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Framing and ideology in breastfeeding discourse: A two-part content and rhetorical analysis of online magazine articles and blog posts

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Framing and ideology in breastfeeding discourse:
A two-part content and rhetorical analysis of online magazine articles and blog posts

by

Raeann Renae Ritland

A dissertation submitted to the graduate faculty
in partial fulfillment of the requirements for the degree of

DOCTOR OF PHILOSOPHY

Major: Rhetoric and Professional Communication

Program of Study Committee:
Tina Coffelt, Major Professor
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The student author, whose presentation of the scholarship herein was approved by the program of study committee, is solely responsible for the content of this dissertation. The Graduate College will ensure this dissertation is globally accessible and will not permit alterations after a degree is conferred.

Iowa State University

Ames, Iowa

2018

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This two-part study used quantitative and rhetorically-informed framing analysis 1) to ascertain how online magazines and blogs frame breastfeeding and 2) to further analyze whether and how such framed messages perpetuate dominant and divergent ideological stances, thereby complicating infant feeding choices.

In total, 437 articles ($n = 201$) and posts ($n = 236$) from three online magazines and three blogs were collected and analyzed in part one. Frequency data indicating the appearance and use of particular content/themes, frame type, frame valence, gain/loss frames, and source type are provided. Chi-square analyses revealed significant differences in publication type (magazine v. blog) for content/theme. Additionally, while both publication types were more likely to use episodic frames than thematic, blogs used episodic frames significantly more often than magazines. Similarly, both more frequently cited non-experts than experts, though magazines cited experts significantly more than did blogs. Finally, results revealed significant differences in frame type and source type by publication title.

Representative examples ($n = 6$) of the most and least frequently appearing content/themes were selected for the rhetorical framing analysis. The analysis argued that despite quantitative results suggesting more diverse topical coverage and neutral treatment of breastfeeding, authors of articles and posts explicitly and implicitly supported the culturally dominant ideology that breastfeeding supersedes all alternatives (i.e., “breast is best”); for all its challenges and difficulties, breastfeeding is worth it. Consequently, rather than encourage or invite open dialogue, such overt and covert ideological framing effectively forecloses conversation, which then has the potential to breed guilt and shame among mothers.
Overall, this dissertation sought to show that while authors are nearly always well
intended and seek to support mothers, the ways in which they word or structure their writing - in
terms of how they frame breastfeeding and the ideologies they support – has consequences
whether intentional or not. Going forward, authors have a responsibility to further acknowledge
variable views is in their writing so as to better reach the whole of their audience instead of
unknowingly or unintentionally perpetuating potentially harmful messages and/or ideologies to
new mothers who are already vulnerable and facing new and huge challenges.
INTRODUCTION

When a woman discovers she’s pregnant, often her first move is to visit a doctor, who will counsel her throughout her pregnancy and likely make recommendations as to how best to care for and nourish her child pre- and postpartum. Most likely, conversations will include communication concerning (and advice toward) breastfeeding, especially considering widespread scientific and organizational support. For instance, the American Academy of Pediatrics (AAP) (2017) recommends exclusive breastfeeding for six months, and the World Health Organization (WHO) and United Nations Children’s Fund (UNICEF, 2017b) recommend breastfeeding within the first hour of birth and continuing until children are two years old. More specifically, UNICEF & WHO (2017) recommend breastfeeding initiation within one hour of birth, exclusive breastfeeding for six months following, and complementary feeding (breast milk with age-appropriate food) until two years old. Additionally, the Centers for Disease Control and Prevention (CDC, 2016b) is “committed” to increasing breastfeeding rates toward improved overall public health in accordance with the United States’ national Healthy People 2020 initiative. What all four major medical organizations have in common is their support of breastfeeding due to its health and immunological benefits for both mother and infant.

To note, such was not always the case. Koerber (2006a) offers an extended description and analysis of changes in scientific understanding concerning breastfeeding’s immunological benefits. During the mid-20th century, several scientists took a hierarchical view, which forwarded that human milk did not offer immune protection. In the 1960s, however, Hanson proposed a complex-systems view. Despite limited initial acceptance, Hanson’s work and that of other scientists eventually led to more insightful understanding of breastfeeding’s immunological protective power (Koerber, 2006a). In the years since, breastfeeding’s health benefits have been
further studied and supported by science, leading many to push for increased breastfeeding practices.

For example, rooted in such scientific research is the sentiment “breast is best,” which has become so widely used and understood that one can argue it serves as the culturally dominant ideology (or way of thinking) surrounding breastfeeding, and perhaps motherhood in general, in American culture. At its most basic, the slogan communicates the notion that breast milk is superior to any alternatives. Going deeper, the statement has come to represent assumptions and expectations governing how infant care and motherhood should function. Specifically, the statement tells mothers that in order to provide their children the best nutrition – and care, for the benefits of breastfeeding extend beyond its nutritional value – possible, they need to breastfeed; nothing else compares. That is not to say every individual agrees with such a sentiment, but rather, that is to say it largely permeates conversations and messages about infant feeding and care.

Moreover, two organizations together have taken concrete steps toward increasing breastfeeding prevalence: WHO and UNICEF together launched the Baby Friendly Initiative in 1991. As described on the Baby-Friendly website, the initiative seeks “to encourage and recognize hospitals and birthing centers that offer an optimal level of care for infant feeding and mother-baby bonding. It recognizes and awards birthing facilities who successfully implement the Ten Steps to Successful Breastfeeding…and the International Code of Marketing of Breast-milk Substitutes” (Baby-Friendly USA, Inc., 2012). As a result of the Baby-Friendly Initiative, 19,000 hospitals in 150 countries achieved Baby-Friendly designation by 2004 (Palmer, 2009). And between 2014 and 2016, US births occurring at Baby-Friendly-designated hospitals have more than doubled: from nearly one in 10 (7.8%) to nearly one in five (18.3%) (CDC, 2016a).
Moreover, doctors and hospitals alike have begun efforts toward minimizing the presence of formula within hospitals, most notably by removing and/or banning formula samples and coupons from discharge packets. Specifically, the percentage of hospitals issuing formula packs went from 72.6% in 2007 to 31.6% in 2013 (Nelson, Li, & Perrine, 2015).

Such efforts have no doubt contributed to recent increases in breastfeeding rates. Indeed, the CDC (2016a) reports that breastfeeding is on the rise in the US: among infants born in 2013, 81.1% were breastfed, up from 70.3% in 2000 and 76.7% in 2010. Furthermore, 51.8% were still breastfed at six months, and 30.7% were at twelve months (CDC, 2016a). From these numbers, one may infer progress and success in relation to breastfeeding practices. However, a problem persists: despite increased knowledge, support, and communication from doctors and organizations (e.g., AAP, UNICEF, WHO, Le Leche League, personal doctors, etc.) regarding the importance and benefits of breastfeeding for infants and mothers alike, breastfeeding rates—especially duration—remain far below recommended levels within the US and globally (UNICEF & WHO, 2017), as the following paragraphs explain.

First, definitions of breastfeeding differ, thereby complicating statistical amalgamations. For instance, breastfeeding occurs over a period of time, so one must consider breastfeeding initiation (the start of breastfeeding) as well as breastfeeding duration (the length of breastfeeding). The above statistics include both and more: the 51.8% at six months and 30.7% at 12 months are more inclusive than one may initially assume in that they include supplementary (formula in combination with breast milk) and complementary (other liquids and/or food included) feeding rather than exclusive (only breast milk, either from the breast or expressed and bottle fed) breastfeeding. Considering exclusive breastfeeding (as recommended) alone, breastfeeding rates drop to 22.3% nationally (CDC, 2016a). Recent data from UNICEF and
WHO (UNICEF, 2017a) similarly found just 24% of US infants are exclusively breastfed until six months, compared to 40% globally. Both fall far below the recommended 60% (UNICEF & WHO, 2017).

Second, demographics play a key role. While national *initiation* data are promising (at 81.1% initiation), 22 (44%) states do not meet the 81.9% target rate for initiation (CDC, 2016a), the majority of which lie in the southeast region. Duration is far lower; just 12 (24%) states meet the target rate 6-month duration of 60.6% (CDC, 2016a). Race/ethnicity also factors in. Data indicate that three groups meet the 81.9% target rate of ever breastfeeding: non-Hispanic White (84.3%), Asian (83.8%), and Hispanic (83%), whereas four do not: two or more races (79.0%), Hawaiian/Pacific Islander (75%), American Indian/Alaska Native (68.3%), and non-Hispanic Black (66.3%) (CDC, n.d.). In terms of education, 92% of college-educated mothers breastfed in 2013 compared to 83.6% of mothers with some postsecondary education, 71.2% of high school graduates, and 69.3% of those with less than a high school education (CDC, n.d.). Taken together, statistics that emphasize the growth in breastfeeding across the population are not wrong, but they fail to acutely represent various demographic groups.

The above paragraphs elucidate the data behind breastfeeding rates among mothers in America. These data, which show breastfeeding rates remain subpar, are interesting in light of the widespread scientific and medical support for breastfeeding as well as the widespread use and understanding of “breast is best.” Put another way, in recent decades, it has become increasingly clear via scientific research that breast milk has unquestionable health and immunological benefits for both infants and mothers. And yet, mothers continue to not breastfeed. Perhaps it is because breastfeeding rates are one small part of a much larger issue. That is, scholars across disciplines have investigated potential reasons as to why mothers opt not
to breastfeed, often concluding that science alone is not how mothers make decisions. Rather, considerations beyond the milk produced by their breasts alone contribute to mothers’ decisions, and these factors warrant scholarly attention in order to fully understand the intricate and complicated nature of breastfeeding in America.

Examples of such variables include the complex, often oscillating history of breastfeeding as it relates to wet nursing, industrialization, urbanization, the “scientific” origins of infant formula, debates surrounding feminism and women’s rights, arguments concerning breastfeeding as a public policy issue, and more. (See especially Fildes, 1985, 1988; Kedrowski & Lipscomb, 2008; Seals Allers, 2017; Wolf, 2001 for full accounts of breastfeeding’s historical and current tensions and challenges.) In addition, more current socio-cultural, economic, and political pressures surround breastfeeding. For example, UNICEF and WHO (2017) analyzed breastfeeding prevalence in their “Tracking Progress for Breastfeeding Policies and Programmes.” Looking worldwide, they measured eight policy and program indicators, finding the US fails to achieve several, including 1) legal implementation of the “International Code of Marketing of Breast-Milk Substitutes,” 2) offering paid maternity leave, and 3) implementing the “ten steps to successful breastfeeding” (UNICEF & WHO, 2017, n.p.). These factors can be interpreted as working against breastfeeding, thereby making it difficult or infeasible for a number of women.

Furthermore, even more recent developments suggest a change in respect to breastfeeding ideology may be occurring. For example, the United States did not sign on to the World Health Organization’s 2018 Breastfeeding Resolution (Jacobs, 2018), implying the US government is not be so supportive of breastfeeding. Similarly, the existence of counter discourse and phrases such as “a mother’s choice” and “fed is best” suggest a shift in thinking among the public.
Thus, tensions surround breastfeeding in America such that one cannot hope to elucidate a full picture with so many factors playing a part. However, the present two-part study focuses on one area that can provide added insight: communication and its rhetorical function in relation to mothers’ infant feeding decisions. In other words, of particular interest in this study were the breastfeeding messages mothers encounter, and in particular, whether and how those messages communicate the dominant (and divergent) breastfeeding ideologies.

One may ask why study breastfeeding through communication and rhetorical lenses. First, communication is ubiquitous and conflicting; it permeates every facet of one’s life, coming from every direction and representing every opinion. Second, communication is rhetorical, meaning it is persuasive and has the power to influence one’s knowledge, attitudes, and behaviors, including those related to infant nutrition. And finally, women require and benefit from breastfeeding communication that is diverse (i.e., multiple perspectives and varied topical emphases), something several scholars claim today’s breastfeeding discourse lacks. What follows is an elaboration of each perspective.

**Communication as Ubiquitous and Conflicting**

Prior to the advent of mediated communication, expectant mothers relied on interpersonal (family, friends, midwives, etc.) communication when it came to maternal information. That is, mothers relied on the experiences and information gleaned from their own mothers, friends, and midwives; birthing occurred in the home, and breastfeeding followed soon after (Seals Allers, 2017). Change occurred during the late nineteenth and early twentieth centuries, which welcomed in a new, widely accepted philosophy for childbirth and infant care that worked against breastfeeding: scientific motherhood (Foss, 2010; Wolf, 2001). Mothers encountered communication from the medical field that stressed the importance of medical involvement in
child rearing. Doctors took the place of midwives, and hospitals took the place of homes. No longer did mothers know best, for new sources of information (trusted medical professionals), told them they did not. Compounding the issue was the relationship between the formula industry and physicians and their support and advertising of formula as a safe, equal alternative (Seals Allers, 2017).

The prevalence, power, and impact of formula advertising persists today, though other sources of information have since cropped up as well, meaning women have easy access to exponentially more communication sources than ever before. In other words, doctors, midwives, mothers, and friends are no longer the only sources of information for mothers. Rather, women encounter messages from medical professionals (doctors, nurses, lactation consultants), professional organizations (WHO, UNICEF, AAP, CDC, LLL), traditional mass media (television, magazines), social media (Facebook, Twitter, Instagram, Blogs), and interpersonal sources (family, friends). Importantly, just as scientific motherhood communicated a new perspective on infant care, so too, do messages coming from a host of sources. For example, mothers are no strangers to subtle and overt advertisements for breastfeeding and formula products. As Kasper Jakobsen, president and CEO of Mead Johnson Nutrition, explained, the formula industry uses digital and social media analytics to target pregnant women; his company claims to have the names and addresses of 70% of America’s expectant mothers (Seals Allers, 2017).

Outside of advertisements, mothers encounter messages including conflicting and contradictory advice on parenting and health websites; Facebook, Twitter, and other social media posts supporting and condemning mothers no matter their decision; personal accounts of successes and failures; legislative decisions that inhibit and support mothers’ infant feeding
decisions and practices; and many more. Still other messages come from the resurgence of breastfeeding in popular culture, with celebrities—actresses, singers, and models alike—becoming particularly vocal advocates for breastfeeding, publicizing their opinions not only via traditional mass media channels but through their individual social media accounts as well. In sum, women are bombarded with infant feeding communication from every angle. And they are individually tasked with navigating and deciphering what information is most credible and applicable given their circumstance.

Communication as Rhetorical

To note, when sifting through various messages and determining which are most relevant, women engage with texts meant to affect their knowledge, attitudes, and behaviors. In other words, they interact with persuasive, rhetorical texts. Scholars across time have studied the rhetorical power of texts, and breastfeeding has provided a site ripe for examination.

Indeed, the persuasive potential of breastfeeding communication can be seen throughout history. First, when publications and advice journals in early America focused on breastfeeding, many mothers breastfed (Doyle, 2009). Later, when milk reform and formula fortification made alternatives safer, and messages proclaiming that safety permeated public communications, formula took hold. Second, many mothers believed their bodies incapable, inadequate, and likely to fail in the late nineteenth and early twentieth centuries, a fact Wolf (2001) claims physicians attributed to medical journal and magazine articles cultivating doubt in mothers’ minds as to their breastfeeding abilities. Finally, formula companies and the AAP recognize the potential power of communication, for when the Ad Council and the Department of Health and Human Services created a strongly worded campaign emphasizing the cons of not breastfeeding as recently as 2002, they immediately quashed it (Foss, 2010; Seals Allers, 2017). One
advertisement included a woman riding a mechanical bull with the words “If you wouldn’t take
risks before your baby was born, why start now?” A tag reading, “Babies are born to be
breastfed” accompanied the image (Seals Allers, 2017, p. 194). In sum, written arguments,
magazine articles, formula advertisements, interpersonal communication, and medical advice
have all worked to circulate infant feeding information and influence women’s decisions.

Scholars have taken a number of perspectives to study the rhetorical nature of
breastfeeding texts, including the problematic nature of choice (Bartlett, 2003; Gaarad, 2010;
Hausman, 2008) as well as tensions and controversies surrounding issues like morality
(Callaghan & Lazard, 2012; Crossley, 2009), sexuality (Duvall, 2014), and feminist politics
(Blum, 1993; Hausman, 2013; Koerber, 2001). These and other studies like them support the
study of breastfeeding communication from a rhetorically-informed perspective.

**Communication, Especially about Breastfeeding, Should Be Diverse**

Beyond communication as ubiquitous and rhetorical, scholars note that women need to see and
witness diverse representations of breastfeeding – representations depicting a range of
experiences and perspectives – as was common historically. That is, women traditionally relied
on experiential knowledge and familial support when it came to birthing and feeding children.
But more recent historical developments and influences contributed to shifts away from
breastfeeding such that seeing breastfeeding became the exception rather than the rule. Such
developments include the role of sexuality and pleasure in breastfeeding, even as early as the
seventeenth and eighteenth centuries (Doyle, 2009); twentieth century industrialization leading
to women’s increased presence in the workforce (Seals Allers, 2017); economic pressures and
social changes related to “time, efficiency, self-control, health, medicine, sex, marriage, and
nature” and tied to urbanization (Wolf, 2001, p. 3); decreased infant mortality as consequence of
increased safety of breast milk alternatives supported and advertised by pediatricians and pharmacists (Seals Allers, 2017; Wolf, 2001); prevailing practices related to medicalization and scientific motherhood; and debates surrounding the feminist movements of the 1960s and 1970s (Blum, 1993; Kedrowski & Lipscomb, 2008; Seals Allers, 2017). As a consequence, many of today’s mothers (and even grandmothers) have never actually seen another woman breastfeed a child; much experiential knowledge has been lost.

To combat the loss, scholars such as Seals Allers (2017) claim mothers need diverse (i.e., a range of experiences, topics, and perspectives) and strategic messages concerning breastfeeding, especially those centered on the realities of breastfeeding as opposed to the ideal, a point supported by mothers partaking in studies by communication scholars (e.g., Arora, McJunkin, Wehrer, & Kuhn, 2000; Koerber, 2006b; Kukla, 2006; McDuffie, 2014). However, many scholars claim such diversity does not exist. First, Seals Allers (2017) asserts that “[s]tories are important…The stories that shape the breastfeeding world should be multidimensional and complex like the women they seek to attract. Instead, they have been mostly simplistic” (p. 204). She goes on to name three personally-identified archetypal stories: the idyllic-meadow scenario, the scientific evidence in favor of breastfeeding, and the lactivist narrative (see pp. 204-206).

Extending the individual results of Seals Allers are several studies that have content analyzed educational (e.g., textbooks) and mass (e.g., newspapers, magazines, television) communication to ascertain how breastfeeding is portrayed or communicated to expectant and new mothers, including whether information is diverse, accurate, positive, applicable, and/or appears frequently. For example, in her examination of Parents magazine, Foss (2010) found that breastfeeding-focused message content shifted over time in relation to broader, societal attitude shifts. Later, she added a visual component to her textual analysis of breastfeeding on
television, finding portrayals largely restricted to educated, white mothers; any depiction of extended or public breastfeeding was viewed as unacceptable (Foss, 2013). In other words, despite finding positivity surrounding breastfeeding in general, empirical investigations such as these often also find a lack of diversity and other problems with portrayals.

The Present Study

The above sections point to the importance and necessity of studying breastfeeding messages. Whereas much communication research examines traditional mass communication outlets, few consider today’s growing online communications or multiple outlets together, thereby missing opportunities for comparison and interaction among different communicative spheres. Further, no previous literature combines a social scientific content analytic approach of message frames with a rhetorically-informed analysis of ideological representations and influences to study varied online sources of breastfeeding information. Likewise, none explicitly make use of framing theory and ideology together in the context of breastfeeding.

The present study sought to fill these gaps. Specifically, it made use of both quantitative and rhetorically-informed framing analysis 1) to ascertain how modern, varied, online outlets (e.g., online magazines and personal blogs) frame breastfeeding (as public health concern, as sexualized, as healthy or beneficial, as inexpensive, as (in)convenient, as difficult or simple, as natural, etc.) and 2) to further analyze whether and how such framed messages perpetuate dominant and divergent ideological stances, thereby complicating infant feeding choices. Both approaches were necessary in that one provided a broader view of overt messages targeting mothers while the other provided a more nuanced interpretation of messages’ underlying rhetorical nature.
Framing theory was especially useful here, for its emphasis on analyzing manifest and latent content to determine common themes in the portrayal of information. According to the theory, frames serve to organize a story and provide meaning to an event (Gamson & Modigliani, 1987; Rodriguez & Dimitrova, 2011). Frames rely on selection and salience to achieve one of four purposes: defining problems, diagnosing causes, making moral judgments, and/or suggesting remedies (Entman, 1993). In other words, authors select and make salient certain aspects of a story: they decide exactly what details their audience reads, sees, and hears. In so doing, they have the potential to directly influence people’s understandings and reactions. A number of studies using the theory employ quantitative methods, striving for objectivity in identifying themes and frames (e.g., Frerichs, 2006; Gearhart, 2016; Hamilton & Lewis, 2014). Similarly, part one of this study took a quantitative approach to identify thematic content and frames in breastfeeding communication.

Relevant to part two of this study was the rhetorical influence of ideology as manifest through language. First, the term ideology generally refers to those beliefs, thoughts, and ideas concerning how society, or in the case of this study, how breastfeeding, should work or function. Second, because the present study analyzed textual content, an understanding that language communicates ideology, a point Bakhtin (1981), Jasinski (2001), and van Dijk (1998) make, was crucial. And finally, the relevance of ideology as a rhetorical concept has been studied for some time. Especially popular between 1978 and 1988, the term later fell out of use, though Jasinski (2001) notes this was likely due to the emergence of critical rhetoric, wherein scholars seek to uncover power relations, especially those related to social practices. In line with the idea that discourse can influence social practices, part two of this study examined how messages
perpetuate ideologies as they relate to breastfeeding in order to forward specific agendas and influence mothers’ infant feeding decisions.

Results and findings are intended to provide understanding of digital, online breastfeeding communication in relation to past analyses of traditional mass media; to highlight the diversity of messages, or lack thereof, in breastfeeding communication; to contribute to rhetorical understandings of ideology manifest in language; and to offer suggestions to communication practitioners concerning their framing and ideological representations of breastfeeding—most especially which frames and ideologies are most prevalent, which are potentially helpful or troublesome, and which are lacking or absent in online form.
LITERATURE REVIEW

This study aimed to ascertain how online information sources (e.g., online magazines and blogs) frame breastfeeding and whether such messages propagate dominant and divergent ideological stances, thereby complicating mothers’ infant feeding decisions. Prior to analyzing online content, one must establish the Internet as a documented source of science and health information. In addition, this review includes overviews of framing theory and the concept of ideology, the frameworks guiding each part of the study, as well as research examining breastfeeding portrayals in varied communication sources.

