

**A Pleasurable and Painful Space:
Beyond Maternity and Motherhood**

by

© Kira Petersson-Martin

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ABSTRACT

In order to better understand the complex interrelationship between maternity, society, power, and desire, I propose a new framework for the study of maternity and motherhood: maternal space. “Maternal space” is a trialectical space-based analysis drawn from Soja’s *Thirdspace*. In this thesis it is used in conjunction with a Kristevan understanding of the abject and the Barthesian *plaisir/jouissance* construct, in order to emphasise the importance of taking pleasure and desire into account.

Giving the concepts of desire and pleasure primacy allows the researcher to analyse maternal space without relying on arbitrary designations of who has agency and who does not. This thesis outlines a theoretical framework with the potential to analyse maternal practices and beliefs without claims of empowerment, and uses my own fieldwork as a practical application of this approach.

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“That’s what motherhood’s all about: shut up and deal with it.”

– Gillian

«Que la difference se glisse subrepticement à la place du conflit.»

Roland Barthes, *Le Plaisir Du Texte*, p. 27

First and foremost, I must give my heartfelt thanks to my participants. Through my interactions with each and every one of you I came to new understandings of the body, space, and what it means to be a mother. You showed me the value of intellectual flexibility and bottom-up theory. Thank you for sharing with me, and allowing me the space to explore your worlds and words.

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TABLE OF CONTENTS

Abstract	i
Acknowledgements	ii
<u>CHAPTER 1: INTRODUCTION</u>	<u>1</u>
Studying Motherhood	3
Maternity and Motherhood	6
The Costs of Motherhood	8
Troubling the Binary	10
An Alternate Approach.....	11
<u>CHAPTER 2: METHODS AND METHODOLOGY</u>	<u>15</u>
Methodology.....	15
<i>The Personal is Maternal</i>	15
<i>"Feminist Research"</i>	18
Methods	20
<i>Study Site & Research Period</i>	20
<i>Selection Procedure and Participant Details</i>	22
Data Collection Techniques.....	26
Ethical and Feminist Methods.....	32
<i>Informed Consent</i>	32
<i>Data Processing and Analysis</i>	35
Conclusion.....	38
<u>CHAPTER 3: MATERNAL SPACE.....</u>	<u>39</u>
Spatiality.....	41
Trialectical Space.....	42
Maternal Space	45
The Symbolic Order, the Real, and the Object.....	47
Object space, centrality, and desire	50
Conclusion	52
<u>CHAPTER 4: PLAISIR, JOUISSANCE, AND MATERNITY</u>	
Introduction	53
Plaisir & Jouissance	53
Flickering & Creaking	56
Illustrating the Plaisir / Jouissance Principle.....	58
Conclusion.....	62
<u>CHAPTER 5: COMMUNAL/SHARED MATERNAL SPACE</u>	<u>64</u>
Introduction	64
Focus Group Structure	65
Power Dynamics	67
Arbiters of Maternal Space	72
Conclusion	74

CHAPTER 6: SUBJECTIVITIES OF MATERNAL SPACE	76
Gillian	77
Holly.....	86
Claire	95
Marilyn	102
CHAPTER 7: CONTRADICTIONS AND CONFLICTS OF PLEASURE.....	111
Introduction	111
Plaisir	111
<i>Holly</i>	<i>113</i>
<i>Marilyn</i>	<i>117</i>
Jouissance.....	120
<i>Healing</i>	<i>122</i>
Conclusion	124
CHAPTER 8: CONCLUSIONS	126

LIST OF APPENDICES

APPENDICES

Appendix A: Focus Group Consent Form.....	145
Appendix B: Interview Consent Form.....	148
Appendix C: Focus Group Schedule	151
Appendix D: Interview Schedule	152

La différence n'est pas ce qui masque ou édulcore le conflit: elle se conquiert sur le conflit, elle est au-delà et à côté de lui.

Difference is not what masks or waters down conflict: it is that which conquers conflict; that which is both beyond and beside it.
(Barthes, 27)

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CHAPTER 1: Introduction

In a civilization that puts the self first, motherhood is a challenge, even a contradiction. Desires that are considered legitimate for a childless woman no longer are once she becomes a mother. Self-interest gives way to selflessness. "I want everything" becomes "I must do everything for my child." And the moment a woman chooses to bring a child into the world for her own satisfaction, notions of giving are replaced by debt. The gift of life is transformed into an infinite debt towards a child that neither God nor nature insists you have, and one who is bound to remind you at some point that he or she never asked to be born.
(Badinter 2010, 13)

The above quotation, taken from Elisabeth Badinter's hugely controversial 2010 book, *The Conflict*, illuminates a topic that, for me, has become all-consuming: the question of desire as it relates to motherhood. Daphne de Marneffe addresses what she calls "maternal desire": a powerful physiological and emotional need for contact with one's child or children, something akin in nature, intensity, and repression to sexual drive (3 – 4). Given this, it may be fair to say that Badinter and de Marneffe stand at near opposite ends of the ring. Badinter claims that motherhood is that cause of women's stalled revolution (a claim echoed by Bobel 2001), while de Marneffe spends the first few chapters of her book defending full-time motherhood as a valid life choice. Still, one thing these scholars do agree on is the absolute centrality of desire to the question of motherhood.

Badinter points to an article in the French *Philosophie Magazine*, which found that 73% percent of its respondents chose to have children for reasons involving pleasure, claiming

that “[h]edonism ranks first among the motives, with no mention of self-sacrifice” (11). For her part, de Marneffe states that “We need to develop a more satisfying, more complex understanding of what women get from mothering, not only the rewards of being responsive to children but also the ways in which mothering is responsive to self” (54). That is, both of these authors recognise that becoming a mother, mothering, and all that comes with it, are not just for the child – they are also for the mother. Desire is a cornerstone of motherhood.

My purpose within this thesis is to steer this discussion into new territory. I argue that it is not enough to merely acknowledge that desire exists without also interrogating the grounds and context of that desire. Similarly, it is also important to interrogate the directions this desire can take. I am especially interested in questions of “fitting in” and “belonging.” This question of desire also serves to bridge the binaries commonly found in social science-based explorations of motherhood (binaries like good vs. bad mothers, mothering/maternity vs. motherhood, natural vs. medicalised birth, breastfeeding vs. bottle feeding, etc.). However, if desire is to connect these dichotomies, it is important to situate desire in a model that functions outside of traditional dichotomous bounds. For this reason, I work with a model of spatial analysis that I have dubbed “maternal space.” My articulation of maternal space draws on the works of Edward Soja, Henri Lefebvre, and Julia Kristeva. Desire plays a key role within this analytical framework.

Studying Motherhood

Motherhood studies is not, strictly speaking, a “new” field of inquiry. Its origins can be traced back to Adrienne Rich’s *Of Woman Born*, published in 1976. In *Of Woman Born*, Rich argues for an understanding of motherhood that acknowledges a separation between the felt (or “lived”) experience of “mothering,” and the constraining institution of “motherhood.” The deeply personal book, which included then-taboo confessions of negative feelings toward her children, was the first scholarly work to analyse what it meant to be a mother on a personal and cultural basis, and to explore what relationship motherhood shared with power.

While the 1980s saw a number of publications dealing with elements of mothering¹ (such as childbirth, feeding, and history²), the next significant contribution to the field of motherhood studies (as it now stands) was Sara Ruddick’s 1989 book, *Maternal Thinking*. Ruddick sees “preservation, growth, and social acceptability” as the foundational elements of maternal work, and argues that, “to be a mother is to be committed to meeting these demands by works of preservative love, nurturance, and training” (17). She argued that this form of “maternal thinking” could be used to create a politics of peace. Importantly, because Ruddick frames motherhood (or, at least, the act of mothering) as a form of reason, she makes room for a vision of motherhood that is not tied to the female body (70).

¹ Unless otherwise noted, I use the terms “mothering,” “maternity,” and “motherhood” interchangeably in this thesis. When quoting other theorists I preserve their word choice.

² See, for example, Katz Rothman 1986, Apple 1987, and Wertz 1989.

The study of motherhood flourished in the 1990s, with dozens of books published on the racial (Solinger 1992, Kaplan 1997), classed (Edin & Lein 1997), colonial (Ram & Jolly 1998), gendered (Gordon 1990, DiQuinzio 1999), experiential (Pollock 1999), identity-based (Lewin 1993, McMahon 1995), relational (Walters 1992), and representational (Kaplan 1992, Keller 1994) facets of mothering, among others. Evelyn Nakano Glenn's 1994 anthology, *Mothering: Ideology, Experience, and Agency*, dealt not only with variances over conceptions and constructions of motherhood (across cultures, time, and classes), but also with the conflicts resulting from those differences (a tack shared by Shari Thurer's *The Myths of Motherhood*, published the following year). Sharon Hay's highly influential 1996 book, *The Cultural Contradictions of Motherhood*, gave rise to the concept of the "ideology of intensive mothering": the cultural scripts that demand that mothers devote the vast majority of their time, energy, and resources to raising their children (5). Likewise, Molly Ladd-Taylor and Lauri Umansky's 1998 collection, "*Bad Mothers: the Politics of Blame in Twentieth-Century America*," was pioneering in its analysis of the human costs of demanding that mothers conform to such an ideology.

Since 2000, certain areas in the study of motherhood have enjoyed much play. The questions of parenting and the academe (Basset 2005, Evans & Grant 2008, Monosson 2008, O'Brien Hallstein & O'Reilly 2012), transnational adoption (Volkman 2005, Dorow 2006, Jacobson 2008), queer and lesbian mothering (Thompson 2002, Ryan-Flood 2006, Mamo 2007), maternity and socio-economic class (Gillies 2003 & 2006), and other areas of stigma and oppression (Davis 2004, Berry 2005, Gustafson 2005, and Landsman 2009) have been well covered. The study of breastfeeding, both as an

experience and a concept, is an area that has garnered particular attention. Coming in at the very end of the 1990s was Linda Blum's important *At the Breast: Ideologies of Breastfeeding in the Contemporary United States* (1999), one of the first scholarly books to look at not only breastfeeding, but also at the social constructions surrounding and informing it and the institutions (like La Leche League) concerned with it. In the early 2000s, Fiona Giles' various books and articles on breastfeeding emphasise the ways in which the lactating breast upsets the symbolic order and explore the possibility of breastfeeding as an "ars amatoria" (2002, 2003, 2004, 2008). Jean O'Malley Halley's *Boundaries of Touch: Parenting and Adult-Child Intimacy* (2007) connects breastfeeding with the "boundaries of touch" between adults and their children, pulling from both secondary sources and her own fieldwork. Alison Bartlett's 2005 book, *Breastwork*, meanwhile, suggests the adoption of new forms of social meaning for breastfeeding. Bartlett locates breastfeeding very clearly in the cultural realm, allowing it to be seen as something constructed and, thus, deconstructed. Other works, such as Gabrielle Palmer's *The Politics of Breastfeeding* and Rebecca Kukla's *Mass Hysteria* focus on the corporately and medically enforced alienation of mothers from their bodies (especially through breastfeeding).

By far the greatest presence in motherhood studies – indeed, she coined the term herself – is Dr. Andrea O'Reilly. The vast majority of scholarship related to motherhood studies comes from Demeter Press, which is an imprint of The Motherhood Initiative for Research and Community Involvement (MIRCI, formerly the Association for Research on Mothering). MIRCI's affiliated journal(s), and other work associated with its founder

and director, O'Reilly also make up a fair amount of the published research on motherhood. Because of the sheer quantity of work put out by this collection of sources, the result is that much of the feminist research surrounding motherhood conforms to an approach that focuses on the notion of empowered motherhood (O'Reilly 2005, O'Reilly 2008). This is an approach that privileges Sarah Ruddick and Adrienne Rich as the producers of "the most significant work[s] in maternal scholarship and [...] motherhood studies" (O'Reilly 2009, 295). With the publication of the *Encyclopedia of Motherhood* in 2010, the field of motherhood studies seems to have come into its own. As its general editor, Andrea O'Reilly, says in the introduction to the three-volume work, "Motherhood studies [...] has emerged as an autonomous and independent scholarly discipline" (vii).

Maternity and Motherhood

The cornerstone of O'Reilly's motherhood studies is a well-established division in the language concerning mothers, namely, the mothering/maternity vs. motherhood construct, which has been the impetus and engine behind many valuable studies, and is so common within motherhood studies that it can almost be taken as a "given." Still, elaborating on this distinction is vital to understanding the thrust of this thesis, as I find this theoretical dichotomy problematic.

This divide derives from Adrienne Rich's distinction between "mothering" and "motherhood" (nomenclature later adopted by O'Reilly and her presses). Rich defines this division as such:

[I] try to distinguish between two meanings of motherhood, one superimposed on the other: the *potential relationship* of any

woman to her powers of reproduction and to children; and the *institution*, which aims at ensuring that the potential—and all women—shall remain under male control. (13)

Put more simply, Rich claims that mothering is *expressive*, while motherhood is *oppressive* or *repressive*. Robyn Longhurst understands “maternity,” a semi-synonym of Rich’s “mothering,” to be the embodied experience of mothering: carrying the child, giving birth, nurturing. It is a felt experience, that which connects women to their bodies (1).

In this understanding, “maternity” can be said to relate to Irigaray’s concept of the body “which is not one,” as well as her theory of fluids. Irigaray argues that mathematics and physics have “precluded the analysis of fluids,” (1985, 109) which carries on to the identification of the feminine with the fluid (1985, 111). Whether or not there is an essence of femininity, and whether or not this essence is fluid, is a moot point in this discussion. Rather, what is useful here is this notion of the fluid as “the messy.” Irigaray writes that “[f]luid [...] is, by nature, unstable” (1985, 112). This notion of the unregulated, unsanitised elements of life (the Real) is later picked up by Fiona Giles, who notes that physical bodily fluids (vomit, urine, blood) cause anxiety when they appear unregulated, as they undermine the dry social order (Giles 2002, 9). The lactating maternal body, therefore, is a body which does not fit well within our society’s symbolic order: it is not dry or sanitised, but wet and messy. Much like the fluids that seep from it, the maternal body straddles the area between inside and outside, private and public, the Real and the symbolic (Kristeva 1990). Maternity is thus bodily, and not socially, regulated and encountered (whether physical or emotional).

However, Rich suggests that mothering and maternity are *not* motherhood. Motherhood, like gender, is a performance. It is constituted by acts that existed before an individual becomes a mother, but is then carried on by that same mother, thus continuing a cycle that consistently produces and reproduces not only “motherhood,” but “mothers.” Thus, unlike mothering, motherhood is readily constrained, regulated, and packaged for public conception. It might be understood as the “dry” equivalent of maternity. In this sense, motherhood can be seen to be related to Zerilli’s mythology: it is something that is “utterly groundless, hence stable” (443), because it is disconnected from the reality of mothering. Maternity/mothering exists as an infringement of the lived experience upon the patriarchal institute of motherhood. As Rich argued in *Of Woman Born*, motherhood essentially *is* those social norms; it is the processed by-product of a patriarchal culture (13). Because of the centrality of society to motherhood, in these theories it makes sense that motherhood is the most readily regulated of the two. Thus it is predominantly “motherhood,” *moreso* than “maternity,” that preoccupies the field of motherhood studies (as related to O’Reilly).

The Costs of Motherhood

Related to this concept of “motherhood” is the ideology of intensive mothering, which is widespread and powerful. Theorists have approached intensive mothering’s mother-as-martyr trope for decades, though the exact term derives from Susan Hays’ 1996 publication *The Cultural Contradiction of Motherhood*. In “Stabat Mater,” Kristeva points to the self-sacrificing Virgin Mary construct as something that seems to provide an identity for women, but in fact provides stability for a paternalistic society instead

(Kristeva 1990, 182). Adrienne Rich states that “pain, like love, is embedded in the ideology of motherhood” (157), and even goes so far as to refer to a mother’s suffering as society’s “emotional leaven” (169). Rich suggests that society “needs” an all-sacrificing, chaste mother, which is why those who transgress are punished (Rich 2002). Both of these writers stress the link between motherhood and martyrdom, a link that I see as fundamental to the ideology of intensive mothering. This philosophy undergirds many of the scripts on motherhood. The ideology of intensive mothering encourages mothers to devote the vast majority of their time, energy and resources to their children, or risk being seen as a “bad” mother (Kline 1993, Hays 1996). This cultural hegemony applies to all mothers in a North American cultural context (at the least), and is widely accepted (even if not personally implemented) as the description of a “good” mother. In short, good motherhood involves sacrificing oneself for one’s children at all times.

In order to explain this construct, scholars who study gender have turned to the theory of political economy, stating that the gendered organisation of capital and society demands that a woman must sacrifice her own desires to those of her husband and children in order to secure her access to the means of production (Luxton 1980). Motherhood thus becomes a form of “compulsory altruism” (Land 1985). However, while this description acknowledges some forms of power, it fails to take the fear of abjection – and its flipside, the pleasure of belonging – into account. That is, not all social influences come from economic capital. This is not to say that theories relating to political economy are incorrect – the organisation of society matters. However, by focusing exclusively on “power from above,” to use Bordo’s parlance (27), these scholars ignore non-

authoritarian and non-coercive power that is still capable of producing relations of dominance and subordination (1993). As Onar Usar suggests, “Power is not something that belongs only to one group but rather a dynamic network of non-centralised forces” (74). Bordo, drawing from Foucault, contends that this results in self-induced discipline and surveillance, or “power from below,” which replaces coercive assertion (Bordo 167). That is, what is producing “motherhood from below” is not addressed in many theories of intensive mothering.

If motherhood, following Judith Butler’s concept of performativity (as in Butler 1990), is a gendered performance that produces the appearance of “the mother,” and if these repeated performances establish the regulatory practice of the “mother as martyr,” what larger implications can be drawn? It seems to me that what this approach to motherhood does is to separate “mother” as ideology from “mother” as person – it is the antithesis of “maternity,” which emphasises the embodied experiences of maternal bodies. It could be as Rich ultimately argues: that motherhood threatens to restrain maternity, dictating how and when one should encounter it. I disagree with this assessment, however.

Troubling the Binary

If maternity is naturally felt, while motherhood is culturally created, one automatically assumes a mutually exclusive relationship between society and/or culture and what is “natural.” One also assumes that we, as human beings, can know what is “natural” when it comes to the act of mothering or becoming a mother. Additionally, in positing some elements of maternal experience as being infused with patriarchal values, while others are

not, we as researchers open up a window for claims of empowerment, yes, but also its flipside: accusations of false consciousness. That is, if one can say that a mother is empowered for rejecting patriarchal motherhood while accepting felt maternity, one can also claim the inverse: that a mother who does not do this is not empowered. This is a dangerous precedent to set, especially in feminist research (where motherhood studies usually situates itself). Though much has been written on the nature, and methods, of “empowered mothering” (see, for example, O’Reilly 2004), no consensus has been reached. Perhaps this is because trying to separate a “natural” human drive from the culture that a human grew in/from is close to impossible. Making claims of agency based on these assumptions is equally fraught. For this reason, the differentiation (linguistic and theoretical) between maternity/mothering and motherhood is one I ultimately reject in this thesis. To counteract this dualism, I propose utilising a different form of analysis: that of maternal space.

An Alternate Approach

Thus far, with the notable exception of Badinter and de Marneffe’s works, very little has been written on the relationship between desire and motherhood, and even less has been said of the possibility of studying maternity through spatial analysis. Robin Longhurst’s 2007 collection *Maternities: Gender, Bodies and Space* approaches the study of motherhood through a geographer’s lens, choosing to view maternal bodies as sites of subjectivity that influence and are influenced by spatial processes. As suggested earlier in this introduction, I am interested in applying Edward Soja’s school of spatial analysis to concepts of maternity and motherhood. To my knowledge, the only work to date that

does so is Conlon and Carvalho's "Spaces of Motherhood," which explores maternal and paternal authority over the pregnant body as portrayed in film and television. To better understand the complex interrelationship between maternity, society, power, and desire, a more (w)holistic approach is needed. I propose that a trialectical space-based analysis, drawing from the Kristevan understanding of the abject and Barthes' *plaisir/jouissance* construct, provides just such an approach. Badinter points out that, in a construction of motherhood that exemplifies sacrifice, "the greatest enemy of naturalism is individualism and its hedonistic promise" (169), and I heartily concur. Giving the concept of desire and pleasure primacy allows the researcher to analyse maternal space without relying on arbitrary designations of who has agency and who does not. Thus, the purpose of this thesis is two-fold: to develop and outline a theoretical framework of maternal pleasure and desire that analyses maternal practices and beliefs without claims of empowerment, and to use my own field work as a practical application of this approach.

