On 21 June 1986, nine American women removed their shirts in a park in Rochester, New York. They were protesting against a law which criminalized topless women but not topless men. They chanted “Whatever we wear and wherever we go, yes means yes and no means no” and “Not the Church, not the State, women will control our fate”. Placards bore less snappy slogans: “Suppression creates Obsession”, “What is Indecent about Our Breasts?”, and “Don’t Bust my Bust”. Their demonstration took place in front of hundreds of keen observers – some were there to give support; others to gawk. Despite the fact that no one made a complaint, seven of the women were arrested. In court, Judge Walz ruled that the state was right to require that “the female breast not be exposed in public places” because “community standards… regard the female breast as an intimate part of the human body”. Since “community standards” did “not deem the exposure of males’ breasts offensive”, he concluded, men were permitted to wander about shirtless. Women’s breasts are offensive; men’s breasts are not.

It was not always like that. Male nipples used to be as shocking as female ones. Indeed, it was illegal for men in many states of America to expose their breasts in public. By the early 1930s, though, men had had enough. On beaches in Coney Island, Westchester, and Atlantic City, male swimmers stripped off their shirts and nipple-covering swimsuits. Other swimmers and sunbathers, as well as law enforcement agents and jurists, were outraged. The topless men were mocked, called “gorillas”, fined, and threatened with arrest. One magistrate rebuked them with the words: “All of you fellows may be Adonises but there are many people who object to seeing so much of the human body exposed”. Shirtless men won the subsequent debate, however. By the end of the decade, “Adonises” were free to flaunt their breasts and nipples.

Today, men retain the right to walk around topless but, in the UK and many states in the US, the female breast remains taboo in public places. Indeed, unlike their counterparts in many parts of continental Europe, Britons and Americans seem pretty alarmed by breasts. Facebook is censoring photographs of breastfeeding mothers; Instagram claims that pictures of women’s nipples are “instances of abuse”. There was a public outcry when Janet Jackson’s nipple was inadvertently revealed during the televised Super Bowl game in Los Angeles in 2004. The “costume malfunction” led to hearings before committees in the US House of Representatives and Senate. Michael K. Powell, chairman of the Federal Communications Commission (FCC), maintained that it was “just the latest in a growing list of deplorable incidents”. He complained that “I share the displeasure and fatigue of millions of Americans about the erosion of common decency on television”. CBS was fined $550,000 by the FCC and a five second delay on live broadcasts was introduced. The hullaballoo is even more baffling when we note that CBS and other channels routinely linger over the breasts of poor, black women in the global south as they breastfeed their infants during famines. American families also routinely subscribe to the National Geographic magazine, with its staple of dark-skinned, topless women. Clearly, not all breasts are the same.

Why is catching a very brief glimpse of the breast of an African America celebrity on a stage in Los Angeles regarded as scandalous, while poring over “arty”, black-and-white photographs of semi-naked women in Sudan during humanitarian crises is unexceptional? And how can we explain that peculiarly British phenomenon
(although it was exported to 97 countries all over the world) of the Benny Hill Show? His skits frequently included women with large breasts (or “knockers”, as Hill would have said) and men with balloons stuck up their jumpers. This was one of the most watched programmes on TV between the 1950s and the 1970s, with audiences of 21 million in 1971. In popular culture, too, breasts are routinely lampooned. Novelty shops sell blown-up plastic breasts to be used as bath pillows or as soap dispensers. Breasts are called “boobs” (which also means “stupid”) and “tits” (“make a tit of yourself”). They are baloobas, melons, bee stings, jugs, milk floats, and John Wayne’s saddlebags.

In earlier times, breasts were treated with more respect. After all, humanity itself has been classed amongst the mammals, a word meaning “of the breast”. The father of biological taxonomy, the eighteenth-century biologist Carl Linnaeus, divided animals into six classes – Mammalia, Aves, Amphibia, Pisces, Insecta, and Vermes. Humans were grouped with other animals who possessed milk-producing mammae. Linnaeus’ taxonomical placement of humans was not inevitable. After all, milk-producing mammae is only one of the characteristic of mammals and the mammae are (as the historian of science, Londa Schiebinger, reminds us), “functional” in “only half of this group of animals (the females) and, among those, for a relatively short period of time (during lactation) or not at all”. Interestingly, Linnaeus went one step further. Humans, he maintained, are mammals: our milk-producing mammae link us to other members of the animal kingdom. But when he set out to distinguish humans from the rest of mammals, he invented the term Homo sapiens or “man of wisdom”. In other words, for Linnaeus and subsequent taxonomists, what ties humans to the rest of the animal kingdom is feminine (milk-producing breasts), while what distinguishes humans from other mammals is masculine (wisdom or intelligence). Woman is an animal; man is the exemplary human.