The Internet as a Source of Science (Health) Information

In addition to intuition, experience, faith, etc., people make use of science and science-related (e.g., health) knowledge to inform everyday decisions. The knowledge upon which they base decisions comes from several outlets, though according to a National Science Foundation (NSF, 2016) study, Americans use the Internet as their primary source of science information, even more so than television. Moreover, nearly half of Americans claim the Internet as their primary source of information today, compared to one-tenth of Americans in 2001 (NSF, 2016). Of those, 40% use a search engine to find information, while 20% use online newspapers (NSF, 2016).

As a biological process, breastfeeding falls within the larger category of science, and thus, the above statistics likely apply. More specifically, breastfeeding is a health issue. When it comes to health information, Americans likewise favor the Internet: Colby, Johnson, Eickhoff, and Johnson (2011) found that of 437 randomly-selected Americans, the largest proportion (28.3%) reported the Internet as a favored source of health and health-related topics, especially among young people. More recently, Manierre (2015) found that women more than men are likely to seek health information online.
Even more specific to breastfeeding, Bernhardt and Felter (2004) and Guerra-Reyes, Christie, Prabhakar, Harris, and Siek (2016) point out that women seek pre- and postnatal information online and that websites complement the face-to-face information mothers also receive. Bylaska-Davies’ (2015) qualitative interviews with mothers directly support this: interviewees reported using the Internet and social media for information related to parenting and infant care. Furthermore, Foss & Southwell (2010) found correlations between media portrayals and breastfeeding rates the following year, indicating the potential for media content to influence decisions. The fact that women seek health and maternal information online supported a more in-depth examination and analysis of how such online sources not only portray breastfeeding but how they challenge and reinforce existing perceptions, attitudes, and ideologies, two goals of the present research.

**Breastfeeding Coverage, Content and Themes**

A number of studies have content analyzed breastfeeding discourse to ascertain its portrayal across an array of mediated sources including television news and primetime programs, general and parenting-specific magazines, newspapers, and, more recently, Internet sites and blogs. The inclusion of certain topics increases salience and indicates a level of importance. It also suggests those topics are more memorable, since they are more prevalent. A review of results suggests relatively wide variation in content or theme as well as conflicting and inconsistent messages, all of which inform the coding scheme of the present study.

To start, Gearhart and Dinkel (2016) analyzed television news coverage between 1999 and 2013, finding, in general, that despite increases in the number of reports on breastfeeding, stories have become more trivial, for instance, increased reporting on celebrities and decreased attention to breastfeeding benefits. To note, the most common theme in more recent news
coverage was “controversy,” described as discussion of controversial issues like public and workplace breastfeeding. Similarly, Foss (2013), who analyzed primetime television, found public breastfeeding (and extended breastfeeding) presented as socially unacceptable and as uncomfortable for those witnessing it (i.e., as problematic if not controversial). In addition, public breastfeeding often co-occurred in scenarios involving sexualization of the breast (Foss, 2013). In terms of who breastfeeds, portrayals often show educated, middle class, white mothers breastfeeding newborn infants (Foss, 2013). Furthermore, analyses have often found bottle feeding represented as the norm (i.e., more typical, “normal”) on television and in newspapers (Foss, 2013; Henderson, Kitzinger, & Green, 2000).

Investigators of Internet content have found similar results in terms of sexualization (e.g., Bylaska-Davies, 2015; Schneider & Pobocik, 2013); however, other themes vary and conflict. For example, Schneider and Pobocik (2013) analyzed 75 YouTube videos using both deductive and inductive approaches to determine the quality and credibility of breastfeeding information provided. Themes included breastfeeding as “good,” barriers and difficulties of breastfeeding, and support or promotion for breastfeeding; however, four videos offered inaccurate information, leading the authors to conclude that while videos offer support, quality and credibility are inconsistent (Schenider & Pobocik, 2013). McInnes, Arbuckle, and Hoddinott (2015) similarly found inconsistencies in online content specific to breast milk expression and breast pumps between and even within single sites: expressing was portrayed as similar but simpler than breastfeeding but also difficult and requiring learning. Findings led the authors to conclude that Internet information is not only inconsistent but incomplete and not evidence based (McInnes et al., 2015). West et al. (2011) is the only study to date to analyze breastfeeding blogs, finding information related to 1) attitudes, 2) behavior, and 3) consciousness-raising most common in
posts and information related to 1) praise, 2) behavior, and 3) attitudes most common in comments. In the context of this study, West and colleagues’ (2011) conclusion that support of breastfeeding is common in blogs means this theme was expected to appear in the study’s sample.

Like general Internet information, magazine content has been found to exhibit inconsistencies. Several scholars note the presence of scientific information (e.g., health benefits, scientific processes, nutritional value) as especially common (Dodgson, Tarrant, Thompson, & Young, 2008; Foss, 2010; Kedrowsi & Lipscomb, 2008; Potter, Sheeshka, & Valaitis, 2000). Conversely, Frerichs, Andsager, Campo, Aquilino, and Stewart (2006) found less emphasis on benefits in the seven general and parenting-specific magazines examined. Another disparate finding among breastfeeding topics in magazines is the presence or absence of practical advice for mothers. Whereas Frerichs et al. (2006) examined seven general and parenting-specific magazines, finding more advice for mothers, Foss (2010) analyzed issues of Parents magazine from 1930 to 2007, finding little practical advice and more reliance on expert voices. Given the wide array of documented content and themes in representations of breastfeeding, the present study posed the following:

RQ1: What breastfeeding content/themes appear in online blogs and magazines?

Framing Theory

Examining communication for content or theme was useful toward applying this study’s theoretical framework, framing theory, which holds that how messages are presented affects the way audiences take in, understand, and respond to messages. Indeed, past research has found support for framing effects in connection to breastfeeding (Bakker & Van Acker, 2014; Hussein, Manna, & Cohen, 2014; Merdasi, Araban, & Saki, 2017).
Originating in sociology, the first mention of framing came from Goffman (1974), who defined frames as “principles of organization which govern events…and our subjective involvement in them” (p. 10). Since, the term frame has been variously defined, contributing to a lack of cohesive conceptualization and operationalization (Cacciatore, Scheufele, & Iyengar, 2015; Scheufele, 1999). However, perhaps the most widely recognized understanding comes from Entman (1993), who claims frames operate via selection and salience. That is, a communicator selects certain aspects of an issue or event, making it more salient, in order to define problems, diagnose causes, make moral judgments, and suggest remedies or treatment (p. 52). Put another way, through “selection, emphasis, exclusion, and elaboration,” frames tell what the issue is (Tankard, 2001, p. 99) and suggest a particular understanding. In general, then, frames can be described as overarching ideas that provide meaning to events and issues discussed within a communication message.

Gitlin (1980) and Scheufele (1999) describe two levels of frames: media and individual (or audience). Media frames are “persistent patterns of cognition, interpretation, and presentation, of selection, emphasis and exclusion” (Gitlin, 1980, p. 7). Media frames, in other words, are tools available to arrange or package information in order to efficiently relay it to an audience. Individual frames, on the other hand, are “mentally stored clusters of ideas that guide individuals’ processing of information” (Entman, 1993, p. 53). That is, individual frames deal with how a person’s own background, biases, and cognitions influence his/her understanding and perception.

Entman (1993) considers frames not in terms of level but location, of which there are four: communicator, text, receiver, and culture. Communicators make conscious and unconscious decisions as to what to say, which are guided by frames (i.e., schemata) that
organize their belief systems; texts contain frames, as indicated by the presence or absence of linguistic structures; receivers’ frames guide their thinking and conclusions and may or may not mirror text or communicator frames; and cultural frames are a set of commonly invoked frames reflecting the thinking of most people in a social group (Entman, 1993, pp. 52-53). Similarly, Van Gorp (2010) describes cultural frames as the cultural notions journalists apply. Taken all together, this study investigated textual frames, similar to media frames, selected by a communicator (influenced by cultural norms and values) and presented to an audience. In other words, it analyzed the ways in which communicators—here online magazine article authors and blog writers—package breastfeeding information for readers.

Further, this study took into consideration a point made by Cacciatore et al. (2015) in that attention should be paid to different types of framing, namely emphasis and equivalence framing. That is, the present study examines whether and how messages use framing to emphasize particular content over other information as well as whether and how messages use framing to differentially represent logically equivalent information.

Identifying such frames involves examining a text’s manifest and latent aspects, for instance, exemplars, and catchphrases (Gamson & Modigliani, 1989) as well as lines of reasoning or keywords with deeper meanings or connotations (Reese, 2010). Beyond these, one may also examine quantifications and rhetorical appeals (Van Gorp, 2010). For example, one type of appeal used extensively in persuasion is a fear appeal (Benoit & Benoit, 2008). Fear appeals, as their name implies, target an audience’s emotional response to fear. Structurally, fear appeals resemble a problem-solution organization in that they first communicate a threat or problem (those elicit feelings of fear before providing a recommendation or strategy to reduce or cope with the threat, thereby lessening fear (Benoit & Benoit, 2008). Sites in which to investigate
such framing devices include headlines, subheads, photos, photo captions, leads, sources cited, quotations, logos, statistics and charts, and general body text (Tankard, 2001, p. 102). Some framing scholars focus explicitly on the manifest content of the message while others incorporate latent meanings as well.

Notably, framing analysis may take a deductive or inductive approach. Studies deductively analyzing texts make use of predetermined coding schemes to classify thematic information, whereas in inductive research, frames emerge during the interpretive process. Most framing research takes a deductive approach (Van Gorp, 2010); as such, part one of this study used a deductive method to analyze online magazine articles and blog posts via frame type, frame valence, frame equivalence, information source, and publication type. An explanation of each follows.

**Frame type**

Breastfeeding can be portrayed through episodic and thematic framing. Coming from Iyengar (1991), episodic and thematic frames describe two opposing ways of presenting information as related to attributing responsibility for creating or improving the problem or situation. Episodic frames attribute responsibility to the individual whereas thematic frames attribute responsibility to the larger community or society. For example, a magazine article or blog post focused on one mother’s reasons in particular for extended breastfeeding (see Reneau, 2017) uses an episodic frame. By contrast, a magazine article or blog post explicating a larger issue, such as a post explicating the need for a Black Breastfeeding Week (see Wisner, 2017), employs a thematic frame.

Iyengar’s (1991) episodic and thematic frames were initially applied to political communication, though they have since been applied in numerous areas. In the context of health,
effects of episodic and thematic frames have been documented (Coleman, Thorson, & Wilkins, 2011), supporting their application in health-related framing research. Namely, Coleman, Thorson, & Wilkins (2011) studied how changing frames from episodic to thematic affected perceptions of obesity, diabetes, immigrant health, and smoking; findings indicated thematic frames induced readers to improve health behaviors, though it did not change how audiences attributed responsibility. That is, they still blamed individuals (Coleman, Thorson, & Wilkins, 2011). Various health issues content analyzed include obesity (Gearhart, Craig, & Steed, 2012), breast cancer (Cho, 2006), and breastfeeding (Gearhart & Dinkel, 2016).

Specific to breastfeeding, Gearhart and Dinkel (2016) found a significant preponderance of episodic frames in television news for all three timeframes (1999-2003, 2004-2008, and 2009-2013) analyzed. That is, much of the information pertained to the individual (e.g., personal stories, personal responsibility, and/or individual instruction) as opposed to focusing on larger, societal topics (e.g., results of scientific study, public breastfeeding, and societal support/encouragement). Further, Frerichs and colleagues (2006) found responsibility frequently attributed to the mother as well as messages primarily focused on individual barriers and advice (i.e., episodic frames) in magazine print coverage of breastfeeding. Far fewer messages covered social or environmental issues. While neither study examines online breastfeeding discourse, they do analyze content specific to breastfeeding. Taken together, both studies indicate individualized coverage as more prevalent—and, according to Gearhardt & Dinkel (2016), becoming ever more prevalent over time—than societal or environmental concerns, suggesting that episodic frames should be more common than thematic frames. Further examination of the presence and use of episodic versus thematic frames can highlight which types of breastfeeding issues receive adequate attention in online magazine articles and blog posts and which receive
limited or no attention, providing insight as well as suggestion to communication practitioners and writers. Thus, the present study built upon past research and posed the following hypothesis:

**H1:** Episodic frames will appear more frequently than thematic frames in both online magazines and blogs.

**Frame valence**

Another commonly assessed feature of frames is their valence. Valence refers to whether the message is judged to be positive, neutral, or negative. In other words, valence is used to determine whether messages employ a positive (good, pleasant, happy), neutral (neither positive nor negative), or negative (bad, unpleasant, sad) tone overall. De Vreese (2010) suggests a message’s valence, as positive or negative, will have differential effects on audiences’ cognition and attitude, supporting its analysis. Further, the author argues the study of framing practices is a prerequisite to framing effects. Put another way, one must first acknowledge and document the use of valence before studying its effects, a goal of this research.

In line with this thinking, several scholars have studied whether breastfeeding communication in particular tends toward positive or negative messages. To note, many refer to this characteristic as “tone” rather than valence. Overwhelmingly, breastfeeding messages have been found to be positively valenced, regardless of outlet (television, newspapers, magazines, and the Internet) (see Bylaska-Davies, 2015; Dodgson et al., 2008; Foss, 2013; Kedrowski & Lipscomb, 2008; Schneider & Pobocik, 2013; Simpson, Garbett, Comber, & Balaam, 2016; West et al., 2011). Moreover, Kedrowski and Lipscomb (2008), who content analyzed breastfeeding communication in four newspapers, three network news stations, and 11 women’s magazines over a period of 15 years (from 1990-2004), claim messages employing a negative tone are primarily circumstantial, meaning they “did not attack the idea of breastfeeding per se, but rather
talked about specific dangers from breastfeeding that arise in specific circumstances” (p. 59). Thus, while negatively valenced messages did occur in breastfeeding communication, their presence was not the norm, nor did the tone reflect on breastfeeding in general; rather, negative messages centered on isolated instances. Positive breastfeeding messages were and have been the overwhelming majority.

Using framing theory specifically, Hamilton and Lewis (2014) coded 819 newspaper articles from five regional papers for positive, neutral, or negative valence. Results indicate positive valence as predominant across all regions (four at or above 90%, one at 78%) as compared to negative (at or below 8%) and neutral (four at or below 5%, one at 17%) (Hamilton & Lewis, 2014). On average, neutral and negative valence were employed equally as often (5.4%) (Hamilton & Lewis, 2014). Given the majority of positive valence found throughout past breastfeeding research and across media, the present research expected the following:

H2: Messages in both magazine articles and blog posts will more frequently have a positive valance than a neutral or negative valence.

Frame as gain or loss

Closely related to frame valence are gain and loss frames. An equivalence frame is a type of gain/loss frame that “reverses the wording of identical information” (de Vreese, 2010, p. 188) such that identical outcomes are presented either in terms of gain (greater) or loss (lesser). People base their decisions, then, on their assessment of gains or losses. A classic example of equivalency comes from Kahneman and Tversky (1984), who presented two groups of participants with reverse worded “consequences of two disease-prevention programs on a disease expected to kill 600 people” (de Vreese, 2010, p. 188). One group was to choose between option A (in which 200 people would be saved) and B (in which there was a one-third probability that
600 people would be saved and a two-thirds probability that no one would be saved). A second group was to choose between option C (in which 400 people would die) and D (in which there was a one-third probability no one would die and a two-thirds probability that 600 people would die). Results of the study indicated people were risk averse when information was framed in terms of gain (group one) and risk seeking when framed in terms of losses (group two).

Importantly, gain/loss frames may not be exact (equal) word reversals; rather, they may focus on the positive outcomes of performing an action (gain) or the negative outcomes of not performing an action (loss.) Gain/loss frames are especially common to risk communication; however, they can be applied to most any cause/effect situation. In the context of breastfeeding, a gain frame would describe positive outcomes of breastfeeding, such as health benefits for the child or mother, the emotional bonding that occurs, the low financial cost, etc. Conversely, a loss frame would describe negative consequences of not breastfeeding. For the child these include outcomes such as increased risk of death, obesity, other health problems, etc. For the mother, loss frames would focus on increased financial cost, increased risk of ovarian or breast cancer, lower parent-child attachment, etc. To note, a neutral frame would suggest the absence of either (or the presence of both) gain or loss information.

Research on gain/loss frames in health communication has primarily focused on their effects. For instance, Schneider et al. (2001) documented framing effects in women’s health. In the context of breastfeeding, Hussein et al. (2014) found no significant effect of gain/loss framing on attitude or intention, though Esquibel (2013) did find support for loss frames. These conflicting results suggest further research and investigation on gain/loss frames. Outside of framing effects, little research has content analyzed gain/loss frames in breastfeeding communication. However, prior to analyzing their effect(s), it is worthwhile to determine the
presence and use of gain/loss frames in breastfeeding communication. Consequently, to better
gauge whether and how communicators apply gain/loss frames in breastfeeding messages, the
following research question was asked:

RQ2: Do online magazines and blogs frame breastfeeding information in terms of gains
or losses?

Information source

Individuals providing information and opinions are often included in news, feature, professional,
and personal stories. Sources offer additional perspectives and have the potential to impact the
construction and reception of messages. Specific to health, scholars have noted the impact of
information source on readers’ ability to process information (Kott & Limaye, 2016) as well as
perceptions of credibility (Jucks & Thon, 2017). The present study recognized this potential of
information source to influence readers, and thus, it considered from whom information within
magazine articles and blog posts comes.

Past research on breastfeeding communication has found a general reliance on expert
sources (Foss, 2010; Gearhart & Dinkel, 2016; Kedrowski & Lipscomb, 2008); however, the
term expert can refer to various individuals. For example, Foss’ (2010) use of the term expert
implies medical doctors, who have historically provided mothers with infant feeding advice (see
pp. 298-299). Conversely, Kedrowski and Lipscomb (2008) include doctors and scientists,
government officials, and medical journals under the general heading of experts, finding these
more frequently cited than individual sources such as mothers, breastfeeding advocates, children,
and fathers. Different still are Gearhardt & Dinkel (2016), who exclude network-employed
doctors, including a separate coding category for these specialists, and instead define expert as
“individuals with specialized knowledge and regarded as reliable sources on breastfeeding” (p.
Their results indicated sources cited differed significantly over time: while reliance on expert sources remained highly consistent over time, reliance on celebrity parents increased over time. Additionally, parents as cited sources became less frequent after 2008, and network-employed doctors were cited even less frequently (Gearhart & Dinkel, 2016).

Each of the aforementioned studies varies slightly in its conception of expert: whereas all appear to define the term as individuals with specialized knowledge, one primarily implies medical/health professionals (Foss, 2010), one identifies several possible sources (Kedrowski & Lipscomb, 2008), and one excludes network-employed doctors (Gearhardt & Dinkel, 2016). In an effort to distinguish medical practitioners from scientific, academic, and governmental researchers in order to provide deeper insight as to whom authors most frequently cite, the present study separated the categories of medical doctors and other experts.

In addition to citing experts, breastfeeding communication often refers to and includes non-expert sources, such as parents and other lay members of society. The importance and relevance of distinguishing between and analyzing the use of expert and non-expert sources in breastfeeding communication has to do with perceptions of credibility of varied sources. For instance, Jucks and Thon (2017) made use of online health forums to study effects of an expert statement (i.e., quality) compared to a “strong in numbers opinion” of anonymous masses (i.e., quantity) (p. 375). Results suggest similar assessments of trust; important, though, is the distinction between quality and quantity. Whereas a single expert attribution can incite trust, the same cannot be said of a single non-expert, anonymous post or comment; rather, trust in non-expert support requires collective assessment. Thus, in addition to the expert source categories of medical doctors and other experts, the present study further utilized the non-expert source
categories of lay parents, celebrity parents, public speakers (e.g., politicians, advocates), and other. It hypothesized the following:

**H3:** Both magazines and blogs will more frequently cite expert sources than other non-expert sources.

**Publication type**

Finally, this research goes beyond that of earlier work in that it examines two previously un(der)studied and categorically different publication types, allowing for comparison of the two outlets. That is, much past breastfeeding communication research has considered traditional media (e.g., newspapers, television, print magazines), while the present study analyzes and compares online magazines and blogs. Yet, even these online outlets differ in several ways, a point Burke’s dramatistic pentad helps illustrate. The pentad acts as a guide for comprehending an act and recognizing its motives (Rountree & Rountree, 2015). Its five elements include act, scene, agent, agency, and purpose (Burke, 1945). Hamlin and Nichols (1973) offer detailed definitions of each element: 1) *act* refers to what took place, either in thought or action; acts emphasize verbs; 2) *scene* refers to the background or situation of the act, including spatial and temporal characteristics; 3) *agent* refer to whom committed or performed the act; 4) *agency* refers to the means or instruments used by the agent; and 5) *purpose* refers to the function of the act, scene, agent, or agency (p. 97-99). Rhetors, then, select and combine certain elements to form strategies when communicating a particular situation. Which elements are emphasized (act, agent, purpose, etc.) reveal or point to the rhetor’s perspective. In the case of online magazine articles and blogs referring to breastfeeding, the pentad is useful in elucidating how the two publication types may differ.
The online magazine articles and blogs posts analyzed here perform the same act: They refer to breastfeeding in some manner. Other elements of Burke’s pentad speak to their differences. For example, both magazine articles and blog posts occur online. However, the rhetorical and figurative situations in which they occur differ. Whereas the communicative setting for online magazines involves a journalistic source communicating or disseminating newsworthy information to the public, blogs occupy a more informal communicative space, one that may not necessarily conform to the same, traditional concepts of “newsworthiness.” Put another way, the online magazine here analyzed are offshoots or add-ons to their traditional print magazine origins. Article writers likely follow traditional notions of “newsworthiness” – that information be timely, significant or relevant, proximal, novel or odd, controversial, impactful, etc. – and also rely on credible sources to support their claims. Importantly, magazines have a targeted focus, covering stories and issues relevant to a particular topic, in this case parenting (and more specifically, breastfeeding).

In contrast, blogs (in the general sense) are not a traditional news source; they occupy an altogether different scene than do online magazines. Specifically, blogs refer websites run by individuals or groups that are written in a more informal, reflective, experiential, and/or conversational style. They often include reference to personal experiences or opinions, and as such, may not prescribe to the same journalistic conventions – such as newsworthiness or citation practices – that one would expect of online magazines. However, the present study sampled now institutionalized blogs – that is, blogs originally started by individual mothers that have since become much larger enterprises, employing groups of paid (full-time and freelance) writers. Thus, it may be that the scene of blogs sampled here functions and behaves more similarly to magazines.
When it comes to *agent*, in general, online magazines are written and published by trained journalistic professionals, individuals who have studied news writing but may or may not have actual experience with the topics about which they write; conversely, blogs tend to be more informal and do not necessarily prescribe to the same set of “rules” concerning authorship/contribution. That is, the writing credentials of blog contributors are not always entirely clear: they may or may not have journalistic training or professional writing experience. In addition, because blogs tend to be personal, blog writers often have direct experience with the topics about which they write. The same was true for this study’s sample. That is, despite writing for institutionalized blogs, many of the blog contributors in this study’s sample wrote of their own experiences as mothers. Taken together, the women writing for these blogs range from the average lay person to content and/or writing expert, indicating there may be differences in the ways magazine articles and blog posts frame and treat breastfeeding.