This thesis is divided into two sections. Part I covers the methodological/methodical and theoretical elements of the theory undergirding the thesis. Following Soja's example, I will not provide a simple "cookbook" definition of maternal space, instead allowing its meaning to "evolve and expand chapter by chapter" (2010, 6). Part II presents my original fieldwork as an extended example of how the theory of maternal space can be used as a tool for understanding how maternal space and the *plaisir/jouissance* principle interact with mothers' lives. Chapter 5 introduces the stories of four women, all of whom interact with maternal space in unique ways. This chapter provides a greater context and "thick description" of my participants' lives (Geertz 1973). In Chapter 6 I explore the

power dynamics within a focus group of breastfeeding mothers, as a method of studying the ways in which power and pleasure interact. In doing so, I set the stage for the seventh chapter, which revisits these narratives in hopes of elaborating upon the *plaisir/jouissance* binary. While much remains to be done in the area of maternal space, my hope is that this thesis can serve to suggest new approaches to thinking about maternity, beyond the motherhood/mothering binary.

PART ONE

CHAPTER 2: Methods and Methodology

In this chapter I explore the methods and methodologies I used and the challenges I faced while working on this study. In my research I utilised a combination of focus group and in-depth interviews, and applied feminist research methodologies. I have also included a discussion on participant selection, data collection, and analysis strategies.

Methodology

The Personal is Maternal

I came to the study of maternity “naturally” – that is, through becoming a mother myself. At the time that I began formulating this research, I was hoping to complete a study that looked at the impact of religion on motherhood, particularly mothers’ sexual lives. While the area of religion and maternity remains under-studied (Kawash 994), I lacked the wherewithal to complete such a project. The intersection of religion and maternity remains an interest of mine, one I hope to be able to address in the future. This was not the only reason for a shift in my research priorities, however.

When I first began thinking critically about motherhood I was in my early twenties, the mother of a toddler, and still with the father of my child (though we unwed). At the time of this writing I am nearer to thirty than twenty, my daughter is school-aged, and I have been a “single mother” for years. As my personal circumstances changed, so, too, did my focus. During my own entry into motherhood, I struggled with combining my identity as

a sexual being with my newfound identity as “mother.” In speaking with other mothers I began to realise that I was not alone in this experience, and sought out reasons for what I saw as a problem. I felt then that my religious upbringing may have led to my struggle, and that a more “enlightened” approach might exist in other religious spheres. This overly simplistic construct was not just an attempt to universalise my own experience, but also a rudimentary attempt to understand my own issues as external to myself. In other words, I wanted to find a way to excuse the conflicted feelings that I found intellectually troubling.

While questions of identity and sexuality remain central to my personal interests, I have become more aware of the wider constraints faced by mothers who dare to defy the ideal. Whereas initially my research had mirrored my own issues, and thus grew from an intensely personal and individual standpoint, I have begun to question how motherhood as an institution affects mothers, moreso than how I (as a woman) related to motherhood. This is not to say that I no longer see myself as reflected in my research – I certainly do. Rather, the implication is that I now see myself and my experiences as fitting into a larger system of maternal oppression, much of which does not directly affect me.

My first foray into this broader study of mothering grew from a symposium presentation on erotic lactation. I began to question “where” a woman’s sexuality – and especially her sexual relationship with her breasts – went once those same breasts were no longer meant to be thought of as only sexual (or sexual at all). During the time of my proposal writing and fieldwork this question remained more or less stable. However, two things conspired

to change my approach: the first was the complete and utter failure of my research data to correlate with what I had theorised. Bluntly: my theory had been wrong (at least in relation to the particular women with whom I was working). The second was the re-evaluation of my limited approach, prompted by an attendee at my public presentation (a requirement for the Master of Women's Studies degree). I was lucky enough to have been confronted with two very valid challenges: whether or not it was possible to draw meaningful conclusions from such a small sample, and the importance of taking queer parents into account.

At the time I bristled at the questions. I was convinced then, as now, that my role as researcher had to be limited to analysing only what I saw before me in the group I was working with. It was not my place to make universalising claims about other mothers based on the experiences of a few women. The questions, however, stayed with me. While it is true that my sample was incredibly homogenous according to census standards (all but one participant were heteronormative, white, middle class, Catholic and local mothers with planned pregnancies), the creation and application of the theory I had tailored uniquely to that group was neither new nor necessary. One could argue that most theories and studies were created for the sole purpose of studying that privileged group. I began to question whether my own work was going to be complicit in the continued marginalisation of "other" mothers. After all, I myself came from a working class background, had a child from an unplanned pregnancy, and was a single mother. Even my own experiences did not "fit" into the theory I then espoused. I had gone from too central in my work to entirely peripheral.

I wanted to find a way to make my work relevant by making room for those who often are not included in conventional studies of motherhood, while still remaining faithful to the experiences of my own participants and myself. For me, the solution was to create an emergent theory, one that drew from the data I already had, rather than the data I'd wished to collect. By developing a theory from my participants' experiences, rather than applying a pre-packaged one, my hope is that this thesis presents a new, and more grounded, theory of maternal experience.

"Feminist Research"

As Katherine Borland makes clear, "relations of privilege [...] are reproduced both within and through research" (623). Researchers decide which stories and quotations to include, how those stories are worded in published studies (regardless of the number of direct quotations), and to whom that research is presented (Hastrup 121 & 122, Baker 37). Thus, the question naturally arises: can there ever be a scholarly representation that is not in itself an act of violence or imperialism (Marcus and Fischer 1986, Stacey 1988, Norris 1992)? By using a reflexive feminist approach I believe it is possible to make this privilege apparent and, also, to possibly mitigate it.

I do not wish to use the term "feminist research" uncritically. Following the example set by Jayaratne and Stewart, I hold that methods themselves have no inherent ethical or political standing (47). Grounded theory (discussed in greater detail later in this chapter) is a good example of this distinction. While designed to prevent the tainting of data, it

always remains possible to “fudge” information or “miscode” (misallocate) concepts. While one is intentional and the other unconscious, both can lead to inaccurate or misleading analysis. In other words, methods are not innately *anything*: they are value-neutral. Any research method can be used fairly or unfairly, thus it is not the method itself that is morally questionable, but the motivation and application of that method: the methodology. Research becomes inclusive when it draws from methods both qualitative and quantitative (sociological, philosophical, anthropological, psychological, textual, and historical), but becomes feminist by virtue of the treatment and care taken in representing its participants (Jayaratne and Stewart 47).

By stating that I intend to draw from feminist methodology, thus meaning that I will “take care” in representing my own interests in addition to those of my participants, I refer to approaches outlined by Lorraine Code and Joan W. Scott. Both scholars assert that there is no view from nowhere, and that experiences are “at once always already an interpretation and something that needs to be interpreted” (Scott 96). In Code's approach, the researcher should take her own subjectivity into account, paying as much attention to her own positionality in relation to the data as to the data itself, for “knowledge is always *relative to* [...] specifiable circumstances” (Code 40). Scott's approach holds that the experience of the subjects should also be examined, rather than taken as “evidence” in and of itself, as experiences *produce* individuals, individuals do not just “have” experiences. Just as a researcher has a position, so too does a participant. Thus, the positionality of both the researcher and the researched must constantly be questioned. While it is tantamount that the researcher honour the intentions of her or his participants,

it remains possible for the researcher to draw conclusions from the data that the participant may not have seen or acknowledged explicitly.

Code's insistence that researchers take their own subjectivity into account is especially important in this case. Failing to locate my self and self-interest within my work would create a study that is at once disingenuous and lacking in context. If I do not own my interpretations they run the risk of traipsing into the realm of false objectivity, which serves to obscure alternate interpretations. I borrow from Alison Rooke in my conviction that the researcher “[must] work from an honest sense of oneself that is open and reflexive, rather than ontologically holding on to a sense of self that provides a stable place to enter into the fieldworld and subsequently leave from [it]” (154). In other words, I must be able to consistently monitor my own assumptions, and question whether the issues that are important to me also matter to the women I will be studying. . By utilising these theories to frame my definition of “feminist research,” I hope to have created a description of maternal space that makes good use of feminism's critical edge. With that in mind, my methods have shifted. While I began by applying and then testing a theory, I moved towards an emergent form of analysis over the course of this research path.

Methods

Study Site & Research Period

I conducted my study in St. John's, the capital of Newfoundland and Labrador, and also its largest city. St. John's boasts a population of 199, 966 according to the 2011 census – nearly one fifth of the entire population of Newfoundland and Labrador. When I initially

began my research, I had intended to focus much more intently on infant feeding practices, more specifically with regard to lactation and formula feeding and sexuality. My interest lay in discovering if feeding choice resulted in, derived from, or related to sexuality in taboo ways. St. John's is an interesting site for my research because Newfoundland and Labrador has some of the lowest breastfeeding rates across Canada, with less than 45% of women breastfeeding at all by three months (Chalmers et al. 2009). This was significant to my research because women who choose not to breastfeed are frequently stigmatised, and may thus camouflage their reasons for their choice. However, I believed that in Newfoundland,³ where choosing not to breastfeed and ending early are more common, this may not have been an issue. As it was, not only was I wrong, but my research ended up following a different track altogether.

In addition to St. John's' utility as a locale for examining mothers' decisions around (and experiences of) breastfeeding, there were other reasons for picking the city as a site of research. St. John's' relatively large size was likely to give me access to more participants than a smaller community might have. Additionally, conducting my research in the city where I lived allowed me to leverage contacts and access networks that would have been difficult to establish in a community where I had no connections. Finally, as a graduate student and single mother of limited means, working in the community where I lived was ideal.

This research took place over four months, from December 2010 to March 2011. It

³ Here I am speaking specifically of the island of Newfoundland. The province will always be referred to as "Newfoundland and Labrador."

involved two categories of participants: breastfeeders and bottle-feeders. Each participant was asked to identify the group in which she felt most comfortable. I organised a focus group in mid December for my breastfeeding mothers, and I conducted individual in-depth interviews with participants over the following months, with the last one concluding in late March.

Selection Procedure and Participant Details

When I was initially planning my research, I was hoping for a small number of participants – around a dozen women – so as to be able to engage in in-depth interviews while completing my research in a timely manner. I had hoped to find six breastfeeding women, and six bottle-feeding mothers. For the purposes of my research, I defined a “breastfeeding mother” as a woman-identified individual with a) a child or children under school age, who b) was still breastfeeding one or multiple children, and had done so for c) the World Health Organisation (WHO) recommended minimum of six months. I defined a bottle-feeding mother as a woman-identified individual with a) a child or children under school age, who b) was not currently breastfeeding any children and had c) either never breastfed, or had breastfed for less than the WHO recommended minimum of six months. I had no difficulty finding six breastfeeding mothers, but was unable to find an adequate number of bottle-feeding mothers for several months. It was not until February 2011 that I was able to find my third bottle-feeding mother. In the end, I conducted a focus group consisting of five breastfeeding mothers (two of whom only participated in the focus group and three of whom agreed to interviews in addition to the focus group), followed by an additional one who only wanted to take part in the interview

portion of the study, for a total of six breastfeeding mothers. Due to the staggered entry of bottle-feeding mothers into the study, I was unable to form an alternative feeding focus group. Thus, I conducted an in-depth interview with each of my three bottle-feeding mothers, resulting in a 6:3 split in participants.

I utilised multiple methods to find my participants. In order to provide as accurate a representation of women's experiences with maternal sexuality as feasible, I aimed to include marginalised voices to the fullest extent possible. I wanted to open my study not only to women who had chosen not to or were unable to breastfeed, or women who continue to breastfeed late into their children's lives, but also to mothers with physical or mental disabilities, mothers of colour and immigrant mothers, and queer or transgender mothers. In keeping with this goal, I also submitted calls for participation to five local organisations and groups dedicated to these communities, including (but not limited to) the *Independent Living Resource Centre* and the *Multicultural Women's Association of Newfoundland and Labrador*. My call for participants was ultimately only published in three organisational newsletters, and also failed to provide any of the hoped-for results. In the end, all of my participants were white, Canadian-born, heterosexual, cisgendered, neurotypical and enabled mothers. However, one of my participants was a volunteer associated with one of these groups who had come across the ad in a newsletter, so the recruitment tactic was not a complete failure.

I submitted calls for participants to three local publications, including *The Telegram* (St. John's' local newspaper), *The Scope* (the local events publication), *The Muse* (Memorial

University's student newspaper) and *Kijiji* (an online classifieds service provided by Google). While *The Muse* never actually printed my advertisement, it did appear in both online and printed editions of *The Telegram* and *The Scope*, and on *Kijiji*'s online site for the St. John's area, resulting in a total of eight initial emails of interest, all from breastfeeding mothers. Of these, only four ultimately ended up participating. The rest either never replied to my follow-up email, or were located outside of the St. John's research area.

In January, I began papering the downtown and university area with posters requesting participants for my study. I postered in downtown coffee shops and stores, across the university campus, and in the surrounding area. My hope for this technique was that it would help me to reach people of different economic and social classes. The downtown and university areas (especially *Stockwood's*, the 24 hour bakery on Freshwater Road) service a diverse collection of socio-economic communities, from students to oil executives to blue-collar workers to artists. However, this technique did not result in any participant interest. Finally, in February 2011, I posted a link on one of my personal social media pages to the aforementioned *Kijiji* call for participants. A well-connected friend of mine "shared" my post on her own page, which resulted in a final spike in interest, netting me an additional six emails of interest, and four actual participants. Thus, I found the majority of my participants through a modified snowball technique.

Despite the disappointment of a relatively homogenous sample, I was ultimately able to secure enough participants to conduct my field work more-or-less as planned. After my

fieldwork had been completed, I realised that another effective strategy that could have been utilised would have been to take out advertisements in childcare centre newsletters. I feel that this may have been a more effective way of targeting mothers without targeting specific feeding practices. As breastfeeding mothers seemed very eager to engage with my work, the group I struggled most to connect with were bottle-feeding mothers. This might have been due to the wording of my posters (though the imagery featured pictures of both bottle and breastfeeding mothers), or perhaps due to larger issues of stigmatization. For future studies, leveraging the “daycare news” may be an effective form of participant recruitment, as would directly connecting with post-natal units, or community centres with new mother programs.

The question of *why* I had so much trouble finding participants from marginalised communities may be as simple as looking in the wrong places. It is also possible that the questions I was then articulating were only of interest (or, at least, predominantly of interest) to mothers within dominant communities. If this is so, one wonders if the breastfeeding vs. bottle-feeding debate is primarily one of privilege: the concern of educated, economically secure, white women. While there are studies that suggest that marginalised women’s views on breastfeeding differ significantly from the dominant discourse on maternity (Tiedje 2001), there is room for more research in this area. Though this question ultimately falls outside of the scope of my research, it is one that would be worth exploring in future academic work on mothering.

Data Collection Techniques

I conducted in-depth, semi-structured interviews with each of my willing participants. In addition to this, I also conducted a focus group with my breastfeeding participants regarding breastfeeding and post-natal sexuality⁴ in general. The focus group was conducted in a community centre in mid-December. I interviewed the participants in locations of their choosing over the next few months. While this was a somewhat labour-intensive method, I remain convinced that it was necessary in order to achieve my spin on a “thick description” of the participants (Geertz 1973).

Transcription

Thick description is an essential element of meaningful research because it provides a context for the behaviour and beliefs of the subjects of study, and thus facilitates feminist understanding. The element of thick description that I use is the inclusion of details outside of simple transcription, as all senses can be meaningful in ethnographic description (Stoller 6). Before moving into descriptions of the focus group and the interviews, I think it is important to explain how I worked thick description into their collection.

I transcribed the focus groups and interviews with an ethnopoetic style in mind. The ethnopoetic approach is meant to reflect the “rhythms and intensities” of interactions in simple, long-line verse (Pollock 25). This includes the use of ellipses, hyphens, and bolding or italics throughout my transcriptions. In some cases, this lent the text a dream-like quality, as when mothers drifted off into internal monologue, like in the following

⁴ Subjects which were of central import to my initial research interests.

excerpt:

You know, I never... [long pause] I never really thought about it that way, you know? ...It just didn't really matter to me, or, maybe... [Pause. She inhales, opens her mouth to speak, and looks to the other mothers before beginning again]
...Maybe I just wasn't paying attention?

In other cases, the inclusion of tonal inference through italics or bolding (dependant on which style best visually represented the emphasis in the participants' words), or descriptive asides, help to clarify the meaning of statements that may otherwise appear ambiguous in conventional transcriptions:

And **then** she says, [in a shrill, sharp voice] "I suppose that's that, then!" [laughter]

In both cases, the adoption of a moderate ethnopoetic style helps to convey the meaning of my participants' words in a more accessible and direct manner than drier forms of transcription, which acknowledge the text but not the texture of verbal communication.

Focus Group

As initially conceived, the purpose of the focus group phase was to get the participants thinking about the topics of breastfeeding and sexuality more actively, so that when we moved on to individual interviews they would have had time to begin formulating thoughts about breastfeeding and sensuality in ways that were potentially more critical. By allowing the participants to build on each other's ideas and "shared experience" (Oakley, qtd. in Reinharz, 223), the focus group was also meant to serve as a method of allowing women to feel more comfortable broaching topics that they may not have thought of approaching before. Importantly, focus groups shift the balance of power because they are less amenable to the researcher's influence than direct interviews, in that

participants may speak in their own voices and determine the direction of the conversation (Wilkinson 2004, Threadgold 2000). As a result, observing women during group discussions can reveal silences among women and, as Kamala Visweswaran suggests, “begin to shape a notion of agency that, while it privileges speaking, is not reducible to it” (51). Focus group research mirrors “everyday social interchange in a relatively naturalistic way,” creating its own social context (Wilkinson 275, 277). Thus, utilising focus groups allowed me to observe the ways in which women negotiated the relationships between mothers and children when navigating the social realm as compared to the personal. This notion of group dynamics ultimately became key to my research. Because there has traditionally been tension between mothers who breastfeed and those who do not, I planned to conduct two separate group discussions in December. Ultimately, given the staggered entry and small number of bottle-feeding participants, I only convened one focus group of breastfeeding mothers.

The focus group took place on December 16th, 2010. The participants by-and-large controlled the flow of the conversations, despite my attempts to keep the discussion focused primarily around breastfeeding, mothering, and maternity. I had attempted to organise the focus group around case studies, so that mothers would be able to share their opinions about various facets of mothering without having to reveal their own personal experiences and positions. The topics I had chosen to introduce to the mothers touched on a variety of subjects that dealt with blurring the line between motherhood and sexuality. These included Kathryn Blundell’s 2010 declaration that she “formula-fed. SO WHAT?”

(Blundell 2010), and the various lactivist⁵ responses it generated; Lynn Stuckey's decision to breastfeed her son until he was 8, including on national television (Associated Press); Denise Perrigo's arrest for seeking help after experiencing sexual arousal while breastfeeding (Kukla 2005); the anonymous story of a woman who experienced intense sexual sensations during breastfeeding (Giles 2010); and the case of Jacqueline Mercado, a 33 year old Peruvian immigrant who chose to photograph her son's last time breastfeeding, and had her children removed from her after the photographs were developed, because she "did employ, authorize and induce Rodrigo Fernandez [her son], a child younger than 18 years of age, to engage in [...] sexual conduct and sexual performance" (Korosec). I chose these scenarios because I felt they all spoke to the unspoken nexus of sexuality and breastfeeding on which my earlier research plan was focused. However, my involvement was minimised by the mothers' eagerness to discuss certain topics over and above others. Additionally, three of the mothers who participated knew each other, and thus dominated much of the group discussion. The few times I did intervene was to give the two other participants a chance to speak when the women who knew each other got into personal discussions over unrelated, "outside" issues (such as gossip surrounding a mutual friend who was not present, and unknown to the other participants). While I had prepared potential discussion topics in the event that conversation floundered or was slow to start, they were unnecessary, as the women decided which elements of the case studies were relevant or interesting. Ultimately, it was the women who decided how much to interact with the provided material.

