

“Where the Mother’s Milk is Insufficient...”: The Commodification of Infant Feeding and the Demise of Breastfeeding

In May of 1867, one of the first ads for manufactured infant food (what would later be called “formula”) appeared in *The New York Times*.¹ This marketing ploy for Liebig’s formula touted its product as “a perfect substitute” for breastmilk.² Within just a few years, a number of manufactured infant food companies emerged.³ Heavy advertising ensued, with each brand trying to persuade consumers that their product was the best alternative to breastmilk. While this early marketing certainly was not the sole cause of the trend toward bottle-feeding in the mid- to late-1800s, its pervasive messages suggested to women that breastfeeding would likely fail and that a “safe” alternative would protect their children through the perils of infancy.

Before the lucrative marketing of milk substitutes, it was common-sense that babies needed breastmilk to survive. The extent to which a woman was successful at breastfeeding would determine whether her baby would live or die.⁴ Infants needed to either suckle at their mothers’ breasts or at the breasts of wet nurses.⁵ Those who were not lucky enough to be breastfed, particularly abandoned babies, had very little chance of survival, even if adopted by well-meaning caregivers.⁶ Yet, by the late 1800s, many women did not breastfeed, opting to give their babies artificial food, often with dire results. In *Don’t Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*, historian Jacqueline Wolf estimated that 10–15 bottle-fed babies died for every one breastfed child, primarily due to diarrhea from contaminated cow’s milk and other substitutes.⁷

Considering that women had been taught for generations that breast-milk was the *only* suitable food for babies, how did the tide turn? How do you move from a breastfed population to an artificially-fed one, particularly when the consequences were often fatal? This chapter seeks to answer this question, using literature on this time period and a primary study of media discourse of *LHJ* to identify and help explain the ideological shift from “only the breast” to a cultural preference for bottles.

CHANGING IDEOLOGIES ABOUT INFANT FEEDING

Scholars have speculated about the timing and primary causes of the increasing preference for artificial food and bottles during this time. According to Janet Golden, the popularity of wet nursing in the 1700s and 1800s instigated changes in infant feeding norms by making it common practice for (wealthy) mothers not to breastfeed their babies, instead hiring lactating women (usually of a lower socio-economic status) to nourish their infants.⁸ This practice became so popular that by the mid-nineteenth century, people began to associate class with milk supply, falsely assuming that high-society women simply did not produce enough milk.⁹ By the mid- to late-1800s, more and more women began weaning early, supplementing with bottles, or choosing not to breastfeed altogether.¹⁰ Recognizing the high mortality risks of cow’s milk and artificial food, nineteenth-century physicians continued to strongly encourage breastfeeding.¹¹ Yet, the rise in women’s inclination for bottle-feeding gradually changed the position of the medical profession.^{12, 13} By the early 1900s, this societal shift to bottle-feeding had become solidified by the medical profession’s endorsement of artificial foods.¹⁴

Other factors also contributed to the erosion of women’s confidence in breastfeeding and the decision to bottle-feed. In conjunction with other cultural shifts of the 1800s, the commodification of infant feeding, first with human milk, and then artificial food, profoundly influenced infant feeding.¹⁵ Long before physicians encouraged artificial feeding, mass media, through articles and ads, persuaded mothers to use alternatives to their breastmilk, reinforcing and perpetuating bottle-use as the modern norm. In this chapter, I argue that nineteenth century media discourse spearheaded the ideological shift in infant feeding perceptions and practice, establishing justifications for not breastfeeding that are still used 125 years later. Examining the marketing of wet nurses and milk substitutes in the 1700s and 1800s demonstrates how and when women

stopped trusting their bodies to feed their babies against medical recommendations, while discourse of the 1900s highlights the growing acceptance of artificial food by the medical community, both with homemade doctor-recommended concoctions and manufactured infant food.

WET NURSING: THE FIRST ALTERNATIVE TO MOTHER'S MILK

As Golden laid out, the first commodification of infant feeding emerged long before manufactured breastmilk substitutes. Some upper-class women sought wet nurses because their husbands disapproved of them breastfeeding, particularly with beliefs in abstinence during lactation.¹⁶ Others hired wet nurses out of convenience. When mothers could not breastfeed, wet nursing was vital to infant survival. In fact, churches and townships would pay for wet nurses to breastfeed orphaned babies well into the 1800s.¹⁷ For the wet nurses themselves, breastfeeding other people's children provided a stable income to women who would have otherwise had a hard time.¹⁸ Unfortunately, this occupation often came at the expense of the wet nurses' own children, many of whom died after they weaned them early in preparation to feed their clients' children.¹⁹

Beginning in the late 1700s, wet nursing was heavily advertised in newspapers, regularly appearing in the classified sections. Rich families routinely posted ads in which they sought a "respectable woman" with a "good breast of milk." Such ads were common and often described breast size and nipple shape as connected to the perception of good milk. Women would also advertise their services. For example, a 1795 ad labeled "A Wet Nurse," published in the *Weekly Museum*, called for "A healthy woman, 26 years of age, of a respectable and unexceptionable character, (having a good breast of milk), wishes to take a healthy child of reputable parents, to suckle in her own house."²⁰ Similarly, a woman advertised her lactation services in the November 25, 1815 issue of *The Intellectual Regale*, describing herself as "a respectable young married woman, who has lost her infant, wishes to take a child of reputable parents to suckle in her own house."²¹ In addition to these individual ads, some printers and later, intelligence offices and maternity houses, served as brokers for wet nurses.²² A 1797 ad appearing in *The Time Piece and Literary Companion* declared, "Any person wanting a wet nurse may be supplied by applying at Charles Coleman's... She has a new breast of milk and can be satisfactorily recommended: She would, if required,

take a child into the house to nurse."²³ Comparable ads for wet nurses appeared throughout the newspapers of this era, often specifying class, marital status, religion, and other demographics, along with moral characteristics.

The way in which wet nursing was advertised highlights the difficulty of commodifying a product that is so intimately connected to a person. In these relationships, authority of the wet nurse's body was unclear, which became even more complicated when growing medical interest in infant feeding prompted wealthy families to use physicians to screen wet nurses for disease.²⁴ Furthermore, the belief that diet and lifestyle influenced milk quality raised more questions about the extent to which families should be able to monitor and control their wet nurses' behavior.²⁵ Fear of disease transmission and the challenge of satisfactorily controlling wet nurses contributed to wet nursing losing popularity in the late 1800s.²⁶ Even when physicians were still recommending hiring wet nurses, mothers began choosing artificial feeding, except in the most severe cases.²⁷ A search for "wet nurse" ads in the ProQuest Historical database illustrates the decline in this practice—at the very least, in its marketing. In the 1860s, 433 classified ads call for wet nurses. The number dropped to 350 ads in the 1880s, down to 117 ads from 1900–1909. And, in the 1920s, only 17 ads for wet nurses appeared, which declined to no ads by the 1930s.

Wet nursing first presented mothers with an alternative to what had been considered the natural progression after pregnancy. The prevalence of ads for wet nurses helped to normalize the practice and present it as the "modern" trend for families who desired to flaunt their status. However, cultural shifts of the 1800s, paired with the extensive marketing of manufactured food, drove women to choose bottles, not wet nurses, when they believed that their milk supply was inadequate.