*Agency*, the means or instruments used to perform the act, can likewise vary between articles and blog posts. Both use the Internet to disseminate information, but journalistic writing conventions (e.g., beginning with a lead, paying particular attention to detail in feature stories) likely govern the content and structure of magazine articles whereas blog posts have a different communication style (e.g., more conversational); the two likely look and sound very different from each other. Thus, authors employ different stylistic means to perform the act.

All of the above speak to how each element functions differently in the context of magazine articles and blog posts which affects *purpose*. Furthermore, purpose itself may differ. Articles and blog posts may have as their purpose to inform, to persuade, to entertain, to build community, to sell a product, to support an initiative, etc., all of which can affect how each
performs the act. Owing to the numerous inherent differences of the two publication types, this study asked the following question:

**RQ3:** Do results of RQ1-2 and H1-3 vary by publication type (magazine or blog)?

**Framing Theory and Ideology**

Two points are important to note concerning framing research. First, framing studies often draw upon additional theories or concepts to guide the analysis (D’Angelo & Kuypers, 2010). Second, framing studies focus on *what* frames are present (as derived from messages’ manifest and latent content), but they do not always interpret *how* such frames serve to forward or advance a particular point of view or agenda, which Kuypers (2010) argues is an essential component of (rhetorical) framing analysis. He says, “[T]he media not only focuses attention on particular attributes of an issue, making some portions more salient than others, it does so in such a manner that a particular point of view is advanced” (Kuypers, 2010, p. 300). Further, D’Angelo (2002) notes that “scholars argue that news organizations select some information and intentionally omit other information such that different frames of a topic either will not exist or will still foster a single viewpoint supportive of the status quo [or the ideological assumptions of the news organization]” (p. 876). Taken together, it can be said that ideology names an appropriate concept with which to consider frames, a point with which Hackett (1984) agrees, for he argues frames are an application of “deep structure,” a society’s naturalized beliefs (as cited in Reese, 2010, p. 24). Uncovering these points of view is a rhetorical process. However, such rhetorical work requires a different, more interpretive, critical perspective (Kuypers, 2010; Reese, 2010). Thus, part two of this study used the concept of ideology to guide a rhetorically-informed framing analysis in order to determine whether and which points of view (i.e., ideologies) are forwarded by online magazine and blog outlets.
Ideology defined

A general definition of ideology comes from notable rhetorician Kenneth Burke (1969), who conceived of the term as “a system of political or social ideas…obviously, but a kind of rhetoric” (p. 88). Scholars have noted problems with this definition, namely its ambiguity and failure to connect ideology to language. First, Jasinski (1988) notes its vagueness, claiming the definition lacks an account of how and why ideologies change. Thus, he aims to provide a more comprehensive understanding of the term through his contribution of a recursive five-moment model of ideological totality. In general, the model outlines a process of using (1) cognitive schemata to (2) interpret (3) argumentation (specific rhetorical practices meant to transform belief systems) and (4) judge its validity and legitimacy toward establishing (5) cultural belief systems, which then inform later cognitive schemata (see pp. 208; 210-215). For Jasinski (1988), “[t]he central task of a rhetorically informed ideology critique…is to identify the claims to validity and legitimacy inherent in argumentative form and uncover how these claims are adjudicated or judged in the public sphere” (p. 213, emphasis added).

The five moments of this totality have merit in that they provide a nuanced and comprehensive theoretical framework as to how individuals and cultures establish and/or modify ideological beliefs; however, Jasinski’s (1988) argument that mediated forms of information have consequences for ideological critique due to their existence in a “privatized” rather than public sphere—wherein audiences consume information but do not actively or publically participate in judging its validity or legitimacy, instead participating in “alienated judgment” (p. 213)—falls short given characteristics of today’s media. That is, the Internet has transformed mediated communicative practices such audiences need not be passive or isolated receivers. Yes, audiences often still interact with communication in the privacy of their own homes; however,
the Internet invites individual participation (as communicator and audience), allowing direct contribution to the construction of social knowledge and cultural beliefs. Additionally, the volume and contradictory nature of information circulated online invite judgment, individually and socially. Finally, writing not long after Jasinksi (1988), Thompson (1990) advocates for the ideological critique of mass mediated communication, claiming critics cannot ignore it; such communication has not destroyed the public sphere but instead has transformed what it means to be public (i.e., to be public no longer requires face-to-face interaction or the mutual occupation of physical space of interlocutors).

A second limitation of “ideology as a system of beliefs” is its failure to address ideology’s connection to language and meaning making. Scholars across communication fields have theorized the relationship (e.g., Bakhtin, 1981; Brown, 1978; Eagleton, 2007; Jasinski, 2001; van Dijk, 1998), including McQuail (2010), who defines ideology as an “organized belief system or set of values that is disseminated or reinforced by communication” through the implicit selection and emphasis of certain values and norms (p. 559). The relevance of this definition to the present study lied in its reference to (1) the implicit nature of ideology and (2) the role of communication—of which online magazine articles and blogs posts are two types—as disseminating or reinforcing such sets of values and norms. That is to say, ideology often lurks below the surface; thus, even seemingly trivial remarks may indicate and perpetuate ideology, thereby necessitating deep analysis of online magazine article and blog post content.

McGee (1980) provides terminology relevant to identifying ideological content: “An ideograph is an ordinary-language term found in political discourse. It is a high-order abstraction representing collective commitment to a particular but equivocal and ill-defined normative goal” (p. 15). In other words, ideographs are ideologically-charged terms; their utterance directly
invites interpretation of a single ideological stance. In the context of breastfeeding, the term *natural* names an ideograph for its connection to the ideological perspective of breastfeeding as correct or preferred due to its being a natural, biological process. Beyond ideographs, Kuypers (2010) further provides direction for detecting ideology in text, claiming interpretation of keywords, phrases, and other textual content aids in analysis. Appeals, and other rhetorical strategies can similarly indicate ideology.

In sum, then, *ideology* was used in this study to refer to how messages suggest—both overtly and implicitly—particular understandings of breastfeeding as good or bad, better or worse (than alternatives), easier or more difficult, healthy or unhealthy, right or wrong, moral or immoral, valued or unvalued, normal or not normal, public or private. Of course, ideology is not as simple as these dichotomies suggest; rather they act as intersecting spectrums, meaning each informs another and subsequently affects beliefs about how breastfeeding should function.

And how do these spectrums intersect to suggest how breastfeeding ought to function? What is the dominant ideology of breastfeeding? As the previous chapter introduced, the culturally dominant ideology surrounding the issue of breastfeeding, at least of the past several decades, seems to support breastfeeding as *the* option for mothers (i.e., breast is best). Such a stance has implications, not the least of which is that it fails to account for personal circumstances constraining the act of breastfeeding. For example, many mothers experience physical complications, such as inverted nipples or low milk supply, limiting their ability to breastfeed. Others cannot initiate or sustain a breastfeeding relationship due to psychological conditions such as postpartum depression or psychosis. Still others may be unable to breastfeed due to personally-relevant situational pressures like returning to work. Adoption names yet another circumstance in which breastfeeding by the mother is not possible. Moreover, many
mothers hold alternative perspectives or opinions, namely that breast is not best for them. For mothers such as these, an ideology of breastfeeding that communicates breast milk as the “best” option has the potential to cause undue emotional pressure and breed feelings of shame and guilt, for “best” connotes its opposite, “worst.” Put differently, the ideology inherently criticizes and condemns the actions of mothers who cannot or do not wish to breastfeed as worse than mothers who can and do breastfeed. Going further still, if one focuses on use of the term “breast,” in connection to “best” practices, it can be said that the ideology essentially reduces mothers to their breasts; suggesting that if they do not breastfeed, they fundamentally fail to do what is best for their children. All other aspects of the mother and motherhood are sacrificed in favor of a singular body part.

A discussion of breastfeeding ideology would be incomplete without acknowledgement that alternative thinking exists. In recent years, two phrases have begun to circulate in mothers’ discussions about breastfeeding (or not). These include “a mother’s choice” and “fed is best.” To note, these two phrases are not specific to breastfeeding; however, because they pertain to infant feeding as a whole, they inherently include beliefs and ideas about breastfeeding, making them relevant to the conversation. Use of the first implies that how a mother feeds her infant remains her choice alone; outside spectators do not have a voice. Several scholars have grappled with this phrase, particularly in connection to the term choice (see Bartlett, 2003; Crossley, 2009; Hausman, 2008). The second is most readily associated with a foundation of the same name whose goal is to provide families up-to-date information about breastfeeding, formula feeding, and combination feeding (Fed is Best, 2016). Importantly, neither phrase is associated with breastfeeding or formula feeding alone; rather, each focuses on the mother-child dyad and what
feeding method(s) works for them. In this way, the two phrases represent an alternative ideology about breastfeeding that is more inclusive than the dominant “breast is best” ideology.

Examining manifestations of such ideologies, as part two of this study does, aids in understanding existing cultural beliefs and power relations. The process by which to study such ideological manifestations draws upon several of the aforementioned scholars in that it requires interpretation and analysis of the rhetorical/argumentative practices authors employ, including but not limited to, keywords, phrases, patterns of reasoning, and other linguistic features.

**Ideology and breastfeeding research**

Few studies examine persuasive breastfeeding communication with the express goal of identifying and deconstructing ideological representations. Such would be a useful endeavor, however, as McDuffie (2014) points out: “rhetorical inquiry is greatly influenced by ideological critique” (p. 130). A scholar recognizing this potential is Kukla (2006), who examines ethics and ideology in a breastfeeding advocacy campaign in order to highlight its problematic nature.

In 2004, with breastfeeding rates still falling below recommended levels, the Department of Health and Human Services identified a need for a new campaign, moving away from the ubiquitous slogan “Breast is Best” and creating new promotional materials. Kukla (2006) sardonically criticizes the identification of the problem as women’s lack of understanding the message as opposed to the United States’ “abysmal maternity leave policies, privatized daycare system, complete absence of workplace regulations supporting breastfeeding, and so forth” (p. 161-162). In any case, the DHHS hired the Ad Council, who coined the slogan “Babies Were Born to Be Breastfed” and created new materials that ironically contained no pictures of breasts or breastfeeding at all; instead, while demanding that women breastfeed, the campaign reinforced notions of privacy and indecency connected to breastfeeding (Kukla, 2006, p. 170). Thus, the
author ultimately argues that the campaign is “unresponsive and even hostile to many women’s actual concerns about breastfeeding, and well positioned to produce shame and compromise agency among the women it targets” (p. 157). That is, the campaign not only ignores many deep-rooted cultural norms harmful to successful breastfeeding practices and contributing to its failure but is unethical and attacks women’s autonomy and agency. While not using the term ideology outside the title, the power structures and cultural norms Kukla (2006) identifies form an ideological critique.

Similarly, several rhetorical scholars address societal and cultural influences and their relationship to breastfeeding attitudes and behaviors, concepts directly related to ideology. Two breastfeeding issues often discussed include breastfeeding normalization (see especially McDuffie, 2014) and the public/private debate (see Callaghan & Lazard, 2012; Duvall, 2014; Hausman, 2007; Lunceford, 2012). Moreover, a prolific author, Hausman (2007, 2008, 2013) analyzes various communication forms (e.g., a breastfeeding campaign, television and mass media, formula marketing) concluding a large problem is the simultaneous idealization of breastfeeding and extreme sociocultural obstacles and barriers to successful breastfeeding.

In addition to idealization, breastfeeding as a moral choice is a theme common to arguments concerning breastfeeding. In her discussion of choice rhetoric, Bartlett (2003) argues that “choosing” to breastfeed or not really has little to do with actual choice and more to do with cultural notions of control (over the female body) and morality (doing “right” as a woman and mother). Hausman (2008) and Crossley (2009) similarly discuss choice, morality, and oppression as they relate to breastfeeding: both note oft contradictory societal pressures, namely that women are told to breastfeed because it is “right” and because “breast is best” but then have little-to-no cultural or economic support.
Another theme referenced is that of resistance. In her examination of political activity on feminist mothering websites, Koerber (2001) discovered a “counter-discourse” wherein mothers argued that “because feminist discourse…has developed in the context of capitalism and liberal individualism, it has come to construe children as a burden to women, rather than as a source of strength” (n.p.). Such discourse denies “the possibility of a positive, life-affirming mother instinct” (Koerber, 2001, n.p.). The impact of this and other counter-discourses is not yet apparent; however, their existence is tied to ideology in that they represent marginalized points of view speaking out against the status quo.

Considering the foregoing literature on breastfeeding communication and its connections to and representations of ideology, the present study asked the following two research questions.

**RQ4a:** Which ideologies are forwarded in online magazine articles and blog posts referring to breastfeeding?

**RQ4b:** Do ideological representations within magazines and blogs differ?

**Summary**

The purpose of this chapter was to review relevant literature pertaining not only to the Internet as a recognized source of breastfeeding information, thereby supporting the analysis of online magazines and blogs, but also literature related to breastfeeding communication, framing theory, and the concept of ideology. Specifically, given their emphasis on communication as having the potential to impact readers’ attitudes and behaviors, the literature review argued for the use of both framing theory (specifically frame type, valence, and gain/loss) and the concept of ideology as relevant lenses with which to examine breastfeeding messages meant to inform and influence mothers’ infant feeding decisions. In sum, this research posed the following research questions and hypotheses:
**RQ1:** What breastfeeding content/themes appear in online blogs and magazines?

**H1:** Episodic frames will appear more frequently than thematic frames in both online magazines and blogs.

**H2:** Positive valence will appear more frequently than neutral or negative valence for both magazines and blogs.

**RQ2:** Do online magazines and blogs frame breastfeeding information in terms of gain, neutral, or loss?

**H3:** Both magazines and blogs will most frequently cite expert sources than other sources.

**RQ3:** Do results of RQ1-2 and H1-3 vary by publication type (magazine or blog)?

**RQ4a:** Which ideologies are forwarded in online magazine articles and blog posts on breastfeeding?

**RQ4b:** Do ideological representations within magazines and blogs differ?

Results and findings associated with RQ1-4 and H1-3 have implications for framing theory, ideology, and breastfeeding messages in general. First, framing theory holds that what a message says and how it says it has the potential to influence subsequent attitudes and behaviors. Results of hypotheses add to the existing body of literature on framing theory, and in turn, provide further evidence for its explanatory power. Results are also intended to build on the previously understudied area of frame equivalence as pertaining to breastfeeding communications. That is, it is relevant to study whether messages frame breastfeeding information in terms of gains or losses for their potential to affect readers’ interpretations and understandings (and subsequent behaviors). Second, findings of RQ4a-b are intended to build on previous rhetorical work focused on ideology. Again, this concept/area has been understudied in
connection to breastfeeding. However, using the term *ideology* and its conceptual definition as ideas about how society (or breastfeeding) should function is especially relevant to both rhetorical and breastfeeding research. That is, given discourse’s ability to influence attitudes and behaviors as well as larger social practices, examining communication for its ideological representations aids in understanding how messages perpetuate and further specific agendas in order to influence mothers’ infant feeding decisions. Furthermore, such examination may expand definitions of ideology and/or identify new strategies for employing/incorporating ideology in texts. And finally, the combined results and findings of this research are intended to highlight the diversity, or lack thereof, in breastfeeding communication, providing practitioners a deeper understanding of how messages are currently framed and suggestions as to which are potentially helpful or troublesome.
METHODOLOGY

To test hypotheses and answer research questions, this study proposed a two-part content analysis of online breastfeeding texts. The unit of analysis for both parts was the individual article or blog post. Part 1 made use of a quantitative content analysis, as is typical of framing studies. Part 2 employed a rhetorically-informed critical content analysis of frames, as outlined by Kuypers (2010).

Neuendorf (2002) describes content analysis as a quantitative method that relies on the scientific method. More precisely, Riffe, Lacy, & Fico (2014) define quantitative content analysis as “the systematic and replicable examination of symbols of communication, which have been assigned numeric values according to valid measurement rules, and the analysis of relationships involving those values using statistical methods, to describe the communication, make inferences about its meaning, or infer from the communication its context, both of production and consumption” (p. 20). Following these tenets, part one of this study made use of an established coding scheme and statistical analyses to content analyze breastfeeding communication texts coming from parenting magazines and parenting blogs to ascertain how these online outlets frame breastfeeding.

Importantly, framing analyses can also be rhetorical, wherein rhetorical concepts provide lenses with which to interpret underlying meaning. Such an understanding of (critical) framing analysis allows for a degree of subjectivity on the part of the researcher (Kuypers, 2010). Thus, part two of this study proposed a rhetorically-informed analysis of select frames/texts to provide an in-depth description and analysis of how framed information perpetuates varied and competing ideological stances thereby complicating mothers’ infant feeding choices.
Quantitative Analysis

Sampling procedures and data collection

*Online magazines.* Online magazines were selected for inclusion by searching “baby magazines” via Google (in line with research that suggests women use search engines) and comparing results to top parenting magazine lists of the last several years, including lists from Cision (2012; 2013; 2016), a global public relations and software company, that are based on print circulation and those of Lifescript (Stewart, 2008), a leading website on women’s health, and Mom Junction (2016), a website claiming to be a community for women and mothers that publishes expert and researched content.

A well-known general magazine, *Parents,* focuses on all aspects related to parenting. It includes a section on infants that seeks to inform parents “how to care for [their] baby,” offers expert advice for “resolv[ing] any problems with breastfeeding, diapering, and sleep,” and covers other similar topics (*Parents,* “Babies,” 2017). *Parents,* and its sister magazine *American Baby,* appear high on Google’s results page. Similarly, they consistently appear on other recommendation lists (e.g., Lifescript and Mom Junction), indicating their popularity online.

Further evidence of their high reputations comes from reports of print circulation. In 2013, each reached over 2,000,000 subscribers (Cision, 2013), and in 2016, *Parents* occupied the number one position, with 2,217,318 subscribers. In 2015, printing of *American Baby* halted. Today, online searches for it lead one to *Parents’* website. Thus, only *Parents* was included here.

*Fit Pregnancy and Baby* is a magazine offering “advice and tips for moms-to-be and new parents on pregnancy, *nutrition,* fitness, exercises, *baby care,* and *weight loss*” (Meredith, 2017, emphasis added). It appeared just behind *Parents* on Google’s results list and was the number one recommended pregnancy magazine by Mom Junction (2016). Its print version currently sits
at third—behind *Parents* and *FamilyFun* (a magazine geared toward older children)—with a circulation of 2,000,000 (Cision, 2016).

Next on Google’s results page was *Parenting*, which is a second general parenting magazine with sections specific to infants and infant care. Lifescript (2008) recommends *Parenting* as a top magazine. And while the magazine does not reside on Cision’s top list for 2016—indicating a drop in its print popularity in recent years—it has a well-known reputation and a history of high circulation, as indicated by its inclusion in Cision’s 2012 and 2013 top 10 lists. Thus, it was included here.

Data from these magazine websites was collected on the basis of topic relevance and publication date. While each online magazine has its own search function, results are not organized chronologically. Because of this, data was collected using Google’s site search function and “custom time” tool. The keyword “breastfeed” was used to find articles referring to the act. To ensure information from each source was most timely and up-to-date, search results were ordered chronologically, from most to least recent. Approximately one hundred article results from the last two years were randomly selected using a random number generator before they were then downloaded and saved for coding and analysis.

**Online blogs.** Blogs were selected based on relevance and current following. Relevance here refers to blog topic, meaning it emphasizes parenting, especially motherhood and child care. To procure a list of potential blogs focused on parenting/motherhood, the researcher first conducted several searches using the keywords “top parenting blogs,” “top mommy blogs,” and “top mom blogs.” The researcher read and compared approximately 10 websites featuring recommendations for the best parenting/mom blogs to generate a list of 16 well-known and respected blogs. From here, the author manually searched Facebook and Twitter to determine
each blog’s current following. Because certain blogs use Facebook, others Twitter, and others both, the average number of Facebook likes and Twitter followers was used to determine the most like/followed blogs across these two popular social media platforms (see table 3.1).

Table 3.1.

*Blogs included for analysis, based on average number of Facebook likes and Twitter followers.*

<table>
<thead>
<tr>
<th>Rank</th>
<th>Blog</th>
<th>Facebook likes</th>
<th>Twitter followers</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Scary Mommy</td>
<td>3,534,529</td>
<td>493,917</td>
<td>2,014,233</td>
</tr>
<tr>
<td>2</td>
<td>BabyCenter Blog</td>
<td>2,371,374</td>
<td>675,100</td>
<td>1,523,237</td>
</tr>
<tr>
<td>3*</td>
<td>The Better Mom</td>
<td>823,575</td>
<td>9,040</td>
<td>416,308</td>
</tr>
<tr>
<td>4*</td>
<td>The Bloggess</td>
<td>185,286</td>
<td>476,807</td>
<td>331,047</td>
</tr>
<tr>
<td>5</td>
<td>Mom Blog Society</td>
<td>54,355</td>
<td>283,448</td>
<td>168,902</td>
</tr>
</tbody>
</table>

*Blog three will be excluded due to its broad scope and few posts related to infant care. Blog four will be excluded due to its lack of focus on parenting and child care.*

The top two blogs were Scary Mommy and BabyCenter Blog. Jill Smokler started Scary Mommy in 2008 with the express goal of providing parents “support, camaraderie, information, and…a healthy dose of levity” as well as “a safe, intimate place for thoughtful discussion and playful banter” (Scary Mommy, n.d.b). By 2015, however, the site had amassed 10 million monthly readers, and the media group Some Spider, LLC took over (Scary Mommy, n.d.b). Currently, the blog has a full staff of editors, producers, and writers as well as hundreds of contributors (Scary Mommy, n.d.a). BabyCenter Blog is a part of the larger BabyCenter, L.L.C., which includes “websites, mobile apps, online communities, email series, social programs, print publications, and public health initiatives” that collectively reach more than 45 million parents monthly (BabyCenter, 2017). Additionally, BabyCenter Blog has a section specific to breastfeeding, meaning its relevance here is no question. Therefore, because Scary Mommy and BabyCenter Blog focus on providing space to share and find parenting information, especially as it relates to infant care; because they have especially large followings; and because initial
searches resulted in well over 100 posts mentioning breastfeeding each, both were included for analysis.

To note, the parenting/mom blogs with the third- and fourth-highest average followings (the Better Mom and The Bloggess) were excluded from analysis. First, The Better Mom is a top mom blog with a large following; however, the blog’s broad scope and less frequent posting means posts are split between “family, faith, food, meal plans, marriage, and health” (The Better Mom, 2017). Accordingly, an initial search of the website garnered just 12 posts with any mention of breastfeeding. Thus, the blog was not included for analysis. Second, The Bloggess, written by Jenny Lawson, was excluded from analysis due to its lack of relevance, meaning that while it is considered a top mom blog, posts do not focus on Lawson’s role as mother but instead chronicle her life as an individual, with mentions of her now teenage daughter appearing less frequently.