As the focus of my study shifted over the course of my research, many of the topical

⁵ A portmanteau for "lactation activist."

elements of this focus group data became irrelevant to my thesis. However, what did remain important were a) the observations of tonal shift and deference within the group, i.e. how “alpha mothers” and their views on varying issues took precedence over alternative viewpoints and b) how participants who later participated in interviews conducted themselves in group settings, thus giving me a better, “thick-er” understanding of these women, their priorities, and their methods of interacting with others.

Interviews

During the individual interviews, I had intended to use a structured interview format, so that all my participants would have the opportunity to discuss the same issues. However, in keeping with the feminist notion of “preserving the authority of the subjects one studies” (Borland 621), I eventually decided on a semi-structured format. By retaining a certain amount of freedom of movement (the “semi” in “semi-structured”), this approach did not wholly obscure the silences of my participants (as a fully structured interview is bound to do). By allowing the participants to choose where they took questions and the ones with which they fully engaged, I was able to “read” the silences themselves (DeVault 1990). In this case, what a participant chose not to talk about was just as important as what a participant said, because it illuminated what she considered to be acceptable, relevant or interesting (that is, non-normative and, therefore, worthy of note). Rather than scripting individual questions, I produced a list of topics to be addressed (Appendix D). This list was informed by my own research interests but also drew from the focus groups conducted in December. In this way I hoped to ensure that not only my interests, but also those of my participants, would be taken into account when I conducted

my analysis, thus further positioning my work within the broad field of feminist research (Rooke 2009).

Some interviewees kept very close to the topics list I had prepared, while others diverged wildly. I was able to bring up each of the topics I had hoped to mention in every case, but the extent to which each mother engaged with those topics differed dramatically. One participant, in particular, was preoccupied with a wholly different set of concerns, and kept redirecting the conversation towards those issues. Hers was also the longest interview, totalling over two hours, and by far the most diverse in content. Had I insisted on a fully scripted interview, I would have missed out on more than an hour's worth of data. Another participant, however, was unwilling to offer any information that was not specifically asked for. Her interview, which was completed in roughly forty-five minutes, was punctuated by long, awkward silences while I waited for elaborations that never came. Had I chosen to use a completely participant-driven interview, without any structure, this interview would have been impossible to complete. Having said that, this mother's account was razor focused on the topics I provided, thus limiting my ability to integrate her story into the broader scope of this thesis. As this interview also happened to be my first at the graduate level, I was ill prepared for the uncomfortable silences, and too inexperienced to successfully navigate them at the time. In the future, this situation may be avoided by informing my participants of the interview structure in advance, thus giving them the opportunity to think on topics they may want to broach before the interview begins. A second or third interview may also have lead to a similar result.

Ethical and Feminist Methods

Informed Consent

As the notion of informed consent is vital to research, I asked mothers who participated in the focus group to complete a consent form, which gave them the option to be contacted for further participation in the study as interviewees. I also asked mothers who agreed to participate in the interviews to sign a separate consent form from those in the focus group. I gave every participant the choice either to allow the researcher retention of the data collected from her up to that point, or to request that all data relating to her be destroyed. Finally, I also made it clear that any participant could refuse to answer any questions without repercussion, and provided a brief description of the project's general objectives at the time of the interviews (though those objectives have since changed). I ensured confidentiality of information to the best of my abilities, stating that nobody but myself would have access to either the recordings or the raw transcriptions collected.

I structured the focus group around the discussion of case studies⁶ and third-party issues, rather than personal experience. In addition to the reasons previously provided, this was to avoid potential legal and social repercussions for the participants. This consideration grew out of a story I read during my preliminary research. In Kukla's *Mass Hysteria* I came across the story of single mother Denise Perrigo (205). Perrigo was distressed by the feelings of sexual arousal she experienced when breastfeeding her then-three-year-old daughter. She phoned a La Leche League volunteer, who transferred her to a rape crisis line, who immediately called the police. This resulted in the separation of Perrigo from

⁶ Please see Appendix C for the focus group topics schedule.

her child and the continued state surveillance of their relationship (ibid.). While I found no evidence of similar cases in Canada (Perrigo's case took place in Colorado in the early 1990s), I felt that there was still a chance that mothers might face repercussions for publically discussing their experiences with the erotic elements of lactation. For this reason, anonymity was a primary concern with this research.

Anonymity and Confidentiality

Several interviews contained personal stories that I felt would be compromising if someone were to attach them to the women who shared the narratives. As a result, I have taken several steps to protect the identities of these participants.

Total anonymity is virtually impossible to guarantee in any research, especially in research where participants knew each other in advance. I undertook every reasonable means to minimise breaches in confidentiality and/or to maintain anonymity, but the nature of the research and the research design precluded guarantees. However, I balanced this by attempting to honour the individual dignity, privacy, experiences, and personal understanding of participants. All reasonable efforts were made to ensure that the identity of the mothers involved would remain anonymous by giving them pseudonyms in my writing, and by keeping all descriptions devoid of information that would lead to identification. An additional measure I took to protect the anonymity of my participants was the change or omission of minute details that did not meaningfully impact either their narratives or their presentation (for example, while someone's birth order may have been changed, nobody's religion or ethnic background would have been altered).

Focus groups provided an added challenge to anonymity, as the behaviour of any participant outside of that room was beyond my control. To combat this possibility for exposure, mothers in the focus groups were discouraged from sharing their own experiences or feelings surrounding breastfeeding, and were instead encouraged to share their feelings around a select group of case studies. While what participants chose to speak of in front of others was beyond my control, encouraging discretion helped to keep the conversation outwardly focused (despite my ultimately being unable to enforce this in practical terms). Regardless, some participants still shared personal experiences, though they did so knowing that what they shared could not be guaranteed to remain anonymous.

Because no participant revealed illegal or harmful activities to me during the course of an interview, the entirety of what was shared during interviews will remain protected under the Wigmore criteria. This criteria states that confidentiality will be guaranteed if i) the communication originated in a confidence that it would not be disclosed, ii) the confidence was essential to the relationship in which the communication arose, iii) the relation must be one which is of value to the community, and iv) the interests served by protecting the communications from disclosure outweigh the interest of the court (Palys and Lowman 2000). While Canada does not currently view the researcher-participant relationship as one of privilege, the Wigmore Criteria has been recognised as an assertion of privilege by Canada's Supreme Court, as in the case of Russel Ogden (Ogden 2008). Thus there is a precedent under common law in Canada for participants to be protected against disclosure of identifying information. Given this information, I offered my

interview participants absolute confidentiality on my part, though what they choose to disclose to others regarding their participation is not within my realm of responsibility.

Data Processing and Analysis

Related to the ideals of feminist research and keeping my participants preoccupations in mind, I “applied” an emergent theory⁷ to my collected data as an analytical tool. Emergent theory functions under the assumption that the quality of a theory must be evaluated by the process by which that theory is constructed. I draw from Straussian grounded theory, as outlined in Anselm Strauss and Juliet Corbin’s 1998 publication, *Basics of Qualitative Research*. The essential method of Straussian grounded theory is to mine a body of text in order to identify the variables (categories, concepts, and properties) in the text, and to then examine the relationships among them. The ability to perceive variables and relationships is termed “theoretical sensitivity,” which grows with increased exposure to data (230). The researcher is meant to determine and analyse concepts according to whether they relate to phenomena (the subject or outcome of interest), causal conditions (variables that lead to the development of phenomena), the context of phenomena, the conditions of that context, interactional strategies used to manage phenomena, or the consequences of these interactions (Glaser and Strauss 23, 31). Though the authors lay out many detailed plans about how to enact this process, they also encourage researchers to adapt grounded theory to their own work, saying that “these procedures were designed not to be followed dogmatically but rather to be used creatively

⁷ It should be noted that the term “emergent theory” can refer to a number of distinct theories across disciplines. In this case I use the term very literally: emergent theory is theory that emerges from the data and the analysis of said data, rather than preceding those elements.

and flexibly by researchers as they deem appropriate” (Strauss and Corbin 13).

While I have not formally applied grounded theory to my research, I have borrowed the commitment to inductive theory that is foundational to Strauss’ approach. However, emergent theories are not without detractors. Strauss’ former partner, Barney Glaser, has accused Strauss of “forcing” evidence (1992). It is with this statement in mind that I bring in a feminist lens, to ensure that I did not “force” my desired findings out of the ether. As Scott points out, grounded theory building must be guided by an adequate epistemological understanding of the relationship between data and theory in order to avoid “selecting evidence” (Kelle 2005). A *feminist* emergent theory must therefore move beyond traditional grounded theory by analysing not just the experiences, contexts, and ideas of the participants, but also by constantly examining the assumptions of the researcher, thus allowing theory to emerge from data (or at least creating the best chance for such a thing to occur). In this sense, my interpretation of a feminist grounded theory provides a methodology that allows for a *theorisation* of data as the analysis emerges *from the data itself* – hence, an “emergent” theory.

I had performed two waves of transcription: one rough transcription, and a second, more polished version that incorporated notes on tone, inflection, and silences. I then read and re-read each transcription individually, and then as part of the larger, “breastfeeding” or “bottle-feeding” groups. It was during this stage that I attempted to draw connections between what participants found important, and the theory I had crafted during my thesis proposal. Unfortunately, I found that my research questions and goals did not match up well with what the mothers in my study found important, and did not account for the

challenges and pressures they faced. Instead of attempting to “mould” my data into my theory, I dropped my original approach entirely. Instead, I adopted the emergent theory approach outlined above. In culling central themes and concepts from within my interview and focus group data I was able to build a theory around the data I did collect, rather than the data I had hoped to collect. My theory of maternal space came about as a way of making sense of my participants’ experiences, while also leaving room for the inclusion of alternative maternal experiences.

To get a sense of how this theory could work with my participants’ narratives, I began writing case studies about some mothers whose narratives were notable. These case studies were simply written records of the trends and observations I had while reading over each woman’s narrative, and were not related to any form of theorisation. Through the development of these case studies I was able to identify several recurring issues across the board. Of particular interest was the way each woman reacted to her sense of belonging. Not only were mothers concerned with whether or not they “fit” into positive scripts of motherhood, but their reactions to and feelings about that access to maternal space were diverse. Once I began conceiving of these challenges as relating to access to maternal spaces, I also began to see connections between Nelson’s (2009) and Soja’s concepts of “space.” Making use of a feminist form of emergent theory allowed for the creation and development of a theory more closely related to the realities of my participants than my original proposal, which had been based uniquely on literature and conceptual speculation drawn from my own personal experiences. This has led me to continually question my own biases throughout this research process. As the following

section will make clear, the feminist methodology at work here is focused on reflexivity, sensitivity to power imbalances, and respect for participants' interests. Emergent theory, when incorporated with these feminist sensibilities, was an ideal way in which to apply these values to my work.

Conclusion

Although my research did not yield the results initially anticipated, it is my opinion that these methods and methodologies have lead to a stronger and more sensitive thesis. Conceiving of motherhood as a socio-cultural and political space, one that is governed by power relations and coercive or judicial force and infused with desire and/or fear, rather than as an institution/experience dichotomy allows for a form of fluidity and nuance that I find to be lacking in other approaches to the study of maternity. The theory presented in this thesis, and the succeeding analysis, is a direct result not only of my attempt to take my own subjectivities into account, but also of my commitment to do the same for my participants. Through the use of feminist methods and methodologies, the concept of maternal space was born. Drawing from Soja's theories of trialectical space, Kristevan abjection, Barthes' *plaisir/jouissance* binary, as well as bell hook's appeal to choose the margin, the theory put forward in the following two chapters attempts to add some additional layers to contemporary theories of motherhood.

CHAPTER 3: Maternal Space

In *Maternal Encounters*, Lisa Baraitser makes the observation that “the pregnant and lactating body is usually where ‘maternal embodiment’ [...] begins and ends” (107). She worries that this emphasis on pregnant embodiment turns “the maternal to a matter of flesh, whereas the maternal [...] encompasses many non-genetic and non-gestational, bodily relationships” (107). I would like to push this train of thought even further from the tracks. I argue that the maternal encompasses embodied subjectivity in a way that needn’t always concern the physical body at all. In this case, a mother’s “body” can also be said to be her role in society, her place in the family, and more specifically her position within the broader cultural scripts that define “mother.” Subjective space is more than “just” a body; it is also that body’s relationship to the perceived and conceived worlds it occupies.

All bodies exist within subjective space and also encompass it, as space exists only in relation to the persons who create and populate it. Where a mother fits in maternal space is an important question, the answer to which serves to illuminate much about any individual mother’s personal subjective space. While the transition into motherhood is widely regarded as a life-changing experience that will profoundly affect (both positively and negatively) every aspect of a woman’s life, (McMahon 1995, Teather 1999), the shape and extent of that change is always located in time and space. The changes any one mother may experience will be profoundly different than that of another from a different socio-economic status and religion on the other side of the Atlantic, for example. What

this suggests is that maternity is always shifting, and that its shape and meaning vary widely from mother to mother. This suggests to me that theorists need to be sure to position their discussions within the context from which they emerged.

However, the picture is still incomplete. There is more to motherhood than the where, when, and how of “fitting in” to maternal space. Importantly, there is also the question of desire (to be addressed more fully in the following chapter): where does one *want* to fit (in contrast to where one *does* fit)? Does one want to be “fit” anywhere at all? Maternal space is a theory of, yes, space, but it is also a theory that stands as a reinterpretation and refinement of the well-trod mothering/motherhood dichotomy set forth by Adrienne Rich in *Of Woman Born*. Drawing from the classics of maternal scholarship (from Adrienne Rich to Susan Hayes), as well as from newer scholars (like Fiona Nelson and Fiona Giles), I regard maternal space as an attempt to make sense of the disparate threads in mothering scholarship and weave them into one coherent theory. By imagining the maternal experience as one comprised of both social and embodied encounters, encounters that are both tied to and transcend geographical boundaries, my hope is that maternal space will be a theory that will allow for a fluidity of meaning, while still maintaining an analytical framework that can be applied to diverse maternal experiences across equally diverse contexts.

In this chapter I begin by introducing the language and concepts associated generally with spatial analysis, but more specifically with Edward Soja’s theory of trialectical space. I

then move into a synthesis of this theory with the Kristevan notion of abjection, thus forming the basis for what I have termed “maternal space.”

Spatiality

Space, place, and location are words that are used in diverse ways in scholarly literature, and my usage is very specific. In this thesis, *location* can refer to a geo-political site, such as the main island of Newfoundland or the city of St. John’s; or a specific physical location, such as a house, meadow, or room. Following Guigné, I maintain that physical space can only be a “meeting ground” for knowledge, as no knowledge or culture rises uniquely from any singular location (9). Location has no inherent meaning, rather, it is always dependent on agents or actors to give it meaning. I take from humanistic geography that *places*, on the other hand, are locations that are full of human significance *because* they have been experienced by ordinary people (Rose 41). Examples include “home,” “school,” or “work.” What is home to one person may only be a house to another, while what is an empty field to one group may have been ancestral sacred space to another. Places are “laden with meanings, including the meaning attached to the place by the geographer” (Rose 44). In other words, places overlap with locations, but are never tied to them, and are always subjective.

This leaves only space. Space, as Henri Lefebvre defines it, is a system of social relations. He argues that “when we evoke ‘space’, we must immediately indicate what occupies that space and how it does so” (Lefebvre 12). For Lefebvre space is a theoretical concept, one that, unlike place, is not tied to the physical world. Instead, it can be seen as

a system of social relations, which manifests both as a site of conflict and as a judiciary body. Space here is not a void, but “haunted by people, events and acts that have occurred in the past,” and occupied by those that exist in the present (Sebastian *n. pag.*).

Trialectical Space

Edward Soja’s 1996 and 2010 books, *Thirdspace* and *Seeking Spatial Justice*, provide a useful way of conceptualising space as it interacts with social relations. Soja is concerned with the ways in which geographies affect social processes (such a race, class, and sex stratifications) (2010, 4), and is driven by the belief that “*whatever your interests may be, they can be significantly advanced by adopting a critical spatial analysis*” (2, italics original). In *Thirdspace*, Soja builds on the work of both Lefebvre and Homi Bhabha to envision what he calls a “trialectical space.” Firstspace is formal, perceived space, while Secondspace is conceived, representational space. Thirdspace, on the other hand, represents “a creative recombination and extension, one that builds on a Firstplace perspective that is focused on the 'real' material world and a Secondspace perspective that interprets this reality through 'imagined' representations of spatiality” (6). These three spaces together represent “trialectical space.” When analysing strictly subjective, social spaces (as I do here), Firstspace can be thought of as the formalised, judiciary powers (like governments or legal systems), while Secondspace represents the social institutions that maintain and feed off of these tangible Firstspace entities (like the institution of “the family,” for example). In terms of motherhood, one might think of the various legal and governmental institutions responsible for granting or rescinding custody as examples of Firstspace, and of culturally-specific scripts and values that define what “good” and

“bad” mothers are as the Secondspace conceptions that support those Firstspace institutions. Thirdspace, meanwhile, becomes a site of hybridity and transgression, located outside of and between First and Secondspace. Activist groups and lobbyists, like Planned Parenthood or La Leche League, can be said to be Thirdspace entities. Firstspace and Secondspace are covertly co-dependent forces, each sustaining and enforcing the other, sharing an uneven symbiotic relationship. While the Firstspace cannot survive without the Second, Secondspace is only marginally dependent on Firstspace. Thus, while governments may change, social institutions (the family, hegemonic masculinity / femininity, religious organisations, etc.) will continue on. Additionally, anyone may find oneself both excluded from and included in multiple spaces at any given time.

Note, however, that while I draw inspiration from Soja’s theory of trialectical space, I do not strictly adhere to its guidelines. Spatial justice is a theory that was designed to be applied to locations and places, specifically in relation to Los Angeles and urbanization. As such it is very much connected to the political, physical world, and is attuned to the social justice problems particular to it. The distinctions and relationships between ghettos and gentrification are good examples of the sorts of issues towards which spatial justice and trialectical space are normally applied. Because my study relies on Lefebvre’s understanding of space as a socio-cultural construction, this grounding in the material world is insufficient for my ends. Additionally, “Thirdspace” as it currently stands is insufficient to address the needs of my work.

Soja's theory of trialectical space was created as a response to binarised thinking, false dichotomies that he felt "constrain[ed] critical interpretation and severely limit[ed] the possibilities for strategic intervention" (Soja 1996, 314). Thirdspace developed as "an-Other view":

Thirling introduces a critical "other-than" choice that speaks and critiques through its otherness. That is to say, it does not derive simply from an additive combination of its binary antecedents but rather from a disordering, deconstruction, and tentative reconstitution of their totalization producing an open alternative that is both similar and strikingly different. (61)

However, this construct is only partially successful. Although it is intellectually tempting to conceive of spatial analysis as emphasising differentials, it also works as an identifier and categoriser, which is one of the foundational elements of the symbolic order. What should be an analysis of the way different socio-cultural spaces affect people's lived experiences, keeping in mind the notions of fluidity and ephemerality, runs the risk of turning into a simple rhetorical exercise. Thus, theories of space may in fact reify the very homogenisation they are attempting to overcome. Thirdspace is not immune to this. As Lossau states, "What makes the pitfalls of third space even more problematic is that the homogenizing productiveness and the objectifying consequences of spatial terminology often seem to go unnoticed even in critical social and cultural theory" (70).⁸

In *Postmetropolis*, Soja states that he hopes Thirdspace can be seen as a space of "radical openness, a site of resistance and struggle, [...] where there are always 'other' spaces [...] It is a meeting ground, a site of hybridity and *mistizaje* and moving beyond

⁸ Please note that, as Thirdspace has been theorised by many scholars, it has many possible spellings. I follow Soja's example of creating a new, capitalised word, but when quoting other scholars I use the spelling native to their text.

entrenched boundaries, a margin or edge where ties can be severed and also where new ties can be forged. It can be mapped but never captured in conventional cartographies; it can be creatively imagined but obtains meaning only when practiced and fully lived” (276). In response to this, I would say that a space that builds on the elements of the symbolic order can never be fully liberated from them, and while Soja’s Thirdspace certainly can work as a site of hybridity, and even as an “edge,” it cannot be a true place of “radical openness.” While Soja’s concept of trialectical space is useful for mapping the various forces that shape a mother’s experience of entering into motherhood, superimposing schematic of power divisions over maternity is what creates the foundation for my theory of maternal space.