THE NINETEENTH-CENTURY MEDIA LANDSCAPE: INFANT FOOD AS A PRODUCT

Commercial media boomed in the 1800s. The onset of industrialization and urbanization drastically changed the American landscape. Before this era, people made most of their goods or purchased them locally. The industrial age brought factory-production and mass distribution. This process largely separated producers from consumers.²⁸ And for the first time, people had choices in their products, particularly in rapidly-expanding urban areas.²⁹ Thus, the practice of branding and

trade-marking became important, often conveyed through ads, which introduced and familiarized consumers with particular brands and products.³⁰ This practice cultivated a consumer lifestyle, creating, as historian James Wood stated, “New desires in the minds of readers, desires that grew into needs and resulted in purchases.”³¹ As part of this consumer culture, advertising became a lucrative business, aided by the reduced cost of printing, the expansion of places to advertise, and a growing audience due to increased literacy rates, higher incomes, and urbanization.³² Furthermore, lack of federal regulation and knowledge about disease causality meant that advertisers could make any claims about their products, including curative properties.³³

The development of what were marketed as breastmilk substitutes fit perfectly into this expanding climate of consumerism. Wet nursing had introduced the misperception that some women (or “class of women”) could not produce enough milk. Urbanization and immigration had cut off many women from their extended families—generations of women who traditionally would have guided the birth and lactation process.³⁴ And, enough women had begun feeding babies alternatives to human milk that the medical community had begun investigating “safe” ways to modify cow’s milk.³⁵ All that was needed was a product to fill that gap. In the 1860s, Justus von Liebig developed a “substitute” for human milk containing cow’s milk, malt flour, bicarbonate of potash, and wheat flour.³⁶ Almost immediately, people rushed to create their own versions of the “breastmilk substitutes,” with Mellin’s Food, Nestlé’s Milk Food, Hawley’s Food, Wagner’s Infant Food, Carnrick’s Soluble Food, and other brands appearing in the 1860s and 1870s.³⁷ By 1873, 27 brands of infant formula had been patented.³⁸ It should be noted that these “breastmilk substitutes” were far from safe alternatives to mother’s milk. In fact, they held very little nutritive value, and since most of them required cow’s milk, babies fed manufactured food still faced steep mortality rates like other bottle-fed babies.³⁹ Nonetheless, these products were heavily marketed in newspapers and magazines as revolutionary and even curative alternatives to breastmilk.

At the same time, chemists and physicians were responding to the increase in bottle-feeding by developing their own recipes for artificial food. Many doctors believed that since women were already bottle-feeding, there needed to be a safer alternative to human milk. Dr. Thomas Rotch, a professor of Diseases of Children at Harvard University, spearheaded scientific efforts to develop alternatives to human milk. His 1893 address to

the Children of the Pan-American Medical Congress captured three points of the medical profession’s prevailing view of infant feeding at the time—acknowledging the superiority of human milk, establishing that an “infant feeding problem” existed because of the increase in bottle-feeding, and lastly, explaining how it was the role of science and physicians to both create a “safe” substitute and oversee the feeding process.⁴⁰ Rotch declared that only by duplicating “the changes in the various elements of the breast-milk which satisfy the individual... can we finally arrive at the proper solution of this intricate feeding problem.”⁴¹ Building on Alfred Meigs’ 1884 descriptive analysis of the composition of human milk, Rotch led the creation of milk laboratories that developed scientific recipes for artificial feeding.⁴² Using Rotch’s theories, in 1897, Emmet Holt published 10 formulas for infants for physicians to prescribe to their patients—a number that continued to expand.⁴³ Most physicians preferred this approach, called the American Method or percentage feeding, over manufactured food.⁴⁴ While manufactured infant food would eventually dominate, the percentage feeding guidelines by Rotch and other physicians of the time set the stage for the medical profession’s acceptance of bottle-feeding in the early to mid-1900s.⁴⁵

MEDIA’S ROLE IN THE SHIFT TO BOTTLE-FEEDING

As Wolf has demonstrated, breastfeeding rates did not initially decline due to pressure from ill-informed physicians.⁴⁶ Rather, women changed their feeding preferences and patterns in the mid- to late 1800s, against their doctors’ recommendations.⁴⁷ To understand this cultural shift, extensive sources were examined. In addition to secondary scholarship on the early history of infant feeding in America, I used the Proquest Historical Database to locate articles and ads from this time period. Searches were conducted for “infant feeding,” “infant food,” “breast milk,” and early milk substitute brand names. Articles related to human milk and infant feeding appearing in the late 1800s were also identified (spanning from 1887 to 1905). A search indicating the frequency of wet nursing ads was also conducted, producing ads from 1797 to 1971. Furthermore, medical journal issues from the 1800s were consulted for discussions on infant feeding, milk substitutes and breastfeeding to help contextualize the role of “experts” in this time period. Specifically, the *Journal of the American Medical Association (JAMA)* and the *New England Journal of Medicine* were explored.

This preliminary analysis established the media landscape for how infant feeding, breastfeeding, wet nursing, and increasingly, bottle-feeding, were talked about in various media sources from the late 1700s to the early 1900s. The frequency of articles about infant feeding and ads for wet nursing, then milk substitutes, also sets the stage for further media analysis. Analysis of secondary sources, background literature, and trends in women's media consumption in the late 1800s established the magazine *Ladies' Home Journal* (*LHJ*) as one of the earliest and key magazines appealing to women in this time period. In addition, this magazine was a prime outlet for advertising home and childcare products. Thus, a case study of the articles and ads in *LHJ*, 1883–1907, provides a look into changing ideology and the rise of milk substitute marketing in this time period.

INFANT FEEDING IN *LHJ*

By the 1880s, more and more niche publications were emerging, appealing to both readers and advertisers, who took advantage of the clearly defined targeted audience. *Ladies' Home Journal* began in December 1883 as one of the first magazines for women (under the title *Ladies' Home Journal* and *Practical Housekeeper*). This publication quickly became popular. Within a year of its first issue, circulation reached 25,000 readers.⁴⁸ By 1886, the magazine had 400,000 subscribers.⁴⁹ Its audience spanned socio-economic class lines and clearly recognized women as consumers.⁵⁰ Compared to other women's magazines at the time, *LHJ* was affordable, relying heavily on advertising to subsidize the cost. Historian Helen Damon-Moore described how the publisher, Cyrus Curtis, aimed for "a wide lower-middle-class to middle-class audience for the magazine, one to whom his advertisers could sell their new products."⁵¹ Indeed, this approach was effective. By 1900, *LHJ* had more readers than almost any other magazine in the United States, with a circulation of more than one million.⁵² Clearly, the messages in this magazine were widely received, including those about infant feeding. Therefore, this magazine allows a look into the changing attitudes toward breast- and bottle-feeding, as well as an exploration into the early marketing of manufactured infant food in an era with no regulation. To better understand the messages about infant feeding, articles about infant feeding and ads for milk substitutes and artificial feeding products were analyzed for the period 1884–1907.⁵³ This period encompasses the beginning of the shift toward bottle-feeding, as well as the early 1900s,

in which "feeding experts" started recommending artificial feeding. A textual analysis was conducted on both articles and ads. Frequency of both was also noted. The end date (1907) was selected because of *LHJ* availability in the *American Periodicals* online database.