The blog with the next-highest average following, Mom Blog Society, was included for analysis. Started by LaDonna Dennis Maxwell in 2011, Mom Blog Society seeks to “utilize the power and potential of the Internet to connect consumers and brands around the world as never before” (Dennis, 2012). Its focus on connecting consumers with brands provides a different perspective to the issue. In 2014, Cision named Mom Blog Society the top mom blog in the US, and Healthline, a consumer health information site, recently honored it as the best mom blog of 2017 (Campbell).

As with magazines, data from these blogs was collected on the basis of topic relevance and publication date. While each blog has its own search function, results are not always organized chronologically, and one blog limits its search results. Because of this, Google’s site search function and “custom time” tool was again used to collect data. The keyword “breastfeed”
was used to find blog posts referring to the act. To ensure information from each source is timely and up-to-date, search results were ordered chronologically, from most to least recent. Approximately one hundred blog posts from the last two years were randomly selected via a random number generator before they were then downloaded and saved for coding and analysis.

**Sample characteristics**

A total of 437 online magazine articles \( (n = 201) \) and blog posts \( (n = 236) \) made up the final sample. Table 3.2 displays the number of articles/posts that were included in the sample from each publication as well as the percent of the sample they represented. Despite explicit, verbatim searches for “breastfeed,” 10 of the downloaded articles from *Parents* and four from *Fit Pregnancy & Baby* were excluded because they lacked explicit mention of the term. Additionally, of the several hundred *Parenting* articles Google collected, just 15 explicitly referred to breastfeeding, and of the Google search results for Mom Blog Society, 36 specifically used the term. Consequently, these two publications had limited representation within the sample.

Table 3.2

<table>
<thead>
<tr>
<th></th>
<th>Magazines</th>
<th></th>
<th></th>
<th>Blogs</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>( n )</td>
<td>%</td>
<td>Title</td>
<td>( N )</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td><em>Parents</em></td>
<td>90</td>
<td>20.6</td>
<td>Scary Mommy</td>
<td>100</td>
<td>22.9</td>
<td></td>
</tr>
<tr>
<td><em>Fit Pregnancy and Baby</em></td>
<td>96</td>
<td>22.0</td>
<td>BabyCenter Blog</td>
<td>100</td>
<td>22.9</td>
<td></td>
</tr>
<tr>
<td><em>Parenting</em></td>
<td>15</td>
<td>3.4</td>
<td>Mom Blog Society</td>
<td>36</td>
<td>8.2</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>201</td>
<td>46.0</td>
<td>Total</td>
<td>236</td>
<td>54.0</td>
<td></td>
</tr>
</tbody>
</table>

**Coding scheme**

The quantitative coding scheme for this study primarily drew upon the work of Gearhart and Dinkel (2016) as well as Hamilton and Lewis (2014). Two coders coded for *publication type*,
publication name, content/theme, source, frame type, frame valence, and frame equivalence, in that order.

Publication type indicates whether the text is a (a) magazine article or (b) blog post. Publication name indicates the specific magazine or blog and will include (a) Parents (b) Fit Pregnancy & Baby, (c) Parenting, (d) Scary Mommy, (e) BabyCenter Blog, and (f) Mom Blog Society.

Following Gearhart and Dinkel (2016), coding of each text’s content/themes was based on the topic(s) of discussion as it relates to breastfeeding. Categories coded for presence/absence included (a) health benefits to child, (b) health benefits to mother, (c) program/support, as in mentions of the need to support or encourage breastfeeding, (d) emotional difficulties (e.g., mothers’ struggles), (e) physical issues (e.g., physical struggles related to the breast or breastfeeding complications), (f) risks/warnings concerning breastfeeding (negative consequences of not breastfeeding and cautions while breastfeeding), (g) advice (e.g., recommendations or tips), (h) controversy (e.g., public breastfeeding, workplace challenges), (i) culture (e.g., cultural differences or norms), (j) length of time (e.g., how long to breastfeed), (k) “breast is best” (e.g., breast as better than alternatives), (l) attachment parenting, (m) policy (e.g., current policies or changes in policy), (n) pumping, (o) celebrity, and (p) other (Gearhart & Dinkel, 2016, p. 887).

Source refers to any content in the article or post coming from a source other than the article’s or blog’s primary author. Such information was coded for presence/absence according to three expert categories—(a) medical doctors, (b) lactation consultants, and (c) other experts (i.e., others with specialized knowledge)—and five non-expert categories—(c) lay parents, (d)
celebrity parents, (e) public speakers (e.g., politicians, advocates), (f) social media (e.g., Facebook groups, Twitter) and (g) other non-experts (modified from Gearhart & Dinkel, 2016).

Following coding for the above, texts were coded for frame type. In general, episodic frames refer to individualized events whereas thematic frames refer to a broader societal context (De Vreese, 2010, p. 190). Here, texts were coded as (a) episodic, when content concerned the particular, personal, or individual, or (b) thematic, when content focused on general information, research results, or societal issues/efforts (Gearhart & Dinkel, 2016). An example of an episodic frame includes a mother offering her singular experience with breastfeeding due to its emphasis on an individual. Articles or posts providing specific advice to mothers were likewise considered episodic, since they placed responsibility of breastfeeding on the mother. An article or blog post focused on breastfeeding as sustainable or environmentally-friendly was coded as thematic for its focus on the larger, societal and community benefits of breastfeeding. Similarly, an article or post referring to a scientific study’s new findings regarding breastfeeding was considered thematic for its reliance on data rather than individual experience. Importantly, articles and blogs may employ both frame types to different degrees. In this case, title and context were used to determine which frame took primacy.

In line with Hamilton and Lewis (2014), texts were also coded for frame valence, or the overall tone of the piece toward breastfeeding, with (a) positive, (b) negative, or (c) neutral indicating the coder’s impression of breastfeeding after reading. Positive referred to championing breastfeeding, speaking to its overall value or benefits, or otherwise affirming its worth. Negative referred to those mentions of breastfeeding as especially troublesome or when authors specifically stated their disdain for it. Neutral here meant references to breastfeeding that either
included both positive and negative affect toward breastfeeding or the absence of any qualitative or value judgment.

Finally, texts were coded for frame gain/loss. Gain frames represent the positive consequences of breastfeeding, and loss frames represent the negative consequences of not breastfeeding. For example, a gain frame emphasizes the health or emotional benefits of breastfeeding for either the mother or child, whereas a loss frame emphasizes that not breastfeeding can lead to a poor immune system, increased risk for obesity or other chronic health conditions, or even death in certain circumstances. Messages were coded as being (a) gain-framed if they included reference to positive outcomes of breastfeeding, (b) loss-framed if they included reference to negative outcomes of not breastfeeding, or (c) not applicable in the absence of either. Importantly, in the rare case that articles or posts equally referred to gains and losses, coders coded them as “(c) not applicable,” based on the mutual agreement that the gain and loss frames essentially counteracted each other.

See the Appendix for the codebook with further detail and examples.

**Coder selection and training**

Two coders, including the author, coded articles and blogs. To ensure coding consistency, coders went through an initial training period before independently coding a pilot sample of 20 articles and posts (10 each) published in earlier years. Following the pilot, reliability calculations using Cohen’s kappa were determined. Discrepancies were discussed, which resulted in the refining of operationalizations as well as the addition of “lactation consultants” as an expert category and “social media” as a non-expert category, where social media refers to mentions of specific accounts, pages, and/or applications, such as “Facebook Mama Talk,” or Instagram accounts that have either no or several authors. Pilot data were then recoded and acceptable reliability was
achieved for all categories: themes (K = .683; 89.3%), sources (K = .928; 97.5%), frame type (K = .875; 95%), frame valence (K = .668; 80%), and gain/loss frames (K = .686; 85%). According to Landis and Koch’s (1977) benchmark scale, the above kappa statistics fall within the “substantial” (.61-.80) or “almost perfect” (.81-1.00) ranges (p. 165).

From here, the two coders independently coded subsets of the full sample until the total sample (N = 437) was coded. After each subset, reliability was computed using Cohen’s kappa, and discrepancies discussed prior to moving to the next subset. Discussions concerning discrepancies were aimed at further refining how the construct was operationalized before moving on to code the next subset of data. However, neither coder changed her response; rather, the dataset analyzed reflected codes of the author, as she took the lead on the project.

Final reliability for themes, sources, frame type, frame valence, and gain/loss frames was as follows: themes (K = .654; 92.5%), sources (K = .681; 92.2%), frame type (K = .608; 85.1%), frame valence (K = .661; 78.5%), and gain/loss frames (K = .451; 75.7%). Again using Landis and Koch’s (1977) scale, for themes, sources, frame type, and valence, intercoder reliability fell within the “substantial” agreement range, and gain/loss fell within the “moderate” agreement range (p. 165). Table 3.3 includes kappa values and percent of agreement for pilot data and full sample data by construct.

Table 3.3

<table>
<thead>
<tr>
<th>Coding Categories</th>
<th>Pilot Data</th>
<th>Full Dataset</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>K</td>
<td>%</td>
</tr>
<tr>
<td>Themes</td>
<td>.683</td>
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</tr>
<tr>
<td>Sources</td>
<td>.928</td>
<td>97.5</td>
</tr>
<tr>
<td>Frame type</td>
<td>.875</td>
<td>95.0</td>
</tr>
<tr>
<td>Frame valence</td>
<td>.668</td>
<td>80.0</td>
</tr>
<tr>
<td>Gain/loss frames</td>
<td>.686</td>
<td>85.0</td>
</tr>
</tbody>
</table>
Data analysis

After coding was complete, RQ1-3 and H1-3 were answered using descriptive statistics and chi-square analyses. That is, because RQ1-2 and H1-2 refer to frequency, they were answered using descriptive statistics. And because it investigates relationships between nominal, or categorical, variables, chi-square analyses were conducted to answer RQ3.

Rhetorically-Informed Analysis

Selection of artifacts (articles and blogs)

Approximately one dozen magazine articles and blog posts analyzed in Part 1 were selected for deeper, critical analysis. The frequency of content/themes identified in Part 1 was used to select artifacts for deeper, critical analysis. That is, messages employing frequently mentioned (typical, common) content/themes were included, as were messages employing infrequently mentioned (atypical, unique) content/themes. Including both allowed a more nuanced critique in that it not only captured typical references to breastfeeding but also those that stood alone and pushed against or complemented prevailing ideological perspectives.

Data analysis

To answer RQ4a (which ideologies are forwarded in online magazines and blogs) and RQ4b (whether ideological representations within magazines and blogs differ), the quantitative counts identified in Part 1 were followed by interpretation of their underlying meaning. That is, using the content/themes identified in Part 1, Part 2 analyzed how those themes were framed and which ideologies were forwarded via those frames. More specifically still, the content/themes quantified in Part 1 served to identify general topics covered in articles and blog posts, but they offered little in the way of deeper interpretation, especially those related to ideological representations of breastfeeding.
Kuypers’ (2010) approach to rhetorical framing analysis offers further explanation: “A theme is the subject of discussion, or that which is the subject of the thought expressed. The frame, of course, is suggesting a particular interpretation of the theme” (p. 302). To conduct the analysis, the researcher looks for “key words, phrases, concepts, and labels” (p. 302) that indicate how the theme is to be understood by the reader. The process requires close textual reading of each article and special attention to repeated themes and frames (Kuypers, 2010, p. 302). In other words, the researcher looks to the content/theme to identify the subject or topic. Subsequent analysis of surrounding textual content informs interpretation, indicating to the reader how the topic is to be understood.

In this study, then, magazine articles and blog posts referring to breastfeeding were first analyzed for content/theme. Subsequent interpretation of the content/themes and their surrounding textual context spoke to the inclusion (or exclusion) of particular ideological stances and agendas (e.g., good or bad, better or worse, easier or more difficult, health or unhealthy, right or wrong, moral or immoral, valued or unvalued, normal or not normal, public or private). For example, the content/theme “physical issues/struggles” indicates the topic of the article or blog post as physical challenges to breastfeeding. However, the content/theme does not indicate how the reader should understand this problem. Possibilities for interpretation include a challenge to overcome, a too heavy or painful burden, a reason to quit, the cause of a health condition, caused by the mother herself, etc. Close reading of key words, phrases, and the like provides the reader frames of reference for interpreting and understanding the content/theme. The interpretation speaks to the perspective or ideology being forwarded. As a second example, the content/theme “health benefits for baby” could refer to observational data of a single or group of mothers, or it could refer to scientific data. Each forwards a different perspective.
RESULTS OF QUANTITATIVE CONTENT ANALYSIS

The main objective of part one of this study was to ascertain how various, popular online magazines and blogs frame breastfeeding. To do so, a quantitative content analysis design was employed, which followed the tenets of framing theory. This chapter reports results of the quantitative content analysis of 437 online magazine articles ($n = 201$) and blog posts ($n = 236$) referencing breastfeeding. Constructs coded and analyzed included what content/themes were covered, which frame types were employed, the valence of frames, whether content was framed in gain or loss terms, and what sources were cited. Further, results were analyzed to determine whether results vary by publication type (magazine or blog) and name (i.e., title).

Content/Themes

The first research question asked what breastfeeding content/themes appear in online magazine articles and blog posts. To answer this question, frequencies for each content item/theme were calculated using IBM SPSS Statistics 25. Table 4.1 includes frequency counts and percentages indicating the presence of each coded content/theme within sample articles and posts (total sample $N = 437$, magazine articles $n = 201$, blog posts $n = 236$). Results indicate the most common content/theme within magazine articles was advice or tips for mothers ($n = 63$, 31.3%), which means suggestions for mothers like how to breastfeed, products to aid in breastfeeding, how best to combat challenges, etc. The most common content/theme in blog posts was physical challenges or issues ($n = 82$, 34.7%), which refers to breast-related issues such as mastitis, engorgement, lack of supply, chafing, bleeding, cracked nipples, etc. Collectively, physical challenges or issues was the most common theme across articles and blog posts ($n = 130$, 29.7%). Other common content/themes – where “common” means appearing more than 20 percent of the time in articles, blogs, or both – included cultural norms or differences, pumping,
controversy surrounding breastfeeding, health benefits to child, and length to breastfeed. An additional three themes appeared more than 10 percent of the time in articles, blogs, or both: organized support, emotional difficulties, and celebrity. The least common content/themes were attachment parenting and risks or warnings of breastfeeding, with both appearing less than six percent of the time in articles and blog posts.

Content/themes not represented in the coding scheme were coded as “other.” A total of 97 (22.2%) articles (n = 47, 23.4%) and blog posts (n = 50, 21.2%) referenced “other” themes. Most were mentioned only rarely, meaning they appear in only one or two articles or posts.

Recurrent themes included donor milk and milk banks (n = 11, 2.5%), wet nursing (n = 7, 1.6%), paternal/partner support (n = 4, .9%), tandem feeding (n = 3, .7%), sleep (n = 3, .7%), and cancer (n = 3, .7%).

Table 4.1

<table>
<thead>
<tr>
<th>Presence of each content/theme in magazine articles and blog posts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content/Theme</td>
</tr>
<tr>
<td>---------------------------------------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Advice or Tips for Mothers</td>
</tr>
<tr>
<td>Attachment Parenting</td>
</tr>
<tr>
<td>Breast is Best</td>
</tr>
<tr>
<td>Celebrity</td>
</tr>
<tr>
<td>Controversy and Breastfeeding</td>
</tr>
<tr>
<td>Cultural Norms or Differences</td>
</tr>
<tr>
<td>Current or Changing Policy</td>
</tr>
<tr>
<td>Emotional Difficulties</td>
</tr>
<tr>
<td>Health Benefits to Child</td>
</tr>
<tr>
<td>Health Benefits to Mother</td>
</tr>
<tr>
<td>Length to Breastfeed</td>
</tr>
<tr>
<td>Organized Support</td>
</tr>
<tr>
<td>Physical Challenges or Issues</td>
</tr>
<tr>
<td>Pumping</td>
</tr>
<tr>
<td>Risks or Warnings Associated with Breastfeeding</td>
</tr>
</tbody>
</table>

*Note. Themes are not mutually exclusive
Frame Type

Hypothesis one posited that episodic frames (i.e., individualized focus or responsibility) would appear more frequently than thematic frames (i.e., community focus or responsibility) in both online magazine articles and blog posts. Frequency of presence was calculated and indicated that episodic ($n = 314, 71.85\%$) frames were overall more common than thematic ($n = 123, 28.15\%$) frames for both magazine articles (episodic: $n = 134, 66.7\%$, thematic: $n = 67, 33.3\%$) and blog posts (episodic: $n = 180, 76.3\%$, thematic: $n = 56, 23.7\%$) in the sample. Thus, H1 was supported.

Frame Valence

Hypothesis two posited that positive valence, where breastfeeding is treated as a good or happy experience, would appear most frequently for both magazines and blogs. Overall, totals for both publication types indicated neutral tone ($n = 210, 48.1\%$) as appearing slightly more frequently than positive ($n = 207, 47.4\%$) and more frequently negative ($n = 20, 4.6\%$). However, when split by magazine article or blog post, results differed. Frequencies for magazine articles indicated positive ($n = 104, 51.7\%$) as most frequently appearing, followed closely by neutral ($n = 92, 45.8\%$) and ending with negative ($n = 5, 2.5\%$) valence. For blogs, neutral ($n = 118, 50\%$) valence was most common, followed by positive ($n = 103, 43.6\%$), and ending with negative ($n = 15, 6.4\%$) as least common. Because positive valence was more frequent in magazine articles, H2 was partially supported.

Gain and Loss Frames

Research question two asked whether magazine articles and blog posts frame information in terms of gains or losses, where gain referred to the positive outcomes of breastfeeding (e.g.,
health benefits to mother or child, emotional bonding) and loss referred to the negative outcomes of not breastfeeding (e.g., increased risk for obesity, financial expenses).

Frequency calculations showed that collectively, magazine articles and blog posts in the sample most often employed neither gain nor loss frames \((n = 336, 76.9\%)\). Gain frames appeared 22.4 percent of the time \((n = 98)\), and loss frames appeared .7 percent of the time \((n = 3)\). When broken by publication type, magazine articles \((n = 146, 72.6\%)\) and blog posts \((n = 190, 80.5\%)\) each similarly tended to use neither gain nor loss frames. Specifically, 53 \((26.4\%)\) magazine articles and 45 \((19.1\%)\) blog posts used gain frames, while 2 \((1.0\%)\) magazine articles and 1 \((.4\%)\) blog post used loss frames. In sum, frequency counts of the present study’s sample indicated that neither magazine articles nor blog posts frequently employed gain or loss frames, though when they did, gain frames were more prevalent than loss frames.

Sources Cited

Hypothesis three posited that online magazine articles and blog posts would more frequently cite expert sources than non-expert sources. To test H3, frequencies were computed. Counts, percentages, and averages for the presence of each source type (expert and non-expert) are shown in table 4.2. On average, magazine articles and blog posts both cited non-expert sources more frequently than expert sources, indicating nonsupport for H3. Analyzing the data another way, the top two source types for magazines (lay parents, social media) and the top three source types for blogs (lay parents, social media, other non-expert) were all non-experts, again indicating nonsupport for H3.

This study also sought to determine what “other expert” sources were cited. Descriptive statistics indicated a total of 74 \((16.9\%)\) magazine articles \((n = 46, 22.9\%)\) and blog posts \((n = 28, 11.9\%)\) referenced other experts. Several expert sources appeared just once or without
identifying characteristics in articles and posts (“a study,” “a dentist,” “a researcher,” etc.). Only those identifiable, recurring expert sources are outlined in table 4.3. Most frequent were the American Academy of Pediatrics and various medical journals. Similarly, references to individuals holding PhDs or identified as professors or researchers were also often cited. Least frequent were registered dieticians and UNICEF.

Table 4.2

Frequency, percent, and average appearance of expert and non-expert sources cited in magazine articles and blog posts.

<table>
<thead>
<tr>
<th>Source</th>
<th>Magazine Articles</th>
<th>Blog Posts</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n=201</td>
<td>n=236</td>
</tr>
<tr>
<td><strong>Expert</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical Doctor</td>
<td>33</td>
<td>7</td>
</tr>
<tr>
<td>Lactation Consultant</td>
<td>14</td>
<td>6</td>
</tr>
<tr>
<td>Other Expert</td>
<td>46</td>
<td>28</td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td>31</td>
<td>13.6</td>
</tr>
<tr>
<td><strong>Non-Expert</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lay Parent</td>
<td>53</td>
<td>70</td>
</tr>
<tr>
<td>Celebrity Parent</td>
<td>23</td>
<td>13</td>
</tr>
<tr>
<td>Public Speaker/Advocate</td>
<td>15</td>
<td>21</td>
</tr>
<tr>
<td>Social Media</td>
<td>51</td>
<td>50</td>
</tr>
<tr>
<td>Other Non-Expert</td>
<td>41</td>
<td>41</td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td>36.6</td>
<td>39</td>
</tr>
</tbody>
</table>

Coding for “other non-expert” sources was also completed. Frequencies indicated a total of 82 (18.8%) articles and blogs cited other non-experts, with 41 (20.4%) magazine articles and 41 (17.4%) blog posts citing these sources. Nearly every mention of an “other non-expert” was a unique, single citation in one article or post. The few recurrent “other non-experts” are outlined in table 4.3. Most frequently cited were photographers, as several articles and posts covered photo shoots meant to normalize breastfeeding and/or honor mothers no matter their feeding method. To note, the *Huffington Post* and other publications or news outlets mentioned less frequently were cited as a source, often without credit to an individual.
Results by Publication Type and Publication Name

Research question three asked whether results of RQ1-2 and H1-H3 varied by publication type and publication name. To answer RQ3, chi square analyses were conducted. The following sections detail chi-square results for content/themes, frame type, frame valence, gain and loss frames, and sources cited by publication type and name.

Content/theme

Chi-square analyses were calculated to determine if the presence of each content/theme differed by publication type. Of the 15 coded themes, five varied significantly by publication type at the $p \leq .05$ level: health benefits to child, $\chi^2(1, N = 437) = 6.413$, emotional difficulties, $\chi^2(1, N = 437) = 6.026$, physical challenges or issues, $\chi^2(1, N = 437) = 6.132$, controversy, $\chi^2(1, N = 437) = 4.267$, and celebrity, $\chi^2(1, N = 437) = 4.165$. One theme varied significantly at the $p \leq .01$ level: length to breastfeed, $\chi^2(1, N = 437) = 10.087$. Online magazines were significantly more likely than blogs to mention health benefits to the child and celebrity. Conversely, blogs were significantly more likely than magazines to mention emotional difficulties, physical challenges or issues, controversy, and length to breastfeed. Table 4.4 shows results of chi-square analyses.