Maternal Space

Maternal space is seen here as a term that encompasses *all* experiences of maternity and motherhood; it maps the journey into taking on the subjectivity of motherhood. That is, every maternal encounter belongs in maternal space. Every mother has a place in maternal space. However, there *are* divisions in its bounds, as various forms of power influence mothers’ subjectivities and determine who is a “good mother” and what is “bad mothering.” In my understanding, motherhood is subject to the legalising and normalising bodies of the First and Secondspaces, as described above. It is also subject to the resistance of the Thirdspace. I am thinking here of maternal groups like La Leche League and the midwifery movement, and also of the “empowered mothering” touted by such academics as Andrea O’Reilly. Thirdspace subjects “resist and remake the normative grids in which they find themselves,” and this resistance exposes the taboos

structuring the social relations and cultural formations of the Secondspace (Flax 3). In fighting for a woman's right to bare her breast in public, to feed her child freely and without fear of rebuke, La Leche League (for example) occupies the Thirdspace, attempting to triumph over normalising bodies associated with one's sex (such as modesty over exposing the breast). However, in arguing that these rights are due women because breastfeeding is the "best" and "most natural" choice for feeding (implying that, by contrast, bottle feeding is "less-than"), La Leche League also belongs in part to the Secondspace, from whence it draws its authority. That is, because breastfeeding is associated with "ideal" motherhood, and thus "traditional" family values, La Leche League's association with the Secondspace is what allows the organisation the privilege of working from in Thirdspace. Therefore, though maternal space is a socio-cultural space and a subjective space, it is *also* a political space that occupies physical locations. These spaces, however, do not make up the sum of maternal space.

In opposition to the standard maternity/motherhood divide, which creates a dichotomy between the felt and/or lived experience of mothering and the patriarchal culture of motherhood, maternal space acknowledges that there are both *performances* of motherhood and *feelings* that are "allowed." Returning once again to Joan Scott (first referenced in the previous chapter), I note that every experience is socially constructed and historically located (27), and it is thus *impossible* to divorce one from the other, or to posit that there is such a thing as a "relationship between a woman and her "powers of reproduction" that is untouched by, say, patriarchy, or any other social institution (Scott 13). Even something as personal as an emotion or bodily sensation, whether shared or

not, can belong to the symbolic ordered portions of motherhood. Maternity is thus not exempt from social structures, as no encounter occurs in a vacuum. Every sensation and emotion is filtered through a lens grown from the ground of one's context. If there are "allowed" feelings and performances that fit in trialectical space, it stands to reason that there are also feelings and performances that fall outside those bounds.

While the experience of having birthed or raised a child can never be revoked, the title of "mother" (a symbol of having fully integrated into maternal space) represents a performative achievement, and it is one of which any woman can be stripped. What then happens to those who are not granted total or even partial access to the combined trialectical space (First, Second, and Thirdspace) of maternity? What happens to the "bad" or "less than" mothers who do not or cannot live up to the criteria for entry? Following the example set by Deepthi Sebastian in the first chapter of her forthcoming PhD thesis, "The rise of the Vigilante, Euchronias and Eutopias in post 1950's fiction and cinema," I posit that there is a *fourth* space, where things that are not suitable for the "civilised" trialectical spaces are quarantined. What I call "abject space" is the realm of "bad" motherhood, a maternal intermediary between the symbolic order and the unknowable Real. Kristevan understandings (to be introduced presently) of the symbolic order, the abject, and the Real help to make sense of this division.

The Symbolic Order, the Real, and the Abject

The symbolic order houses First, Second, and Thirdspace – the socially/contextually valued and sanctioned expressions and experiences of maternity and motherhood –

“good” maternal space. The abject, alternatively known as abject space or “bad” maternal space, encompasses the symbolic order and all spaces in it. The abject is not tied to the symbolic order. It is a true example of the centrality of the margin, for it is, in fact, the symbolic order which defines itself *in contrast to* that abject. The abject is the dark matter that gives shape and boundaries to the social constructions in it, the Real against which the symbolic order declares itself. Maternal encounters or feelings that fall outside of the acceptable scope of the symbolic order find a home, by necessity, in the abject, which is empty and devoid of meaning in and of itself. There is fluidity in and between these borders, but also a guarding of territory: because the symbolic order defines itself in contrast to the Real, it seeks to protect itself from this abject space.

This is all well and good, but what defines the symbolic order? The Real? The abject? These three concepts are drawn from the work of Julia Kristeva. Though the Real and the symbolic order originate in the writings of Jacques Lacan, mostly in the *Écrits*, it is Kristeva’s interpretation that ultimately fuels the theoretical engine of this thesis. Still, by way of an introduction, it is helpful to begin with Lacan. The Real represents, to an extent, nature. It is chaotic, direct experience and fulfilment of need (Evans 1996, 162). The symbolic order represents the entry into language (Evans 134, 201). My own interpretation of the Real draws more from Émile Meyerson, who defined the real as “an ontological absolute, a true being-in-itself” (quoted in Evans, 162). In contrast, the symbolic order can be seen as the normative socio-cultural grid upon which we live. What is and is not acceptable practice and belief is created and recreated in and by the symbolic order. The symbolic order is the means for persons to live what Judith Butler

has called a “liveable life” (Butler 2004, 39). Belonging is precipitated upon the rejection of those elements of the Real that do not “match” the symbolic order’s language.

Abjection occurs when one is threatened with a collapse in the meaning of the symbolic order. That is, its “script” is seen to not “match” what is real. Abjection, in Kristeva’s words, is that which “disturbs identity, system, order” (1982, 4). The classic example used to illustrate this is the corpse. In our daily lives we are consistently exposed to the knowledge and meaning of death, as both of these can exist in language. However, the sight of an actual corpse threatens a breakdown in the differentiation between subject and object. When one witnesses a corpse, one is in fact witnessing one’s own eventual end – “death infecting life” (1982, 4). Further, one is irresistibly drawn to the abject (1982, 2), as when one cannot look away from the scene of an accident. In my use of the abject, I have taken it to represent very simply the confrontation of the real with the symbolic order in which humans live. When the language of the symbolic order fails to harmonise with lived experience, one is transported to the threshold that is abjection. Abjection thus becomes not only the eruption of inconvenient and publicly unacceptable truth into the social order, but also the subsequent rejection of that truth. Again, this rejection *must* occur in order to maintain one’s access to a “liveable life” (Butler 2004, 39). It is important that the Real and the abject are not confused. While the real is that formless, limitless emptiness that bounds the symbolic order, the abject is the tipping point, the eruption of the real into the symbolic. It is an experience of horror precisely because it

opens up that gash, in which one can see the gaping maw beyond cultural significance – the terror of the “radically open.”⁹

Abject space, centrality, and desire

For the purposes of my work, I identify abject space following Kristeva’s definition of the abject. As previously stated, abjection occurs when one is threatened with a collapse in the meaning of the symbolic order. Therefore, abject space can be seen as the shadowy contours of maternity, that area which serves to house those elements that threaten the identity, system, and order of maternal space.

The people and elements that populate abject space have been denied access to the culturally sanctioned parts of maternal space. Often, as in the case of adoptive mothers, the only reason for denying access to these individuals and their practices is their failure to conform to the criteria for “good” or normative motherhood as outlined by dominant societal scripts (hence the distinction sometimes made between one’s adoptive mother and one’s “real,” biological, mother). Because they do not have the tacit acceptance of the Secondspace, these persons are also not eligible for the protection of the Thirdspace, which remains mired in the normative values of the Secondspace. The “exclusion by inclusion” of abjected mothers illustrates an attempt to negate the existence of a space beyond the jurisdiction of mainstream society. That is, by relegating certain mothers to abject space, they are symbolically stripped of their maternity, driving a wedge between their selves and their experiences. The subjectivities fostered in abject space are deviant

⁹ With apologies to bell hooks (1990).

subjectivities that are refused realignment or refuge, and serve as a warning to other mothers that one must conform or be seen as a “bad mother.”

As bell hooks has suggested, this conceptual marginalisation serves to obscure the actual centrality of the abject space. Abject space serves as boundary of the trialectical spaces. It delineates their shape and stabilises them precisely because they define themselves in opposition to its formlessness. Maternal, abject, and trialectical space exist as concentric spaces. While maternal space refers to the entirety of maternal experience and culture, abject space is the morass of that collection, while trialectical space (a spatial articulation of the symbolic order) is the rigid, privileged division of power that defines itself against the shadowy haze of the abject. As such, the abject contains both the margin and centre, making it as close to a place of “radical openness” (hooks 1989) as is possible, what Gillian Rose called “paradoxical space” (155).

The distinction between the abject and the symbolic order, wherein socio-cultural mores and values attempt to define themselves in contrast to the raw emptiness of the Real, is one that applies (by virtue of tautological language) in all instances where a “society” exists. The benefit of sharpening this dichotomy through the inclusion of spatial analysis, especially in relation to motherhood, is in the creation of an alternative way of looking at maternity. Rather than creating a divide between experience and culture (or the expressive versus the repressive), maternal space is about recognising the interconnectedness of the two. Said in another way, maternal space is about making sense

of the inextricably linked and simultaneous experiences of motherhood and culture (whatever culture that may be).

Conclusion

Maternal space is a theory of mothers, their bodies, and their social contexts, but also of their feelings around each of those elements and the relationships between them. Belonging to the symbolic order, abject space, or some self-constructed liminal space in between does not adequately describe each mother's interaction with maternal space. Their feelings about where they find themselves, and their desire to belong or to rebel, also shape each mother's relationship to both the symbolic order and the abject. In the following chapter, I will to address this final element that, I argue, will colour any mother's encounters with trialectical or abject space: desire.

CHAPTER 4: Plaisir, Jouissance, and Maternity

Introduction

While Daphne de Marneffe uses “maternal desire” to refer to a mother’s desire for her child and the bond she shares with him or her, saying that “the desire to mother is not only the desire to have children, but also the desire to care for them” (de Marneffe 3), I use “maternal desire” to point to a different form of desire – the desire for pleasure. Specifically, I am concerned with desire and pleasure as they pertain to Roland Barthes’ functional binary of *plaisir* and *jouissance*. Originally a theory designed around textual criticism and analysis, I apply it here as a corollary of and complement to the theory of maternal space outlined in Chapter 3. Maternal space and the *plaisir/jouissance* principle are two separate strings of theory. While both can be used in conjunction with one another, each is also independently applicable in other contexts. In this chapter I will illustrate first what it was that Barthes was originally designing, and then how this theory can be incorporated into my own. I will end with a brief illustration of the workings of *plaisir* and *jouissance* as I have framed them.

Plaisir & Jouissance

Roland Barthes speaks of the distinction between *plaisir* and *jouissance*, two competing yet somehow complementary forms of pleasure, in his 1975 book, *Le Plaisir du texte*. While *jouissance* is an ecstasy that derives from smashing all of one’s values, assumptions, and expectations, leaving “nothing reconstituted, nothing recuperated”

(52)¹⁰, *plaisir* is a different beast. *Plaisir* relates to comfort, tradition, and convention, and derives from a reaffirmation of one's values and culture (51). As I have framed it, the question of desire in relation to maternal space is one of belonging: does one desire to belong, and if so, where? The conflict between *plaisir* and *jouissance* is one way of understanding desire across multiple contexts and experiences, in that rather than focusing on the content of desires, it focuses on the reward sought. One should disregard neither the pleasure that can come from conforming and not challenging the status quo (*plaisir*), nor the *jouissance* that comes from flouting these same conventions. While what it means to "belong" may change, and the experiences of mothers regarding that feeling of "belonging" most certainly vary, it remains possible to analyse this *desire* to fit in throughout this diversity. In my figuring, while *plaisir* – the pleasure of having one's beliefs reaffirmed, of "belonging" in every conventional way – is more-or-less stable, *jouissance* is ephemeral, a threshold or "edge."

Plaisir can be seen as desire's manifestation of one's own "symbolic order," that which constrains and contents, that which directs, that which controls (though in this case, through pleasure and reward). The pleasure of never truly questioning one's values, *plaisir* "comes from culture, [and] never breaks from it," and is tied to a *comfortable* experience of life (Barthes 25). It is a pleasure of not only acceptance, but also of accepting – the pleasure of the familiar, but also of the righteous. It is one's beliefs reaffirmed as truth, which often (though not always) leads to revelling in the "rightness" of the symbolic order and one's place in it.

¹⁰ Unless otherwise noted, all translations are my own.

Jouissance, by contrast, is more akin to the Real, to a felt experience which can threaten the symbolic order's hold, and in fact its whole construction. Barthes describes *jouissance* as "that which puts us in a state of loss, that which discomforts [...], [that which] makes historical, cultural, psychological edicts waver." *Jouissance*, in my usage, is not just extreme pleasure. It upsets the consistence of one's "tastes, of one's values, and of one's memories, it throws one's relation to language into jeopardy" (Barthes 26).

However, this destruction, once experienced, is not threatening: in fact, it is liberating. It is joyous. It is this distinction which separates abjection (as outlined by Kristeva) from *jouissance*: while the abject horrifies, *jouissance* thrills. It is worth noting that in popular French, *jouissance* (and especially its verbal form, *jouir*) can be used to refer to orgasm (Jouissance, *Dictionnaire de l'Académie Française*, 9ème édition; Jouissance, *The Literary Encyclopedia*), and I suspect this usage may have closer ties to Barthes' use of the term than one might imagine. Barthesian scholars have noted the connection between Barthes' use of the term *jouissance* and its orgasmic connotations for nearly 30 years,¹¹ beginning with a 1977 translator's note by Stephen Heath:

English lacks a word able to carry the range of meaning in the term *jouissance* which includes enjoyment in the sense of a legal or social possession [...], pleasure, and, crucially, the pleasure of sexual climax (9).

In *New French Feminisms* (1980), Marks and de Courtivron comment that *jouissance* "is a kind of potlatch in the world of orgasms" (36), while Corbett and Kapsalis claimed that *jouissance* "interrupts language. An orgasm: the blissed-out sound of broken-down speech" (102). There is a reason this comparison is so ubiquitous: *jouissance* is often understood as a sudden, all-encompassing rush (not unlike ejaculation) that threatens the

¹¹ See, for example: Beaver 1981, Unger 1982, Miklitsch 1983, Bredbeck 1993, Berger 1999.

fabric of what society and culture dictate as acceptable. *Jouissance* cannot be sought. Because its basis is the challenging of one's beliefs, the idea of seeking *jouissance* is rhetorically empty. Likewise, one does not desire *jouissance*, for that still "ties the margin to the centre," to borrow a phrase from bell hooks (1990). Rather, *jouissance* overcomes the desire for the centre, or *plaisir*. In this way *jouissance* can be seen as the opposite of abjection, for while it represents many of the same elements, rather than being rejected, it may well be embraced. To be clear, *jouissance* is not a synonym for, or a result of, the place of "radical openness" that was introduced in Chapter 3. Rather, as an embraced manifestation of the Real, *jouissance* is a gateway that has the capacity to *lead to that place*.

Ultimately, the greatest distinction between *plaisir* and *jouissance* is not what is culturally sanctioned or normal (as in the symbolic order) versus what is "strange" or feared (as in the Real), though the divide does often fall along these lines. Rather, it is a question of what is believed, and what is questioned. *Plaisir* and *jouissance* are both systems of pleasure. Instead of making accusations of false consciousness or empowerment, the question to ask is "what kind of pleasure is being sought?" regardless of political motivation.

Flickering & Creaking

The *plaisir/jouissance* dichotomy is not a stable one. Like maternal space in general, it is always in flux. As I have said before, *jouissance* cannot be sought. This is because *jouissance* is desired only as it is experienced, in the acceptance of a breakdown in

meaning (the rejection of this breakdown, followed by a return to *plaisir*, is abjection). This is why counter-cultural movements are not inherently affiliated with *jouissance*, and elements of popular culture are not inherently related to *plaisir*. In fact, *jouissance* must inevitably dissolve into *plaisir* eventually, as it is an event horizon rather than a fixed state of being.

This fluidity of meaning is not always appreciated. Soja saw binaries, such as *plaisir* and *jouissance*, as suffering from a “flickering effect,” where the constant movement between each half of the binary created “illusory knowledges that ‘embody’ and ‘nourish’ each other” (Soja 1996, 72). For Soja, this was problematic because the assumed “a or b” nature of binaries silenced, or marginalised, other options. Barthes also noted this “flickering,” but he had a very different interpretation of its effects. As he explains:

Plaisir/Jouissance: terminologiquement, cela vacille encore, j'achoppe, j'embrouille. De toute manière, il y aura toujours une marge d'indécision; la distinction ne sera pas source de classement sûrs, le paradigme grincera, le sens sera précaire, revocable, reversible, le discours sera incomplet. (10)

*Plaisir/Jouissance: terminologically, it always vacillates; I stumble, I am confused. In any case, there will always be a margin of indecision; the distinction will not be a source of sure classifications. The paradigm creaks, the meaning is precarious, inconstant, and reversible – the discourse will be incomplete.*¹²

One stumbles and is confused by the wavering in the terminology – like an unsteadily built house, the construction creaks as it sits precariously askew. This is by design. Whenever one works with functional binaries, there must be a “margin of indecision,” the chance of “revocability, reversibility,” the promise of the incomplete (Barthes 10). The

¹² Translation mine.

flickering that Soja so detests is also the creaking that Barthes valued. As noted in Chapter 3, adding a third option does not necessarily create more room for openness. No matter how many categories are added, there can always be room for more. Thus, a “creaking,” fluid dichotomy may in fact serve as an antidote to the potential for an endless system of categorisation, sub-categorisation, and sub-sub-categorisation ad infinitum. This fluidity is what makes *plaisir/jouissance* a functional dichotomy, and also what makes it a useful concept to apply to a maternal space framework.

Jouissance, the ephemeral pleasure brought by breaking down culture, “leaving nothing reconstituted” (25), is not an end in itself, but rather a means to end. It is possible to experience *jouissance*, and then once again turn back to the comfort of *plaisir*. It is also possible to experience *jouissance* in one area that is in fact *plaisir* for another. This is, I believe, what Barthes was referring to when he spoke of the impossibility of the “sure categorisation” of *plaisir/jouissance*. Part of the value of this dichotomy is in noting in which contexts a mother seeks *plaisir* and in which she is overcome by *jouissance*. Because this potential for fluidity exists, the question of which pleasure one desires at any given moment becomes an important one for understanding the contours of maternal space.

Illustrating the Plaisir / Jouissance Principle

I have already noted at multiple points in this thesis that the ideology of intensive mothering, wherein mothers devote vast amounts of time and resources to their children, is imagined as a sort of “golden standard” for some mothers. As an old saying goes, “a

mother is someone who, upon seeing that there are only four pieces of pie for five people, promptly declares that she never did care for pie.” It is tempting, then, to view the rejection of this standard as an act of *jouissance*. This is not always the case, however. In this section I will outline the stories of two very different women, and the movements that they represent. My goal here is to make clear the flickering effect described above, but also the usefulness of applying the concept of *plaisir* and *jouissance* to the study of maternity.

Muffy Mead-Ferro’s 2004 book, *Confessions of a Slacker Mom*,¹³ detailed the value of approaching motherhood from a “slacker’s” standpoint. The “slacker mom” movement gained momentum throughout the 2000s, until the re-emergence of the “attachment parenting” model at the start of the following decade. According to Mead-Ferro, slacker moms do what feels right, follow their instincts, let their kids watch TV sometimes, don’t sign them up for every class imaginable, and sometimes even spank children (Mead-Ferro 132). As Mead-Ferro sees it, much of what mothers are encouraged to do and buy is unnecessary. She reassures the reader that, “[even] if you have none of the advantages – no exclusive preschool, no educational toys, and a complete lack of private coaching in mathematics – it doesn’t stop you from being a successful person. Or even a great person” (133).

The butting of heads between slacker moms and those who subscribe to theories of attachment parenting, often pejoratively referred to as “the mommy wars,” has been the source of much “ink,” both in print and online. Attachment Parenting advocates often

¹³ Not to be confused with the newer blog of the same name.

claim to feel stigmatised by mainstream society (Faircloth), which is true. A search for *Time Magazine*'s May 2012 cover feature, "Are You Mom Enough?" quickly turns up response articles with headlines like "'Time' Breastfeeding Mom Is Nuts Like Other Extreme 'Attachment Parenters'!" (Fuller). However, mothers who choose not to or cannot breastfeed may feel victimised not only by broader society, but also by these same attachment parents.