BREASTMILK OR DEATH: 1884–1889

In the articles of the early years, breastfeeding⁵⁴ is promoted as the only safe way to feed a baby. From 1884 to 1889, 23 articles address breastfeeding. *LHJ* writers in this era were 95% women. Drawing from their own experiences, their advice assumed that women planned to nurse for an extended period of time.⁵⁵ Writers offered tips to make nursing more comfortable. Nurse and regular writer Elizabeth Robinson Scovil, who later published a manual on childrearing, provided lengthy advice in an 1890 column, instructing readers on how to help draw out inverted nipples by using hot water to create a vacuum in a bottle.⁵⁶ She addressed the common problem of nipple pain, suggesting a variety of solutions that included "bathing the nipples twice a day for six weeks before the confinement with powdered alum dissolved in alcohol; or salt dissolved in brandy" and suggested treating cracked nipples with "a mixture of tannin and glycerine," which must be wiped off before nursing.⁵⁷ Furthermore, rubber nipple shields are recommended as a means to help with pain.⁵⁸ In an advice column on home issues, "Mrs. M. McO" recommended a tea to help with diaper rash, adding, "This same wash is excellent for sore nipples."⁵⁹ She also commiserated with readers about clogged ducts (what she calls "caked breasts"), describing how she found "relief in pouring on melted lard as hot as can be borne, and laying on a warm flannel" and massaging the breasts "so that the milk will flow freely."⁶⁰ If those remedies fail, she advised using "a common clay pipe," also useful for weaning.⁶¹ Here, solutions do not include supplementing with bottles or early weaning, but instead address practical remedies to make breastfeeding more comfortable.

New mothers were expected to follow a set of very specific "rules" to produce quality milk. According to articles of the 1880s and 1890s, nursing women should consume sugar for constipation and "a cup of cocoa, gruel made with milk, good beef tea, mutton broth, or any warm, nutritive drink" after meals and before bed, avoiding vinegar and strong tea after meals and before bed.⁶² Maintaining an "even" temperament was apparently part of the breastfeeding discourse, as emotion

was believed to influence milk quality and the baby's health. For example, in a series entitled "Talks with Mothers, with Eminent Physicians," Dr. E.W. Watson explained that "Calmness and an equable temper on the part of the mother are necessary if she would be a good nurse."⁶³ Similarly, in "Timely Hints About Baby," Ada E. Hazell warned women about the transfer of one's demeanor to her child, stating,

Aside from the diet, many other causes affect breast milk, and that mother who values the health of her child will persistently endeavor to preserve a cheerful, even temperament, and to avoid becoming overheated from violent or too-prolonged exercise, manual labor, etc. Anything that unfavorably affects her milk will manifest itself in the fretting and disposition of the babe.⁶⁴

Likewise, in 1890, Scovil reminded breastfeeding women of the importance of a "sound mind," emphasizing, "If a woman is nursing her child, a fit of passion, or an imprudence in diet will affect the baby more disastrously than it will the mother."⁶⁵ She goes on to warn mothers against becoming overly tired or "excited," for "Self-control is as necessary on physical as on moral grounds."⁶⁶ Such advice is reminiscent of the beliefs about milk quality and emotion for wet nurses from earlier in the century. It also likely prompted mothers to question whether they were negatively impacting their milk if they became tired or upset—difficult to avoid with a new baby.

Writers offered strict, but sometimes conflicting, rules for breastfeeding. Hazell advised women to nurse every 2 h so that milk would not "spoil" in the breast.⁶⁷ Watson urged women to avoid nursing at night and if necessary, "Very small babies can be accustomed to drinking cool water out of a glass, and will be glad to get it, instead of an extra meal which they do not need."⁶⁸ This practice, he believed, would improve the "quality of [mother's] milk."⁶⁹ Very little justification was given for needing to switch to milk substitutes. In fact, even a "lack of milk" could be corrected with "persistency" and diet.⁷⁰ Regardless of the issue, women were encouraged to breastfeed through it.

Not breastfeeding posed great risk for babies, according to the discourse of this time. For example, in 1884, a cautionary tale written in the third person describes a baby that died after physician-recommended weaning at age 2 months. One character says: "Doctor to fiddlesticks! What do I care for a doctor? What do ye s'pose we did fifty year ago

when half the time we couldn't get a doctor? We raised our children then; we didn't kill'em; but we didn't have anything to do with weak-kneed doctors, nervous gals, and milk-bottles."⁷¹ An angry reader responded to this story, lamenting, "Let the women of fifty years ago step into *our* places and have twelve children and do their own work. Ah! I think they too would resort to some milk-bottles."⁷² This reader's letter indicates that the cautionary tales conflicted with contemporary women's practice. And yet, a satirical piece entitled "Now to Kill the Baby" humorously emphasizes bottle-feeding's danger, stating that to harm one's children, one can give the baby castor oil, anise, or "Get some prepared food; try three or four kinds—you want the best. Alternate between them and nature's supply."⁷³ In serious pieces, writers outlined the dangers, with statements like "Babies who are fed from the bottle, either wholly or partially, are naturally more liable to bowel disorders."⁷⁴

Writers cautioned women of early weaning, which they defined as ceasing breastfeeding before 12–18 months of age, or before "the Second Summer," a period of high mortality for babies and young children due to "Cholera Infantum" (severe diarrhea caused by contaminated milk). Indeed, they had reason to do so, given the prevalence of diarrhea-related deaths for bottle-fed babies at this time.⁷⁵ Stories were used to emphasize the risk of weaning early or not breastfeeding, connecting artificial food with infant diarrhea and death. The frequent columnist "John's Wife" described artificially-fed babies as "very large and fat, but their flesh is of a spongy texture, their teeth backward in cutting, and they are more apt to fall victims to cholera infantum and dysentery."⁷⁶ She pleaded with her readers to think of their babies' health, stating, "If it is possible, take care of yourself and your diet this summer and nurse baby till October."⁷⁷ In 1887, *LHJ* ran a three-month series on "The Summer Complaint," with Dr. Watson advising mothers on how to protect their babies. In "The Care of Babies in Summer-time," Dr. Watson declared, "The baby on the bottle however is the greatest problem of the summer."⁷⁸ The following month, Watson simply stated, "When a baby is nursed at the breast there is little to say" because the child is protected, followed by a lengthy description about the health complications of substitute feeding and the difficulties of keeping everything hygienic for the baby.⁷⁹ Watson went into detail in another article: "Summer Diarrhea is generally caused by the failure of an infant to properly digest its food; the food being generally not that designed for it by

nature; hence; the great proportion of sickness of this sort in babies, is found in the bottle-fed, rather than in those at the breast.”⁸⁰

In the midst of these pro-breastfeeding articles, there is some acknowledgement of bottle-feeding. After outlining the importance of breastfeeding in the summer, Dr. Watson instructed women on how to help the bottle-fed baby and protecting him/her from Cholera Infantum.⁸¹ Similarly, Anna E. Watson in “About the Baby,” began her article with, “The heated term is approaching when so many babies die, and so many mothers, who are unable to nurse their infants are asking, ‘What shall I feed my baby?’”⁸² A lengthy discussion of mixing baby bottles answered this question. Yet, these articles on bottle-feeding are in the minority and overall position bottles as a far inferior second to breastmilk.