Chi-square analyses were also conducted to determine if the presence of content/themes varied by publication name. (See table 4.5 for percentage of content/theme presence by publication name.) Of the coded themes, five varied significantly by publication name: health benefits to child, $\chi^2(5, N = 437) = 12.991$, advice for mothers, $\chi^2(5, N = 437) = 42.991$, controversy, $\chi^2(5, N = 437) = 20.392$, cultural norms or differences, $\chi^2(5, N = 437) = 16.950$, and length to breastfeed, $\chi^2(5, N = 437) = 16.900$ (see table 4.6).
Table 4.3

*Frequency and percent of appearance "other expert" and "other non-expert" sources*

<table>
<thead>
<tr>
<th>Other Expert Sources</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Academy of Pediatrics</td>
<td>19</td>
<td>4.3</td>
</tr>
<tr>
<td>Medical Journals</td>
<td>19</td>
<td>4.3</td>
</tr>
<tr>
<td>PhD, Professor, Researcher</td>
<td>12</td>
<td>2.7</td>
</tr>
<tr>
<td>Nurses (R.N., Nurse Practitioner)</td>
<td>9</td>
<td>2.1</td>
</tr>
<tr>
<td>Center for Disease Control and Prevention</td>
<td>7</td>
<td>1.6</td>
</tr>
<tr>
<td>World Health Organization</td>
<td>7</td>
<td>1.6</td>
</tr>
<tr>
<td>Doula and/or Midwife</td>
<td>3</td>
<td>.7</td>
</tr>
<tr>
<td>Federal Drug Administration</td>
<td>3</td>
<td>.7</td>
</tr>
<tr>
<td>Registered Dietician</td>
<td>2</td>
<td>.5</td>
</tr>
<tr>
<td>United Nations Children’s Emergency Fund</td>
<td>2</td>
<td>.5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Non-Expert Sources</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Photographer</td>
<td>25</td>
<td>5.7</td>
</tr>
<tr>
<td>Huffington Post</td>
<td>5</td>
<td>1.1</td>
</tr>
</tbody>
</table>

Table 4.4

*Chi-square analyses testing the difference in content/theme by publication type*

<table>
<thead>
<tr>
<th>Content/Theme</th>
<th>Publication Type</th>
<th>$\chi^2$</th>
<th>$\Phi$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Magazine</td>
<td>Blog</td>
<td></td>
</tr>
<tr>
<td>Health benefits to child</td>
<td>47</td>
<td>33</td>
<td>6.413*</td>
</tr>
<tr>
<td>Emotional Difficulties</td>
<td>18</td>
<td>40</td>
<td>6.026*</td>
</tr>
<tr>
<td>Physical Challenges or Issues</td>
<td>48</td>
<td>82</td>
<td>6.132*</td>
</tr>
<tr>
<td>Controversy around BF</td>
<td>31</td>
<td>55</td>
<td>4.267*</td>
</tr>
<tr>
<td>Celebrity</td>
<td>24</td>
<td>15</td>
<td>4.165*</td>
</tr>
<tr>
<td>Length to BF</td>
<td>24</td>
<td>56</td>
<td>10.087*</td>
</tr>
</tbody>
</table>

*Note. * = $p \leq .05$, ** = $p \leq .01$*
Frame type

A chi-square was conducted to assess whether frame type (episodic or thematic) differed by publication type (magazine articles or blog posts). The result for this test was significant: $\chi^2 (1, N = 437) = 4.95, p < .05$ (see table 4.7). Blogs were significantly more likely than magazines to employ an episodic frame.

An additional chi-square was conducted to assess whether publication titles differed by frame type (episodic: Parents $n = 62$, Fit Pregnancy and Baby $n = 60$, Parenting $n = 12$, Scary Mommy $n = 71$, BabyCenter Blog $n = 76$, Mom Blog Society $n = 33$, thematic: Parents $n = 28$, Fit Pregnancy and Baby $n = 36$, Parenting $n = 3$, Scary Mommy $n = 29$, BabyCenter Blog $n = 24$, Mom Blog Society $n = 3$). The result for this test was significant: $\chi^2 (5, N = 437) = 12.910, p < .05$ (see table 4.8).

Frame valence

A chi-square was conducted to determine if magazine articles and blog posts differed in valence or tone (positive: articles $n = 104$, blogs $n = 103$, negative: articles $n = 5$, blogs $n = 15$, neutral: articles $n = 92$, blogs $n = 118$). The result for this test was not significant: $\chi^2 (2, N = 437) = 5.46, p > .05$.

An additional chi-square was conducted to assess whether publication titles differed by frame valence (positive: Parents $n = 47$, Fit Pregnancy and Baby $n = 49$, Parenting $n = 8$, Scary Mommy $n = 39$, BabyCenter Blog $n = 50$, Mom Blog Society $n = 14$, negative: Parents $n = 2$, Fit Pregnancy and Baby $n = 2$, Parenting $n = 1$, Scary Mommy $n = 9$, BabyCenter Blog $n = 6$, MomBlog Society $n = 0$, neutral: Parents $n = 41$, Fit Pregnancy and Baby $n = 45$, Parenting $n = 6$, Scary Mommy $n = 52$, BabyCenter Blog $n = 44$, Mom Blog Society $n = 22$). The result for this test was not significant: $\chi^2 (10, N = 437) = 14.198, p > .05$.
### Table 4.5

**Percentage of content/theme presence by publication name**

<table>
<thead>
<tr>
<th>Content/Theme</th>
<th>Parents (n = 90)</th>
<th>Fit Pregnancy and Baby (n = 96)</th>
<th>Parenting (n = 15)</th>
<th>Scary Mommy (n = 100)</th>
<th>BabyCenter Blog (n = 100)</th>
<th>Mom Blog Society (n = 36)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child’s health</td>
<td>28.9</td>
<td>19.79</td>
<td>13.3</td>
<td>9.0</td>
<td>18.0</td>
<td>20.0</td>
</tr>
<tr>
<td>Advice</td>
<td>27.8</td>
<td>33.3</td>
<td>40.0</td>
<td>13.0</td>
<td>21.0</td>
<td>66.7</td>
</tr>
<tr>
<td>Controversy</td>
<td>18.9</td>
<td>12.5</td>
<td>13.3</td>
<td>29.0</td>
<td>26.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Culture</td>
<td>17.8</td>
<td>21.9</td>
<td>13.3</td>
<td>30.0</td>
<td>27.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Length to BF</td>
<td>18.9</td>
<td>6.3</td>
<td>6.7</td>
<td>26.0</td>
<td>24.0</td>
<td>16.7</td>
</tr>
</tbody>
</table>

### Table 4.6

**Chi-square analyses testing the difference in content/theme by publication name**

<table>
<thead>
<tr>
<th>Content/Theme</th>
<th>Parents</th>
<th>Fit Pregnancy and Baby</th>
<th>Parenting</th>
<th>Scary Mommy</th>
<th>BabyCenter Blog</th>
<th>Mom Blog Society</th>
<th>(\chi^2)</th>
<th>V</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health benefits to child</td>
<td></td>
<td></td>
<td>26</td>
<td>19</td>
<td>2</td>
<td>9</td>
<td>18</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>28.9%</td>
<td>19.8%</td>
<td>13.3%</td>
<td>9.0%</td>
<td>18.0%</td>
<td>16.7%</td>
<td>12.991*</td>
<td>.172</td>
</tr>
<tr>
<td>Cultural norms or differences</td>
<td>16</td>
<td>21</td>
<td>2</td>
<td>30</td>
<td>27</td>
<td>0</td>
<td>16.950**</td>
<td>.197</td>
</tr>
<tr>
<td></td>
<td>17.8%</td>
<td>21.9%</td>
<td>13.3%</td>
<td>30.0%</td>
<td>27.0%</td>
<td>0.0%</td>
<td>16.900**</td>
<td>.197</td>
</tr>
<tr>
<td>Length to BF</td>
<td></td>
<td></td>
<td>17</td>
<td>6</td>
<td>1</td>
<td>26</td>
<td>24</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>18.9%</td>
<td>6.3%</td>
<td>6.7%</td>
<td>26.0%</td>
<td>24.0%</td>
<td>16.7%</td>
<td>16.900**</td>
<td>.197</td>
</tr>
<tr>
<td>Advice or tips for mothers</td>
<td></td>
<td></td>
<td>25</td>
<td>32</td>
<td>6</td>
<td>13</td>
<td>21</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>27.8%</td>
<td>33.3%</td>
<td>40.0%</td>
<td>13.0%</td>
<td>21.0%</td>
<td>66.7%</td>
<td>42.991***</td>
<td>.314</td>
</tr>
<tr>
<td>Controversy around BF</td>
<td></td>
<td></td>
<td>17</td>
<td>12</td>
<td>2</td>
<td>29</td>
<td>26</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>18.9%</td>
<td>12.5%</td>
<td>13.3%</td>
<td>29.0%</td>
<td>26.0%</td>
<td>0.0%</td>
<td>20.392***</td>
<td>.216</td>
</tr>
</tbody>
</table>

*Note.* \(* = p \leq .05, ** = p \leq .01, *** = p \leq .001\)*
**Gain and loss frames**

A chi-square test was conducted to determine whether magazine articles and blog posts differed in their use of gain and loss frames (gain: articles $n = 53$, blogs $n = 45$, loss: articles $n = 2$, blogs $n = 1$, neither: articles $n = 146$, blogs $n = 190$). The result of this test was not significant: $\chi^2(2, N = 437) = 3.97, p > .05$. The chi-square revealed that publication types do not differ in their framing of information in terms of gains, losses, or neither.

An additional chi-square analysis was conducted to assess whether publication names differed in their use of gain and loss frames (gain: Parents $n = 25$, Fit Pregnancy and Baby $n = 26$, Parenting $n = 2$, Scary Mommy $n = 15$, BabyCenter Blog $n = 21$, Mom Blog Society $n = 9$, less: Parents $n = 1$, Fit Pregnancy and Baby $n = 1$, Parenting $n = 0$, Scary Mommy $n = 0$, BabyCenter Blog $n = 1$, Mom Blog Society $n = 0$, neither: Parents $n = 64$, Fit Pregnancy and Baby $n = 69$, Parenting $n = 13$, Scary Mommy $n = 85$, BabyCenter Blog $n = 78$, Mom Blog Society $n = 27$). The result of this test was not significant: $\chi^2(10, N = 437) = 8.659, p > .05$.

**Sources cited**

Chi-square analyses were conducted to determine if articles and blog posts differed in their use of expert and non-expert sources. Results of chi-square analyses for each source type indicated significant differences between magazine articles and blog posts for four source types: medical doctors, $\chi^2(1, N = 437) = 23.621$, lactation consultants, $\chi^2(1, N = 437) = 4.862$, other experts (e.g., scientists/researchers, journals, nurses, and midwives), $\chi^2(1, N = 437) = 9.374$, and celebrity parents, $\chi^2(1, N = 437) = 5.057$, as shown in table 4.9. Magazine articles cited medical doctors, lactation consultants, other experts, and celebrity parents significantly more than did blog posts.
Additional chi-square analyses were conducted to determine if publication titles differed in their use of expert and non-expert sources. Results of chi-square analyses for each source type indicate significant differences between publication titles for medical doctors, $\chi^2 (5, N = 437) = 27.074$, and lay parents, $\chi^2 (5, N = 437) = 19.206$ (at the $p \leq .05$ level), as well as for lactation consultants, $\chi^2 (5, N = 437) = 11.543$, and other experts, $\chi^2 (5, N = 437) = 13.046$ (at the $p \leq .01$ level), (see table 4.10).

<table>
<thead>
<tr>
<th>Frame Type</th>
<th>Publication Type</th>
<th>Magazine</th>
<th>Blog</th>
<th>$\chi^2$</th>
<th>$\Phi$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Episodic</td>
<td></td>
<td>134</td>
<td>180</td>
<td>4.951*</td>
<td>-.106</td>
</tr>
<tr>
<td></td>
<td>Episodic</td>
<td>66.7%</td>
<td>76.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thematic</td>
<td></td>
<td>67</td>
<td>56</td>
<td>11.543</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Thematic</td>
<td>33.3%</td>
<td>23.7%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. * $= p \leq .05$
Table 4.8

Chi-square analysis testing the difference in frame type by publication name

<table>
<thead>
<tr>
<th>Frame Type</th>
<th>Publication Name</th>
<th>Parents</th>
<th>Fit Pregnancy and Baby</th>
<th>Parenting</th>
<th>Scary Mommy</th>
<th>BabyCenter Blog</th>
<th>Mom Blog Society</th>
</tr>
</thead>
<tbody>
<tr>
<td>Episodic</td>
<td></td>
<td>62</td>
<td>60</td>
<td>12</td>
<td>71</td>
<td>76</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td></td>
<td>68.9%</td>
<td>62.5%</td>
<td>80.0%</td>
<td>71.0%</td>
<td>76.0%</td>
<td>91.7%</td>
</tr>
<tr>
<td>Thematic</td>
<td></td>
<td>28</td>
<td>36</td>
<td>3</td>
<td>29</td>
<td>24</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>31.1%</td>
<td>37.5%</td>
<td>20.0%</td>
<td>29.0%</td>
<td>24.0%</td>
<td>8.3%</td>
</tr>
</tbody>
</table>

Note. * = p ≤ .05,

Table 4.9

Chi-square analyses testing the difference in the use of expert and non-expert sources by publication type

<table>
<thead>
<tr>
<th>Expert Source</th>
<th>Publication Type</th>
<th>Magazine</th>
<th>Blog</th>
<th>( \chi^2 )</th>
<th>( \Phi )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical doctor</td>
<td></td>
<td>33</td>
<td>7</td>
<td>23.621***</td>
<td>.23</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16.4%</td>
<td>3.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lactation consultant</td>
<td></td>
<td>14</td>
<td>6</td>
<td>4.862*</td>
<td>.10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7.0%</td>
<td>2.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other expert</td>
<td></td>
<td>46</td>
<td>28</td>
<td>9.374**</td>
<td>.14</td>
</tr>
<tr>
<td></td>
<td></td>
<td>22.9%</td>
<td>11.9%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Expert Source</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Celebrity parent</td>
<td></td>
<td>23</td>
<td>13</td>
<td>5.057*</td>
<td>.10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11.4%</td>
<td>5.5%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. * = p ≤ .05, ** = p ≤ .01, *** = p ≤ .001
Table 4.10

*Chi-square analyses testing the difference in the use of expert and non-expert sources by publication name*

<table>
<thead>
<tr>
<th>Expert Source</th>
<th>Publication Name</th>
<th><em>Parents</em></th>
<th><em>Fit Pregnancy and Baby</em></th>
<th><em>Parenting</em></th>
<th><em>Scary Mommy</em></th>
<th><em>BabyCenter Blog</em></th>
<th><em>Mom Blog Society</em></th>
<th>$\chi^2$</th>
<th>V</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical doctor</td>
<td></td>
<td>13</td>
<td>19</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>27.074**</td>
<td>.249</td>
</tr>
<tr>
<td>Lactation consultant</td>
<td></td>
<td>4</td>
<td>10</td>
<td>0</td>
<td>2</td>
<td>4</td>
<td>0</td>
<td>11.543*</td>
<td>.163</td>
</tr>
<tr>
<td>Other expert</td>
<td></td>
<td>20</td>
<td>25</td>
<td>1</td>
<td>11</td>
<td>13</td>
<td>4</td>
<td>13.046*</td>
<td>.173</td>
</tr>
<tr>
<td>Non-Expert Source</td>
<td></td>
<td>24</td>
<td>24</td>
<td>5</td>
<td>29</td>
<td>40</td>
<td>1</td>
<td>19.206**</td>
<td>.210</td>
</tr>
</tbody>
</table>

*Note. * $p \leq .05$, ** $p \leq .01,*
RHETORICAL FRAMING ANALYSIS

Whereas part one of this study sought to determine how online magazine articles and blog posts frame breastfeeding, part two of this study sought a more nuanced understanding of how such frames serve to perpetuate ideological stances and agendas that complicate infant feeding decisions. To accomplish this goal, this chapter critically and rhetorically analyzed individual magazine articles and blog posts representing the most and least frequently employed content/themes as determined in part one of this study.

Importantly, in a rhetorical framing analysis, as Kuypers (2010) describes it, themes come from topic whereas frames come from how the theme is treated or portrayed, which is discernible via linguistic markers such as words, phrases, captions, etc. As such, the goal of this analysis was to ascertain how the most and least frequently covered themes in magazine articles and blog posts were treated (or framed), with particular attention paid to the rhetorical and ideological implication(s) of those frames. The artifacts selected for analysis in this chapter were selected based on data analyzed in chapter four (see table 4.3). The next two sections organize an analysis of most frequent and least frequent themes. Each section begins by explaining the process of selecting the three most or the three least frequent themes. Each section then presents themes with representative magazine articles or blog posts and the analysis of the framing and ideological representations of the artifact as it relates to breastfeeding.

Ultimately, the chapter argues that despite results of the content analysis showing an increase in diverse topical coverage and neutral treatment of breastfeeding issues, magazine article and blog post authors continue to both explicitly and implicitly support a culturally dominant understanding of breastfeeding as superior (i.e., “breast is best”). Such overt and covert ideological framing ignores the existence of alternative perspectives and experiences, breeds
guilt and shame among mothers who cannot or wish not to breastfeed by making them feel as though they have somehow failed, and potentially limits or halts dialogue completely.

**Frequently Appearing Content or Themes**

When comparing the three most common themes across magazines and blogs, overlapping themes included physical challenges and advice or tips for mothers (see table 5.1). The next most frequent theme, overall, was pumping. Each of the most frequent content/themes appeared in at least 100 articles or blog posts. As such, identifying a *single* artifact to represent the entire theme (and all frames within the theme) proves challenging. Thus, the following sections primarily focus on an individual, representative example within each theme but also incorporate examples of framing used in other relevant articles and posts.

Table 5.1

<table>
<thead>
<tr>
<th>Content/Theme</th>
<th>Magazine Articles %</th>
<th>Blog Posts %</th>
<th>Combined %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advice/Tips</td>
<td>31.3</td>
<td>24.6</td>
<td>27.7</td>
</tr>
<tr>
<td>Pumping</td>
<td>25.4</td>
<td>24.2</td>
<td>23.8</td>
</tr>
<tr>
<td>Physical Challenges</td>
<td>23.9</td>
<td>34.7</td>
<td>29.7</td>
</tr>
</tbody>
</table>

*Note. Percentages of content/theme presence come from table 4.3 and represent the full sample (N =437, not the average of the two publication types).*

**Physical challenges or issues**

In this theme, the most frequent among both blog posts and the third most frequent theme in magazine articles, physical challenges such as pain, milk supply (low or high production), engorgement, mastitis, etc., were often explicitly treated as problematic but not impossible to overcome. That is, the breastfeeding in the presence of physical challenges was framed as “painful but possible,” “hard but worth it,” “an obstacle to overcome,” “a challenge that will get better,” or (more sparingly) “just plain hard.” Implicit is the ideological frame. Why is it necessary to overcome the pain? Because breastfeeding is worth it, breastfeeding has value,
mothers should breastfeed. The following paragraphs analyze key instances of these frames appearing in BabyCenter Blog.

Written by a mother who experienced inexplicable pain when learning to nurse for the first time, the post “Pain but no problem: My breastfeeding drama” sets up the expectation of a drama-filled story about breastfeeding and its accompanying pain. Such a story would indeed deviate from what Seals Allers (2017) describes as the archetypal “idyllic-meadow scenario” (p. 204) proffered by many communicators, and instead deliver a truer account of how breastfeeding functions for a large number of women: it is painful, and it is hard. Period.

In reality, though, the “no problem” portion of the post’s title tells more its true content. That is, the post’s framing serves to establish that new mothers should endure the pain associated with breastfeeding, since it is normal. In other words, where “pain” and “drama” in the title foreshadow a discussion of the problems associated with breastfeeding, the post actually oscillates between breastfeeding being painful and pain being worth it, always ending with the latter such that a pro-breastfeeding perspective is consistently and ultimately reinforced. In this way, the title foreshadows the author’s “back-and-forth” organizational scheme that ultimately ends with a strong and explicit endorsement of breastfeeding consistent with the dominant ideology that tells mothers they should breastfeed.

The opening sentences of the post follow the same vacillating pattern. The post opens with Hodges (2016) explaining that she expected days “filled with drama” early on, but research told her “a little bit of fortitude” would quickly remedy issues. “Drama” connotes the author’s expectation of an over-the-top, intense experience with breastfeeding rather than a run-of-the-mill bout with nipple pain; however, immediately following “drama” are “little bit” and “fortitude,” alluding to the conclusion that all mothers can easily overcome the so-called drama
with a small amount of strength or determination. The opening lines thus act as a kind of refutation against any argument that breastfeeding may not be worth it because the pain can so easily be overcome. In this way, the author implicitly states that mothers should breastfeed.

In her next statement, Hodges back peddles. She returns to the negatives of breastfeeding, stating that her research was wrong (i.e., a “bit of fortitude” will not remedy the problems) and that for “the first two weeks, every time my daughter latched I experienced toe-curling pain” (Hodges, 2016). At this point, readers likely expect Hodges to continue in her description of the pain and drama of breastfeeding, at last offering an alternative to the mantra that mothers should endure the pain. Instead, the author shifts back to breastfeeding pain as worth it in her next paragraph, which details conversations with lactation consultants. The professionals explained to her that, for all her pain, there was no problem: her baby’s latch – which is typically to blame for any pain – was fine, the infant was not ill or tongue-tied, and the baby was gaining weight. The message Hodges (2016) received from consultants was to “[w]ait it out. Breastfeeding hurts, but it’s worth it.” The inclusion of outside sources again eludes to the dominant ideology that breast is best. That is, lactation consultants represent the medical community, which fully endorses breastfeeding.

At this point, any reader expecting sympathy or proactive measures to combat unexplainable pain are likely left more defeated than before. Here is a mother, who knows the pain of breastfeeding, telling readers that breastfeeding pain is normal and will dissipate if only they wait it out. While perhaps meant to console mothers, the statement insinuates that unless breastfeeding pain is related to her infant’s latch, it does not deserve attention, relegating the mother’s physical and emotional well-being below that of her child’s. Put another way, the
author’s and lactation consultants’ messages convey to mothers that their pain does not matter; what matters is that their baby receives breast milk, for breast is best.

Beyond that, the author’s use of the terms “relish,” “opportunity,” “soothe,” and “bond” to describe her current breastfeeding relationship in the next paragraph likely produce guilt in mothers having come to the post looking for sympathy, support, and suggestions (Hodges, 2016). Thus, readers are again left with the explicit message that pain is expected and will dissipate if they only just wait, and the implicit message that should endure pain in order to breastfeed, since breastfeeding is what society expects of mothers wanting to provide the best for their children.

The intent behind telling mothers pain will subside is likely to give reassurance, and some mothers may indeed react positively to the message; that is, they may find comfort in the fact that others have faced similar pain and still succeeded in their breastfeeding endeavor. However, for other mothers – who may have come to the post looking for answers, sympathy, or compassion and who may feel so defeated they want to quit – it seems guilt and/or shame would be a natural response to a message like Hodges’, undermining her seemingly good intent.