Carl Linnaeus’ taxonomies were part of wider series of debates in the eighteenth century about human breasts. One of the most prominent of these scientific debates was why human males possess breasts at all? There were two responses to this question. The first was to point out that some men do have breasts that produced milk. I will return to this point later. The second response was to make a link between breast milk and blood. Eighteenth century physician Louis de Jaucourt aligned himself with Aristotle’s argument that breast-milk was “concocted blood”. Women secrete blood as menstrual fluid. When pregnant, this blood nurtures the fetus; when she gives birth, blood is converted into milk. Schiebinger explains:

According to Jaucourt, with the onset of puberty, blood surges throughout the female body, causing young women’s breasts to “inflate”; the passion of love also experienced at this age causes them to inflate even further. Men do not have menses… and therefore their breasts – though anatomically similar to women’s – never inflate.

Men’s vestigial teat was also believed to support Plato’s view that “mammals had hermaphroditical origins and only later developed into distinct males and females”. This was certainly the view of Erasmus Darwin. His grandson, Charles Darwin, also argued that, in early evolutionary time, the breasts of male mammals had been capable of producing breast milk but this had eventually ceased (perhaps because of smaller litters) which rendered male assistance in nurturing infants unnecessary. Male breasts joined other organs, such as the appendix and coccyx, as “vestigial” organs.

Clearly, the ways people understand breasts vary dramatically. In many civilizations (including the pre-Greek ancient worlds), breasts were sacred. They produced sustenance, without which humanity would not survive. While ancient Greece revered the phallus over the breast, the mammae organs came back into fashion between 6th century BC and 1st century AD in both Jewish and Christian traditions. Again, this was because of their function in nurturing future generations. It was only from the fifteenth century that breasts came to be viewed primarily as erotic. By the sixteenth century, it was even fashionable for women to wear gowns that exposed their breasts. But in the eighteenth-century, function (in the sense of lactation) rather than form once again rose in prominence, leading to a drop in both the erotic and religious symbolism of breasts. This continued into the nineteenth century, with its renewed emphasis on women as mothers. Postcards and paintings depicting sentimental portraits of large-bosomed mothers breastfeeding their babies proliferated. By the 1890s, the breast’s lactating and sexual meanings had been sheared apart. While 1920s women celebrated their sexy, relatively flat-breasted looks, pro-natalist governments throughout Europe were keen to promote the more functional aspects of female breasts.
In all of these contexts, women’s freedoms, status, and autonomy were at stake. It was one thing to insist on the power of women-as-homemakers, whose breasts were private objects of male heterosexual desire and occasionally functioned in the production of healthy infants; quite another thing for women to enter public life as women with breasts. Breasts have played powerful roles in female subordination. This can be illustrated by an anecdote from the original “Star Wars” film in 1977. In her memoir, Carrie Fisher – who played Princess Leia – recalled being summoned by the director George Lucas to model what was to become Leia’s iconic white dress. Lucas bluntly informed Fisher that she was not to wear a bra because space was an “underwear-free place”. He explained that “what happens is you go to space and you become weightless…. But then your body expands. But your bra doesn’t – so you get strangled by your own bra”. It was a message that women have imbued for centuries: being a woman-with-breasts means that any attempt to break into a male-dominated public culture will lead to strangulation. When entering public life as women, breasts created problems.

This returns us to the inequity that only male members of humanity are allowed to wander topless in public spaces. The censorship of female breasts perpetuates heterosexual men’s definition of eroticism. Not only do men get to decide what is right for women, but if a woman does go topless and a man is aroused by it, then she is guilty of lewd behaviour. This point was made explicit by Justice Payne in his findings during the 1991 trial of Gwen Jacob who walked through the streets of Guelph topless in protest of double standard that allows men, but not women, to be topless. Justice Payne contended that it was “clear to me… that the female breast constitutes a very personal and responsive part of the female anatomy and is a part of the female body that is sexually stimulating to men, both by sight and touch”. As a result, he judged, women’s breasts were “not therefore a part of the body that ought to be flagrantly exposed to public view”. Of course, the law does allow for public exposure of (some) women’s breasts – in topless bars, for example, which are largely catering to male clientele – but not the breasts that “belong” to male lovers or husbands. In this way, women’s bodies are objectified and sexualized: the preferences of women themselves become secondary to those of heterosexual men who decide when and where female breasts can be displayed. Of course, eroticism of all kinds is to be celebrated, not disparaged. But, as Brenna Helppie-Schmieder points out in “The Constitution and Societal Norms: A Modern Case for Female Breast Equality” (2015), “when eroticized body parts develop into the eroticization of a class of people, there is a danger that the class’s sexuality overshadows other aspects of the class”. Heterosexual men’s obsession with policing women’s breasts is oppressive to those women they profess to love.