Writers even warned women against introducing any solid food. In a letter to the editor section, a woman urged mothers to delay complementary foods, declaring, “Above all don’t give nursing babies ‘tastes’ of the food you eat. Let a mother feed herself with the most nourishing food she can get and the child will thrive without feeding until it is 10 months old.”⁸³ “John’s Wife,” also spoke strongly against adding table food too early. She wrote of a woman who gave her 10 month-old a slice of cucumber because “he cried for it,” and as a result, “the child was dead within twenty-four hours.” “John’s Wife” added that another child died after eating green corn.⁸⁴ This opposition to complementary foods would radically change within the next few decades, illustrating the wholehearted acceptance of alternatives to mother’s milk.

FALSE PROMISES OF EARLY MILK SUBSTITUTES

Advertisements during this era tell a different story than the articles. Despite the pro-breastfeeding messages in the content of *LHJ*, ads for milk substitutes regularly appeared even early in the magazine. The five-year period of 1884–1889 included 74 milk substitute ads and two ads for bottles. During the early days of artificial feeding, companies pitched directly to consumers, targeting a wide audience. Milk substitutes were not solely marketed to babies, but to “invalids,” “dyspeptics,” “aged people,” and occasionally even as beverages for breastfeeding women. While other groups were mentioned, however, the text and images of these ads focused on feeding babies, therefore, profoundly undermining the stern warnings of artificial feeding in the magazine’s articles. With

the lack of marketing regulation, milk substitute corporations positioned themselves as the optimal solution to when mothers "couldn't breast-feed." An 1886 ad for Lactated Food began with "It may be used with confidence when the mother is unable, wholly or in part, to nurse the child, as a safe substitute for mother's milk.... It cause no disturbance of digestion and will be relished by the child."⁸⁵ Lactated Food made a similar claim in an ad the following year, declaring, "Very many mothers cannot properly nourish their children, and the milk of many mothers produces bad effects in the child because of constitutional disease or weakness."⁸⁶ Likewise, Nestlé's Food declared, "Where the mother's milk is insufficient Nestlé's Milk Food is alone to be recommended."⁸⁷

Other brands went so far as to claim their products were equal to breastmilk. A December 1884 Mellin's Food ad declared it as "The only perfect substitute for Mother's Milk."⁸⁸ Similarly, Carnrick's Soluble Food ad, from March 1888, stated, "Perfectly nourishes the child from birth, without the addition of cow's milk, and digests as easily as human milk."⁸⁹ Nestlé's Milk Food claimed to be "the best substitute known for mothers' milk.... Its chemical analysis is almost indetical (sic.) with that of human milk.... It is very nourishing and produces firm flesh, hard bone and tough muscle."⁹⁰ Another Carnrick's ad claimed that it was "The only food that removes from infancy all necessity, danger, and annoyance of a wet nurse."⁹¹

Another popular marketing strategy was to undermine the effectiveness of other products. For example, one ad stated that the recommendation of Nestlé's by a "prominent" physician "will be appreciated by mothers who are perplexed by the mass of boastful and extravagant advertising of infant foods, to know which is really THE BEST."⁹² Similarly, an 1888 Nestlé's ad explained that "Each new compound put on the market in the past few years has either aimed at *imitating* Nestlé's food or *attacking* it, thereby testifying to its superiority."⁹³ Carnrick's Food also positioned itself as a finer product than its competitors. A long-running campaign for Lactated Foods touted its product as "the most nourishing, the most palatable, the most economical, of all prepared foods."⁹⁴ Attacks were paired with consumer testimonials that supported the superiority of the marketed product, such as "Our Baby thrives on Horlick's food."⁹⁵ Another tactic was to advertise these products through pseudo-articles, which appear to be magazine content but are clearly ads for manufactured food. For example, in August 1885, text in paragraph form read "The milk of a nursing mother becomes

singularly venomous through the operation of certain powerful emotions.” This statement is followed by the anecdote of a woman who received bad news and then nursed, causing her baby to die. Below this “article” is an ad for the milk substitute Ridge’s Food.⁹⁶ This combination frequently and increasingly appeared in the magazine, undermining the pro-breastfeeding messages.

Despite evidence that babies were dying from contaminated milk, artificial food companies capitalized on concerns about hot weather mortality, claiming that their products offered protection against Summer Complaint. In fact, the ad campaigns for Nestlé’s and others shifted to focus on hot weather with statements like, “Nestlé’s Food is especially suitable for infants in hot weather. Requires no milk in its preparation, and is effective in the prevention of cholera-infantum.”⁹⁷ Lactated Food took its claim a step further, declaring it as “The safest food in summer for young or delicate children: A sure prevention of cholera infantum. It has been the positive means of saving many lives where no other food would be retained.”⁹⁸ The text of the ad then explicitly stated that the product “does not cause sour stomach, irritation, or irregular bowels.”⁹⁹ Another Lactated Food ad from the same year described the product as “a predigested, non-irritating, easily assimilated food.”¹⁰⁰ Later that year, Lactated Food promised to “surely prevent fatal results,” while Mellin’s Food positioned itself as “invaluable in cholera infantum and teething.”¹⁰¹

Much like Dr. Watson and other medical experts in the magazine content, milk substitute companies often included a doctor’s recommendation as part of the advertising text, with words like “Commended by Physicians,” “Sold by Druggists Generally,” “Hundreds of physicians testify to its great value,” “England’s *best known* medical authorities,” “A prominent Boston physician,” “The Physician’s Favorite,” and sales aided by “the influence of the medical profession.”¹⁰² Advertisers also use references to general “experts,” as Nestlé illustrated with an 1888 ad reading “all the prominent writers on infant’s feeding give this food the first place as a diet in hot weather as a preventative of summer complaints.”¹⁰³ As with this Nestlé’s ad, artificial food companies particularly used health “experts” during the summer months. An even bolder ad campaign that ran for years included the text “Ziemssen’s Cyclopedia of the Practice of Medicine, Vol. VII., of the standard work, says; ‘IN CASES OF CHOLERA-INFANTUM, NESTLÉ’S MILK FOOD IS ALONE TO BE RECOMMENDED.’”¹⁰⁴ This campaign illustrates

the importance of science and medicine in this era, as these companies used the endorsement of a few physicians or scientists to make it seem as though the medical profession wholly approved of these products. To further emphasize their authoritative positions on infant feeding, most of the artificial food companies ended their ads with the offer of advice or samples. Readers could request free infant care books, or samples, or even "a pamphlet giving important medical opinions" from most of these companies, including Mellin's Food, Nestlé's Milk Food, and Lactated Food.

Ads were stacked together so that readers would see a string of milk-substitute brands, with Mellin's Food, Horlick's Food, and Anglo-Swiss Milk Food on one page.¹⁰⁵ And, unlike magazine articles, increasingly, artificial food companies used drawings to bolster their messages. Anglo-Swiss brand incorporated the image of a sophisticated woman next to its messages. Some of the Lactated Food for Infants and Invalids included a sketch of a woman holding her child as an old woman points at them. Carnrick's Soluble Food contained the most dynamic illustration. Its half-page ad featured two sophisticated women standing next to an elaborately decorated baby carriage.¹⁰⁶ The caption below the drawing details how the baby had been very ill until "we tried CARNRICK'S SOLUBLE FOOD, which agreed with him at once".¹⁰⁷ In an era with very few images and illustrations, these ads would have been particularly eye-catching and influential.