Consider the outlet, too. Blogs, both institutional and personal, occupy a social space wherein authors share their (or others’) experiences, offering them up and opening the way for conversation among readers who do – and do not – find common ground with them. In the case of Hodges’ post, the opposite seems to happen. In light of the value-laden terminology used to describe pain (normal, worth it) and breastfeeding (relish, opportunity, bond, etc.) as well as the continued return to a place of support for breastfeeding, readers are unlikely to take a contradictory stance or voice a dissenting opinion. Instead, any conversation is likely to affirm or reinforce Hodges’ message such that the dominant ideology is reinforced and any conversation to the contrary effectively shut down.
A second author took a different, less common but perhaps more effective approach to the theme of physical challenges. The post deserves mention for its ability to invite dialog without requiring that the author lose her overall message of support for breastfeeding. Coming again from BabyCenter Blog, author Laura Falin (2017) wrote “5 awkward moves only breastfeeding moms know” with an air of levity not commonly found outside of Scary Mommy posts. (Scary Mommy’s mission includes reference to humor.) While her writing can at times isolate or exclude – for example, her reference to babies as “she” and “her” leaves out mothers to infant sons – Falin also makes positive moves in her writing meant to include and recognize variable life situations and beliefs about breastfeeding.

For instance, Falin (2017) begins noting that prenatal breastfeeding classes cannot prepare one for the realities of breastfeeding and that she would like to relay these realities for mothers “if [they], too, plan to breastfeed [their] baby” (Falin, 2017, emphasis added). Two points bear mentioning here. First is Falin’s critique of prenatal classes, classes frequently taught by medical professionals who support breastfeeding as the optimal choice. Of course, Falin does not criticize the act of breastfeeding itself, and in fact, her ultimate goal is to provide information to help mothers succeed at breastfeeding; nonetheless, in stating that these classes cannot prepare one for the realities of breastfeeding, Falin opens the door for others to provide their own thoughts on the issue. Second, noteworthy is Falin’s use of a condition statement (i.e., an if-then structure), which leaves open the possibility that expectant or new mothers reading this post may opt not to breastfeed. Unlike many other writers, this author does not assume her audience will invariably choose to breastfeed; she recognizes the decision is not hers but the mother’s. Again, she implicitly invites commentary.
The conditional structure also brings to mind “contingency,” a key rhetorical term, for rhetoric is concerned with disputable or arguable issues (Jasinski, 2001, p. 108). A complete and exhaustive explanation of the term extends beyond the scope of this discussion, for the term is among those “complex and elusive” to rhetorical scholars (p. 108). Suffice to say that in this context, contingency manifests in the “alternative possibilities” (p. 108) brought about and implied by the conditional clause. That is, here, necessity does not mandate a mother’s actions where her child’s nourishment is concerned; rather, her actions are contingent. Multiple alternatives exist, and she chooses depending on her circumstance and perspective.

Exhibiting similar notions of contingency is awkward move number five, entitled “The Panicked Partner” rather than “The Panicked Husband” or “The Panicked Babysitter.” This heading serves two purposes. First, it recognizes alternatives, i.e., contingencies, to a heterosexual lifestyle and the fact that not all families are nuclear. Second, in the absence of a qualifier, “partner,” leaves room for additional possibilities – the partner need not be a romantic one but anyone partnering with the mother to care for the child. Indeed, the accompanying text points to this as well. The first sentence reads, “This move can really be performed by anyone who watches your baby and is not you” (Falin, 2017). Further, the whole of the paragraph avoids use of any gender-specific pronouns, instead always referring to the individuals as “partners” or by the plural “they.” Moments like these were not overwhelmingly common in this study’s sample but were included here to show how authors, especially blog writers, can frame the topic of breastfeeding (and its physical challenges) in a way that alleviates some pressure, leaves room for alternative perspectives and ideologies, and even brings humor to the discussion – without necessitating a change in the author’s pro-breastfeeding stance.
Advice or tips for mothers

Giving advice or tips to breastfeeding mothers was the most common theme in magazine articles and the second most frequently covered theme among blog posts. Importantly, articles and blogs were written in varying styles. Some included more generalized advice like, “Hang in there; it will get better,” while others provided more practical and concrete strategies to mothers. Also, some were written using imperative mood (i.e., “Follow these tips”), whereas others were written in a more informative style, absent of any command or instruction. Still others followed a question-and-answer format.

Regardless of style, within the larger theme attention was split between clothing that better affords breastfeeding, actions to take post-delivery or postpartum, steps to increase milk supply (e.g., foods to eat), instruction for pumping or hand expressing breast milk, and several others. Often breastfeeding advice was provided in passing – that is, a breastfeeding tip or two was embedded in an article or post about motherhood in general. Treatment of the theme (frames used and the ideological stances they symbolize) ultimately emphasized breastfeeding as possible or achievable – “ways to succeed at breastfeeding” or “how to improve breastfeeding.” In this way, the dominant ideology of breast as optimal was implied, for why would messages provide advice if not to enable mothers to enact the preferred behavior? To note, ideologies were also often couched in the negatives of breastfeeding, meaning multiple frames were present, though all led to the conclusion of a pro-breastfeeding stance. For instance, advice or tips were often suggestions to make breastfeeding easier, implying its initial difficulty but at the same time suggesting a need to continue the behavior.

Given the purpose within this theme is to provide advice and the audience is mothers who breastfeed (and want to), the presence of pro-breastfeeding ideologies is no surprise. Interesting,
though, was how sentence structures and word choices within these messages could also be interpreted as pushing or urging mothers down a singular path and perhaps adding pressure or guilt. The following pages take an in-depth look at one such article, written by lactation consultant Wendy Wisner and published in *Fit Pregnancy and Baby*.

From the title, “Bottle Feeding Tips for Breastfeeding Mamas,” one can surmise that the author writes to mothers who breastfeed and seeks to give them tips they can use when introducing bottles (Wisner, 2017). The subtitle gives more context, referring to the tips as “smart strategies” mothers can use to help “bottle feeding and breastfeeding work well together” if they worry about nipple confusion. To note is use of the word “smart” in front of “strategies.” The intention seems to be that strategies in this article are wise, whereas the implication is that other strategies are unwise or not to be followed, that the ones presented herein are better than others. An added implication here is that breastfeeding and bottle feeding should *not* work well together, but they can *if* mothers employ these *smart* strategies. In a single sentence, the writer has indicated to readers (i.e., breastfeeding mothers) that they need these strategies in order to reconcile two inherently disparate feeding methods. Readers may similarly infer from the sentence the preferred situation is one in which breastfeeding *at the breast* continues, thereby reinforcing breastfeeding as ideal and bottle feeding alone (whether it is breast milk or formula) as problematic.

The opening paragraph goes on to say that “[a]lmost all breastfeeding moms have times when they need to be away from their babies,” and at these times, their infant will require a bottle instead of the breast. Mothers, then, “worry” about “nipple confusion,” where the baby begins to “prefer” the bottle over the breast (Wisner, 2017). Such statements imply bottle feeding’s convenience (possible in the mother’s absence) and ease (babies begin to prefer the
bottle), two seemingly positive characteristics that might suggest favoritism for bottle feeding; however, use of “worry” and “nipple confusion” suggest otherwise. Readers are to understand the convenience and ease of bottle feeding as negative traits liable to threaten an already tenuous and inconvenient breastfeeding relationship. And why would a mother desire to prolong a challenging breastfeeding relationship? The ideological implication is because breastfeeding is ideal.

Paragraphs two and three serve to further explicate the problem of nipple confusion: As a lactation consultant, the author explains she has been asked whether nipple confusion exists and whether preventative measures can be taken. After indirectly confirming its existence “depends on the baby,” Wisner (2017) ignores the second part of the question and goes on to explain why nipple confusion happens. She states the reason has to do with bottle feeding being “easier” to manage: bottle nipples are firmer and “less difficult to latch on to,” and they have a more consistent and faster flow. In other words, according to the lactation consultant, breastfeeding is harder and more difficult whereas bottle feeding is easier and more consistent.

One might question why a lactation consultant – an individual whose profession relies on mothers who breastfeed – would speak of breastfeeding in such negative terms. In this case, Wisner (2017) likely knows that her audience of breastfeeding mothers understand and prescribe to the dominant ideology of breastfeeding as preferred, and any negative attention paid to breastfeeding is unlikely to affect their desire to breastfeed. Instead, by suggesting how easily bottle feeding can undermine the desired breastfeeding relationship, Wisner (2017) instills doubt and fear in her readers. Once the fear takes hold and readers recognize the inherent challenges to a successful breastfeeding relationship, they are likely to want and may be more open to adopting the strategies Wisner next offers. In this way, Wisner (2017) is able to address apparent
negatives of breastfeeding (inconvenience and difficulty) early on before then reinforcing and strengthening an ultimately pro-breastfeeding ideology. In other words, Wisner (2017) uses a fear appeal.

To note, fear appeals begin by explicating the severity and susceptibility of a threat (that the baby will refuse to nurse) before offering coping strategies meant to lessen or alleviate the threat (recommendations to minimize the likelihood that the baby will refuse to nurse and increase the likelihood of success at breast and bottle feeding together) (Benoit & Benoit, 2008). In other words, the author must provide solutions vulnerable individuals can enact. In this instance, the author does just that. However, as the following paragraphs explain, the strategy is not without problems, for it pushes mothers down a singular path of breastfeeding and potentially leaving them more fearful and less empowered.

First, the whole of paragraph four transitions to the solution: “But don’t fret. If your baby is having an issue switching between breastfeeding and bottle feeding – or if you just want to prevent this from happening in the future – there are some concrete actions you can take to make bottle feeding and breastfeeding work well together” (Wisner, 2017). Not only does the author tell mothers not to worry if their baby is showing signs of nipple confusion or a preference for bottle feeding, she tells them the steps she provides can prevent the problem from beginning in the first place. The implication here is obvious: breastfeeding mothers need to follow these strategies in order to ensure their breastfeeding relationship remains uninterrupted by the introduction of bottle feedings.

Next, the author provides six strategies for mothers to adopt. Importantly, none stand on their own. Instead, following each strategy is an elaboration or explanation of its rationale and/or
concrete instructions for mothers to follow. The text accompanying each strategy indicates the frames and ideologies. For example, number three reads as follows:

3. A good milk supply = a happy baby, so make sure you pump every time your baby receives a bottle. It can be hard to keep up with pumping, especially while you’re busy working, but pumping as frequently as you breastfeed is important for keeping up your milk supply. A hearty milk supply will keep your baby happy and content at the breast. (Wisner, 2017)

The author gives mothers a concrete, simple, and easy-to-follow directive: pump every time baby has a bottle. In this way, the fear appeal is complete. Moreover, the author states she understands the challenges of pumping while working, a tactic likely meant to earn mothers’ trust and confidence by identifying a common understanding that pumping is time consuming and not always easy when not at home. However, the author’s sentence structure and word choice communicate additional meaning, not altogether supportive of all mothers. First, the bolded statement establishes a cause-effect relationship between pumping and a “good” milk supply, implying pumping is the only way to maintain one’s supply and that not pumping will leave one with a “bad” milk supply and an unhappy baby.

Second, also interesting is the author’s choice to use “hearty” over other terms when referring to milk supply. The root word, “heart,” signifies the organ located in one’s chest, which makes sense given the topic of breastfeeding. “Heart” also symbolizes love. This, combined with the terms “happy” and “content” lead one to interpret that a hearty milk supply is synonymous with love and happiness between a mother and her infant. Here again, the ideological stance promotes breastfeeding as necessary, but it leaves no room for other ways to show an infant love. Put another way, a mother’s love is reduced to the breast milk she provides her baby.
Other tips similarly promote breastfeeding as much as possible in order to alleviate the threat of nipple confusion and bottle preference. Moreover, "the article concludes with statements in support of breastfeeding: “Breastfeeding is not just a feeding method – it’s a way to bond with your baby. Keeping that in mind, and remembering to offer the breast for comfort as well as food, will help keep your breastfeeding relationship alive despite the separations you and your baby face.” Again, the sentiment is not unexpected given the purpose and audience; however, connotations are not always positive. For instance, use of “alive” in the second sentence connotes its opposite, “death,” suggesting nipple confusion and bottle preference among babies means the death of one’s breastfeeding relationship, an extreme consequence.

Considering the author is writing to mothers who want to continue breastfeeding, it is not surprising to see pro-breastfeeding ideologies permeate the article; however, the author goes beyond support of breastfeeding – she employs a fear tactic meant to urge mothers into adopting the particular strategies she provides, and her word choice suggests breastfeeding (and pumping) is the only way to establish and maintain a loving bond with one’s child. These types of suggestions were not uncommon in articles and blog posts, but they can negatively impact mothers by insinuating they must continue breastfeeding or risk the bond they share with their baby. More effective may be a restructuring of the article to avoid playing on mothers’ emotions and insinuating all bottle feeding as troublesome or problematic; reframing the article to more positive present tips meant to assist in a transition to non-exclusive breastfeeding; and/or noting that even if an infant prefers the bottle and stops feeding at the breast, it does not signal the end of one’s mother-child bond.
Pumping

The third most common theme among magazine articles and blog posts was pumping. Few articles or posts addressed how to use a pump, and few included recommendations or advertisements for a particular kind or brand of pump. More often, authors mentioned the theme in passing. Articles and posts emphasizing pumping most often did so in order to highlight it as a means to facilitate breast milk donation and/or nourish premature infants. In other words, the articles served to highlight pumping as a way to ensure premature infants receive the “best” nutrition possible. Ideological frames were made evident not only by the inclusion of particular topics but also by the apparent and obvious exclusion of others. The following paragraphs analyze one article covering pumping in connection to preemie care.

First, as its title suggests, “Preemie Basics,” written by Nancy Gottesman and published in *Parents* magazine, targets mothers of premature infants. The “guide to nurturing” spans several “basics,” of which pumping is the first (Gottesman, n.d., p. 1). Including pumping as the first section in this article tells readers that pumping – and breast milk by extension – is of the utmost importance to preemies. It outranks both skin-to-skin contact and sleeping position, which appear second and third in the article. Pumping’s very placement thus pressures mothers of premature infants to follow the directive and begin pumping as soon as possible, “within hours of delivery” (p. 2).

Second, text within each of this section’s two-paragraphs similarly pressures mothers to pump. It does so first by stating breast milk’s superiority to formula: “Preterm formulas can provide all the nourishment your baby needs to develop, but your breast milk has one advantage: It contains antibodies that will protect him from infections his immune system can’t fight off” (p. 2). Needless to say, the statement explicitly places breast milk above formula for its protective
immunologically-protective qualities: breast is best, and mothers of preemies should breastfeed if they want to prevent illness in their children.

Importantly, such a message goes beyond support for breast milk. By clearly indicting formula as deficiency, the article communicates to mothers that unless they pump, they fail to do what is best for their new infant and potentially invite harm (i.e., sickness). A likely consequence is silence on the part of formula-feeding mothers so as to avoid feelings of shame or guilt for their “lesser” decision, a decision they may have had no part in making if, for example, their milk has not yet come in or their body does not respond to the pump.

Moreover, the article suggests that all mothers will be able to pump and that they will feel empowered when they do:

Perhaps one of the best arguments for pumping (which you need to do every three hours until your baby can nurse) is how it will make you feel. ‘With their baby in the NICU, a lot of moms feel helpless,’ says Mandy Brown Belfort, MD, a neonatologist in the NICU at Children’s Hospital Boston. ‘Breastfeeding gives you a sense of empowerment because you know you’re the only person who can provide this for your baby. (Gottesman, n.d., p. 2)

Interestingly, the paragraph starts by acknowledging that the author is making an “argument” to pump; she thus indicates that mothers take convincing to pump. In response to this supposed need for an argument then, the author tells mothers they will feel better about having a premature infant if only they pump, a presumption that may or may not prove true considering that some mothers’ milk does not come in until several days postpartum, some are unable to pump (e.g., their bodies do not respond well to the mechanized stimulation), some do not enjoy the physical feeling of a pump attached to their breast, and some prefer to hand express their milk. In other
words, the argument here seems applicable only to a small margin of mothers rather than resonating with the whole of the article’s target audience. In this way, the article limits dialog only to those select mothers capable and desiring to pump; other opinions, experiences, and ideologies are not invited to partake in the conversation.

Also of interest is the final clause. New mothers, let alone mothers of premature infants, are prone to stress, anxiety, and depression (Jalal et al., 2017). Indeed, as Dr. Belfort indicates, one emotion they often feel is helplessness (Gottesman, n.d.). Asserting that they “need” to pump puts added (and immediate) pressure on these women to succeed. (Mothers of full term infants do not face the same urgency, since it is not recommended to introduce bottles until at least four weeks, once breastfeeding has been established.) Further, declaring the mother is the “only” one who can meet the “special nutrient needs” (Gottesman, n.d.) of the preemie insinuates that if they fail to successfully pump breast milk (or choose not to), no one else will be able to step in. Such statements not only reinforce the dominant ideology of breast as best but likely induce anxiety and distress, which can then adversely affect mothers’ ability to breastfeed successfully (Jalal et al., 2017; Obrien, Buikstra, & Hegney, 2008), an outcome opposite the desired effect.

The above is not to say that Gottesman’s article (and others like it) has no merit or should not be shared, for her statements express scientific fact that pumped breast milk provides infants, premature infants included, antibodies they otherwise would not receive. Rather, the above analysis is meant to show that the rhetorical choices she made when writing may prove ineffective in achieving her goal of supporting mothers of premature infants in their pumping and breastfeeding endeavor for the undue pressure they put on mothers. More effective may have been to acknowledge other views and soften the delivery in order to alleviate perceived pressure and undue guilt should a mother forego pumping for any number of reasons.
Other articles treated pumping similarly. That is, the inclusion and exclusion of certain details communicated an especially strong preference for breastfeeding, in line with cultural understandings of breast milk as ideal. Such positivity and preference for breastfeeding is not surprising given the inclusion criteria for the study; what is surprising, though, is that even when faced with the physical impossibility or impracticality of breastfeeding (either by mother or by baby), formula was still not judged relevant in that it was often not even mentioned, or, as in the above article, it was deemed a lesser choice. In other words, because 1) pumps make it such that breastfeeding is still possible even when a baby cannot suck and 2) donor milk (made possible via pumps) makes it such that breastfeeding is still possible even when a mother cannot produce or express breast milk, there is no excuse not to breastfeed. For those committed to breastfeeding, the sentiment can be uplifting and supportive, communicating that even in the face of adversity, breastfeeding is possible. At the same time, the notion can reinforce a “breastfeeding-or-bust” ideology that breeds negativity, shame, and guilt among mothers who would rather not breastfeed or who would rather not give their child someone else’s milk.

Summary

Taken together, the above analyses show how authors tended to support breastfeeding in spite of the many obstacles mothers face, including those related to physical pain, balancing breast and bottle, and premature births. Rarely did messages tell mothers that breastfeeding may not be worth it for them. Rarely was an understanding voice saying it is okay to feel differently about breastfeeding; rather, writers perpetuated the idea that breastfeeding should, can, and will happen, if only mothers persist and keep trying. For mothers struggling and already feeling defeated, who have tried everything and have nowhere else to turn, articles and posts like these can seem to minimize their experiences by saying, “Just do this; it will work.” The result is
added pressure, guilt, and feelings of failure if the proposed remedy does not work, which can further impede a mother’s ability to breastfeed.

Least Common Content or Themes

After comparing the least frequent themes across magazines, blogs, and combined, overlapping themes include attachment parenting and risks or warnings associated with breastfeeding (see table 5.2). The next least frequent theme overall for magazines and blogs was breast is best.

Representative examples of each are analyzed in the following sections.

Table 5.2

<table>
<thead>
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<th>Least frequently appearing content/themes*</th>
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<tr>
<td>-----------------------------------------</td>
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<tr>
<td>Attachment parenting</td>
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<tr>
<td>Risks or warnings</td>
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<tr>
<td>Breast is best</td>
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*Note. Percentages of content/theme presence come table 4.3 and represent the full sample (N = 437, not the average of the two publication types).

Attachment parenting

The terms “attachment” and “attachment parenting” appeared in just three blogs posts, all from BabyCenter Blog. Two posts mentioned attachment in passing – one mother claimed her formula-fed children do not have attachment issues (Willets, 2017b); the other briefly described criticism she has faced for breastfeeding her daughter past two years old (Gulley, 2016).

Analyzed here is the third post, called, “Is home birth more about the mom or the baby?” and written by Sara McGinnis (2016). The post is unique in that the author (seemingly) provides a balanced review of a one doctor’s counterpoint to the much-circulated pro-natural parenting messages (of which attachment parenting and breastfeeding are large parts). In reality, the author’s review ultimately brings the doctor’s alternative views on natural parenting and breastfeeding into question, thereby halting the discussion as soon as it began.
McGinnis highlights critical comments made by Dr. Amy Tuteur in her book *Push Back: Guilt in the Age of Natural Parenting* (McGinnis, 2016).

In summarizing and relaying Dr. Tuteur’s book, McGinnis includes several excerpts containing the doctor’s firsthand critiques of breastfeeding and lactivism:

(1) The natural parenting movement praises the virtues of birth without medical interference, staunchly advocates breastfeeding for all mothers, and hails attachment parenting.

(2) Most of what passes for knowledge within natural childbirth, lactivist and natural parenting communities is flat out false….I came to understand that natural childbirth, lactivism and attachment parenting actually is about privileging the process over the outcome.

(3) Women do or don’t breastfeed for lots of reasons, and you’re not going to do any harm by formula feeding. Stressing out about it will probably cause the baby harm, though. (Tuteur, in McGinnis, 2016)

The vocabulary and tone of the above critiques clearly communicate that Tuteur holds natural parenting advocates and breastfeeding lactivists as sanctimonious, in it to profit, and with less care about the outcome than the process (i.e., following the “right” process). Again, such beliefs were rarely acknowledged in this study’s sample and were even more rarely supported. For McGinnis to write the review brings an uncommon perspective into the conversation and may indicate she understands and even agrees with Dr. Tuteur to some extent. Indeed, McGinnis (2016) concedes that she “suspect[s] this book makes a number of points worth mulling over” and that she is “all for examining the issues and having the discussions.” However, the author’s
framing of this disparate perspective throughout her post suggests she does not agree with Dr. Tuteur’s points.

McGinnis’ (2016) opening statements read, “Is a natural, drug-free home birth the ultimate way to welcome baby peacefully into the word? A large number of people believe so, and it isn’t too often a doctor bluntly speaks out to criticize the choice to have baby outside of the hospital.” In these first two sentences one can already see ideology lurking. Use of “natural” and “drug-free” in connection to “home birth” and “peaceful” leave positive impressions, whereas “bluntly” and “criticize” carry negative connotations. In addition, “natural” names an ideograph. Recall that an ideograph refers to an ordinary word that when used in a particular context abstractly represents “collective commitment to a particular but equivocal and ill-defined normative goal” (McGee, 1980, p. 15) or ideology. In its dictionary form, the term simply refers to that which exists in nature (i.e., not made by man). However, in the present context, the term brings with it a host of positive connotations supporting an ideology of breastfeeding (for natural parenting fundamentally backs breastfeeding) as true, honest, real, unaffected, biological.