Both slacker moms and Attachment Parenting mothers work in the normative grids of maternal space, but both also work in constructs of *plaisir* and *jouissance*. When Mead-Ferro finally had her "breakthrough moment," allowing her to put her inability to attain a bassinette in perspective (8), she experienced *jouissance*. Her dedication to what she would later classify as "personal indulgences" (9), and her guilt over not piping Mozart into her womb via earphones (5), were destroyed by that sudden moment of clarity: her baby didn't *need* those things. This moment of *jouissance* inevitably led to *plaisir*, however (as *jouissance* is, by nature, ephemeral). Mead-Ferro's new approach became one focused on having "a sense of what's practical, and a willingness to listen to your inner voice, instead of bowing to the inevitable pressures of 'perfect parenting' messages" (15). Thus, while the new "culture" she created was located outside of dominant norms of "good" motherhood, she still rebuilt a belief system that she could live by into perpetuity.

By contrast, Jamie Lyn Grumet, the poster mother for *Time*'s provocative piece, can be read as entirely maintaining her sense of *plaisir*. Grumet, in particular, was raised with

the notion of attachment parenting (she herself was breastfed until she was 6), and continues to support that ideology in her own role as mother. She is also, it should be noted, fulfilled by this approach. Her pleasure is no less real and no less valid than Mead-Ferro's. If we as researchers want to ask who of these two women has more agency, or who is more empowered, then I believe the questions we want to ask are the wrong ones. It seems to me that the greatest benefit of applying the *plaisir/jouissance* principle to maternal space is in avoiding claims of agency or false consciousness.

While it remains possible to use maternal space to critique prescriptive practices and the harm they may have on mothers, by framing the analysis in terms of pleasure the researcher is also able to preserve the integrity of the participant. Analysing *why* a mother may seek a certain kind of pleasure is not the same as *questioning* what that mother desires. The former implies a politically motivated (and perhaps unkind) judgement on behalf of the researcher. The latter allows the researcher to explore motivations and desires without imposing one's own preferences on the subjects, thus preserving their integrity. Personally, I found adopting this interpretation of *plaisir* and *jouissance* to be very helpful in my work. As I said in the introduction, when I first began this research project, I found myself centralising my own concerns. This was a problem I continued to struggle with well into the writing process. Making pleasure, and the desire for pleasure, a centralising element of my analysis enabled me to inwardly acknowledge my own biases without forcing them on my participants or on the data they provided me. In a sense, while I cannot *actually* occupy a neutral position (the fabled Archimedean point),

this particular expression of the *plaisir/jouissance* principle allowed me to take on a “bias of neutrality.”

Conclusion

It is useful here, I think, to stop and review what has been said so far. This thesis is a reaction to a particular trend in motherhood studies: the division between mothering/maternity and motherhood begun in Adrienne Rich’s *Of Woman Born*. I have rejected this division, and suggested using the concept of maternal space instead. The maternal space framework sees every experience and interaction and mother as belonging somewhere in maternal space. Trialectical space (a combination of First, Second, and Thirdspace), drawn from the works of Edward Soja, defines itself against the morass of maternal space as a defined understanding of what a “mother” is. Trialectical space can be seen as representing the symbolic order of maternity, while the “leftover” parts of maternal space resemble the Real and/or abject. The fear of being abjected from the symbolic order insures that mothers continue to produce and reproduce dominant maternal scripts. These elements of maternal space create a method of mapping the journey into motherhood, and questioning the terms of taking on that subjectivity. In the context of the grounded theory discussed in Chapter 2, maternal space serves as a method of “coding” my research, moreso than a method of analysing it.

In this chapter I introduced the *plaisir/jouissance* construct, which provides a means of analysing not just where but why the mothers in this project position themselves (or were positioned) in maternal space. This principle allows me to interrogate my data without

undermining the feelings of the mothers themselves. That is, by applying *plaisir* and *jouissance* to my work I am able acknowledge both my own subjectivity, and the subjectivities of my participants, while still respecting all of those involved. This will be made evident in the second half of this thesis, where I will apply my theory to my own fieldwork in hopes of uncovering a clearer picture of where the women I worked with fit into maternal space, and how they felt about not only their positions, but also the positions of other mothers.

PART TWO

CHAPTER 5: Communal/Shared Maternal Space

Introduction

In Chapter 3, I discussed the elements of maternal space. I wrote that it is socio-cultural, political, embodied, and more than a simple institution. I further wrote that it is both personal and communal, that the theoretical boundaries between “motherhood” and “mothering” are thinner and more fluid than once articulated, and that beyond simply “fitting in” to one part of that space or another, there was the issue of desire to contend with: who wants to fit in, where and why? While thus far I have spoken of maternal space as a subjective space, owned uniquely by the mother experiencing motherhood, it is important to acknowledge that maternal space is also a shared space. That is, while recognising individuals’ rights to their own experiences and interpretations of motherhood, one must also be aware of the ways in which individual women share maternal space.

In analysing my fieldwork, I see some relationships between the communal space created in the focus group, and the more intimate subjectivities made visible during the interviews. Not all focus group participants became interviewees, and not all interviewees were involved in the focus group, but when these separate circles overlapped, there was much to be considered. To some extent these disparities are common sense. That what is shared in the privacy of an interview would be different from what is said in front of a group of peers seems to be of little note. However, I found the silences and “softening” of

alternate opinions present in the focus group very interesting. During the course of the evening, I noticed that one participant in particular – Elizabeth – directed the flow of the discussion. In her self-appointed leadership role, she defined the parameters of acceptable opinion in the confines of that particular meeting. That one participant gained the power to direct conversations and silence differing opinions says much about the way power works in maternal space. However, it also says something about the tensions between pleasure and desire on the one hand, and fear on the other, in a shared space.

In this chapter I begin with a brief description of the focus group structure, in order to provide a context for an analysis of the group's power dynamics and their impacts on discourse.

Focus Group Structure

I conducted one focus group, with my breastfeeding participants. Although there has been some precedent set for the use of small focus groups of just two people (Longhurst 1996), at the time of my fieldwork I felt that anything less than three participants would be too small to effectively meet the goals of the focus group portion of my research. Because this part of my research only reflects just over half of my participants, it is important to remember that any and all findings can only be thought of as preliminary, and any application of this portion of the research should especially be considered speculative and exploratory.

When I was designing the focus group segment of my thesis, the objective was to a) get my participants thinking more actively about my areas of interest, b) create a body of “shared experience” (Oakley, qtd. in Reinharz, 223) to form a basis for comparison of individual stories, and c) create a working space wherein I was not privileged as the sole source of power in the researcher/researched relationship. I did not realise at the time that my first and final goals were, in effect, contradictory. Asking my participants to think about what *I* found intellectually interesting, while at the same time expecting to create an equitable working space where my voice was not privileged over theirs was almost impossible. However, my inexperience in fieldwork resulted in a happy accident that allowed me to create a space where the researcher/researched power dynamic was nearly reversed. I often found myself struggling (and failing) to get the discussion “back on track.” However, my loss of control proved to be fruitful. In (unintentionally) making the focus group less amenable to my research interests, I was able to observe not only the agreements and disagreements in the group, but also the silences that buffered them, a practice that Kamala Visweswaran (1994) suggests, “begin[s] to shape a notion of agency that, while it privileges speaking, is not reducible to it.” (51). That is, who had the power to hold the floor, who remained silent, and why. In hindsight, I am grateful for this serendipitous development.

The topics I had chosen to introduce to the mothers touched on a variety of subjects that dealt with blurring the line between motherhood and sexuality. Though they were in fact covered to some extent, the amount of time spent on each subject (as compared to other, “non relevant” areas) was outside of my control, as was the more general direction of the

responses to each issue. However, this is not to suggest that the focus group lacked direction – rather, the power vacuum was simply filled by someone else. By this I mean that the group did not function as an equitable meeting ground. Though I as researcher “lost” much of my control over the discussion, Elizabeth very quickly grabbed the reins. The effect of that power, and the fact that Elizabeth was able to harness it, are dependent on both Elizabeth’s position and the larger structure of maternal space.

Power Dynamics

At the time of the focus group, Elizabeth was a mother of two children, and was still breastfeeding the youngest. Even before the “official start” of the focus groups, when I began presenting topics, Elizabeth was the centre of conversation. While at the very beginning of the video the audio is difficult to decipher, as there are three separate conversations happening at once, eventually it is Elizabeth who triumphs over the rest. The other conversations gradually fade away until only her voice remains, holding the floor for over a minute. Elizabeth’s ability to command not only the attention, but also the deference, of the other participants is intriguing.

As the focus group proceeded, it became clear that, while unassuming in appearance, and without showing any outward signs of aggression, Elizabeth was repeatedly able not only to regain control of conversations, but also to bend other women’s input to her own standards.

In many ways, this seemed to be due to Elizabeth's extreme position of privilege in maternal space. A devoted breastfeeder, Elizabeth fits many of the ideal standards of a lactivist: natural birth (no medical interventions), a firm belief that breast is best (with almost no exceptions), and most of all, a belief that it was all, in her words, "easy." Part of the so-called "party line" for the attachment parenting-influenced sub-culture that my participants lived in or recoiled from is that one must never admit to disliking the work of motherhood. That is, though mothers may confess that certain elements of mothering are difficult when in the company of other mothers, at the end of the day all mothers should still claim to love doing those things. During the focus group, Elizabeth made a point of trumpeting the ease of natural childbirth and hand-expressing breastmilk, claims that my other participants reacted to with a range of emotions (from amazed disbelief to unquestioning acceptance). In her other comments, which included mention of her quick postpartum recovery and her mother's very large number of children, Elizabeth appears to feed into a sort of mythology of motherhood wherein the difficult elements of delivery were blamed on medical intervention or external pressures. With this process she was able to sanctify the space of motherhood itself as straightforward, simple, and (crucially) natural.

This may have been an intentional power grab on her part. It may have also been an accurate reflection of Elizabeth's experiences. In the end it doesn't really matter, as the result was the same. This discourse positioned Elizabeth as *more* than an "ideal" mother: rather, her narrative positions herself as an "arbiter" of maternal space. In this position of power, Elizabeth claimed the authority to speak on every subject brought forward. She

“knows” that with the right lactation consultant anyone can breastfeed. She “knows” that if her mother could do it, anyone can do it. She “knows” that with just a little effort, everything is “easy.” Above all else, she “knows.” This position, and her leveraging of it, had an important effect on the focus group.

The best example of Elizabeth’s power, intentional or not, came when discussing our final topic of the evening: erotic lactation. This excerpt comes from Fiona Giles’ *Fresh Milk*, an anthology of breastfeeding stories. This particular passage was excerpted from a chapter that discussed the sometimes-sexual nature of breastfeeding, and was presented as an anonymous, first-person essay:

From pretty much the first time I started breastfeeding I would become aroused. Now I think it’s almost a reflex. But I was shocked at first, when I realized what was happening, and decided to ignore it. Then I realized that’s nuts, so now I let it build up, and then rub myself when the baby’s finished feeding. [...] Then, one night in bed, my husband said he’d like to try my milk, and started sucking. I was a bit shocked, to tell the truth, but my milk just flowed in about five seconds flat! He also fingered me as he sucked, and I came straight away. My orgasms are always stronger after he’s been breastfeeding. He likes feeding from me, but he also liked me expressing over his face and cock. There, I’ve said it – my mother would die! (130)

While many of the mothers in the group met the story with bemused shock, their immediate responses were varied: some envied the narrator’s sex drive, one woman wished her husband (who was afraid of accidentally tasting breastmilk) would make some attempt to touch her breasts, another found it hilarious that the original author kept mentioning a fear that her mother would read the story. Most of the women seemed to

find the account funny, mildly intriguing, and curious. Elizabeth, however, changed the tone of the conversation:

Elizabeth: But it's also, there's also an unusual... But I mean it's also, I think, an unusual thing to want *that*. There's already a lot of issues where too many men relate breastfeeding to sex...

Sadie: [quickly] But in a negative way.

Gillian: And this is clearly a very positive reaction for her.

Elizabeth scowls at the paper in her hands. The table is silent. She starts to speak once or twice, furrows her brow again, and then sighs heavily.

Elizabeth: It sounds like she has a really, really aggressive... Just no discretion.

Throughout the remainder of the conversation, Elizabeth continuously bemoaned the fact that the woman in the story was “making breastfeeding sexual.” She then carried this critique over into an ensuing conversation about where sexuality fit into motherhood in general. The line between sex and children, one which Elizabeth herself called “fine,” is one which she feels should be heavily policed. At the beginning of the conversation three of the women attempted, gently, to express that they felt a woman's sexuality was her own business. However, Elizabeth's repeated shaming culminated in the following exchange:

Elizabeth: It's natural and normal for breastfeeding to arouse sexual feelings – not for *me*, though – but I think you leave your kids *out* of the sex.

Electra: Well, I don't have a problem with a very young infant in the same bed –

Elizabeth: I have a problem with him in the next *room*. You can hear him on the monitor! It's very weird, for me.

Silence. Electra looks at the table, the other women shift in their seats.

Elizabeth: My problem is that, in society, I think that too many people link sex to breastfeeding in a negative way. If these kinds of scenarios become mainstream or become

popular or if people start advocating for breastfeeding and sex at the same time, you know what I mean? There's just so many child abusers out there. Where does that line end? Keeping sex so close to children is... Disturbing.

After that point, only one woman had anything more to say on the matter. By appealing to threats of perversion, paedophilia, and incest, Elizabeth was able to move the group consensus away from playful admiration and confusion to tacit acceptance that such behaviour was "wrong." The other women quickly directed the conversation towards the next topic. Greg Myers says of focus groups that:

[T]he moderator has enormous and sometimes unacknowledged influence [...] by introducing and interpreting topics, and by acknowledging responses to them. But I also find that participants are involved in these processes in complex ways, collaborating with one another and with the moderator to shape topics and manage disagreements, in their own assumptions about the event and purpose of a group (88).

That is, focus groups, even "unruly" ones, can never truly subvert the researcher/researched power imbalance, as the participants always know that they are not, in fact, involved in an everyday conversation, but in a conversation with the end goal of showing the researcher their opinions. With this reading, though all of the mothers were aware that they were talking amongst themselves, they were *also* aware that they were presenting their opinions to me – that I was listening. Elizabeth's power can thus be said to derive from her ability to argue that her opinion is "the best opinion," or at least the most forcibly stated one, while other opinions are by necessity "less than," if not outright harmful. It is a power directly related to her stage presence, so to speak, and rhetorical abilities.

While I do believe this effect is part of the answer, I also feel that broader social pressures should not be neglected when analysing group power dynamics. This is especially true in the case of a group like mothers, where there is such diversity, and where so much of one's status as a "good" or "bad" mother is determined by external consensus. Following this interpretation, the implication would be that Elizabeth only had the power she did because she was reinforcing mainstream rhetoric, rhetoric that privileges the chaste mother and wholly separates children from sexuality. In this case, going "against the grain" of the symbolic order may carry with it more pressure than in an everyday conversation. To that end, I propose a complementary understanding of the power relations seen in this focus group. This understanding ties into ideas of maternal space.

Arbiters of Maternal Space

Just as there are ways into the positive realms of maternal space – breastfeeding, natural/vaginal childbirth, self-sacrifice – there are also people, organisations, or institutions (arbiters, if you will) who monitor those entry points, and determine who can successfully pass through them. While it is true that any person can pass judgment on any other, these "arbiters" are unique in that they have the credentials to place them in a position of authority. In the focus group discussed in this chapter, Elizabeth can function as an arbiter because she had the unique experience of both assisted and natural childbirth, along with both bottle and breastfeeding. She also has ties to La Leche League, and knows some of the other participants outside of the focus group (an element

not taken into account in Myers' analysis). Finally, she can also appeal to "ancestral knowledge," as her mother birthed and raised 16 – 17 children.¹⁴ Of course, while these experiences *are* valuable, they in no way make Elizabeth more qualified to speak on mothering and motherhood than any of the other women present in the focus group. Still, of the mothers who agreed to interviews, all of them presented opinions that were at least softer (less firmly/rigidly articulated) when in Elizabeth's presence, while revealing themselves to be much more "laid back" and fluid in their understandings of maternity, and especially of maternal sexuality, when speaking to me in private. To put it another way: mothers who agreed with Elizabeth in-group would often be much more open to alternative maternal practices in private interviews. Even when they did contradict Elizabeth in-group, no one forced the issue, and with the exception of one mother, everyone eventually acquiesced (either explicitly or tacitly) to her definition of appropriate boundaries.

I can see this role reflected in broader societal forms, as well. As was evident in the responses to Kathryn Blundell's pro-bottle feeding editorial, groups like La Leche League, with their hard-line, pro-breastfeeding stance, can and do accuse any publication that is not exclusively pro-breastfeeding of being anti-breastfeeding (Rock 2010). These accusations are then disseminated widely across social networking platforms, the internet in general, or among members of the group.

Much like concepts of good and bad maternal spaces, who or what an arbiter is changes

¹⁴ The number fluctuated between the two times it was mentioned. I suspect this was due to Elizabeth sometimes including herself in the count, and sometimes not. Sadly, I did not notice this discrepancy at the time, and have been unable to contact Elizabeth since then.

from context to context. The only static element is that they must themselves fit into the positive maternal spaces they judge, and they must also be respected as authorities by the mothers in their peer group. For instance, in another social setting, Elizabeth may not have enjoyed the same power and privilege as she did in our focus group. Likewise, an equally opinionated mother without the credentials might not have been able to sway most of the group the way Elizabeth could. Here, too, socio-cultural and geo-political contexts play into the power game. An individual's race, religion, sexuality, gender, and economic status will doubtlessly also affect their likelihood to be seen as an arbiter, as would the presence of any noticeable disability. Similar restrictions may apply to organisations and institutions with the "wrong" origin.

Conclusion

While the focus group I conducted did not work in the way I had hoped it would, it was nonetheless useful for underscoring the communal nature of maternal space, and the effects that sharing has on the structure and subjective experience of that space. In acknowledging that maternal space, like any other, is subject to power dynamics that are *truly* dynamic (in that they shift continuously, dependent on cultural and regional politics and contexts) one is also able to acknowledge the importance of space as a theoretical framework for this sort of data. Elizabeth is a prime example of how occupying a privileged position in the web of power can result in a shift in group trajectory and conversational content. The role of arbiters has an immediately visible effect on the shared aspect of maternal space. The next chapter will turn from the shared elements of

maternal space towards the more intimate subjectivities made visible during the interview process.

CHAPTER 6: Subjectivities of Maternal Space

I thought Catholicism was bad enough, but I think

[motherhood's] a whole new level of guilt.

(Gillian)

In this chapter, I outline the development of select participants' stories and the theoretical components embedded in them in order to provide examples of the ways in which theories of space, the abject, and desire weave themselves into my participants' lives. Each of the mothers who participated in this study embodies, occupies, and rejects, to a certain extent, parts of maternal trialectical space.¹⁵ As discussed in Part One, these elements of maternal space, which belong to the symbolic order, can serve to liberate, limit, or protect the mothers who encounter them. Every mother's relationship with maternal space is unique, yet every experience also overlaps with that of other mothers. Ultimately, this chapter serves to illustrate how and what these ties look like in the lives of four Newfoundland mothers.¹⁶

I have chosen the following four women, two breastfeeding mothers and two bottle feeding mothers, because I feel that their stories represent the four narratives that most greatly influenced my thinking on concepts of maternity, space, and abjection. Gillian, Holly, Claire and Marilyn are the mothers to whom I owe the greatest intellectual debt.

¹⁵ From this point on, the use of the terms "trialectical space," and First, Second or Thirdspace will refer exclusively to those sections of maternal space (and not subjective space more generally).

¹⁶ This chapter will draw from individual interviews, and not the focus group data.

My interpretations of their stories created the lens through which I was able to see the rest of my research; that is to say, these four accounts have most helped to shape my thesis as it stands today. In exploring these narratives I will illustrate the varying degrees *to* which and *in* which the three spaces of the symbolic order, as well as abject space, interact with these women's experiences of maternity and motherhood. In this way, this chapter offers a clear and tangible demonstration of some of the underlying theoretical framework of this thesis, and, in so doing, paves the way for a more abstract analysis in the coming chapters.

