selfhood that blurs the distinctions between self and other, and between one corpus and another. (Orr 39)

Both women’s bodies and the bodies of the disabled are thought of as uncontrollable—that is part of why they are so dangerous to phallocentric norms. These bodies cannot be tamed and constricted to limited norms. For instance, both women and the disabled are viewed as being mentally uncontrollable by the stereotypes that make them appear more controlled by emotions and hormones and ever able to engage in “fits.” Another convergence of these subjectivities is that their physical bodies defy set norms, either by lacking specific parts or functions or by having too much, taking up too much room or producing too much fluid: legs that cannot walk, standard heights that are never reached, pregnant bellies, engorged breasts, missing limbs, and so on and so forth. The liquid they may produce yet again connects the two categories: saliva, menstruation, blood, lubricant, amniotic fluid, yeast, mucus. These literal fluids move away from bodies, living the space that is designated for them, and flow into public space.

Expanding bodily limitations allows us to move past rigid structures that define certain parts as sexual and other parts as asexual. This expansion of thought not only allows for a greater understanding of pleasure by opening up possibilities for exploration, it also allows women’s bodies to be of and for themselves and not an open source to be used by others as they so please. In expanding corporeal boundaries we make room for bodies to set their own identities and limitations without forcing them into restrictive boxes with which they may not identify or in actuality may defy altogether. Such expansive collective thinking leads to the ability to set one’s
own boundaries and therefore fully claim one’s space without cultural backlash that so many who fall outside of the ideal norms face. In this model, not only would beings be able to claim their own space, but that space would be respected and valued by those outside. To this end, it is absolutely critical that we expand our horizons so that all bodies may find power through the fluidity they already possess.
Chapter Five

Conclusion

“However alienated male-dominated culture makes us from our bodies, however much it gives us instruments of self-hatred and oppression, still our bodies are ourselves. We move and act in this flesh and these sinews and live our pleasures and pains in our bodies. If we love ourselves at all, we love our bodies. And many women identify their breasts as themselves, living their embodied experience at some distance from the hard norms of the magazine gaze. However much the patriarchy may wish us to, we do not live our breasts only as the objects of male desire, but as our own, the sproutings of a specifically female desire.”

Iris Marion Young, “Breasted Experience: The Look and the Feeling”

*******

Exploring the ways in which women's bodies define phallocentric norms is an important though difficult pursuit. Using certain body parts as tropes for understanding hegemonic, masculinist standards helps to draw awareness to real lived bodies as varied from that trope as they may be. Breasts are no exception to this. In showing not only the ways in which women's bodies are constrained by society but also the ways in which they are resisting, we allow the agency that all women posses (though it may be limited and compromised) to be recognized. This can be an empowering excursion.

To look at women's bodies as sites of repression and oppression only is to ignore women's strength and vitality, to propagate a discourse that repeats nothing outside of perpetual victimhood limits our capacity to fully understand systems of oppression and privilege. It also compromises the subjectivities of those outside the norm have struggle so hard to create for themselves. As feminists, we should always be striving both to point out oppressions within
dominant frameworks but also take consideration to acknowledge the avenues bodies take to create opportunities for resistance.

In chapter two, of this project I examine the ways in which the fluidity of women’s bodies is apparent through their physical properties. Though there is most certainly a lack of material on the specific subject matter of breast fluidity, I use innovative theorists such as Irish Marion Young to help provide a springboard from which to craft my ideas. Not only are the physical ways in which women’s breasts are fluid—their sagging, moving, swaying, shifting—explored, but the ways in which phallocentric society attempts to control them are as well. Compulsory bra wearing and the social taboos for defying such customs are explored not as a way to simply criticize bras. It has been stated that bras are not intrinsically anti-feminist. Instead, the problem with bras is the mandates placed on women’s bodies to contain themselves through vices that bind and congeal that which would be more readily moving if left alone. A similar point can be made about plastic surgery. While cosmetic surgeries may not be negative and may in fact have self-image boosting effects for numerous people, there are serious feminist concerns surrounding plastic surgery when so many women feel the need to alter their bodies just to feel “normal” and even girls are not only desiring these procedures but engaging in them at increasingly younger ages.

In chapter three, I gather and present information on the benefits of breast milk. Much of this knowledge was learned by studies that focused on the benefits with regard to infant consumption. However, my work takes a step away from an infant-centered exploration of breast milk. I do this not only to provide possibilities for adult bodies to partake in the healing properties of the liquid, but also so that the woman who is producing the milk does not fall out of the picture. Often when we discuss breast milk or breastfeeding, the discourse becomes all about
the baby, and the woman is typically constructed as little more than a milk-producing machine. It is important when engaging such material to examine how breast milk is never fully removed from conceptualizations of a woman’s body; therefore, many of the taboos and stereotypes (falsely) assigned to women’s bodies are also present in our understanding and social customs surrounding breast milk.

Finally, in chapter four, I look toward the future. In trying to do this and constantly challenge and expand our modes of thinking, we must look toward new modes of analysis. Crip sex and S/M falls well outside the accepted norm of embodied sexuality and bodily expression. Unfortunately, it also falls outside much of current feminist dialogue. However, these relationships fully challenge our comfort zone and therefore make feminist critique more open to possibilities. I realize that this is not a comprehensive exploration of S/M and Crip studies. I do hope though that this project is only the beginning of what could be a tremendous expansion to feminist body studies.
Chapter Six

Works Cited