The juxtaposition of pro-breastfeeding articles with the pervasive artificial food ads offered mixed and confusing messages for readers at the time. Practical advice and sometimes difficult to decipher cautionary tales about bottle-feeding could hardly compete with Nestlé and other manufactured food companies declaring that their products could protect babies from intestinal distress, especially when the ads far outnumbered the articles. Furthermore, the use of science and "medical recommendations" in the ads, but not the articles, presented these products as part of the emerging scientific trend at the end of the nineteenth century.

WHEN MOTHER'S MILK INEVITABLY FAILS... 1890s–1900s

In the *LHJ* articles of the 1890s, narratives began to shift, suggesting a growing population of women that "couldn't breastfeed" or who just did not produce "enough milk." In the transitional period, breastfeeding is briefly mentioned, followed by instructions on artificial feeding.

Writers who had previously focused on breastfeeding advice started to shift to a more neutral position on infant feeding. For example, in 1891, Nurse Scovil wrote, “If the mother cannot nurse her child, and it has to be fed, the best preparation to begin with is good cow’s milk, diluted with the same quantity of *boiling* water; three tablespoonfuls of one and three of the other is enough at first, sweetened with sugar of milk, which is very inexpensive.”¹⁰⁸ Likewise, in 1898, columnist Mrs. S.T. Rorer began her piece with “I have already strongly urged that the early food of a young infant should be the breastmilk of its own mother. Where this cannot be, a modified milk may be used,” then launched into a detailed overview on pasteurizing milk and then mixing it with water, milk sugar, cream, egg whites.¹⁰⁹ Here, the lengthy instructions convey the necessity of the advice.

By the early 1900s, this magazine discourse suggested that bottle-feeding had displaced the breast as the means of feeding a baby, even though records show that even by 1911, approximately two-thirds of women still breastfed their babies.¹¹⁰ Although *LHJ* writers acknowledged breastfeeding as the preferable food at birth, they focused on its difficulty and offered lengthy instructions for mixing and preparing artificial food. The prevalence of this shift suggests that nursing was no longer a given or the norm. Themes that emerged in the 1880s continued, with strict breastfeeding rules and concerns about “Summer Complaint” (death from diarrhea in warmer months). Increasingly, though, these issues became justifications for weaning, as recommended by the featured “expert”—now a staple part of the magazine. Earlier years (presumably) used mothers as advice columnists, with bylines that included “John’s Wife” and “Mrs. McO,” with the occasional M.D. By 1889, male participation in the creation of *LHJ* had increased to 15%, likely, in part, due to the rise of male “experts.”¹¹¹ Both male and female “experts” tended to support bottle-feeding. In 1902, Dr. Emelyn Lincoln Coolidge began regularly writing infant feeding-related articles. Coolidge became well-known as a childrearing “expert” even outside of *LHJ*, with multiple books published on infant feeding, including *The Mothers’ Manual: A Month by Month Guide for Young Mothers* (1909) and *First Aid in Nursery Ailments* (1911). From 1902–1907, Coolidge published at least 35 articles on infant feeding in *LHJ*. Unfortunately, Coolidge was also a staunch advocate of modified milk and other foods for babies, perceiving breastfeeding as often inadequate and difficult to control. She even offered readers the service of prescribing the modified milk formulas

through the mail, closing her articles with, "If the mother or nurse will send me a stamped and addressed envelope I will be glad to send a set of formulas with explicit directions for preparing the food, taking care of the bottles and nipples, etc."¹¹² Coolidge's prominence and personal connection to the readers set the stage for messages about infant feeding during this time period.

Under the "right" circumstances, experts and others alike encouraged breastfeeding at birth, for, as "Mrs. S.T. Rorer" wrote in 1900, "a child nursed even for a few weeks at the beginning of his life will have a far better foundation than the child who is given the bottle as soon as he is born."¹¹³ However, there was a persistent assumption that exclusive breastfeeding was unsustainable, likely due to the rigid advice about breastfeeding. Writers advised new mothers to wait 12 h to nurse their newborns and then once the milk came in, breastfeed at fixed intervals of every 2 h, following a prescribed suckling time and maximum number of feedings per night.¹¹⁴ Coolidge proposed longer intervals, with women only breastfeeding every 6 h for the first 3 days, then every 2 h, except at night.¹¹⁵ This rigid advice, of course, would likely lead to an underfed baby and a low milk supply, as contemporary breastfeeding experts recommend intervals of no longer than 2–3 h for new babies.¹¹⁶

This advice on how to keep babies healthy continued, extending to the mother's habits, diet, and emotional state. Mothers were cautioned against indulging their babies' suckling desires, as it was recommended to keep the nipple "out of sight until the baby forgets it," and providing "boiled water" between feeding intervals.¹¹⁷ A nursing mother was expected to maintain a strict diet of cornmeal, cocoa, cooked cereal, eggs and soups, get regular exercise, and "never allow a day to pass by without a free movement of her bowels."¹¹⁸ Furthermore, the misperception that a woman's disposition transfers to her nursling persists in the 1890s and 1900s. A nursing mother was expected to "exercise great self-control of her emotions," otherwise her excitement could result in indigestion or colic.¹¹⁹ For example, in "What to do when the baby is sick?" (May 1903), the author proposed that the mother's lack of exercise and regular bowel movements has been causing her baby's illness.¹²⁰ This advice likely undermined new mothers' confidence in breastfeeding, particularly when paired with bottle-feeding instructions and encouragement to supplement. "Experts" did not advocate for exclusive breastfeeding, stating, "There is no harm whatever in partly nursing and partly bottle-feeding a baby" to give mother more sleep.¹²¹ Introducing bottles

by at least 4 months was strongly encouraged so that “should the mother’s milk then suddenly fail or should she be obliged to leave the child for a short time there will be no struggle which would be especially hard for the baby in the coming hot weather.”¹²²

Breastfeeding was framed as regimented, controllable, and restrictive. Obviously, such “rules” contradict contemporary knowledge of the importance of establishing one’s milk supply and the detrimental impact of supplementing on breastfeeding initiation. The assumption, then, was that breastfeeding would ultimately fail, and when it did, experts in this magazine, other media outlets, and real-life would carefully prescribe a “scientific” concoction of branded milk substitutes and/or cow’s milk, gruel, broth, eggs, sugar, baking soda, lime water, and other ingredients believed to be nutritious for babies.

Writers presented milk substitutes as the immediate and obvious solution to breastfeeding “problems,” particularly Dr. Coolidge, who used “case studies,” to demonstrate the need for breastfeeding mothers to supplement or wean completely. Coolidge often recommended supplementing with barley water and modified milk or complete weaning for a variety of new mother “problems,” including fatigue from babies waking at night, small plateaus in infant weight gain, or for babies who cried after eating, which she suggested signified that the mother “has not enough milk or the milk is not strong enough.”¹²³ Coolidge also advised mothers to dilute their breastmilk with barley water to help with teething.¹²⁴

In comparison to earlier years when writers strongly encouraged nursing until 18 months or so, by the 1900s, weaning was recommended between nine and 12 months. Scovil warned mothers, “A child should never be nursed more than a year.”¹²⁵ She echoed this message throughout her columns, even recommending earlier weaning. As with older articles, weaning continued to be connected to concerns about Summer Complaint (Cholera Infantum or severe diarrhea). Scovil added to one of her weaning declarations of 9 months, “unless this time comes in very hot weather, or the infant is so delicate that a change of food would be injurious.”¹²⁶ Yet, the importance of nursing during the summer came with the caveat, “If the mother is not strong her nursling will sometimes thrive better upon artificial food than on its natural nourishment.”¹²⁷ In July 1902, Coolidge similarly stated, “Although, of course, it is safer for a mother to nurse her baby through the summer months it is much better to wean the child if he is losing steadily in weight or shows marked signs of indigestion.”¹²⁸ In a later article, Coolidge suggested that extended

breastfeeding could even be dangerous, declaring, "Very few mothers can nurse their babies after the twelfth month without either injuring the child or themselves."¹²⁹ She endorsed nursing after a year only during the second summer and then in conjunction with gruels and broths.