As in the overall thesis, the progression of this chapter is meant to gradually build from one case to another as more theoretical concepts are introduced and fleshed out, in the process creating what Soja would call a "theoretical narrative." I begin with the account that I found the most straightforward.

Gillian

Gillian's interview is an ideal one to begin this analysis. Gillian is the eldest of four children, born into a working-class "bay" family.¹⁷ Now the mother of two pre-school aged children of her own, she is the most formally educated woman I interviewed, having completed her PhD. Gillian is involved in several activist communities, especially those related to environmental issues, social justice, and "mothers' interests." We met in my

¹⁷ "The bay" is a Newfoundland colloquialism referring to the parts of Newfoundland that fall outside of St. John's and vicinity. At times "the bay" is considered to include the Northeast Avalon Peninsula, outside of St. John's proper, including Conception Bay South and Torbay; at times it includes central Newfoundland, such as Clarenville or Grand-Falls-Windsor; and at other times it refers *only* to the rural, coastal communities of Newfoundland. Within this thesis I use the most general meaning of "the bay": communities on the island of Newfoundland outside of the St. John's Metropolitan area. "Baymen" are people (usually, but not always, men) from "the bay."

office on campus, so hers was the only interview not conducted in a coffee shop or diner. While most of my participants were comfortable with meeting in a public space, Gillian was concerned with being able to keep our conversation away from prying eyes and ears. As I later came to understand, this desire to keep her maternal space private was a major concern for Gillian.

I had attempted to interview Gillian on two prior occasions, and each time parenting emergencies (first on her part, and then on mine) necessitated a rescheduling. Gillian was accommodating both times, with no hint of frustration or irritation. This laid-back approach seems to characterise Gillian's personal philosophy; in fact, while Gillian is immensely dedicated to both her family and her work, she is hesitant to inconvenience anyone for any reason. This "softness" carries over to her tone and colloquial language, both of which made me feel more at ease than in my earlier interviews.¹⁸ Thus, when she made statements like, "I hate having conflicts with people, like...Whenever there's conflict I just want to deal with it directly, you know? [We'll] just talk about it sensibly. I always feel like everything can be resolved if we just talk about it," I had no trouble believing that she was as quiet and non-confrontational as she claimed to be.

However, Gillian's entrance into motherhood has led to some challenges to this position. During our interview she was most concerned with her relationships with her husband, her children, and her husband's family, and how all of these related to her role as "mother." She spoke frequently of the difficulties she'd had with her mother-in-law,

¹⁸ In contrast to earlier interviews, which had sometimes made me uncomfortably aware of the conventional researcher-researched divide. Gillian's friendly and open manner put me at ease, and made me feel very comfortable with her as a person.

especially with regard to issues surrounding her children. Feeding, in particular, seemed to be a point of contention, with Gillian's mother-in-law not really "understanding that kind of nursing relationship," wherein breastfeeding was not just a source of food, but also a source of comfort for both mother and child. "Nan" had great expectations of what being a grandmother would be like before Gillian's first child was born:

It's almost like she has been really wrapped up, and this is the most important thing in her life now, being a grandmother, and she had a whole lot of things expected of what it was going to be like, and especially with [my daughter], a really needy baby, and a sensitive baby, and my husband's family is just really boisterous, and loud, and extroverted, and me and [my husband] aren't at home, like, we're both, you know, quiet and, like, introverted, and ... the way we dealt with it, we kept things very calm and routine for her, so... Like, we'd go over to visit them and she'd just be totally overwhelmed, and she'd start bawlin'. And we'd try to talk to them about, well, "She gets really overwhelmed, she doesn't like toys that make noise, she really was afraid," and they just *could not understand. Could not understand*, no matter how many times we talked about it.

While Gillian's parenting strategy is to keep her child comfortable and feeling safe, her mother-in-law's tactic was to force her granddaughter to "face her fears," such as refusing to put their large dog away when the child visited (even when asked), or presenting her with noisy, blinking toys despite the anxiety they produced in the baby. In contrast to Gillian's own mother, who was supportive and respectful of her granddaughter's anxieties and Gillian's parenting choices, Nan's approach often ended with her granddaughter in tears. Gillian perceived Nan's behaviours not only as an inability to respect *her* role as mother, but also an inability to respect her husband's role as father. "You know, they find it really hard to [...] be like, 'Ok, this is not what we would do, but this is what *you're* doing and you're the parent.' They **can't** seem to do

that.” In stating this, Gillian makes clear her feelings that Nan’s place is to support Gillian and her husband’s parenting choices, and *not* to attempt to undermine or usurp Gillian’s maternal space.

For Gillian, the maternal space surrounding her children is hers to occupy, and hers alone. Mothering, for her, is a very private role, and one for which she requires full autonomy. Gillian gives people a wide berth, she is also wary of making waves or troubling others, and expects that others grant her the same courtesy. Indeed, personal freedom and space have always been a priority for her, and she notes that when she is pushed in one direction, her immediate reaction is to push in the other. This is especially true with regard to her maternal space. From the comments made during our interview, it is clear that she chafes under her mother-in-law’s constant interference. Nan’s challenge to Gillian’s parental authority is also seen in what Gillian feels is a disregard for (physical) personal space. Gillian interprets this as being denied the courtesy of deciding her own bodily boundaries:

When I was pregnant with [my daughter], she had it in her mind that she had to be there as [my daughter] was being born, she needed to be there. [...] When I’m in pain, or suffering in some way, I want to be on my own. Like, some people want to find other people, but I just – I want to shut everything down, kind of thing... [...] I mean, she didn’t want to be there to support *me*, she wanted to be there because “this is my first grandchild, and this is going to mean so much to **me**!”

In this case, it is clear Gillian’s felt that her maternal space was quite literally threatened, so much so that even though her husband hates confrontation, on this occasion Gillian forced him to confront Nan. When he spoke to his mother in order to tell her that she was

not, in fact, welcome at the birth, the result was a “grudge” on Nan’s part, and increased emotional distance between Gillian’s husband and his mother. As previously stated, Gillian herself is not predisposed to conflict. However, in this case she felt the need to patrol the border of her physical and emotional space. By asking her husband to speak to his mother, she encouraged – rather than discouraged – conflict between them. Although she regrets the negative impact this had on her husband’s relationship with his mother, she also felt that her right to dictate who is welcome in the parameters of her personal space trumped her desire for non-confrontation.

Similar tensions occurred regularly while Gillian was breastfeeding her firstborn. She felt that her husband’s mother wanted to “take her off [her] breast,” because Nan was almost “on top of [her]” when she fed:

And it was – *oh!* – I can remember it would be to the point where I was afraid to take her off and burp her, because she’d be like “Oh ok, it’s Nan’s turn!” and I’d be like, “I was just burping her, so I’ll take her back, she’s not done,” like... Really, really, really *difficult*.

Being forced into such a defensive position is hard for Gillian, but it is also, to her mind, necessary. By Gillian’s reckoning, Nan’s issues stem from an attempt to relive her own children’s youths, resulting in an inability to distinguish the boundaries of her maternal space from that of her daughter-in-law. As Gillian says, “You’re not doing the raising, *you’re the grandparents*. Like, we’re the parents!”

For Gillian, maintaining autonomy over her family (by choosing to breastfeed her children until they are ready to wean themselves, or by adjusting the family environment to suit her children's temperaments, or by making decisions about who will and will not be present at her children's births) is an important factor in her understanding of her maternal identity, particularly as it emerges in response to her relationships with her in-laws. Significantly, in Gillian's case, parenting decisions become acts of transgression, because every decision is one that she must defend and enforce against overt resistance and pressure. This particular confrontation is especially sticky because it involves two maternal spaces. Both Gillian and her mother-in-law occupy a maternal space. As I see it, the problem stems from Nan's perceived attempts to annex, so to speak, Gillian's maternal space. As in the focus group, Gillian is once again resistant to assertions of dominance with regard to maternal space, rejecting Nan's call for arbiter-like authority. In this sense, Gillian's sense of ownership over her own subjectivity is more powerful than Nan's claim to access.

Gillian can and does acknowledge the Secondspace elements of maternal space, but her mothering and maternity belong primarily to Thirdspace. Though she is not challenging mothering practices in a broader, social sense, her mothering is an act of resistance to her mother-in-law's interference. Through mothering, Gillian builds an insular and, as she understands it, private world. Gillian's approach is an important example of the politically transgressive properties of maternity, but also of the ways in which Thirdspaces maternity is dependent upon the Secondspace.

To explain these relationships between Secondspace and Thirdspace further, I want to consider Gillian's understanding of breastfeeding in greater detail. While Gillian breastfeeds in the face of very direct resistance from her husband's family and especially his mother, she is also able to draw upon all of the support that the maternal body and breastfeeding receive in dominant discourses of motherhood. That is, while in her geopolitical, social, and personal contexts extended and comfort breastfeeding¹⁹ is not well understood, Gillian is aware of and draws strength from breastfeeding's more widely accepted position in a North American, medically-certified, "breast is best," educated, middle-class world. Though Gillian may feel that in the "bay" culture that she and her husband come from, breastfeeding (as she practices it) is seen as "strange," she has access to a wide network of breastfeeding support from other mothers (and even Nan herself supports breastfeeding "in theory," though not in Gillian's form of execution). Thus Gillian's breastfeeding sits in the maternal Thirdspace of hybridity, where it is simultaneously an act of rebellion and of solidarity with notions of an ideal mothering practice.

Outside of breastfeeding, however, Gillian's mothering can, in fact, be subversive, and as such represents a form of resistance to Secondspace norms. This is perhaps most evident in the notion of the pregnant or maternal body as being "public space" (Dwyer 2006). One element of this is increased public scrutiny, where a pregnant woman or mother's activities are more closely monitored and judged by passers-by than those of a single woman in an equivalent social location (Dwyer 18). Gillian is very aware of this

¹⁹ In this sense, "comfort breastfeeding" refers to breast feeding for the child's comfort, rather than to alleviate the child's hunger.

appropriation of maternal space, both personally and in a broader political context, and rejects it:

[It's] almost like as soon as you become pregnant, when you're becoming a mother, it's almost like it's not even your body anymore, you know what I mean? [...] [Rising in volume] Like, I don't suddenly belong to you just because this baby's going to be part of your family, and I *really* fought that with his family, [...] So when I get pushed like that I just feel so resistant, I'm like, "What are you doing, trying to make me live my life a certain way?" Like, it's up to me, and I really push back against that hard.

In her personal life, specifically her relationship with her husband's family, this has meant asking her husband to step in and tell his parents when to back down, and in some cases having to directly address what she describes as their "passive-aggressive" behaviour. Gillian has also been forced to confront larger societal pressures. For example, she is aware of the social compulsion to co-sleep. Interestingly, this is a coercive force that was mentioned by all of my breastfeeding participants:

It's this pressure that goes along with, "Oh, you take care of your children and you co-sleep, and this and that," the whole attachment-parenting thing - and some of that stuff really appeals to me. [But] I don't feel like I need to follow anybody else's rules for what kind of a parent I should be, you know?

Co-sleeping or sleep-sharing may still seem to be a marginalised practice, and as such incapable of excerpting pressure from the Secondspace. However, for mothers who self-consciously engage in attachment or "intensive" parenting, even without officially identifying as such, co-sleeping is often assumed to be part of the package. As stated earlier, every breastfeeding interviewee (and one bottle feeding interviewee) spoke of the pressure they felt to co-sleep, and the need to justify their decision not to do so. Certainly

sleep-sharing is not overly common in the broader North American context as a politicised movement (at least not to the extent that breastfeeding is), but its proliferation in my sample is notable.

It is important to keep in mind that space is concentric: just as motherhood may be seen as a “sub-culture” (Nelson 2010), deserving of its own spatial analysis separate from broader society, so too are there subcultures in maternal space. For the most part, the women in my sample inhabit a culture grounded in certain situational particularities. More specifically, they live in a white, educated, cissexual, heteronormative, urban, professional, and Eastern Canadian (more specifically “Newfoundland”) sub-culture. While my participants may not *personally* identify or ally themselves with every/any part of this culture, it is still the culture in which they operate, or at least a culture with immense coercive power in their lives. Thus, while in some cultural spheres co-sleeping may be seen to be a transgressive act, in this particular sub-culture co-sleeping was almost universally seen to be a part of ideal mothering, securing its place in maternal Secondspace for the purposes of this thesis.

Gillian understands her maternal space as *distinct from* the larger, culturally sanctioned maternal space that emerges from the symbolic order’s normalising powers. However, it must be stressed that Gillian, as a married, educated, professional, heterosexual, white, and breastfeeding mother likely enjoys a certain degree of flexibility that allows her access to the maternal spaces belonging to the symbolic order. Thus, while she can use her maternal space for subversive or rebellious ends, she is still protected by belonging to

trialectical space/the symbolic order. That is to say, because Gillian has met many of the requirements for the symbolic order's ideals of maternity (married, professional, middle class, neither too old nor too young, "natural" childbirth, exclusively breastfeeding for at least six months, etc.). She is able to occupy that hybrid Thirdspace without any real threat to her right to belong to First and Secondspace maternity. Gillian has access to trialectical space, so abject space is not a threat to her. Conversely, Holly and Claire, two of my other participants, do not fit so comfortably into the symbolic order. While Gillian can safely attack the elements of this order that she finds distasteful, Holly needs to fight for the right to full access to these more secure elements of maternal space.

Holly

Holly is a bit of an anomaly in my research: she is young and not yet a professional – she was working towards a Bachelor of Arts in the Social Sciences when we spoke. She and her partner met online, and had only been dating for three months when Holly unexpectedly became pregnant. In a sample that consists mostly of married/permanently partnered, professional women in their 30s, Holly stands out. It is precisely this "failure" to conform to the symbolic order's standards for access to maternal space that makes Holly so important in this study.²⁰ What is most interesting to me about Holly's story, though, is her relationship to her body, her son, and other mothers – and how these play into her bid for access to trialectical space.

²⁰ Again, this symbolic order is one that is based on the situational particularities of my sample: white, heteronormative, cisgendered, middle-class, educated, professional, Canadian, and usually Newfoundlander.

The first time Holly mentioned bottle-feeding women, she referenced a couple she and her boyfriend met at prenatal classes:

There was a couple there who announced that they had no intention of breastfeeding whatsoever. They wanted to know how to get formula in the hospital. We just... [My boyfriend] was more perplexed than I was. We just couldn't understand why they wouldn't try.

{Why do you think they wouldn't try?}

Uh, I hate making assumptions about people too much, but they seemed very... Traditional. Uh... Which is odd, because in my mind breastfeeding is traditional but it's not here. They were also very interested in getting their son circumcised, and, uh... The husband didn't want to be in the delivery room, that kind of thing, so, I don't know. Maybe it was something about modesty.

Here Holly (a breastfeeding woman) draws connections between the desire for tradition, modesty, circumcision, and bottle-feeding. However, later in the interview she states that:

Um... I, I wouldn't want to, um... Sometimes I can be a little too understanding about other people's life [sic], but, for somebody who's been socialised to think that the breast is a sexual thing and that's it, I can understand why it would be hard to wrap your head around breastfeeding. Especially if you're like me, I mean, nobody in my family breastfed; it was not something I was exposed to. I didn't hear a lot about it until I was in university...

In this passage Holly argues that women have been socialised to think that the breast is sexual. Thus, according to Holly, women who identify sexually with their breasts do so because of this socialisation (as do women who weren't raised with breastfeeding), and so may find it difficult to understand the concept of breastfeeding. She also notes that after doing her own research, she has found that there is no reason for circumcision, other than what she deems to be the vanity of "having a penis that looks like daddy's." That is, according to Holly, there is no *valid* reason an educated person would choose to

circumcise their child. Though she feels it is every parent's right to make "that" choice, in her eyes there is an obvious "wrong" choice. I get the sense from Holly that words like "tradition" and "modesty" are really just polite euphemisms; reading between the lines, the inference is that women who bottle-feed just don't know better. Over the course of the interview this association of breastfeeding with education and modernism, and bottle-feeding with limited education and limited social privilege, evolved into a more nuanced stance against bottle-feeding. While Holly is careful to underline every woman's right to choose how to feed her child, she also states that, "I do kind of think the way my boyfriend does, like 'How can you not **try**?' At least **try**. If it doesn't work out it doesn't work out."

For Holly, while not wanting to breastfeed is an acceptable reason to avoid doing so, better reasons are outside factors, like an inhospitable work environment, or medication that could be passed through the breastmilk. There must always be a "why," even though, ultimately, there is no good *reason* to choose not to breastfeed – only situations that prevent one from doing so. Here, Holly echoes a sentiment shared among all of my breastfeeding participants: breast is always best. Interestingly, none of the motivations my bottle-feeding participants gave for their choices occurred to Holly when she was asked to identify acceptable reasons for not breastfeeding. The most common complaint from my bottle-feeding participants – that breastfeeding was physically uncomfortable, painful, or exhausting – was not mentioned.

Holly acknowledged that she could “understand why women don’t do this,” because she herself had a very difficult time breastfeeding in the beginning. The first six months in particular were excruciatingly painful – so much so, in fact, that she stated:

I honestly, looking back, do not know *how* I did it [laughter], because, I don’t know how I didn’t put him down and say, “Ok, I’m going to go to a bottle now,” because it was really rough.

Nevertheless, despite the lasting discomfort, Holly soldiered on. The implicit assumptions underlying her decision were that, because breast is best, and because her child deserves the best, it must be provided to him, regardless of the cost to the mother.

But there is more to it than that. Holly’s dedication to breastfeeding was intense and flew in the face of many of the reasons she had originally expressed for choosing to breastfeed in the first place. In some cases, breastfeeding even proved to have the opposite effect of the reasons she cited. For example, Holly mentioned that breastfeeding was an excellent choice for those on limited incomes, but later suggested that she was unable to work due to the demands of breastfeeding. In this case, the money saved from buying formula by breastfeeding was most likely negated by Holly’s inability to work outside the home. Still, these costs were invisible to Holly. When I first asked her if the pain of breastfeeding had affected her relationship with her son, she was reticent. However, she later stated that:

In the first couple months, um, there were times when, yeah, [...] I did associate breastfeeding with pain because it was almost non-stop. And, uh, that, to be honest, it might have had a slight impact on me at that time. I don’t know, maybe just on my end? Because it wasn’t really something that I *expressed*. So... But, uh, you

know it's really hard to say how much it impacted my own head.
I'm hoping none! [laughter] But...

What is significant to me in this passage is Holly's insistence that she didn't "express" her pain. It is also relevant that while she initially denied that the pain had impacted her relationship with her son, she eventually changed her mind. In some ways, this exchange plays into what I identified in Chapter 3 as the ideology of intensive mothering; that is, the dominant discourse of good mothering that states that mothers should always put the needs of their child(ren) before their own needs. Physical pain, the bearing of that pain without complaint, and the emotional pain that can come with it are meant to be downplayed or denied. Heartily embracing one's own pain or negative feelings, giving them primacy, is not a part of good mothering. This encouraged disconnect is so intense for Holly that when asked to describe the physical sensations associated with breastfeeding, she falters:

Uh... Well, it's... Um... It's usually... It's usually really warm, to have him up with me. Um... Uh... Sometimes it's a little awkward I guess, because I'm... Not small. [laughter] I'm well-endowed there. A little *too* well-endowed there, to be honest. But, um, I don't focus on... Hmm. [silence] I don't know. Can you elaborate, maybe, a little more on what you're looking for?

This hemming and hawing continued until Holly was finally able to acknowledge that a year and a half later, she still has a negative reaction to breastfeeding:

Uh... I don't know. Well, usually, I still have a little bit of... Just before he latches on, I have to admit, I still, sometimes, cringe a little, because I'm still expecting to feel pain from it. So, I do do that. And then it's just, um, uh... [silence] Uh... It's a little pull when he first latches on, and then, you know, I'll have to unhook his fingernails because he tends to squeeze when he first latches

on, and, um... And... I don't know. It's just him there, warm, and he'll cuddle in, and that's it.

While recognising the anxiety that can come from breastfeeding, Holly quickly moves into the more pleasant elements of the act: the warmth, the closeness. She chooses not to dwell on the negative, instead emphasising the positive aspects of breastfeeding. She is, in fact, "toeing the party line."