There are other problems with the prohibition on female toplessness in public spaces. It privileges the sexual fantasies of heterosexual men over those of homosexual or queer men, who might find male chests profoundly arousing. It also ignores female arousal in two ways. First, many women experience their own breasts erotically: nipples respond to touch and to temperature, for example. But women are only allowed to experience these sensations in the privacy of their home.

Second, male chests are sexually exciting to many heterosexual women. In one survey, when young women were asked which male body part was the most “sexually stimulating”, 51 per cent chose the chest, 23 per cent the penis, 17 per cent the legs, and 9 per cent the buttocks. When the preferences were weighted (that is, a woman’s first choice was awarded four points; her second choice, three, and so on), the male chest was a clear winner, followed not by the penis but the legs: the penis was third equal with the buttocks. So why shouldn’t men also “cover up”? It is true that women’s arousal to men’s chests does not expose men to the risk of assault or rape (which is sometimes a consequence of male arousal to women’s chests), but why should responsibility for men’s allegedly uncontrollable desires be placed on women?

The message that is projected by requiring women to cover their breasts in public is that female breasts are uniquely shameful. It is another way that the law deems a woman’s body to be lesser and lewder than that of a man. This not only makes women feel uncomfortable in their own bodies, but it also denies her the opportunity to know what normal breasts actually look like, including their vast range of sizes, shapes, weights, and colours. Heterosexual women may only ever have been exposed to the unrepresentative breasts of women like Janet Jackson, Kim Kardashian, and Rihanna.
Perfect breast shape, size, and angle can be faked, of course. Breasts have been supported by whalebone or steel, suspended by straps, compressed by bandages or rubber, separated by wires, ballooned by means of an inner “shelf” of firm elastic, and pushed each and every which way. Brassieres replaced girdles from the 1920s. By 1932, S. H. Camp and Company had introduced cup sizes: A, B, C, D (which were quickly referred to as egg cup, tea cup, coffee cup, and challenge cup). Whatever a woman’s size, bras make breasts appear firmer, more conspicuous, and gives them a more spherical and conical shape.

The commercialization of breasts has been big business. Women’s anxieties have been used to sell pills, exercises, massages, creams, vibrating machines, diathermy, hydrotherapy, suction devices, and so on – all promising breast perfection. From the 1890s through the early 1900s, for example, the Sears department store promoted the “Bust Developer”, complete with “bust food” and what one design historian called a “mental object resembling a bathroom plunger”. The “bust food” guaranteed “the finest nourishment for the bust glands”, promising to create “a plump, full, rounded bosom…. which before was scrawny, flat, and flabby”. Another company, which manufactured “falsies”, drew on metaphors from the burgeoning car industry, boasting to women that “We fix flats”.

Surgery also promised to either “fix flats” or “blow up the tires”. From the 1980s, the American Society of Plastic and Reconstructive Surgery was propagating the idea that flat-chested women were suffering from a disease. “Micromastia” (also called “hypomastia” and “hypoplasia”) was depicted as a scourge on women’s lives and loves. In 1982, the American Society of Plastic and Reconstructive Surgeons could be heard arguing that the “enlargement of the female breast” was “necessary for maintenance of health or treatment of disease”. They claimed that small breasts were “deformities.” They were “really a disease which in most patients result in feelings of inadequacy, lack of self-confidence, distortion of body image and a total lack of well-being due to a lack of self-perceived femininity”. Only surgery could provide these “patients” with “an improved quality of life”.

The history of taking surgical knives to totally normal breasts is bracing. It all began in Heidelberg in 1895. Vincenz Czerny conducted the first cosmetic implantation when he removed a benign tumour from a patient’s back and sewed it into her chest. From the early 1900s, surgeons were transplanting silk, vegetable ivory (from the ivory nut), paraffin, and polyvinyl alcohol sponges into healthy women’s breasts. They mixed vegetable oil with silicone transformer coolant; they used saline solutions. By the early 1960s, Thomas Cronin and Frank Gerow were promoting the first silicone implants. These were first tried out on a dog named Esmerelda before being implanted (in 1962) into the breasts of Timmie Jean Lindsey, a Texan factory worker who had come into their offices simply looking to have a tattoo removed and left with breast implants. Within a couple of decades, more than one million women had had the surgery. It is now a billion-pound industry, with fathers, lovers, and husbands picking out the desired size and shape.