Thus, from the start, the author sets up the reader to be wary of the doctor’s claims, since they run counter to what the masses believe to be positive maternal behaviors. McGinnis (2016) is also quick to point out (on multiple occasions) the “controversial” nature of Dr. Tuteur’s book. On breastfeeding in particular, McGinnis (2016) introduces Tuteur’s opinion by saying the doctor disagrees with “the proven benefits of breastfeeding,” suggesting to readers that they should be skeptical of a doctor that goes against breastfeeding’s scientifically confirmed benefits. In referencing the science of breastfeeding, McGinnis brings the breast is best mentality to the fore, reinforcing to readers the dominant ideology of breastfeeding.
Finally, McGinnis (2016) further discredits Dr. Tuteur’s arguments with her final assessment that the doctor has “[swung] a bit too heavy in the other direction,” leaving the reader with the ultimate message that natural parenting, attachment parenting, and breastfeeding should not be so heavily criticized. In other words, despite the article appearing to present a relatively balanced account of one doctor’s alternative breastfeeding ideology, the author’s final stance quite literally rejects the doctor’s disparate view, thereby suggesting that anyone reading who holds views similar to Dr. Tuteur is wrong and should reconsider.

**Risks or warnings**

Another least common theme included risks or warnings. Examples of this theme were found in “7 things to avoid when you’re breastfeeding” (Simpson, 2017), “Jaundice: What You Need to Know” (Conte, 2017), and “Zika Virus: The White House and the CDC Answer Your Questions” (Guido, 2016). In these articles, risk referred specifically to cautions mothers should take in order to avoid risks to their ability to safely breastfeed. Frames in articles and posts like these supported dominant understandings of breastfeeding (i.e., it is optimal and mothers should do it), albeit with an air of caution. That is, the general message was that breastfeeding mothers need to be cautious and understand how their actions and external factors can adversely affect or interact with breastfeeding efforts, but such risks should not lead them to shy away from or stop breastfeeding.

A second kind of risk, even more rarely addressed than the first but worth mentioning here especially because of that rarity, related to the negative consequences of breastfeeding. That is, whereas most articles and posts were associated with risks to breastfeeding, this kind of risk focused on risks of breastfeeding. An example comes from Valerie Williams’ (2017) Scary Mommy blog post, entitled “Mom Shares Tragic Story of Breastfed Infant Dying from
Starvation.” (An article written by Melissa Willets (2017a) and published in Parents magazine covered the same story.) Based on the title, one might expect an argument in favor of formula; however, even in an article discussing potential perils of breastfeeding, the dominant ideology is subtly reinforced. As the following paragraphs discuss, despite the majority of the post making statements to the effect that hospitals and medical professionals go too far in their efforts to promote and encourage breastfeeding, the post never once denounces breastfeeding. Instead, it ultimately advises readers that “breast is best, but follow with the bottle” (Johnson, in Williams, 2017), which qualifies the dominant ideology but reinforces it nonetheless.

The blog post begins with the statement that, “Doctors and nurses told her to keep nursing, despite signs that her son wasn’t thriving” (Williams, 2017). Unique about the statement is the juxtaposition of a pro-breastfeeding mentality – because doctors and nurses support breastfeeding – with contrastive and negative terms like “despite” and “not thriving.” The first sentence, then, not only sets up negativity toward breastfeeding but acknowledges that this view goes against the recommendation of doctors and nurses. Following this statement are two sentences that function in much the same way. They include the terms “loss,” “heartbreaking,” “death,” “starvation” and “warning” in connection to “encouragement” to “keep nursing.” Thus, the reader is faced with information that goes against dominant expectations and understandings of breastfeeding, perhaps causing dissonance or stress. In addition, they suggest that the doctors and nurses encouraging her to breastfeed were incorrect to do so, for their recommendations led to death and starvation; again, such negativity in connection to breastfeeding and medical personnel goes against social norms and expectations and represents an exceedingly rare perspective within the study’s sample.
Going further, these sentences act in much the same way as the advice post analyzed earlier in that they set up a fear appeal. That is, mothers reading the post come face-to-face with a serious threat (infant death caused by starvation that doctors did not foresee). Their own vulnerability is implied via the next statement: “Her story is an important one that every expecting mom who plans to breastfeed should read” (Williams, 2017). Distinguishing this fear appeal from that used in the post previously analyzed, however, is the overall perspective or stance toward breastfeeding. Whereas the advice post employed a fear appeal to support breastfeeding, this post utilized a fear appeal to heighten mothers’ awareness and ability to recognize signs of ineffectual breastfeeding. Such was an exceptionally rare instance of negative ideological framing of breastfeeding.

Also distinguishing this appeal from the previous is the author’s unusual approach to resolving the threat and completing the fear appeal. One might expect a problem-solution organizational scheme common to fear appeals (Benoit & Benoit) wherein Williams suggests a switch to formula in order to ensure baby receives enough milk. However, such a suggestion would go against the desire of several mothers and runs counter to scientific results and society’s master discourse (i.e., the dominant way of thinking about breastfeeding), meaning the author must find another way to “resolve” the threat.

First, Williams (2017) writes that Johnson gave birth in a Baby-Friendly hospital, “which is a hospital geared toward encouraging moms to nurse their children.” Beyond that, though, Johnson is quoted as saying, “‘Unless you’d had a breast augmentation or cancer or some serious medical reason as to why you couldn’t breastfeed, your baby would not be given formula unless a prescription was written by the pediatrician’” (Williams, 2017). In the previous quotation, both instances of “unless” start condition clauses that introduce the only four circumstances under
which formula is allowable in a Baby Friendly hospital. Suffice to say, the intent behind these statements appears to be highlighting the extreme measures Baby Friendly hospitals take to “encourage” breastfeeding. The implication here is that the above efforts go too far in pushing mothers toward breastfeeding, again representing an uncommon perspective.

Second, the author writes, “Despite knowing this risk factor [polycystic ovarian syndrome (PCOS)] was present along with several others…the new mom was encouraged by nurses, lactation consultants and doctors to keep nursing” (Williams, 2017, emphasis added). Further, Williams includes reference to Johnson’s son continued weight loss despite constant nursing, inconsolable crying, and subsequent discharge from the hospital. As in the previous paragraphs, framing in this paragraph suggests an unnecessary and unwise push toward exclusive breastfeeding – by nurses, lactation consultants, and doctors – even in the presence of known risk factors.

From the above examples, it would appear Williams has resolved the threat by chronicling Jillian Johnson’s (the mother’s) story of loss and using her experience to illustrate warning signs other mothers might use to cue into or recognize malnourishment in their infant. Such a resolution would make sense in light of an inability to argue against generally accepted recommendations in favor of breastfeeding for its myriad benefits. However, Williams goes a step further, upending any previous statements or implications suggesting breast may not be best with a quotation from Johnson saying, “[T]he best advice I was given…is sure breast is best, but follow with a bottle.” Thus, even an article geared toward informing mothers of the potential dangers of breastfeeding and listening too closely to the doctor’s advice, mothers cannot escape the dominant ideology and are once again directed to the only seemingly reasonable choice: breastfeeding.
It cannot be ignored, however, that this post did indeed strive, at least in part, to challenge
the status quo, introducing an alternative way of thinking perhaps more closely aligned with
ideologies related to “fed is best.” That is, Williams (2017), in relaying Johnson’s story, did refer
to breast is best, suggesting that mothers ought not stop breastfeeding, but so, too, did she open
up the possibility that breast alone is not the only option. Such a move invites additional
commentary on the issue, more so than did the majority of articles and posts within the study’s
sample.

Breast is best

Given that this study argues the dominant ideology of breastfeeding is in fact “breast is best,” it
may be surprising that the sentiment was among the least frequent themes mentioned in the
study’s sample, particularly in magazine articles. However, important to note is coding for
“breast is best” included only explicit use of the phrase as well as explicit use of “best” and
“liquid gold.” Conversely, implied reference to the ideology permeated articles and blog posts, a
point this section also makes.

As expected, treatment of the frames employed in articles stating “breast is best” most
often directly pointed to the breastfeeding ideology. However, in some instances, frames pointed
to another ideological perspective: breast is not best. That is, coding for the theme included both
articles writing in favor of and against the sentiment that breast is best because even messages
that push against the slogan acknowledge its existence, thereby circulating (albeit negatively) the
ideology. For example, articles and posts circulating a breast is not best message included those
like “Biggest Scientific Breakthrough in 10 Years Narrows Gap Between [sic] Baby Formula
and Breast Milk” (Willets, 2016b) and “10 Things NOT to Say to a Formula-Feeding Mom”
(Willets, 2016a). In both, “breast is best” appears verbatim, but its use contrasts the articles’
overarching messages that 1) formula feeding comes close and provides an acceptable choice and 2) statements questioning, shaming, or guilting mothers who do not breastfeed are not helpful and should not continue to circulate.

Because favorable use of breast is best was more common than unfavorable usages within this frame, the following paragraphs analyze this more traditional use of the theme. The text’s overarching theme and accompanying ideological frames are apparent from the both the title and subtitle of Melissa Willets’ (2016c) Parents magazine article: Universal Breastfeeding Could Save Nearly 850,000 Lives Each Year: We know breast is best, and now new research quantifies what that really means for the health of kids worldwide.” Because the subtitle includes “breast is best,” the analysis starts there.

As in the case of “natural” above, “breast is best” acts as an ideograph. In the context of the present article, breast is best refers specifically to breast milk’s health and economic value, though its use connotes the a much larger ideology as described and analyzed throughout the whole of this dissertation. That is, use of the three words symbolizes an entire way of thinking about how mothers care for their children, not just in terms of breast milk’s nutritional value but in what it means to be a mother providing the “best” for her child. Implications of the ideograph are many and not always positive. For example, it can be argued that breast is best diminishes a mother’s role to that which her breast alone provides. However, the present article’s use of the ideograph is meant to denote all that is positive about “breast is best.”

Moving on, as a statistic, the title alone is a rhetorical strategy meant to communicate the lifesaving power of breastfeeding worldwide. In addition, readers associate breastfeeding with infants and toddlers, making the title an emotional appeal as well, for what person does not want to see the lives of small children saved? Noteworthy, too, is use of the term “save.” It is not just
that breastfeeding can improve children’s health (an ideology oft circulated in connection to breast is best); it is that breastfeeding can literally save the life of a child. The emphasis and frame are clear: breastfeeding has immeasurable power and influence over children’s well-being. The implication, of course, is that mothers should breastfeed because breast is best.

Beyond the title, though, the article makes use of additional statistics and facts to further support a pro-breastfeeding mindset. Willets (2016c) writes, “And, 22,000 maternal deaths from breast cancer could be prevented if women breastfed for up to two years in lower- and middle-income countries, and to a year in higher-income countries.” Thus, not only does breastfeeding support the lives of children, it also works to make mothers less vulnerable to debilitating and life-threatening health conditions. The implication here is that, if not for their children, mothers should breastfeed to save themselves.

On top of that, the author lists the many health benefits of breastfeeding for children, among them “higher IQs, less risk of infection, protection against diabetes and obesity, and lower rates of death,” as well as for mothers, including “protection against breast and ovarian cancer and type 2 diabetes” (Willets, 2016c). However, the author fails to point out that some of these benefits are contested and others are thought to correlate with breastfeeding rather than be a direct benefit. In so doing, the reader is left with the understanding that breastfeeding is healthy and the implication that alternatives are either less so or not at all healthy.

Statements throughout the article seek to further praise the value (including the monetary value) of breastfeeding. And while a great many mirror those above in that they focus on health benefits, other statements support a breast is best ideology via other means. For example, early in the article, the author claims, “But governments still aren’t doing enough to support breastfeeding. . . .” and later, “Poor government policies, lack of community support, and
aggressive formula marketing may be to blame for why breastfeeding rates aren’t what they should be…” (Willets, 2016c). Dr. Nigel Rollins of the World Health Organization is also quoted as saying, “The success of failure of breastfeeding should not be seen solely as the responsibility of the woman. Her ability to breastfeed is very much shaped by the support and the environment in which she lives” (Willets, 2016c). The doctor goes on to state the “responsibility” of governments and societies to support breastfeeding globally, including through policies and programs. Moreover, the author addresses the issue from a monetary point of view. She claims breastfeeding is “cost-effective” and that a “lack of breastfeeding places a financial burden on the worldwide economy…given the health repercussions” (Willets, 2016c). In this way, the whole of the article is framed in such a way as to support a breast is best ideology from several perspectives.

As in the case of previous themes, consequences of such framing include both validation for mothers who do or want to breastfeed as well as added guilt and pressure on those who may be struggling, want to quit, are unable, or do not wish to breastfeed. That is, if mothers are not convinced to breastfeed for its positive outcomes, they may feel guilted into breastfeeding by statements like the following made by Dr. Rollins: “Not breastfeeding is seen as the modern and sophisticated thing to do – it seems convenient, it allows women to get back to work, it’s all the things you want to “achieve.” We’ve seen this trajectory with developed countries and don’t want it to play out a second time in low- and middle-income countries”’ (in Willets, 2016c). The opening sentences seem favorable – not breastfeeding is modern, sophisticated, convenient, and it allows one to return to work, all of which many would consider positive. However, the final statement undermines any positivity by stating the undesirability of not breastfeeding, further solidifying that breast is indeed best.
Conclusion

The foregoing analysis revealed that in general articles and blog posts in this study’s sample pointed to the pro-breastfeeding ideology that claims breast milk and breastfeeding are the optimal choice among mothers wanting to do what is best for their children; even seemingly neutral or negative framing predominantly and ultimately supported breastfeeding (e.g., physical challenges are worth it). The overwhelming presence of ideologically framing supportive of breastfeeding was not entirely surprising given the inclusion criteria for the study (i.e., articles and posts about breastfeeding); however, what was surprising was the presentation of those ideologies and the limited attention paid to other alternatives. That is, authors often made their pro-breastfeeding mindset explicitly and implicitly clear through the inclusion – and exclusion – of particular words, phrases, and sentence structures. One may wonder then, why, if messages seem to communicate that breastfeeding is achievable, several mothers still opt not to breastfeed.

The answer is complicated. As the analysis sought to show, it would seem the intent among these messages is positive: writers want to support mothers in their breastfeeding endeavor; however, while the intent may be positive, the potential outcome may not always be so positive. Often, messages can be interpreted as pigeonholing mothers, pressuring them down a singular path, and breeding feelings of guilt, shame, and fear should they fail to succeed, decide to quit, or choose not to breastfeed. The effect here may be opposite the desired outcome. Rather than feel supported or excited about the prospect of breastfeeding, mothers may approach it with apprehension or uncertainty; they may even avoid it altogether. In addition, in pushing mothers toward breastfeeding and excluding alternative perspectives and experiences, authors fail to foster open dialogue concerning expectation of motherhood. That said, the forgoing analyses are not meant to suggest, for example, that all advice articles and posts employed fear appeals or that
all articles and posts incite guilt and shame among new mothers; rather, the above analyses serve
to show how, for better or for worse, authors employ rhetorical strategies to make their point(s),
sometimes to the detriment of their message and reader.
DISCUSSION AND CONCLUSION

Breastfeeding receives widespread support and recommendation among medical professionals and scientists especially, and the American Academy of Pediatrics (2017) has as a goal increasing the number of mothers who not only initiate breastfeeding but continue to breastfeed exclusively for at least six months. However, the general public often receives divergent messages from any of several sources. For example, some sources of communication argue a woman maintains the right to determine how best to nourish her child – pushing her toward breastfeeding goes against her right and breeds feelings of guilt and shame. Other sources would shame or censure a mother breastfeeding in public, condemning the act as indecent and not fit to be seen outside one’s home. Breastfeeding communication – for its conflicting narratives, ubiquitous presence, and communicative power (i.e., its power to persuade) – thus deserves scholarly attention. Consequently, parts one and two of the present study aimed to examine how messages perpetuate ideologies as they relate to breastfeeding in order to forward specific agendas and influence mothers’ infant feeding decisions.

To gather data for the study, popular online parenting magazines and “mommy blogs” were content analyzed to determine common themes, frame type, frame valence, the presence of a gain or loss frame, and cited sources. Then, representative artifacts were selected for more in-depth and nuanced rhetorical analysis which argued that despite quantitative results suggesting more diverse topical coverage and neutral treatment of breastfeeding, authors of online magazine articles and blog posts explicitly and implicitly supported the culturally dominant ideology that breastfeeding supersedes all alternatives (i.e., “breast is best”). Put another way, for all its challenges and difficulties, breastfeeding is worth it. Consequently, rather than encourage or invite open dialogue among mothers and the public alike, such overt and covert ideological
framing ignores existing alternative perspectives and experiences, effectively forecloses conversation, and has the potential to breed guilt and shame among mothers who cannot or do not wish to breastfeed, making them feel as though they have somehow failed their children. In the absence of change, tensions surrounding breastfeeding are likely to continue.

The following sections first discuss study results and findings within the context of a larger body of literature; then, they detail implications for theory and practice, explicate study limitations, and offer avenues for future research.

**Discussion**

The following pages discuss relevant results and findings of this dissertation, situating them within larger conversations related to framing theory, the concept of ideology, and past research.

**Content/theme**

Results of the quantitative content analysis indicate magazine articles and blog posts cover a number of themes. Those most and least frequently appearing often overlap between articles and blog posts; however, results indicated differences in the themes covered by publication type. The themes *celebrity* and *health benefits to the child* were more likely to be addressed by magazine articles, whereas the themes *controversy, emotional difficulties, length to breastfeed,* and *physical challenges* were more likely to appear in blogs. Accounting for these differences may be due to the nature of the publication types, because the rhetorical and figurative situations as laid out in the dramatistic pentad (Burke, 1945) differ between magazines and blogs. In particular, magazines serve a journalistic purpose of communicating current events and popular culture to readers. It is no surprise then to find information pertaining to *celebrities* (popular culture) and *health benefits* (scientific findings) within magazines. Conversely, the blogs analyzed in this study have a general goal of camaraderie and information sharing among
mothers; thus, the predominance of themes more closely related to the “realities” of breastfeeding are not surprising.

New, recurrent themes also emerged as part of the analysis. In particular, the majority of articles and posts covered content and themes within Gearhart and Dinkel’s (2016) framework, yet the “other” category revealed additional themes, including donor milk and milk banks, wet nursing, paternal/partner support (as opposed to organizational, community, or societal support), tandem feeding, and sleep. While not appearing as often as more popular themes, these themes occurred as frequently as two of the least common themes (i.e., attachment parenting and risks/warnings). This finding suggests that an expansion of Gearhart and Dinkel’s (2016) coding scheme may be necessary if the prevalence of such themes continues to grow. The finding also suggests authors are beginning to consider and write about a more diverse array of topics, answering a call made by scholars in recent years (see especially Seals Allers, 2017).

**Frame type**

The investigation into whether episodic or thematic frames were more common in articles or posts revealed episodic frames to be more common among both publication types, as expected. These results align with past research, including Gearhart and Dinkel (2016) and Frerichs et al. (2006), who similarly found support for individualized, episodic frames. Still, despite being more frequent within both publication types, blog posts were considerably more likely to employ an episodic frame than magazine articles. It may be that blogs are more focused on the individual than magazines. That is, in covering breastfeeding, magazines appear to more often than not focus on individualized topics, though they also incorporate societal (thematic) content to a certain extent, perhaps in keeping with a journalistic goal to disseminate newsworthy information to a wider, mass audience. On the other hand, it may be that blogs are especially
inclined toward individualized (episodic) topics because they need not necessarily concern themselves with publicizing thematic content. Rather, as a form of social media, blogs are situated in a less formal, more social space - more likened to conversing than broadcasting information to the masses.

**Frame valence**

This study found a neutral valence to be more common overall than either positive or negative valence. Moreover, despite positive valence appearing more frequently in magazine articles when considering them separate of blog posts, results indicate no real difference in valence by publication type or name, meaning writers did not explicitly or predominantly frame breastfeeding in a positive or negative light. The results are unexpected considering past research has typically found positive valence to be overwhelmingly more prevalent in breastfeeding communication (see Bylaska-Davies, 2015; Dodgson et al., 2008; Foss, 2013; Kedrowski & Lipscomb, 2008; Schneider & Pobocik, 2013; Simpson, Garbett, Comber, & Balaam, 2016; West et al., 2011). A potential explanation for the disparity may be that texts, blogs especially, have begun to shift portrayals of breastfeeding in recent years, moving away from the simplistic, idyllic accounts of breastfeeding to more realistic accounts of breastfeeding and its inherent difficulties. An alternative explanation relates to the coding scheme used in the present work: when discussing discrepancies and working to clarify coding procedures, the coders decided only to code for positive valence when breastfeeding was explicitly championed or supported by the author. Implied support did not warrant coding as positive, since implied support could be misinterpreted by readers. Past research may not have been so explicit.

Also important to note is how the prevalence of a neutral valence may seem to contradict findings of the rhetorical analysis that showed articles and posts nearly always forwarded a pro-
breastfeeding ideology; however, support for breastfeeding does not equate positivity. Considering content/theme, valence, and ideology together illustrates this point: several articles and posts focused on the emotional and physical challenges of breastfeeding (content/theme). As expected when discussing challenges, descriptions were not positive, yet neither were they negative. Mothers often wrote about them as obstacles that could be overcome – indicating more neutral treatment (valence). Overall, messages often ended positively, in support of breastfeeding (ideology). In this way, the finding that neutral frames were common appears logical: writers approached the topic more realistically, acknowledging potential pitfalls associated with breastfeeding but ultimately returning to a place of support for mothers breastfeeding. Thus, it may be that writers attempt to frame the topic neutrally; however, the end message is often still ideologically charged in favor of breastfeeding.

Finally, results show negative valence as least frequent in both magazine articles and blogs posts. As in the case of Kedrowski and Lipscomb (2008), it seemed negative valence was more often than not used circumstantially – explicating negative outcomes associated with breastfeeding in particular instances outside the norm (e.g., Williams, 2017).

**Gain and loss frames**

Authors of the study’s sample rarely made use of gain or loss frames; the same is true for both magazine articles and blog posts. This lack of gain or loss frames within magazine articles and blog posts may be due to the desensitization (and speculation) of the public to the pervasive “breast is best” ideology that began as a government campaign to increase breastfeeding rates.

Another reason for the lack of gain and loss frames may be that gain and loss frames are common to risk scenarios, and the issue of infant feeding does not present a traditional risk scenario in that formula presents a well-established and reasonable alternative to breastfeeding.
Moreover, a billion dollar industry (Seals Allers, 2017) is dedicated to researching and improving infant formula, advertising its safety and near equivalence to breast milk, and advocating for its use. All contribute to making the risk scenario appear less-than-risky. Finally, reliability for gain and loss frame coding should be noted as potentially contributing to results. While Landis and Koch (1977) consider $K = .451$ to be moderately reliable, other scholars – the author included – prefer a higher threshold.

