

Resisting the exploitation of black women's reproductive labor in the United States

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In "[Milk Money: Race, Gender, and Breast Milk 'Donation,'](#)" published in *Signs: Journal of Women in Culture and Society*, Laura Harrison demonstrates the exploitative, racially charged nature of Milk Money, a failed pilot program by the Mothers Milk Cooperative and their business partner, Medolac Laboratories. The program, which was a Clinton Global Initiative Foundation "Commitment to Action," targeted African American mothers in Detroit to sell their breast milk at one dollar per ounce to Medolac, who would then process it and sell it at a 600 percent markup.

Harrison argues that Medolac failed to recognize the larger historical context of the exploitation of black [women's](#) reproductive labor in the United States. She also analyzes the successful social media campaign by Detroit health advocates to halt the program, describing the campaign as a model for public health advocacy and corporate accountability.

"A group of white entrepreneurs and investors claimed they would improve the lives of black women and children in Detroit by monetizing black women's bodies," Harrison writes. "As Medolac would discover, however, women of color in the United States also have a long history of organizing against exploitation within their communities."

Although already recruiting women to sell milk through their website, Medolac's efforts to recruit specifically African American donors began in 2014, when they signed the Commitment to Action. Medolac announced the program in September of that year, pledging to enroll two

thousand new "urban donors" in Detroit, Michigan. They estimated the program would result in a \$6.6 million financial impact for urban African American women over a three-year period. They also made the unsupported claim that that paid breast milk donation could solve the problem of low breastfeeding rates in black communities.

The initiative was met with intense protests by Detroiters concerned that the program was exploitative and reinforced racial stereotypes. The first of these came on December 3, 2014, when black health advocate Kimberly Seals Allers wrote an article in Motherlode, the New York Times parenting blog. Allers wrote that at the time of publication, no Detroit hospitals were purchasing milk from Medolac, and few urban or public hospitals nationwide could afford to do so. Citing Medolac's steep markup, she argued that the company was providing breast milk to premature infants not as a public good but, rather, "as a resource that is stratified by income and access to private hospitals and private insurance," Harrison writes.

On January 12, 2015, Black Mothers Breastfeeding Association (BMBFA) executive director Kiddada Green published an open letter to Medolac, which gathered 600 signatures. The same day that blog post published, BMBFA began using the dual hashtags #BlackLivesMatter and #StopMedolac on social media, and others followed suit.

Green's letter challenged the nature of Medolac's "financial incentives" as well as its claim that breast milk donation would encourage healthy behaviors among donors because milk is screened for drugs, alcohol, and other contaminants. This claim appears in materials pertaining to Medolac's Detroit campaign, but not for the general population of breast milk donors. The notion that black mothers require increased surveillance echoes the stereotype that they are irresponsible, drug abusing, and "potential biohazards to their children," Harrison writes. "According to Medolac's logic, donors breastfeed their own infants with

the same [milk](#) they are selling, yet urban, African American women would not be sufficiently motivated to stay 'healthy' by the desire to protect and nurture their own breastfed babies."

Critics argued that Medolac did not understand the underlying causes of low breastfeeding rates among African American women—the problem they were proposing to fix. These factors include the need among low-income mothers to prioritize surviving on a daily basis as well as the history of enslaved African American women being forced to be wet nurses to white babies. "For some black women, breastfeeding is intimately tied to the hypersexualization and exploitation of black women's bodies during slavery."

Ten days after Green's open letter was published, Medolac abandoned its [pilot program](#). It rescinded its Clinton Global Initiative Call to Action as well as its intention to expand the pilot program to other African American communities.

Though many have argued that this type of "hashtag activism" does not lead to structural change, the case of Detroit's resistance to Medolac proves otherwise, Harrison writes. The activists' campaign to shut down the for-profit [breast milk](#) company is a model for how women's health advocates can make "demands for corporate accountability" and resist "neoliberalism posing as public health."

More information: Laura Harrison, Milk Money: Race, Gender, and Breast Milk "Donation", *Signs: Journal of Women in Culture and Society* (2018). [DOI: 10.1086/699339](https://doi.org/10.1086/699339)

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