Unsurprisingly, the surgeons also had a say in the “ideal” breast. In 1970, Richard B, Aronsohn and Richard A. Epstein explained in The Miracle of Cosmetic Surgery that

The breasts should be situated vertically between the third and seventh ribs and horizontally between the edge of the breast plate and the side of the chest…. A conic shape is preferred with the nipple at the apex and at the level of the fourth or fifth rib; each nipple should project slightly upwards and outwards. Breast thickness should be about 8 to 10 centimeters measured from the chest wall; bust measurement should approximate equal hip measurement. In relation to the body, the nipples should be separated by 1 head width and should describe a line separated from the chin by 1 head length…. In appearance, the ideal breast is well-fleshed, rose-tinted white in color (for Caucasians), and is semi-rigid, floating gently on its frame; it should be slightly resilient to the touch.

Cosmetic surgery is not without risk. Operations last between one and two hours, leaving a two or three inch scar under each breast. Implants can leak or rupture. Indeed, according to one survey, this happens to 70 per cent of implants within 10 years. They often cause scar tissue, autoimmune disorders, nerve damage, fatigue, flu-like symptoms, swelling, loss of nipple sensation, and chest pain.
The fact that so many women are willing to undergo such risky procedures is a testament to the importance of breasts to the performance of femininity. It is helpful, then, to remind ourselves that the differential treatment of male and female breasts is not because women’s breasts are significantly different from male ones. At birth, the breasts of both girls and boys are the same. Both male and female breasts consist of tissue, fat deposits, pectoral muscles, and mammary glands. It is only at puberty that oestrogen in women’s bodies leads to the development of lobules, ducts, and stromal tissue. The breasts of both sexes have similar number of nerve endings and degree of “erectile capacity”, which is why male nipples are as erogenous as female ones. Adult women tend to have larger breasts than most men, but many women have small breasts. Equally, many men have large breasts, a phenomenon that is increasing as changing diets are leading to the accumulation of fat deposits and oestrogen in men. Not surprisingly, breast surgery reduction rates for men is soaring.

Furthermore, the ancient philosophers were not totally wrong when they contended that some men produced breastmilk. Between 30 and 60 per cent of adolescent boys develop breasts capable of producing milk. Given the right hormones (progesterone, oestrogen, oxytocin, and prolactin) men can breastfeed. Liver cirrhosis, drugs (such as the antipsychotic drug Thorazine and the heart medication Digoxin), and tumours that cause the pituitary gland to overproduce prolactin can cause men to lactate. Starvation has a similar effect. During the Second World War, when prisoners of war were freed and provided with nutrition, it was found that their livers were incapable of metabolizing oestrogens and androgens: their breasts began producing breastmilk.

However, male lactation is rare (although it is not difficult to imagine a future where doting fathers may choose to feed their infants from their own breasts). It is the ability of female breasts to lactate – under certain conditions, obviously – that has generated some of the other heated debates about breasts. One of these debates is linked to the evolutionary discussions mentioned earlier. Did women evolve breasts as a result of natural or sexual selection? In other words, did the female of the species evolve breast in order to attract men (that is, sexual preference) or to nurture infants (natural selection). Given that no other mammals sexually select breasts, the answer probably lies in the latter.

But if function is so important for the species, then why are so many people phobic when mothers respond to “nature’s call” (that is, a screaming, hungry infant) in public? In 2003, a report published in the Journal of the American Dietetic Association found that 37 per cent of Americans believed that mothers who breastfed should only do so in private places. Those who loudly chant the slogan that “Breast is Best” often whisper sotto voce “at home”.

This is strange, given the indisputable benefits of breastfeeding for both infants and mothers. Breastmilk has immunological and anti-inflammatory properties. Infants who are breastfed are less likely to develop respiratory problems, diabetes, leukaemia, and sudden infant death syndrome. Mothers who breastfeed have lower levels of breast and ovarian cancers, Type 2 diabetes, and myocardial infarction. Both infants and mothers are at reduced risk of obesity.