However, the physical discomfort and potential emotional ramifications are not the only negative aspects that Holly associates with breastfeeding. She also recognizes personal and social pressures:

Uh... The thing with breastfeeding... Mm, it feels like I've automatically been put into the role of number one nurturer, you know? I mean, he does go to [my boyfriend] for some things. [...] But it seems like, if he gets sick, or hurt, or he's having a rough night sleeping (he's always been a bad sleeper), then it's me. Always me. Right? So, if I want to go out with friends even, if he's having a rough night, then I might just end up being called to come home. Because, [if my son] gets too much for [his father] to handle, which he does sometimes, then I'll be called to come home. So. Yeah, it does feel like, sometimes, like, you know, an invisible leash. [laughter]

Additionally, Holly no longer experiences a sexual reaction from breast play. She still allows her partner to "play" with her breasts, despite likening it to him playing with her chin. As she says, "I think part of the reason I've disassociated the two is because, um, a *bii~iig* part was probably to do with the troubles I've had in the beginning, and that pain that I've somewhat associated with breastfeeding, and I don't know." This is especially

meaningful for Holly because prior to becoming pregnant, her breasts were not only an important part of her sexuality, but also an important part of her identity. As she put it:

When, um, I hit puberty really early – well, not really early, but, y’know, the early side of normal – and, uh, growing up, I think, out of any time, like, anybody said “oh, you’re so pretty,” they would always talk about my chest afterwards, so it became a real... It became almost, you know, part of my identity. So, uh, for them to not be the way they used to be kind of, y’know, it bothers me sometimes. So... That’s, that’s something that I uh, think about a lot actually.

In addition to losing her sexual connection to her breasts, Holly has also lost an element of her positive body image. She notes that the only plastic surgery she would consider would be a breast lift, as her breasts have gone from “happy” to “sad.”

Nevertheless, despite the pain, the emotional anxiety, social limitations, sexual issues, and self-esteem deficiencies, Holly still believes that breast is best. When I asked her for her reasons, she produced a long list of answers: health benefits for her son, like reducing cancer risk and developing face muscles; health benefits for herself, like a reduced risk of cancer, osteoporosis, and postpartum depression; increased mother-child bonding; and reduced costs (as compared to buying formula). These are all benefits regularly cited by lactivist organisations, such as La Leche League (Kenady 2006).

Interestingly, Holly’s breastfeeding experience directly contradicts two of the benefits she listed. For example, her ability to bond with her son may have been, by her own admission, affected by her association of breastfeeding with pain (her sexual identity certainly was). Additionally, her commentary suggests that breastfeeding kept her home

and away from not just a social life, but also from work outside the home. An argument often used to encourage low-income mothers to breastfeed is that “[it’s] cheaper than buying formula!” (Kenady 2006). However, for mothers like Holly, who exclusively breastfeed and who don’t have the luxury of a) being able to nurse at work, or b) pumping enough to feed the child in their absence, this tethering to the home may negate the financial benefits of breastfeeding. The benefits that remain, such as cancer and osteoporosis prevention, fall outside of the scope of this research. The fact remains, however, that at least some of the benefits claimed by the lactivist movement and breastfeeding specialists do not apply in Holly’s case. Despite this, she remains devoted to her breastfeeding. I will discuss the pleasure she receives from this in greater detail in the following chapter. For now, suffice it to say that, for Holly, the so-called “practical” reasons to breastfeed are not necessarily the most important.

The question of maternal space in Holly’s narrative is an interesting one. While Gillian used her mothering and breastfeeding to stake a claim to Thirdspace resistance, she was only able to do so because her social and personal identity already secured her privileged position in the bounds of the Second and Firstspace. Holly, on the other hand, is young, unwed, unemployed/underemployed, bisexual, and has not yet finished her degree. As such she has not met many of the requirements or accomplishments needed to successfully access the Secondspace. Furthermore, her pregnancy was not planned, and did not represent the long-awaited culmination of heteronormative romantic ideals of womanhood that is touted as the most normative path to motherhood (even if this is not the case in actual practice). Instead, it was “an accident.” As a result of these factors,

Holly cannot enjoy the privilege of automatic access to the bastion of symbolic order maternal space. While she does have custody of her child and maintains those legal rights (Firstspace), she does not possess immediate access to the very powerful Secondspace in the way that Gillian does, which also has the effect of denying her access to Thirdspace (which is, by my definition, a space of hybridity, and thus requires Secondspace to exist). If Holly were to attempt to wield mothering as a tool of subversion or transgression, rather than doing so in the bounds of Thirdspace she might very well find herself abjected from the symbolic order altogether because she is not fully integrated into trialectical space.

For Holly, then, breastfeeding offers one means of securing access to culturally sanctified maternal spaces, a shield against the shadowy uncertainty of abject space. Her dedication to breastfeeding, even in the face of extreme costs to herself, fulfils many of the cultural requirements of motherhood, and gives Holly something to be proud of. Breastfeeding, even in the face of considerable personal strain, is a success to which she can definitively lay claim. While Holly never expresses a fear of the abject, she certainly insinuates a desire for Secondspace protection. For Holly, breast is not only best; it is a necessary element of mothering, and the key to trialectical space.

For some mothers, however, breastfeeding is not a viable route to Secondspace acceptance. In the face of coming up short in the eyes of symbolic order maternity, then, what options are left for mothers? The following two mothers chose to answer this

question by rejecting the symbolic order's monopoly on motherhood, leaving behind the bounds of trialectical space in search of something more open, namely, abject space.

Claire

Claire was 37 at the time of our interview, making her one of my oldest participants. Originally from southern Ontario, she and her family had moved to Newfoundland a few months before I met her. She and her partner, a "bayman" from the central south coast, were not married, but had been in a committed relationship for seven years. Although they hoped to marry one day, it was not an immediate priority. Instead, after years of being focused on their individual careers, they had decided to have a child, as Claire's age was a potential concern. However, as she explains, childbearing was not the ultimate goal of their lives or relationship:

The approach we took, because of my age – and also because I'm heavy now, and I was heavy when I had him – we didn't know if I could become pregnant, so we just thought, "We'll just try, and if it's meant to be it's meant to be, and if it's not we'll find other ways to fulfil our lives."

For my purposes, this is the statement through which I filter the rest of Claire's story. Both Claire and Holly are situated on the margins of trialectical maternal space. Both women are unwed mothers, and subject to all the potential scrutiny that status may invite in comparison to more traditional family arrangements. While Claire has achieved a level of professional success that Holly has yet to reach, she also felt that she was older than the average new mother. According to Claire, in a "post-feminist media climate" that blames mothers who wait until they are older to conceive for a variety of social ills, she was on

shaky ground. She is, by her own reckoning, too old to have another child, thus making her son a *de facto* “only child” – something which some people may consider to be a failure. More importantly, she does not breastfeed.

Claire’s “decision” not to breastfeed actually began during delivery. When Claire was pregnant she chose to work with a midwife while also delivering at the hospital. During labour she was induced and accepted an epidural. Due to the length of her labour and her extreme exhaustion, her son was unable to latch in the first few hours, and as a result he was bottle fed in the hospital. Claire refers to those first few hours as a “failure of support” for breastfeeding:

So, it’s a very interesting experience, because we were pretty vulnerable, and exhausted, and hormonal, and you know, you just had a baby, you’re in a hospital room, there’s breastfeeding posters up everywhere, but there was nobody to try and help me latch.

Despite having chosen a midwife over a doctor, a decision closely associated with ideals of “natural” and “empowered” birthing and mothering, Claire was unable to receive the support she felt she needed, and things only went downhill from there. Claire’s milk never came in, and she never became engorged. She tried herbal supplements and prescription medication, rented a hospital pump and tried repeatedly to get her son to latch, but nothing worked. Claire describes this time period and its frustrations vividly:

Three weeks of doing this around the clock and not getting any sleep, because I was either trying to get him to latch, or... I felt like a crazy person. [...] When I look back, it seemed like it was such a long time, but really it was just a three week period. But I just... I just... It just wasn’t working. But I was really attached

to the idea of breastfeeding, because in my mind formula feeding was horrible. Breast is best, right?

Intriguingly, Claire, unlike either Gillian or Holly, openly acknowledges having been (in her words) “snotty” about women who formula fed:

[I] thought that that [formula feeding] was really awful, why would you do that? Breastfeeding is the best thing for your child, um... And I thought it was just kind of lazy if you didn't, so I was pretty judgemental.

Here the effects of preaching, “breast is best!” become more apparent. Claire acknowledges having internalised these dominant ideologies surrounding motherhood – that it is natural, that sacrifice is necessary, that pain is intrinsic to motherhood, etc. Throughout her three weeks of guilt and frustration, Claire was labouring under the fear that she wasn't giving her son the best, that he wasn't properly bonding with her, that he didn't know she was his mother, and “a lot of that crap.” While it is evident that Claire no longer believes this to be true, I find it saddening that she was at one point concerned that her decision to bottle-feed would seriously damage her relationship with her son. This threat, “breastfeed or your child won't even recognise you,” appears to me to amount to a form of maternal blackmail – one that ensures that mothers stay loyal to trialectical space breastfeeding philosophies, lest they permanently disrupt their chance to properly bond with their children. It wasn't until Claire's mother-in-law, a nurse who had both bottle fed and breastfed her children, stepped in that Claire was able to take a step back and analyse the situation:

[She] said, “You know, maybe it's just not meant to be? You shouldn't beat yourself up over this. Maybe it just isn't

happening and for your mental health, and therefore the health of your child, maybe you should think about going with formula and just giving yourself a break." So it wasn't until then that I'd even allowed myself to think about it as an option, but once I did I felt enormous guilt, and I felt that guilt for quite a long time, um... Most of the first year of his life, but it was also just a relief of like, "OK, now I can actually just enjoy my baby instead of it being this incredibly painful, stressful, exhausting experience all the time."

These mixed feelings of guilt and relief eventually gave way to a more philosophical approach to parenting, one that echoes Claire's earlier, more independent approach to pregnancy. While Claire had easy access to the maternal Firstspace, the patrolled borders of Secondspace were a source of anxiety for her. I perceive a conflation of the breastfeeding mother with what I would call "capable, caring mother," while the bottle-feeding mother is portrayed as a "lazy, awful mother." This conflation made it very difficult for Claire to even conceive of formula feeding as a responsible possibility for her, and also made it hard for her to come to terms with her decision. It was only in hindsight that Claire was able to see how formula feeding benefitted both her and her child:

[In] terms of my ability as a mother, it was probably one of the best decisions I've ever made, because I became a sane person again, and more emotionally connected to my – instead of resenting, you know – my newborn.

Claire identifies multiple areas in which bottle-feeding proved to be a positive experience for her. One area in which bottle-feeding proved to be beneficial was in allowing her husband to take part in the care of her son, as opposed to just participating in play work. In Hochschild's *Second Shift* (2003), this imbalance – where mothers care for and raise

children, while fathers play with – unfairly puts the lion's shares of parenting work on the mother's plate (see, for example, the story of Nancy and Evan Holt in chapter 4 of that book). By bottle-feeding, Claire's partner was able establish a night-time routine with his son. This routine, which continues to this day, involves feeding him a bottle just before bedtime. Claire feels that this has allowed her husband to bond more meaningfully with their son, as well as teaching their son that both of his parents can be relied upon as sources of food and comfort, and as a source of security. She describes her husband as a "hands-on" parent, and is immensely grateful for the amount of sleep she was able to get by splitting night-time feedings with him. Additionally, Claire felt that bottle-feeding gave her the opportunity to be herself, to have her body as uniquely her own, and to identify herself as more than just "mother."

While all mothers interviewed actively sought physical contact with their children, all of my breastfeeding participants spoke of feeling "touched out" (a term common to most of their narratives) at some point during the day. In fact, of all of the mothers who took part in this study, Claire's descriptions of the physical sensations involved with feeding were the most unilaterally positive, describing them without caveats as "relaxing," "calming," "warm," "nice," and "close." In sharp contrast with Holly, who was disconnected from the sensual elements of feeding her child due to the pain it caused her, Claire describes her year at home with her son in glowing terms, attributing much of that success to the autonomy formula feeding gave her:

I actually really enjoyed my year off with my child. I loved being with him all the time, um... I still felt like I could be myself, too, which is an interesting thing, because I find a lot of the, um, the

force or whatever you want to call it around motherhood is, um, almost, like, things that are good for the baby regardless of the cost to the mother. It's almost like we become completely secondary, and while yes of course we need to put our children, our infants, first, there's also, I think, importance, or there should be an importance placed on *your* health, and your mental health.

Much like Gillian, however, who found that her in-laws were not fond either of her decision to breastfeed for comfort or for an extended time, Claire faced a fair bit of resistance over her feeding choices. In addition to the internalised notions of guilt and inferiority surrounding her inability to breastfeed, Claire also suffered social consequences:

I went to a baby shower for a friend, in Toronto [...] I had the opportunity to go to Toronto for the afternoon and it would be a day out for me to see my friends. [...] When I was there I met some of her friends that I hadn't met before, and they were "Oh, you've got a three month old! *Wowwww*. You're out and away from him? I can't believe that. I'm not like that. I can't be away from my so-and-so for more than a few minutes or they freak out! So did you pump before you went?" And, so, you know, I foolishly was like, "Oh no I had problems with breastfeeding so I ended up formula feeding."

...

Dead silence. And nobody made conversation with me for the rest of the party.

It wasn't only strangers who gave her grief, however. Claire noted that she often received conditional acceptance from close friends, as in the case of a doula friend who wanted Claire to write a letter to the hospital about the lack of breastfeeding support she'd received there. While Claire was ready to enjoy her baby, her friend could only be supportive "as long as [Claire] held that torch for the fight, and stayed angry about it." Claire's decision to accept what had happened, and be content with what she had, was in

violation of what her friend understood as the party line, which demanded outrage that her opportunity to breastfeed had been “stolen” (as Claire put it) from her. Claire noted that this attitude was pervasive:

“You might as well feed your child Cheetos.”

“Why did you even bother becoming a mother if you weren’t planning to breastfeed?”

It seems weird to me, but there’s such a strident... You know. So, those kinds of early experiences just made me think, “You know what? I don’t need that shit.” Excuse my language!

Claire’s rejection of breastfeeding dogma carried over to other elements of her maternal life. Unlike Holly and Gillian, who both expressed some guilt over deciding not to co-sleep, Claire is unapologetic about her stance, reiterating the sentiment she expressed at the beginning of the interview: “If it works for you, then awesome, go for it.” For Claire, who already feels as though she has been cast into abject space, there is no longer a stringent need for reaffirmation or acceptance from other mothers. That is, her fear of that emptiness surrounding the symbolic order has dissipated. While Claire may or may not enjoy or engage in some elements of trialectical maternal space, the pressure to conform exactly to those bounds has gone. As she no longer has the desire to remain exclusively in those parts of maternal space, she now has access to the *entirety* of maternal space (abject and trialectical), if she so chooses. She parents from a position of “radical openness” (hooks 1990), which allows her the freedom to define for herself what her maternal space should look like, and what it should entail. However, while Claire’s journey into abject space was fraught with guilt and self-doubt, some mothers enter into it with much more ease.

Marilyn

Marilyn made it abundantly clear, from the moment she introduced herself, that she is “not a woman who settles.” She also stated that she was, as of the interview, 29 and-a-half. “I make sure to point out the half,” she says. A St. John’s local who studied at a prestigious out-of-province university, Marilyn has volunteered abroad, and holds two professional positions. Her family background is complicated, with much marrying and remarrying, and a large number of siblings (from long lost siblings to step siblings). She is established and self-possessed, and proudly self-identifies as a good mother.

Growing up, Marilyn was used to going against the grain. Her mother, a practicing doctor and Catholic political activist, is vehemently pro-life. By contrast, Marilyn is pro-choice and an atheist. Despite these differences, however, Marilyn grew up in a supportive household, where dissent and debate were encouraged. The independence her family encouraged extends to maternal space as well: while her mother is a great advocate of breastfeeding, she was nevertheless also very supportive of Marilyn’s decision to quit before the WHO-recommended six month minimum. In fact, the only judgment Marilyn actually feared was that of her mother-in-law, a La Leche League-affiliated lactivist:

[She was] very supportive, but, uh, I didn't tell her very *quickly* when I decided not to, because she would have been, not judgmental, but just more “Why are you stopping? I don't understand.” Not outspoken so much as just quietly disapproving. She's very respectful, but I just know that she would be like, “Oh, do it longer,” in her mind, but I don't think she would [say] it.

Marilyn weaned both of her sons between four and five months of age – just shy of the

recommended minimum amount. Despite having breastfed for five months, Marilyn chose to be identified as a “non breaster.” Her choice to quit when she was just a month shy of the recommended minimum was a controversial one to many in her life. Why quit when she was so close? Marilyn explained:

Even from the beginning I was like, “I’ll try it, I’ll see what happens, I’ll keep an open mind.” I was never excited about it, but I didn’t think I’d really not like it. [...] It wasn’t really a decision, it was more like, “I’ll see how it goes.” That’s how I’ve been with everything. Childbirth - we’ll see how it goes. [laughter] Take it day by day.

While Marilyn had agreed to give breastfeeding a try, this decision was due to breastfeeding’s supposed health benefits, in addition to considerable family support, and not out of any real desire to breastfeed. Herein lies the element of Marilyn’s narrative that really sets it apart from those of my other participants: unlike Gillian and Claire, who both wanted to breastfeed and either did or couldn’t, or Holly, who didn’t enjoy it but felt she should, Marilyn didn’t like it – so she stopped doing it. Her willingness to admit to her own desires, regardless of immense social and institutional pressure to ignore or reject them, and her very laid-back approach to any potential or actual criticism received, is remarkable given the culture of guilt surrounding motherhood. It isn’t that she is unaware of this norm, either, referring once or twice to “internalised guilt”:

It’s hard to say, like, when someone asks a question... Every time I pull out the bottle and someone says, “Oh, you’re not breastfeeding anymore?” I wonder where that question is coming from, and it depends on my mood. Sometimes I’ll think that they’re just curious, other times I’ll think, “They’re judging me for bottle-feeding.” [...] I felt like... I felt slightly judged. *Obviously* judged. So, like, in the questions, I’m sure - it’s hard to say.

Despite this acknowledgement, however, she is clear about her motivations for quitting, and also clear that it is her right to do so. From the second day of breastfeeding Marilyn knew that it wasn't right for her. "I didn't ever feel that, 'Oh, I feel so connected' feeling that a lot of women talk about," she says, "I felt like I was bonding more from snuggling or just changing his diaper than from nursing." Like Holly and Claire, Marilyn cites the physical discomfort associated with breastfeeding (like engorged breasts) as a reason for wanting to quit. Unlike them, however, she doesn't always relate this to pain. For example, while letdown was uncomfortable, it was not painful for Marilyn. Nevertheless, it still played a role in her decision to quit.

Though Claire discovered, after the fact, that bottle-feeding lead to a very equitable sharing of childcare duties (as compared to what she perceives in breastfeeding households), Marilyn was aware of this beforehand, and it played a role in shaping her decision to quit:

I'm a little too much on the equality/equity side of dividing up tasks, so the fact that he would feed half the time if we were bottle-feeding was always like "I could sleep through the night if only he could feed him, and he would be willing to do that," so there was that frustration.

In addition to actively seeking equitable sharing of childrearing responsibilities, Marilyn was also concerned with her desire for intimacy. Marilyn's breasts were a large part of her sexuality before her children were born. Like Holly, she understood her breasts as an integral part of her sexual experience. Once her children were born, however, Marilyn

felt as though her husband was “nursing” from her when they engaged in breast play. “That, to me,” she says, “felt like two worlds colliding that I wasn’t ok with.” She didn’t want him to touch her breasts at all, in fact – a choice that disrupted Marilyn’s sex life. For her, this was yet another thing that “pisse[d] [her] off” about nursing. What’s more, if her husband “even went near them, they would explode.” While her husband was more than comfortable with this, and even found it a bit titillating, Marilyn was decidedly *uncomfortable* with it. However, though sexual breast play reminded her of breastfeeding, breastfeeding did not remind her of breast play – sexual sensations never appeared. If she was engaged in sexual behaviour, however, letdown inevitably meant the end of the encounter.

Once I started nursing, I was like, “Ok, they’re for nursing.” Like, that’s how I had it conceptualised inside my head? So even when I could get past that when we were having sex, it was like as soon as I would start the letdown it was like, “Ok, that’s for feeding now,” so I couldn’t. [...] I found it too confusing for me. So when I finished breastfeeding I was like, “Oh they’re mine again!”