As with other articles at this time, writers focused on bottle-feeding. Coolidge briefly acknowledged some protection of mother's milk against Summer Complaint, telling readers, "The breast-fed babies are not so likely to have attacks of summer complaint, and if they do have them the attack will, in most cases, be a short one, recovered from quickly."¹³⁰ At the same time, Coolidge recommended supplementing the breast-fed baby in hot weather, stating "If the child is breast-fed give him one ounce of boiled water or barley-water before nursing, when the day is very warm, and this will reduce the strength of the mother's milk after it is in the baby's stomach."¹³¹ Coolidge strongly discouraged breastfeeding babies who developed diarrhea, arguing, "The general rule in treating cases of summer complaint now is to stop all milk at once."¹³² She instructed nursing mothers to withhold breastmilk and instead give "nothing but gruels for twenty-four hours and using a breast pump for the mother during this time."¹³³

Increasingly, writers emphasize the "deficits" of breastfeeding, presenting it as the source of health problems. One author explained that "sometimes a nursing baby will be constipated because he does not get enough food to form a residue in the intestines. If this is the case he will not gain in weight."¹³⁴ The solution then is to switch to "modified milk made with oatmeal gruel as a substitute for the same number of meals from the breast."¹³⁵ And even though bottle-fed babies also experience constipation, they are, according to this article, "easier to treat."¹³⁶ Doctors of this time conveyed that breastfed babies are at risk of rickets, asthma, anemia, and rheumatism.¹³⁷ The suggestion of these risks, again, weakened claims about bottle-feeding mortality and provided further justification for not breastfeeding.

Even with brief recommendations of breastfeeding at birth, the assumption in this era was that breastmilk would inevitably fail. Considering that the nursing advice given would almost certainly have destroyed a milk supply, it was not surprising that women began weaning earlier or not breastfeeding. Furthermore, should a mother succeed at nursing, supplementing was still encouraged, "just in case" the milk fails later on, especially because most mothers did not perceive the hiring of a wet nurse as an option. According to discourse in *LHJ*, wet nursing was

outdated, except for extreme cases in which mothers “couldn’t” breast-feed and the babies would not suckle from bottles. In 1904, Coolidge stated her opinion on wet nurses, explaining, “As a rule I advise wet-nurses as a last resort only. In the first place it does not seem fair to the nurse’s own baby to deprive him of his mother’s milk; then wet-nurses are, as a rule, expensive and very uncertain as to temper, sometimes making a great deal of trouble in a house.”¹³⁸ She described how an extremely premature baby survived because of a wet nurse. One other article mentioned wet nursing: a story describing how an Italian immigrant abandoned her baby. A doctor examined the child, declaring that he wouldn’t survive “unless a wet nurse could be found, and even then it would be one chance in a hundred if he pulled through.”¹³⁹ They hired a wet nurse and the baby lives. However, this tale was more about the generosity of caring for “foundlings,” than focused on the practice of wet nursing. The scarcity of recommendations for hiring wet nurses emphasized the acceptance and normalization of artificial food as the alternative to mother’s milk. This discourse fits with Golden’s overall discussion of wet nursing at this time, as still occurring, but invisible, and only as a last resort for ill babies.¹⁴⁰

As Coolidge and others touted the difficulty of breastfeeding and the ease of artificial feeding in the early 1900s, advertisers continued to bombard *LHJ* readers with milk substitute propaganda. Like previous decades, the ads often began by stating the importance of breastmilk and then presenting their products as the next best choice for *when* breast-feeding fails, as Nestlé’s Food illustrated, stating, “The mother’s milk is the best food for the baby, but when this fails, Nestlé’s Food is the best substitute” with a large picture of a stork.¹⁴¹ Another Nestlé’s Food ad also exemplifies this tactic: “When a mother is unable to nurse her child, mature and medical skill demand a substitute that shall as closely as possible resemble the mother’s milk—not only in composition, but in the entire absence of all drugs and stimulants, like opium, malt or alcohol.”¹⁴² Eskay’s Albumenized Food declared, “It is the **ONLY FOOD** that perfectly corresponds to mother’s milk.”¹⁴³ Sanipure milk made a similar assertion with “the most perfect substitute for mother’s milk ever prepared.”¹⁴⁴ Lactated Food stated that “Dame Nature provides the best food for babies, but there are often cases where it is impossible to feed the child naturally or where such feeding, because of some unhealthy condition, is absolutely dangerous.”¹⁴⁵ This text was paired with a drawing of a plump, smiling baby, demonstrating the “quality” of its product.

As in earlier times, companies used science and experts to vouch for the effectiveness of their products, quoting mothers and physicians. The text in a Ridge's Food ad from 1890 illustrates this emphasis, declaring, "Its superiority to other similar preparations rests not only on scientific analysis, but on the crucial test of thirty years' experience. It has successfully reared more children than all other foods combined."¹⁴⁶ This connection to science and the use of experts helped support the milk substitute company's claims, which became much more outrageous in this period. Lactated Food was marketed as "far better than medicine. It keeps babies healthy, and is the perfect substitute for mother's milk."¹⁴⁷ Three years later, the company went a step further with its claims, adding, that "by regulating the digestion and supplying the natural elements for proper growth, it prevents and overcomes colic, poor sleep and the other troubles that afflict infants."¹⁴⁸ Companies asserted that their products even protected against Summer Complaint, as Nestlé's Food proclaimed to be "recognized by physicians in all countries as the safest and most natural substitute for the mother's milk, particularly in hot weather" and that it is "fortified against the severe strain of summer heat."¹⁴⁹ Testimonies and anecdotes were used to bolster these claims. An 1889 Lactated Food ad stated in large letters, "Baby's Life Saved." The text describes a baby who was "at the point of death with Cholera Infantum" until "Lactated Food saved her life."¹⁵⁰ Likewise, an Eskay's Food ad includes a picture of a baby next to, presumably, its story. The doctor said he would die "for the baby could not retain mother's milk, or any of the substitutes that the doctor prescribed" until he was saved by Eskay's Food.¹⁵¹ These testimonies, combined with drawings of babies and endorsement by physicians in the text, normalized bottle-feeding, suggesting to an audience that bottle-feeding babies could have a positive outcome (even if the mortality rates of the era conveyed a starkly different message).

The marketing of nipples, bottles, and other artificial feeding supplies dramatically increased in the 1890s. To put it in perspective, between 1884 and 1889, only two ads for bottles or nipples appeared in the 60 issues of *LHJ*. In the next 5 years, *LHJ* included 59 ads for feeding supplies—a number that held steady for the follow 10 years, with 183 ads for bottles and nipples from 1889 to 1907. These messages conveyed the ease, convenience, and "health" benefits of their products. Mizpah Valve Nipples claimed to "Make nursing easy, and prevent much colic."¹⁵² The Best Nurser bottle announced that it "prevents sickness, wind, colic, indigestion."¹⁵³ A Davidson Health Nipple ad featured a picture of a

baby sitting up, with “Here comes my bottle” underneath the image.¹⁵⁴ Like the substitute ads, the prevalence of these messages conveyed that bottle-feeding was the new way of life.