**Sources cited**

Because past research has supported the use of expert sources in breastfeeding communication and because the topic of breastfeeding relates to health, this study hypothesized that magazine articles and blog posts would rely more heavily on expert sources than non-expert sources. In fact, the opposite was found: both publication types more frequently cited non-experts than experts. Accounting for the discrepancy in blog posts specifically may be their informality: as a type of social media, blogs resemble peer-to-peer conversation and employ more informal communicative tendencies such as using anecdotal evidence (e.g., lay parents, other forms of social media) when writing. More surprising, then, is online magazine articles’ use of non-expert sources, for magazines function differently than blogs. And yet, lay parents, celebrity parents, and social media non-experts were more frequent than expert sources in magazine articles. A deductive rationale is perhaps connected to the predominant use of episodic frames. Articles tended toward individualized accounts (episodic frames) over societal issues (thematic frames). Thus, more frequently citing individual stakeholders such as lay parents, celebrity parents, and social media non-experts seems a plausible conclusion.

Results indicate that despite both publication types more frequently citing non-experts, magazine articles and blog posts within the sample differed in their use of expert sources:
magazine articles were more likely to cite medical doctors, lactation consultants, and other experts than were blog posts. As with content/themes, the nature of the two publication types may account for the difference. Despite being less formal than traditional news outlets, online magazines are still more formal than blogs and likely follow more traditional journalistic norms, including the use of expert sources, than newer, more social, and more personalized blogs.

Articles and posts were sometimes authored by invited experts such as medical doctors or lactation consultants. Coders, however, did not code for the expertise of article or post authors because authors do not meet the definition of a cited source and there was no way to accurately identify author credentials in all instances. Future investigations, then, might consider whether and how author expertise affects breastfeeding messages and their potential, rhetorical effects on audiences.

**Implications for Theory and Practice**

Results and findings from parts one and two of this study have implications for breastfeeding communication, framing theory, and ideology. To start, results showing *physical challenges* and *advice* as frequent themes and *breast is best* as a least frequent theme imply to writers and readers alike a shift away from the ever-present mantra based in science toward greater coverage of the (oft challenging) breastfeeding realities new and expectant mothers face. Including the voices of real parents as opposed to citing expert sources alone perhaps indicates a similar shift, especially in connection to magazine articles wherein one might expect journalistic norms and the use of expert sources to take precedence. Thus, it seems magazines and blogs have, at least in part, begun to address critiques that a lack of coverage related to breastfeeding challenges and practical advice in favor of expert voices (i.e., science) can lead to downplaying breastfeeding obstacles and difficulties, contributing to the myth that breastfeeding is easy (Foss, 2010; 2013).
Also, results of the quantitative framing analysis add to the body of literature on framing theory, which asserts that what a message says and how it says it can influence peoples’ successive attitudes and behaviors. Specific to breastfeeding communication, this study found episodic frames to be significantly more frequent than thematic frames within magazine articles and blog posts, a finding that aligns with past research and implies both magazine and blog authors are allocating more attention to individualized topics than societal themes. However, while these findings seemingly align with scholarly calls for more realistic representations of and conversations surrounding breastfeeding, as does the rhetorical analysis, two points warrant mention here.

First, Gearhart and Dinkel (2016) note that an emphasis on episodic frames may not be altogether positive; in fact, they describe to the episodic frames found in their study sample as “trivial” (p. 884). Important is the distinction that the episodic frames they found largely centered on celebrity experiences rather than the physical challenges and advice of lay mothers this study found. The implication for framing theory here is a continued need to contextualize and explain how the episodic and thematic frames fit within the overall situation. For instance, the episodic frames found in this study do not appear trivial in that they largely focused on issues relevant and applicable to mothers as opposed to highlighting inconsequential or “filler” stories. Second, articles analyzed in part two of this study illustrated that despite including information about the very real challenges to breastfeeding, authors often persisted in communicating an end message that promoted breastfeeding above all else. Doing so can downplay the difficult realities of breastfeeding, and subsequently isolate or shame women who do not succeed or choose not to breastfeed.
Also related to framing theory, this study found neutrally-valenced accounts to be more prevalent than positive in both articles and posts, which deviates from past research. Again, results support a conclusion that writers are perhaps shifting their reports and narratives toward more realistic and balanced depictions of breastfeeding; however, as outlined previously, accounting for the divergent results may be the operationalization of the variable. As such, this study suggests framing research continue to refine operationalizations of frame valence in order to corroborate results.

This study found writers of articles and blogs alike tended to favor breastfeeding. Doing so, though, can inadvertently denounce alternatives such as formula and the mothers who use them. Put another way, messages tended to perpetuate the commonly understood, dominant ideology surrounding breastfeeding that advances a particular agenda but perhaps ignores or silences alternative messages that likewise warrant attention, at least to the extent that mothers deserve the whole picture when it comes to making fully informed decisions for their infant children. From a practical perspective, then, authors have a responsibility to first recognize the tendency to near unanimously favor breastfeeding above all and then work to incorporate or allow alternative perspectives within their messages so as to avoid (unintentionally) directing or shutting down the conversation.

Likewise, ideologically framing in favor of a “breast is best” mentality can insinuate to that a mother’s most important maternal contribution is not her love, attention, warmth, support, or other forms of care, but the milk her breasts produce. In this way, she becomes objectified, a means to an end, reduced to a singular body part. Thus, authors again have a responsibility to acknowledge that even if “breast is best,” it addresses just one aspect of motherhood, not the
whole of motherhood, for infants require a great deal more from their mothers than sustenance alone in order to truly grow and flourish.

Finally, this dissertation has methodological implications as well. To the author’s knowledge, the combined use of quantitative content analysis with critical rhetorical analysis has not been done. Indeed, the two are often understood as oppositional for their seemingly contradictory epistemological foundations and objectives; however, what this dissertation sought to show was that the two can in fact be used in complement.

For example, the quantitative analysis of part one provided an entry point for the rhetorical framing analysis of part two. More specifically, the quantitative analysis provided a broad picture as to which themes and frames are most prevalent and warrant additional, focused attention. It also offered a numerically-based rationale for artifact selection, which, from a rhetorical lens, can be viewed both as a benefit and as a shortcoming. On one hand, rhetorical analysis is not epistemologically rooted in numbers, and thus does not require, or necessarily desire, quantitative justification when selecting artifacts for analysis. As such, having that numerical rationale may be unnecessary or may be viewed by some as a shortcoming. However, the author here argues that in this particular situation, a quantitative rationale is a useful criterion upon which to base artifact selection. The goal of the present research was not to select touchstone or high profile communicative pieces about breastfeeding; rather, the objective was to examine representative examples of common, everyday communication taking place in online discourse. Given the sizeable number of messages circulating online, the absence of a quantitative basis may have resulted in the rhetorical analysis of non-representative examples.
Going the other direction, the rhetorical analysis bolstered the quantitative analysis in that it provided a more complete picture of how the communicative messages within the sample functioned to communicate content/themes to audiences. Put another way, while the quantitative analysis elucidated several characteristics of the message (the type of frame, the overall tone of the piece, etc.), it did not detail or interpret, for instance, how a message employing neutral tone can still communicate support for breastfeeding. In addition, results of the quantitative analysis indicated increased variability in topical coverage as it relates to breastfeeding, whereas the analysis highlighted what the numbers could not: that despite greater diversity in coverage, the underlying message largely remained the same (i.e., breastfeeding nearly unanimously supported). In this way, the rhetorical analysis served to extend and contextualize results of the quantitative analysis.

Thus, the inherent differences between a positivist, quantitative investigation and a rhetorical critique need not preclude their working in concert. Where one focuses on the larger, generalizable picture, the other highlights otherwise unaccounted interpretations. In this way, the two together provide a fuller, more comprehensive account of the communication taking place.

**Limitations and Future Directions**

This study takes a step forward in analyzing and understanding how online messages not only communicate the complex issue of breastfeeding to mothers via frames and ideological representations. It also offers explanation as to how frames and ideological representations meant to support and enhance breastfeeding may have the opposite effect for their ignoring alternatives and pressuring mothers. However, the study is not without limitations.

First, part one of this study made use of a pre-determined coding scheme (see Gearhart & Dinkel, 2016) with non-exclusive categories so as to prevent the need to make qualitative
judgments concerning emphasis and focus within texts. The revelation of new, recurrent themes suggests future research would do well to further refine categories. Moreover, use of a mutually exclusive coding scheme would allow for proportional comparison of results in future work.

Second, hypothesis three focused on the use of expert and non-expert sources, seeking to determine whether each publication type was more or less likely to cite experts or non-experts overall. Importantly, the hypothesis was not aimed at determining whether individual articles or posts cited multiple sources (i.e., the number of sources within individual articles or posts) or multiple types of sources (e.g., experts only, non-experts only, experts and non-experts, or no sources) within individual articles or posts. Thus, the results reported here are limited only to understanding how the publication types included in the study’s sample make use of expert and non-expert sources overall. Future research could expand upon this idea to provide deeper insight as to how individual online magazine articles and blog posts cite sources.

Third, coders in this study obtained between “moderate” and “substantial” intercoder reliability according to Landis and Koch (1977); however, the author acknowledges that improved reliability would lend results additional credence, particularly in connection to gain and loss frames, the sole construct for which only “moderate” reliability was attained, despite coders having several clarifying conversations during pilot and sample coding. Also in connection to reliability, kappa values dropped between pilot and sample coding. Accounting for the drop as well as low reliability overall may be unfamiliarity with framing theory on the part of the second coder. In addition, coders were coding for gain/loss frames as well as frame valence. Frame valence refers to positive, negative, or neutral tone whereas gain/loss frames refer to positive consequences of breastfeeding versus negative consequences of not breastfeeding. Because both valence and gain/loss frames deal with notions of positivity and negativity, it is
possible that coding for both variables in a single study confounded or affected reliability of one or the other. Finally, in connection to gain/loss reliability specifically, breastfeeding does not present a traditional risk scenario, and because gain/loss frames were not found to be altogether common within the sample, proportionally, any disagreement was likely to have affected reliability. Importantly, the investigation of gain and loss frames was exploratory; thus, future research might continue to investigate how gain and loss frames affect readers’ interpretations, understandings, and future behaviors when it comes to breastfeeding communication. Similarly, results of the present study both agree with and contradict previous research, suggesting that future research replicate this and other content analyses of breastfeeding communication in order to corroborate results.

Fourth, this study relied on institutional blogs that employ a number of writers that contribute publishable content. As such, all three of the blogs sampled in this study are exponentially larger than any personal blog written and maintained by a single individual (likely untrained in writing for professional publication), and they may be more similar to online magazines than would personal blogs. Beyond size and author characteristics, other traits between the two blog types may differ as well (e.g., topical coverage, tone, citation practices, etc.). Consequently, were personal blog posts included in this sample, results may have differed. Future research, then, might consider studying whether and how smaller, personal blogs frame breastfeeding communication in comparison to institutionalized blogs, online magazines, and/or other forms of online communication. Moreover, the blogs included in this sample were selected as representative of the largest, most popular parenting blogs; however, the researcher recognizes that smaller blogs, both institutional and personal, specific to infant feeding (e.g., Fed is Best, Fearless Formula Feeder) exist; were they to be analyzed, results may differ.
Fifth, explicit reference to the term “breastfeed” was an inclusion criterion for this study, which may have affected results. The intent behind the criterion was to ensure artifacts selected referred to the study topic (i.e., were relevant) and procure a manageable sample size. In addition, the inclusion criterion did not make any qualitative judgment about breastfeeding, meaning no particular perspective or treatment of breastfeeding was included above that of another. However, the inclusion of artifacts explicitly referencing “breastfeed” did exclude other, perhaps relevant, articles and posts. That is, any article or post implicitly referring to breastfeeding would not have been included. In addition, because the research specifically focused on breastfeeding, messages related to bottle feeding and/or infant feeding as a whole would not have been included. Thus, results may be limited to the sample selection and not wholly generalizable. Future research wishing to be more inclusive could broaden inclusion criteria to examine messages referring not just to breastfeeding but to bottle feeding, formula feeding, and/or infant feeding. Doing so would both extend results of the present study as well as provide a more complete understanding of infant feeding ideologies.

Sixth, content analysis does much to describe characteristics of communication; however, it often struggles to capture authorial intent and/or variable interpretations within messages, thereby necessitating the deeper analysis conducted in part two. Part two, though, is not without its own limitation. The rhetorical analysis methodology, even a rhetorical framing analysis, somewhat relies on the subjective interpretation of the researcher (Kuypers, 2010). Thus, despite the researcher making every effort to remain objective and acknowledge the potential for varying perspectives and interpretations, additional analyses are needed to provide added support and validate findings.
In addition to the above suggestions, the continued and growing popularity of the Internet as a source of health (NSF, 2016) and breastfeeding information (Bylaska-Davies, 2015) suggests future studies employing framing theory and/or the rhetorical concept of ideology in connection to breastfeeding communication could extend investigations of online outlets including professional, mass, and social media platforms. For example, other online sources of information include commercial, medical (e.g., hospital, clinic), and organizational websites. Analyses might focus on their framing of breastfeeding and/or seek to examine how content within those sites reinforces or challenges the dominant breastfeeding ideology.

Such work could additionally build a research agenda to examine both text and images for their communicative and rhetorical power. The author has initiated this endeavor by using Kress and van Leeuwen’s (2006) *Reading Images: The Grammar of Visual Design* to analyze breastfeeding images posted to a celebrity’s Instagram page for their ability to push against a heteronormative culture that objectifies and sexualizes the feminine (Ritland, 2018b). Also, the author has applied the concept of ideology 1) to critically analyze a print magazine’s linguistic portrayal of breastfeeding across 15 years (Ritland, 2018a) as well as 2) rhetorically analyze an area hospital’s infant nutrition web page for the many voices it brought together (and the ideological perspectives those voices represented) in an effort to support breastfeeding (Ritland, 2017).

Finally, the researcher acknowledges that blogs especially, and online magazines to a degree, provide space for readers to provide commentary in response to the messages they read. Analysis of such commentary provides a promising avenue for future research, one that would build upon the present findings to include the reader’s perspective. On a similar note, investigations into the microblogging people do – such as posts and responses on Twitter,
Tumblr, or Facebook – provide a promising direction for human subjects research as it relates to people’s communicative behaviors surrounding breastfeeding, i.e., how they personally talk about and frame the issue.

Conclusion

This dissertation sought to show that while authors of online magazine articles and blogs posts are nearly always well intended, the ways in which they word or structure their writing - in terms of how they frame breastfeeding and the ideologies they support – has consequences whether intentional or not. And, while it appears magazine article and blog post writers have begun to incorporate a wider array of topics, personalized stories, and realities of breastfeeding that scholars have called for (e.g, Koerber, 2006b; McDuffie, 2014; Seals Allers, 2017), there exists room to grow in connection to their inclusion of diverse (and disparate) perspectives and ideological stances. Going forward then, authors have a responsibility to further acknowledge variable views is in their writing so as to better reach the whole of their audience instead of unknowingly or unintentionally perpetuating potentially harmful messages and/or ideologies to new mothers who are already vulnerable and facing new and huge challenges. Importantly, such change does not require that authors alter or lose their message; rather, acknowledging alternatives can in fact strengthen their arguments, showing they have considered the full scope of the situation and understand that every woman uniquely experiences breastfeeding (or not).
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## APPENDIX: CODEBOOK

<table>
<thead>
<tr>
<th>Variable</th>
<th>Level of Measurement</th>
<th>Value</th>
<th>Label</th>
<th>Explanation of Code &amp; Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Publication Type</td>
<td>Nominal/Categorical</td>
<td>a</td>
<td>Magazine article</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>Blog post</td>
<td></td>
</tr>
<tr>
<td>Publication Name</td>
<td>Nominal/Categorical</td>
<td>a</td>
<td>Parents</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>Fit Pregnancy &amp; Baby</td>
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<tr>
<td></td>
<td></td>
<td>c</td>
<td>Parenting</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>d</td>
<td>Scary Mommy</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>e</td>
<td>BabyCenter Blog</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>f</td>
<td>Mom Blog Society</td>
<td></td>
</tr>
<tr>
<td>Content/Theme</td>
<td>Nominal/Categorical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>health benefits to child</td>
<td></td>
<td>a</td>
<td>yes</td>
<td>Explicit &quot;this good health thing will happen b/c of breastfeeding&quot; (reduced risk of [x], antibodies, increased immune system, resistance to [x], etc.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>health benefits to mother</td>
<td></td>
<td>a</td>
<td>yes</td>
<td>Explicit &quot;this good health thing will happen b/c of breastfeeding&quot; (reduced risk of [x], healthy body, etc.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>program/support</td>
<td></td>
<td>a</td>
<td>yes</td>
<td>Explicit &quot;support&quot; (finding, needing, seeking) for breastfeeding; NOT husband/partner support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>emotional difficulties</td>
<td></td>
<td>a</td>
<td>yes</td>
<td>Depression, crying, mental fatigue, resentment, overwhelmed, anxiety, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>physical issues/struggles</td>
<td></td>
<td>a</td>
<td>yes</td>
<td>boob problems: mastitis, engorgement, cracked/bleeding nipples, latching problems, infection, milk supply, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>risks/warnings concerning bf</td>
<td></td>
<td>a</td>
<td>yes</td>
<td>*Problems associated with bf like malnourishment, death, obesity, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b</td>
<td>no</td>
<td>*Risks to the mother's health</td>
</tr>
<tr>
<td>Frame Type</td>
<td>Nominal/Categorical</td>
<td>episodic (individualized)</td>
<td>*Isolated events (personal stories), individual responsibility, individualized instruction/advice (i.e., for mothers)</td>
<td></td>
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<tr>
<td>---------------------</td>
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<td>---------------------------</td>
<td>-----------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>advice</td>
<td>a yes</td>
<td>&quot;pro tip&quot;; here's a suggestion; try this</td>
<td></td>
<td></td>
</tr>
<tr>
<td>controversy</td>
<td>a yes</td>
<td>*Conflict, argument, debate, disagreement, etc. (isolated or in general)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>culture</td>
<td>b no</td>
<td>*Context/place/society and their opinions/general beliefs about bf; &quot;normal&quot;; &quot;society&quot; (e.g., military group, our society shames, particular ethnic/racial/religious/cultural/geographic groups)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>length of time</td>
<td>a yes</td>
<td>Explicit references to time – how long they bf, how long to bf</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;breast is best&quot;</td>
<td>b no</td>
<td>Explicit reference to &quot;breast is best&quot; or &quot;optimal choice&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>attachment parenting</td>
<td>b no</td>
<td>Explicit reference to &quot;attachment parenting&quot; or &quot;AP&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>policy</td>
<td>b no</td>
<td>Explicit reference to current or changes to laws, rules, policies, rights</td>
<td></td>
<td></td>
</tr>
<tr>
<td>pumping</td>
<td>b no</td>
<td>Explicit references to pump, pumping, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>celebrity</td>
<td>b no</td>
<td>Explicit references to celebrity parents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>other</td>
<td>b no</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frame Type</td>
<td>Nominal/Categorical</td>
<td>episodic (individualized)</td>
<td>*Isolated events (personal stories), individual responsibility, individualized instruction/advice (i.e., for mothers)</td>
<td></td>
</tr>
<tr>
<td>Frame Valence (The coder’s overall impression of breastfeeding after reading)</td>
<td>Nominal/Categorical</td>
<td>a</td>
<td>positive (happy, pleasant)</td>
<td>*Positive = Breastfeeding overall is a happy/pleasant/good experience *Positive: might be some challenges, but you can overcome them; this is rewarding! *Championing; it's a good thing; it's worthwhile; people should do it; it's possible and great (despite challenges)</td>
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<tr>
<td></td>
<td>b</td>
<td>negative (sad, unpleasant)</td>
<td>*Negative = Breastfeeding overall is a sad/unpleasant/bad experience. *Negative: this sucks; you can do this, but it's not going to be exciting; no uplifting &quot;you can do it!&quot; *It's a thing people do, but we're not making a qualitative/worth/value judgment</td>
<td></td>
</tr>
</tbody>
</table>
*Neutral = The feeling is relatively balanced or does not lean toward good/bad.
*Neutral: not saying one way or the other; those mentioned in passing are primarily neutral
*It's going to suck. It's a good thing to do b/c it's healthy, but it sucks.

<table>
<thead>
<tr>
<th>Frame Equivalence</th>
<th>Nominal/Categorical</th>
<th>c neutral</th>
<th>*Both/Neither = The feeling is relatively balanced or does not lean toward good/bad. *Neutral: not saying one way or the other; those mentioned in passing are primarily neutral *It's going to suck. It's a good thing to do b/c it's healthy, but it sucks.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gain (positives of bf)</td>
<td>a</td>
<td>*What positive outcomes/gains from breastfeeding (for baby, mom, group, society); &quot;If I breastfeed, this positive/good thing will happen&quot; *Examples: health benefits for child or mother, emotional bonding, low financial cost, etc.</td>
<td></td>
</tr>
<tr>
<td>Loss (negatives of not bf)</td>
<td>b</td>
<td>*What negatives outcomes/losses from not breastfeeding; &quot;If I don't breastfeed, this negative/bad thing is going to happen&quot; (e.g., Busy Phillips: &quot;BF your baby or she'll have a bad immune system&quot;) *Examples: (for baby) increased risk of death, obesity, other health problems; (for mom) increased financial cost, increased risk of ovarian or breast cancer, low parent-child attachment, etc.</td>
<td></td>
</tr>
<tr>
<td>N/A (neither)</td>
<td>c</td>
<td>*Source (Expert/Non-Expert) = Nominal/Categorical</td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Source (Expert/Non-Expert)</th>
<th>Nominal/Categorical</th>
<th>a yes</th>
<th>MD, OB/GYN, pediatrician</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other expert (others with)</td>
<td>a yes</td>
<td>Doula, scientists, health organizations, journals</td>
<td></td>
</tr>
<tr>
<td>Specialized Knowledge (E)</td>
<td></td>
<td></td>
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<tr>
<td>Yes/No</td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>Lactation Consultant (E)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Yes/No</td>
<td>a</td>
<td>yes</td>
<td></td>
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<tr>
<td>Lay Parents (NE)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Yes/No</td>
<td>b</td>
<td>no</td>
<td></td>
</tr>
<tr>
<td>Celebrity Parents (NE)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Yes/No</td>
<td>a</td>
<td>yes</td>
<td></td>
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<tr>
<td>Public Speakers (NE)</td>
<td></td>
<td></td>
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<tr>
<td>Yes/No</td>
<td>a</td>
<td>yes</td>
<td></td>
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<tr>
<td>Social Media (NE)</td>
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<td></td>
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<tr>
<td>Yes/No</td>
<td>b</td>
<td>no</td>
<td></td>
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<tr>
<td>Other Non-experts (NE)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Yes/No</td>
<td>a</td>
<td>yes</td>
<td></td>
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<td></td>
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</tbody>
</table>

A person, company, company representative, politician, group, or organization doing/saying something in favor of or in support of or to advocate for breastfeeding (e.g., mamava, target, le leche league, public breastfeeding awareness project)