These benefits have been understood for centuries. When it was revealed that the mortality rate of infants admitted to the Dublin Foundling Hospital between 1775 and 1796 was over 99 per cent (only 45 of 10,272 babies survived), the verdict was “death from want of breast milk”. Two solutions were wet-nursing and cross-nursing (both involve the breastfeeding by someone who is not the infant’s mother but in the first case the person is usually employed while in the latter, it takes place between peers and is often reciprocal). Admittedly, wet-nursing was partly introduced to spare elite women the burden of carrying out this “base” task. In the words of paediatrician Walter Harris in De morbis acutis infantum (1736), it was to ensure that “Ladies of Quality… may have more time to dress, receive, and pay visits, attend public shews and spend the night at their beloved cards”. But it did confer health benefits for the lucky infants, albeit at the cost to the wet-nurses themselves and their own infants. The message that “Breast is Best” was undercut by the promotion of artificial infant foods from the late nineteenth century onwards which, together with the opening up from the 1920s of other forms of employment and declining birth-rates, eventually killed off wet-nursing. The pasteurization of milk and increased knowledge about bacteria were other factors that enhanced the popularity of artificial substitutes to breastmilk.

“Breast is (definitely) Best” but formidable barriers exist to its enactment. Stress, fear, painful nipples, illness (such as HIV), drug dependence, and unease with sexual feelings can all inhibit lactation. This is not to blame mothers.
Rather, it is to castigate broader structural processes that inhibit healthy practices. It is no coincidence that poorer women and minority women are less likely to breastfeed. In one study, for example, only 16 per cent of lower income mothers breastfed for 6 months. There are many reasons for this, including the fact that although there are laws to provide job-protected, unpaid maternity leave for a certain period, not only could many poor mothers or single mothers not afford the “time off” but many businesses (such as small ones) are exempted and part-time workers as well as women who have only recently joined the business are not entitled. Poorer women are under financial pressure to get back to work, they often have other children to take care of, they are less likely to receive support and advice about breastfeeding, they lack access to medical knowledge about “relactation” (or how to restart lactation after it has been stopped), and they are often simply exhausted. Negative public attitudes to breastfeeding in public is also inhibiting, especially when a mother seeks to respond to the infant’s needs rather than stick to a fixed feeding schedule. Capitalist workplaces are designed for male bodies, not female ones and certainly not lactating ones. Mothers are expected to conform to the workplace rather than vice versa. As legal scholar Chantal Morton argues, women who breastfeed are viewed as disruptive and threatening because they refuse ownership, containment, and individuality by making explicit in a material way the social, political, and economic interrelationships that are intrinsic to conception, pregnancy, birth, and child raising as well as the production of public and private spaces.

Finally, contrary to the rhetoric of some advocates of breastfeeding, breastfeeding is not “free” and often not “fun” either. It involves prodding, squeezing, and otherwise handling ones’ breasts and is a particularly exhausting form of labour.

Women have not responded passively to the denigration of their breasts, being treated differently to men, and the propagation of mixed messages (“Breast is Best” versus “not in public, please”). They protested. Feminists picketing the Miss American pageant in Atlantic City in September 1968, threw their bras in rubbish bins. Allowing their breasts to hang free was a powerful symbol of protest against patriarchal values which sought to mould women in Playboy’s image. Lactating mothers (wittily known as “Lactivists”) organized “nurse-ins”, disrupting shops, restaurants, coffee bars, and airlines that had treated breastfeeding women poorly. “Breasts not Bombs” is a political group who protest topless in an attempt to draw attention to double standard relating to breasts as well as the evils of war. “Free the Nipple” campaigners are similarly annoyed that women can be placed on the sex offender register for doing what most men do at the beach. As Lina Esco, instigator of the campaign, asked, “the boob or nipple is the first thing you see when you’re born, it’s the thing you depend on, it’s the first thing that nourishes us, at what point did it become an obscene thing?” Similar initiatives include Go Topless, Topfree Rights Association (TERA), and (my favourite) the Outdoor Co-Ed Topless Pulp Fiction Appreciation Society, where topless women read fiction in public places in New York (female toplessness is legal there). Typical protests include chants of “Free your breasts. Free your minds” and a song “Let ‘em Breath” to the tune of the Beatles’ “Let it Be.”

To conclude. Legal restrictions on the public exposure of female breasts perpetuate harmful prejudices about women’s role in society. They send powerful messages to women about their sexual objectification, their inferiority, and their “place” in public spaces. Breasts are not objects but are part of subjects. Only those subjects – women – should be allowed to say what it means for them and their freedoms. If we want to go topless in a park, we shouldn’t be sexually objectified; if we breastfeed in public, men shouldn’t blush; and if we join Princess Leia in space, our bras should be allowed to become sails, enabling us to fly high.

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Further Reading


Londa Schiebinger, “Why Mammals are Called Mammals: Gender Politics in Eighteenth-Century Natural History”, *The American Historical Review*, 98.2 (April 1993)


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http://www.bbk.ac.uk/history/our-staff/full-time-academic-staff/Joanna

See the website for Sexual Harms and Medical Encounters (SH+ME): https://shame.bbk.ac.uk

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