Feeding products often addressed fears of illness from hidden dangers. An 1899 ad for The King Silver Nipple began with “Don’t Risk the Baby’s Health by using rubber nipples. They are neither clean nor sanitary; therefore not healthful, and not fit to convey food to the infant. The King Silver Nipple made of Sterling Silver.”¹⁵⁵ Similarly, the Security’ Nipple described itself as “Secures cleanliness; no ribs or collars to collect milk or germs.”¹⁵⁶ While it is certainly not clear how these specific products would thwart contamination, this language demonstrates the growing widespread adoption of the germ theory of disease causality.

Over the 1800s, a dramatic ideological shift occurred in how mothers and health professionals viewed infant feeding. Industrialization, urbanization, immigration, changes in family life, the birth process, and other factors certainly influenced perceptions of how babies should be fed. Yet, what validated these justifications together was the heavy unregulated marketing of milk substitutes in the late 1800s and early 1900s. The commodification of infant feeding, first with the marketing of wet nursing, and then the far more lucrative sale of various milk substitutes successfully undermined women’s confidence in breastfeeding. Shifts in discourse in the articles of *LHJ* conveyed the effectiveness of this advertising. In the early years, writers desperately encouraged women to breastfeed, offered advice on overcoming obstacles, and emphasized the dire risks of not nursing, through warnings of Summer Complaint and cautionary anecdotes of infant death from artificial feeding. Yet, amid these pro-breastfeeding articles were pages of ads whose language countered every pro-breastfeeding claim. The prevalence of these ads started to normalize artificial feeding, bolstered by eye-catching text and images and scientific wording that touted this approach as the modern way.

The articles and ads of the 1890s onward gave no indication of the frequency at which bottle-fed babies died from the concoctions administered instead of breastmilk. While writers gave a brief nod to “breast is best,” the immediate jump to artificial feeding, paired with rigid rules for breastfeeding that would have likely destroyed milk supply, firmly established bottle-feeding as the means of feeding babies—“safe” as long as the “right” recipe was determined.

What did this shift mean for babies and mothers? The increase of artificial feeding held dismal consequences for children. Bottle-fed babies

were 10–15 times as likely to die, compared to breastfed babies, yet women still made this choice.¹⁵⁷ In addition to high mortality rates, babies faced malnutrition and other health problems. At this time, milk substitutes did not contain many vitamins needed for healthy development. The absence of vitamin C in commercial milk substitutes and home-made formulas caused many children to develop infantile scurvy—a term coined in this era, demonstrating its prevalence.¹⁵⁸ And, while writers in *LHJ* argued that breastmilk increased the risk of rickets (caused by a vitamin D deficiency), its condition was more common in artificially-fed babies.¹⁵⁹ Rather than returning to the breast as the solution, physicians advised adjusting the “formula” or switching milk substitute brands as the answer. By the 1910s, while most women still initially breastfed, supplementation and weaning occurred much earlier than decades before. Increasingly, bottle-feeding was becoming the normal long-term means of feeding a baby, while breastfeeding, especially after the newborn stage, had become passé. It would take 60 more years before breastfeeding rates would rebound. As media messages had played a significant role in shifting dominate ideologies about infant feeding in the nineteenth century, they continued to do so throughout the next century.

NOTES

1. “Breast Milk for Infants.”
2. Ibid.
3. Apple, *Mothers and Medicine: A Social History of Infant Feeding*.
4. Ibid.; Wolf, *Don’t Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
5. Golden, *A Social History of Wet Nursing in America*.
6. Ibid.
7. Wolf, *Don’t Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
8. Golden, *A Social History of Wet Nursing in America*.
9. Ibid.; Wolf, *Don’t Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
10. Wolf, *Don’t Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
11. Ibid.
12. Scholar Rima Apple (1987) argued that bottle-feeding became popular because of the emergence of “scientific motherhood”—a twentieth-century paradigm in which women relied on experts for childrearing

- advice, including guidance on infant feeding (Ehrenreich and English 1978). However, other historians have placed this change earlier, arguing that the medical community's involvement with infant feeding was a response to existing infant feeding choices (Wolf 2001).
13. Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
 14. Apple, *Mothers and Medicine: A Social History of Infant Feeding*; Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
 15. Golden, *A Social History of Wet Nursing in America*; Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
 16. Fildes, *Breasts, Bottles and Babies—a History of Infant Feeding*.
 17. Golden, *A Social History of Wet Nursing in America*.
 18. Ibid.
 19. Ibid.; Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
 20. "A Wet Nurse," March 21, 1795.
 21. "A Wet Nurse," November 25, 1815.
 22. Golden, *A Social History of Wet Nursing in America*.
 23. "A Wet Nurse," August 25, 1797.
 24. Golden, *A Social History of Wet Nursing in America*.
 25. Ibid.
 26. Ibid.
 27. Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
 28. Wood, *Magazines in the United States*.
 29. Ibid.
 30. Ibid.
 31. Ibid., p. 276.
 32. Ibid.
 33. Ibid.
 34. Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
 35. Ibid.
 36. Apple, *Mothers and Medicine: A Social History of Infant Feeding*.
 37. Ibid.
 38. Baumslag and Michels, *Milk, Money, and Madness: The Culture and Politics of Breastfeeding*.
 39. Apple, *Mothers and Medicine: A Social History of Infant Feeding*; Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.

40. Rotch, "The General Principles Underlying All Good Methods of Infant Feeding."
41. Ibid., pp. 505–506.
42. Apple, *Mothers and Medicine: A Social History of Infant Feeding*.
43. Ibid.
44. Fomon, "Infant Feeding in the 20th Century."
45. Apple, *Mothers and Medicine: A Social History of Infant Feeding*; Fomon, "Infant Feeding in the 20th Century."
46. Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
47. Ibid.
48. Damon-Moore, *Magazines for the Millions: Gender and Commerce in the Ladies' Home Journal and the Saturday Evening Post, 1880–1910*.
49. Ibid.
50. Ibid.; Zuckerman, *A History of Popular Women's Magazines in the United States, 1792–1995*.
51. Damon-Moore, *Magazines for the Millions: Gender and Commerce in the Ladies' Home Journal and the Saturday Evening Post, 1880–1910*, p. 26.
52. Wood, *Magazines in the United States*.
53. For the 1884–1889 database, a search was done using the keyword "milk." Relevant articles were then identified for further analysis. In the "1889–1907" database, "milk" yielded too many results. "Breast" AND "Milk," as well as "Bottle" were then searched, restricted to articles. Advertisements for milk substitutes and bottle-feeding and breast-feeding supplies were also collected, using the terms "milk substitute" for all dates, "Nipple OR Bottle" for the early years and "Nipple" OR "Nursing Bottle" for the latter years. Furthermore, ads for the specific milk substitute brands Nestlé, Carnrick, Ridge's Food, Lactated Food, Allenburys, Sanipure, Eskay's, and Anglo-Swiss were also searched.
54. Nursing, not breastfeeding, is the term used, with breastmilk and mother's milk as the substance. Writers use "bottle-feeding," "modified cow's milk," "artificial food," and "milk substitutes" for the non-breastmilk substances given to babies. The word "formula" to mean milk substitute does not appear in *LHJ* until 1906.
55. Damon-Moore, *Magazines for the Millions: Gender and Commerce in the Ladies' Home Journal and the Saturday Evening Post, 1880–1910*.
56. Scovil, "Words for Young Mothers," October 1890.
57. Ibid.
58. Ibid.
59. Mrs. M. McO.
60. Ibid.
61. Ibid.

62. Hazell, "Timely Hints About Baby"; Scovil, "Words for Young Mothers," October 1890.
63. Watson, "Talks with Mothers, By Eminent Physicians: The Care of Babies in Summer-Time."
64. Hazell, "Timely Hints About Baby."
65. Scovil, "Words for Young Mothers," October 1890.
66. Ibid.
67. Hazell, "Timely Hints About Baby."
68. Watson, "Talks with Mothers, By Eminent Physicians: The Care of Babies in Summer-Time."
69. Ibid.
70. John's Wife, "An Answer to 'Mrs. S.'"
71. "'Nater' vs. Milk-Bottles."
72. Morice, "'Nater' vs. the Milk-Bottle Again."
73. "Now to Kill the Baby."
74. Hazell, "Timely Hints About Baby."
75. Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*; Golden, *A Social History of Wet Nursing in America*; W.S., *Summer Complaint and Infant Feeding*.
76. John's Wife, "An Answer to 'Mrs. S.'"
77. Ibid.
78. Watson, "Talks with Mothers, By Eminent Physicians: The Care of Babies in Summer-Time."
79. Watson, "Talks with Mothers, By Eminent Physicians: Babies' Summer Hygiene."
80. Ibid.
81. Ibid.
82. Watson, "About the Baby."
83. The Mother of Five, "The Mother of Five."
84. John's Wife, "When Shall the Baby Be Weaned?"
85. "Lactated Food," 1886.
86. Lactated Food, "Crying Babies."
87. "Nestlé's Food."
88. "Mellin's Food," 1884.
89. "Carnrick's Soluble Food," 1888.
90. "Nestlé's Milk Food," 1885.
91. "Carnrick's Soluble Food," 1887.
92. Nestlé's Milk Food, "Ringer's Ringing Recommendation."
93. Nestlé's Milk Food, "Winter Diet."
94. "Lactated Food," 1886.
95. Horlick's Food, "Our Baby."
96. "Article 2."

97. Nestlé's Milk Food, "Hot Weather."
98. "Lactated Food," 1886.
99. Ibid.
100. "Lactated Food," 1886.
101. "Lactated Food," 1886; "Mellin's Food," 1887.
102. "Mellin's Food," 1884; "Anglo-Swiss Milk Food"; "Lactated Food," 1886; Nestlé's Milk Food, "Ringer's Ringing Recommendation"; "Nestlé's Milk Food," 1887; "Lactated Food," 1887; Nestlé's Milk Food, "Secure Strong Hard Teeth for Baby."
103. Nestlé's Milk Food, "About Your Baby's Teeth."
104. Nestlé's Milk Food, "Hot Weather."
105. "Mellin's Food, Horlick's Food, Anglo-Swiss Milk Food."
106. "Carnrick's Soluble Food," 1887.
107. Ibid.
108. Scovil, "Feeding Very Young Babies."
109. Rorer, "Proper Cooking for the Nursery: New Cooking Lessons: Number Three."
110. Baumslag and Michels, *Milk, Money, and Madness: The Culture and Politics of Breastfeeding*.
111. Damon-Moore, *Magazines for the Millions: Gender and Commerce in the Ladies' Home Journal and the Saturday Evening Post, 1880-1910*.
112. Coolidge, "The Young Mothers' Home Club: An Ounce of Prevention Is Better Than a Pound of Cure."
113. Rorer, "The Proper Food for a Child in Summer."
114. Rorer, "Proper Cooking for the Nursery: New Cooking Lessons: Number Three"; Scovil, "Feeding Very Young Babies."
115. Coolidge, "The Young Mothers' Home Club: An Ounce of Prevention Is Better Than a Pound of Cure."
116. Sears and Sears, *The Breastfeeding Book*.
117. Coolidge, "The Young Mother and Her Child." Coolidge, "What to Do for a Baby Month By Month."
118. Coolidge, "The Young Mother and Her Child: The Proper Management of Breast-Fed Infants."
119. Ibid.
120. "What to Do When the Baby Is Sick."
121. Coolidge, "The Young Mother and Her Child: The Proper Management of Breast-Fed Infants."
122. "What to Do for a Baby Month by Month."
123. Coolidge, "Mother's Calendar: Four Breast-Fed Babies Who Did Not Thrive, and How"; Coolidge, "What to Do for a Baby Month By

- Month”; Coolidge, “The Young Mother’s Calendar: Why Four Babies Could Not Sleep.”
124. Coolidge, “The Young Mother’s Calendar: The Baby’s Mouth and Teeth.”
 125. Scovil, “Feeding Very Young Babies.”
 126. Scovil, “Words for Young Mothers,” 1890.
 127. Ibid.
 128. Coolidge, “The Care of the Baby in Summer.”
 129. Coolidge, “The Young Mother and Her Child: The Proper Management of Breast-Fed Infants.”
 130. Coolidge, “The Young Mothers’ Summer Club,” 1906.
 131. Coolidge, “The Young Mothers’ Summer Club,” 1906.
 132. Coolidge, “The Young Mothers’ Summer Club,” 1906.
 133. Coolidge, “The Young Mother’s Calendar: What to Do for Summer Complaint.”
 134. “What to Do When the Baby Is Sick.”
 135. Ibid.
 136. Ibid.
 137. Coolidge, “The Young Mothers’ Home Club: The Prevention of Rheumatism in Children”; “The Eleventh and Twelfth Months”; “What to Do When the Baby Has the Rickets.”
 138. Coolidge, “Mother’s Calendar: The Care of Premature and Backward Children.”
 139. Toby, “A Mother to Five Hundred Babies: A New York Woman’s Beautiful Work.”
 140. Golden, *A Social History of Wet Nursing in America*.
 141. Nestlé’s Milk Food, “When the Stork Has Brought the Baby.”
 142. Nestlé’s Milk Food, “Natural Law in the Baby World.”
 143. Eskay’s Albumenized Food, “It’s Worth Crying for.”
 144. Sanipure, “Have Your Baby Thrive.”
 145. Lactated Food, “Proper Food for Infants.”
 146. “Ridge’s Food for Infants and Invalids.”
 147. Lactated Food, “Baby’s Life Saved.”
 148. Lactated Food, “Proper Food for Infants.”
 149. Nestlé’s Milk Food, “Natural Law in the Baby World”; Nestlé’s Milk Food, “One Minute’s Talk with Baby’s Mother.”
 150. Lactated Food, “Baby’s Life Saved.”
 151. Eskay’s Albumenized Food, “It’s Worth Crying for.”
 152. “Mizpah Valve Nipples.”
 153. “The Best Nurser.”

- 154. "Davidson Health Nipple."
- 155. King Silver Nipple, "Don't Risk the Baby's Health."
- 156. "Security Nipple."
- 157. Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the 19th and 20th Centuries*.
- 158. Dobson, *Disease*.
- 159. Apple, *Mothers and Medicine: A Social History of Infant Feeding*.

Breastfeeding and Media

Exploring Conflicting Discourses That Threaten Public
Health

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