Once the weaning was complete, Marilyn found the transition back into a sexual framework of the breast very easy. She acknowledges that while she was breastfeeding, she felt not only that her breasts were the baby’s, but that her whole body belonged to the baby: “I felt like *I* was the baby’s.” Claire also speculated that this blurring of the lines between mother and child, the notion that the mother’s body becomes subordinate to the child’s, was a consequence of breastfeeding. Unlike Claire, who made the comparison based on her perception of other mothers’ experiences, Marilyn had a personal basis for comparison. The merging of the two worlds – sexual and maternal – was not something

she wanted for herself, whether physically or socially. Again like Holly, Marilyn complained about having to be metaphorically chained to her children all the time when breastfeeding. "Like, in the beginning especially, it just felt like all I ever did was nurse, so, I don't like that," she said, adding: "I'm very independent." That independence, a recurrent theme in Marilyn's story, comes into play even more as she reveals her last reason for switching to a bottle: it allowed her to do the things she *wanted* to do.

I also like to have a few drinks. Not often, but I'd say every few weeks I really like to go out with my girlfriends and have a few drinks, so that was always tricky [...] I'd have a bank in the fridge. I had enough for twelve hours, so that I could be sure it was gone, but you always still worried. I felt guilty, selfish, all those little fun things that mothers get to feel.

This stands in sharp contrast to Holly, who doggedly persisted in her breastfeeding despite the social toll, extreme pain, exhaustion, and adverse emotional consequences. Even Claire, who did quit, found it hard to find the strength to switch to bottle-feeding against the immense social and internalized pressure to breastfeed. Breastfeeding had been a painful and stressful experience for Claire, but the only thing that had allowed her to even think about *not* breastfeeding had been input from another person suggesting that her own mental health was at stake. In other words, though Claire didn't like breastfeeding, quitting had to be a *need* and not a *want*. Marilyn recognizes this pressure, but also asserts the value of her own desires:

Again, like, I'm trying to separate that it's *not selfish*, because it's how I felt. Just being like, "I like wearing dresses; I can't wear dresses." It just felt like it affected every aspect of my life. On a small level, but on a small level every day, where at least every day I'd be like, "I wish I wasn't breastfeeding because of this."

Marilyn, then, rejects two of the central ideals that form the basis for symbolic order maternal spaces: sacrifice and suffering. As stated earlier, Marilyn considers herself an unquestionably good mother. There is no doubt in her mind that she parents her children well, and she is secure in this knowledge despite an entire “sub-culture of motherhood” (Nelson 2009) dedicated to telling her that suffering and sacrifice are fundamental requirements for entry into good maternal space. Often, mothers are told that putting their needs above their child’s needs is selfish; Marilyn’s choice to take her desires into account at all is a truly radical one, though Marilyn herself hardly sees it as such. This rejection of pain’s centrality in motherhood is evident even in Marilyn’s birth stories. Both of her sons were born very quickly: one in an hour, and the other in twenty-two minutes, respectively. Marilyn planned on having medicated births to help with the pain, but because her labour progressed so quickly, this proved to be impossible. Her social circles did not understand her frustration with this:

I've got friends who are like, “Oh, I wanted natural childbirth, you're so lucky!” and I'm like, “I wanted drugs.” [laughter] Like, I didn't necessarily get the birth plan that I wanted per se. [...] It's really that assumption that you had the *dream* childbirth, but you know what? Yeah. No.

Marilyn’s desire to avoid pain and discomfort during childbirth flies in the face of the convention of “initiation” (Nelson 2010), wherein one passes through a difficult and/or painful labour to “earn” one’s stripes as a mother. While many women do voluntarily choose medication for pain, Marilyn’s case is somewhat exceptional, because she is personally steeped in a middle-class sub-culture that encourages natural childbirth for women as a marker of ideal motherhood and a key to culturally sanctioned elements of

maternal space. Marilyn's peer group holds onto these ideals, but Marilyn challenges their right to diminish her labour experience by comparing it to longer or more traumatic labours. By constantly telling her "oh, you were so lucky!" or "what an easy delivery," she feels that they undermine her pain and her experience. Marilyn points out that, based on her body's past history of pain, childbirth was almost unbearable, while acknowledging that to other women who had gone through more or experienced it differently, that may not have been the case.

I'd been really lucky, like I'd never been seriously hurt or had cramps or been sick or anything, so to me that was the first painful, shocking body experience, and I didn't know when it was going to end. It was awful.

Here Marilyn again asserts her right to her embodied experience as deeply personal. She acknowledges its subjectivity, but also insists on the notion that her bodily space is ultimately open only to her own judgment. This is also a privilege she grants other mothers, saying that it is her duty to respect other women's decisions about feeding, whether that means breastfeeding long-term or never breastfeeding at all:

It's hard because we all have certain frameworks that we operate in. As much as we try not to judge, there's always, like, "I can't believe you did that because I didn't," which I'm sure my friends felt, but having gone through that feeling of being judged, whether it's really there or in my head, I try not to judge anyone's decisions. [...] I find that as mothers we're so unsupportive of each other generally. I try and at least - I try my best to respect other mothers' decisions when it comes to mothering, as long as no one's in harm's way.

As with Claire, Marilyn's experience of living outside of trialectical maternal space has given her a compassionate perspective towards other mothers' struggles. Her transition

into abject space has provided her with perspective, but not with as high of an emotional cost as Claire experienced. Unlike the other women I interviewed, Marilyn's disconnection from the symbolic order's maternal spaces created room for play and fancy, and not just strife. This is readily apparent. In relating the tale of a New Year's Eve party that she attended when her first son was still an infant her mirth in the telling is undeniable. It was her last statement in our interview, which she introduced with "Oh wait! I've got a funny story for you":

We were at a house party, and I pumped, but I forgot the bottle, so I just pumped into a red plastic drink cup. When I finished my friend was just like, "What does it taste like?" and I said, "I haven't tried it," and she was like, "Oh, can I?" And so she tried it and she was like, "Oh, it tastes like watered down soy milk, it's delicious!" So we went downstairs and everyone at the party had a swig, and it was funny because [a male friend] asked my husband, "Have you tried it?" and he said, "Not from a cup!" and my friend said, "Well I didn't want to be the first man to try your wife's breastmilk outside of your sons!" He tasted it, everyone tasted it, and we analysed what it tasted like, so it was interesting. Everyone tasted it. Everyone at the party was all about tasting it, so... Whatever tickles your fancy I suppose. There were some embarrassed people the next day!

Clearly, Marilyn's position outside of the standard bounds of trialectical space is not a source of strife or challenge for her anymore (if it ever really was), but, rather, a source of pleasure.

These four women, all of them mothers, interact with the different circles of maternal space in very different ways. Whether using their maternity as a Thirdspace tool of hybridity and rebellion, a gateway to Secondspace legitimacy, a companion in abject space, or as a personally constructed and subjective space, they all interact with the same

normative grid as every other mother in the geopolitical, social, and cultural place of St. John's, Newfoundland and Labrador. Despite their similarities, however, each relationship with maternal space, and each concept of what that space entails, is unique to the mother who embodies it. In the following chapter maternal space's interaction with the *plaisir/jouissance* principle will be plumbed for a greater understanding of the framework and analytical tool as a whole.

CHAPTER 7: Contradictions and Conflicts of Pleasure

Introduction

Inherent in theories of maternal space are the realities of contradiction and conflict. Because maternal space is forever in flux – shaped by but distinct from personal experiences, socio-cultural contexts, and geo-political locales – it is unsurprising that conflicts and tensions should arise in it. These conflicts sometimes represent negotiations over the ins and outs of trialectical maternal space; that is, what institutions, society, and immediate social circles consider to be “good” mothers. However, I would argue that the ultimate source of many, if not most, of these conflicts is (fundamentally) a conflict of *pleasure*.

In this chapter, I begin by returning to some of the narratives first discussed in Chapter 5 – specifically those of Holly, Marilyn, and Claire – in order to make clearer the distinctions between *plaisir* and *jouissance*. Ultimately I suggest that the twinned concepts of *plaisir* and *jouissance*, first introduced in Chapter 4, can offer a productive way of thinking through the complexities of maternal space.

Plaisir

Amongst my participants, one of the most conflict-ridden topics in my research was that of a mother’s relationship to her own body. This was so much so, in fact, that when I first

began the very long process of trying to analyse my data, I was convinced that there was no way that I could make a thesis out of it. The problem was that none of my participants shared a bodily relationship. That is, they all experienced their own bodies, and the boundaries of their bodies, differently. Entering into maternal space had affected each of them in profoundly dissimilar ways. There was no way to characterise maternal experience in this regard, other than the fact that it changed things (which was hardly an observation of note). As it turns out, the solution to this problem was simply to look at the situation from a different perspective.

Every mother affects and is affected by maternal space in a unique way, based on the broader cultural structures in which lives, her geopolitical location, and her own life experiences. In addition to this, however, every mother's desire for pleasure affects her relationship to maternal space. While Holly (the young mother who proudly suffered through extended breastfeeding) and Marilyn (the "early weaner" who bucked breastfeeding convention because she wanted to) may at first seem to have little to nothing in common with one another, in fact, their stories share at least one very notable feature: an undeniable devotion to *plaisir* (revelling in the rightness of culture). In this section I will briefly return to each of these narratives, and then explain how (despite appearances) both display a vested interest in *plaisir*.

Holly

One might recall that Holly is a young, unwed,²¹ underemployed, student and mother of one at the time of our interview. She was also a passionate breast feeder. As discussed in Chapter 5, Holly is concerned with promoting the “breast is best” philosophy, despite experiencing great pain while breastfeeding her baby. As previously argued, Secondspace motherhood demands that mothers be educated, middle-to-upper class, professionally employed (or at least formerly professionally employed), and married. Holly does not fit into any of these categories. However, Secondspace motherhood also requires that a mother conform to the ideology of intensive mothering, which demands that mothers devote the vast majority of their time, energy, and resources to their children (Hays 1996). Holly adheres to this ideal despite significant hardship. In addition to experiencing physical pain from breastfeeding, she also found that it tethered her to the home, prevented her from achieving what she felt she was capable of at school, and wore her down in other ways (including occasionally keeping her up for thirty-six hours straight when her son was very young). Despite this, she persisted in breastfeeding, because it was what was best for her son. However, that is not the whole story. The other element of Holly’s story that is significant is the admitted sense of satisfaction she derives from what might be termed the “sacrifices of motherhood”:

And, you know, I do get a little bit of pride saying that I breastfed him exclusively for seven and a half months, you know? I feel like I should get a little sash with a badge on it. [laughter] But, uh... And, I mean, breastfeeding and reading up on things like that, you know... I’ve come to learn a lot of things about it, and I’ve helped other women who had trouble with it, and it’s been helpful in that way as well.

²¹ Though, at the time of her interview, in a committed relationship with her son’s father.

The satisfaction that Holly gets from being a breastfeeding mother (especially in the face of such suffering), the pride of having sacrificed, and the joy derived from sharing her hard-earned wisdom, are some of the benefits she claims to have received from breastfeeding. This can be related to the distinction, first mentioned in Chapter 4, between Roland Barthes' concepts of *plaisir* and *jouissance*. *Jouissance* is an ecstasy that derives from smashing all of one's values, assumptions, and expectations, leaving "nothing reconstituted, nothing recuperated" (52), *plaisir*, however, is a different beast. *Plaisir* relates to comfort, tradition, and convention, and derives from a reaffirmation of one's values and culture (51). From this perspective, Holly's story fits *plaisir* to a "T." In fact, it was Holly's narrative that inspired the inclusion of this principle in this thesis.

While Holly rightly identified bottle-feeding as being related to Newfoundland tradition (nearly every participant made reference to the "Carnation Baby" as a distinctly Newfoundland phenomenon), she did not question her dedication, as a breastfeeding mother, to another tradition – that of the mother as martyr. Further, the pride she feels in having soldiered through breastfeeding, and the positive feelings she gets from having helped other women through their breastfeeding ordeals, can both be related back to Barthes' concept of *plaisir*: the pleasure one derives from conforming and not challenging the status quo. In living up to the ideal of the mother who sacrifices all for her child, Holly has not only reaped the rewards of convention, she has succeeded in creating room for herself in the symbolic order's maternal space.

Holly's *plaisir*-inspired politics make her very amenable to the structures of trialectical space. During our interview, while speaking of her difficulties breastfeeding and the lack of support she felt she received, Holly began to broach the topic of whether or not breastfeeding was natural. She had only just mentioned the social myth that breastfeeding is "the most natural thing in the world," before she immediately cut herself off, instead opting to repeat the party line that it had been natural, before society intervened:

And when I first started I didn't know if I was going to be able to keep going because it's not an easy thing to do. Not for everybody, anyway. You know, it's something a lot of people think is the most natural thing in the world – and it is! Or at least, it used to be, once upon a time – but it's not something that, really, it's not something that's really considered natural anymore.

In a single sentence, Holly abandoned her critique of the discourse that made it seem as if breastfeeding came easily to every mother in order to immediately reify its position *as exactly that* - the most natural thing in the world. This abrupt turnaround is important, because it highlights Holly's ability to ignore her own embodied experiences, or at least to rationalise them away and silence them, in light of the virtues extolled by symbolic order motherhood. While at first she began by speaking about how breastfeeding doesn't always come naturally to every mother-child pair, she quickly switched to arguing that breastfeeding wasn't "natural" anymore due to socialised pressures – a claim that directly contradicts her initial statement. Essentially, it seems that Holly is unwilling to critique the movement with which she has allied herself, instead turning her criticisms towards a broader context that suppresses breastfeeding.

It is important here to avoid claims of false consciousness. It may be tempting to say that Holly lacks agency, or is less empowered than other mothers, but this claim is a dangerous one. I maintain that Holly's decision to remain pro-breastfeeding is just that – a decision. The pleasure that Holly seeks, *plaisir*, is not only valid, but worthwhile. As a feminist scholar it strikes me as patently unfair to, on the one hand, critique the social structures and institutions that seed maternity with the pressures of the symbolic order while, on the other hand, negatively judging the mothers who have to deal with those pressures.

When it comes to pleasure, most people engage predominantly with *plaisir* most of the time. This is entirely understandable. As Judith Butler made clear in *Undoing Gender*, there is a distinction between a “liveable life” and a “good life.” The “good life” is only available to those who don't have to devote most of their energy to figuring out ways to persist (32). Because, as I stated in the introduction, trialectically approved motherhood is a performative achievement, very few mothers are in the position to live Butler's “good life.”²² Having a liveable life means having a recognised life (205); that is, a life that is seen by others as being “worth living.” For mothers, being recognised by necessity involves concessions. Not only is a perpetual state of *jouissance* impossible (due to the nature of *jouissance* itself), it is also unsupportable. With no solid ground to which one can return, it becomes impossible for a mother to have a liveable life.

²² In this instance one could presume that a “good life” would be the absolute freedom to mother as one wished with little to no non-natural consequences (I am here making the assumption that keeping one's child alive is generally an inherent part of mothering).

What does this mean for Holly? Holly's decision to seek *plaisir* through dedication to Secondspace edicts on breastfeeding is evidence of agency, but it is also evidence of survival skills: *plaisir* is not just a safe choice; it is a smart choice. While Holly may suffer physically as a result of breastfeeding, the social benefits she accrues far outweigh this suffering. This is certainly the case in Holly's interpretation, although it also makes sense in light of Butler's concept of the liveable life.

Marilyn

Unlike Holly, Marilyn did not seek to live up to the standards of trialectical motherhood, or at least, she fought to avoid that desire. In fact, Marilyn rejoiced in her position on the margins of abject space. Even from the very beginning, she was ambivalent about breastfeeding. Her decision to wean early was not a difficult one. Though she did fear her mother-in-law's reaction to an extent, her fear was not significant enough to force her to continue breastfeeding. In fact, breastfeeding at all was, for Marilyn, a burden, and one that she could only bear for so long. Quitting was a relief.

In the focus group, first covered in Chapter 5, I brought up an internet comment that had been posted in response to Kathryn Blundell's article, "I formula-fed. SO WHAT?." Blundell's article addresses her experience of choosing to bottle feed because she didn't enjoy breastfeeding, much like Marilyn, finding it "creepy." This was an assertion met with much hostility online, as in the following comment to an online version of her article:

don't have children if you don't want to give them what is rightfully theirs. if you want to retain your bodily autonomy, don't ever spawn any offspring, period.²³

During the focus group, most women agreed that this reaction was unfair, as they felt that a mother's body was always a mother's own. Interestingly, during the interviews every single participant at least mentioned – and sometimes dwelt on – the feeling that, in some sense, bodily autonomy was compromised by motherhood. Five of the mothers I spoke with talked about feeling “touched out,” where constant physical contact with their child left them wanting nothing more than some space to themselves. Notably, every breastfeeding mother made this comment.

Marilyn, too, felt this way with her children while she was breastfeeding. In order to be a happy mother, a satisfied mother, one with the energy and the desire to actively care for and love her children, Marilyn felt she needed to create boundaries around her self. Deciding to wean before the recommended six month minimum was one way in which she was able to “reclaim” her body as her own, in all of its facets. To Marilyn, this was a choice that made her a good mother, despite what social scripts may say to the contrary. However, it was a choice that brought her some minor criticism from others. As she pointed out: “I felt like... I felt slightly judged. *Obviously* judged.” Despite this, Marilyn is ultimately happier since she stopped breastfeeding. The decision to claim her space as her own was a deeply personal one. It was also, I argue, deeply subversive of symbolic order maternity's “rules.”

²³ Taken from <http://morningquickie.com/2010/06/28/breast-is-best-but-formula-is-just-fine/>

It might then be tempting to claim that Marilyn has “agency,” or is “more empowered” than someone like, say Holly. It may *also* be appealing to categorise Marilyn as embodying *jouissance*. In my opinion, however, both of these are *mischaracterisations*. In fact, Marilyn’s behaviour suggests an unwillingness to break down her own belief systems, or really question them at all. For example, Marilyn found it difficult to make her experience of her breasts as sexual work with her experience of her breasts as a source of sustenance. In her own words:

Once I started nursing, I was like, “Ok, they’re for nursing.” [...] I found it too confusing for me. So when I finished breastfeeding I was like, “Oh they’re mine again!”

Unlike the anonymous breastfeeding enthusiast from Fiona Giles’ *Fresh Milk*, first mentioned in Chapter 6, Marilyn was either unwilling or unable to redefine her breasts as simultaneously sexual and nurturing. Sexual feelings and maternal feelings had to be separated, and neither role could be deconstructed. In fact, Marilyn’s pleasure, while subversive in many ways, is just as rooted in *plaisir* as is Holly’s. It does not stem from a sudden breakdown in long-held beliefs, but from shoring up already comfortable values.

Again, this is not to say that either Holly or Marilyn are or are not empowered. Claims of this sort, as I argue above, are antithetical to the feminist goals of this thesis. Rather, the point I am attempting to make here is that *plaisir*, while drawing from culture, is not synonymous with mainstream culture. That is, though Marilyn may position herself outside of the symbolic order in many senses, her narrative is still steeped in *plaisir*, the pleasure of comfort and the static. On the surface it may seem that Holly and Marilyn

have nothing in common, but in fact they are both invested in preserving their belief systems, and revelling in the familiar pleasures of those same beliefs.

Jouissance

Much as Holly and Marilyn may seem to be at odds with one another, the following two stories are vastly different. Yet, both of these women benefitted from the revolutionising power and pleasure of *jouissance*, more so than *plaisir*. I will begin first by returning to Claire's narrative.

Claire

When Claire was pregnant, she was convinced that “breast was best,” and that mothers who didn't breastfeed were “lazy” and “didn't care”: in her words, they weren't “conscious mother[s].” However, when it came time to breastfeed her own son, she found that she couldn't. Her milk never came in. Claire was at the end of her rope after three weeks of unsuccessfully attempting to induce lactation through drugs, herbal supplements, and pumping. Her mother-in-law was eventually able to help her let go of her earlier bias. In addition to this advice, however, Claire found herself reacting to a suggestion from a doula she hired post-partum to help with her breastfeeding issues:

So, near the end of my attempt at breastfeeding, one of the things that pushed me over the edge and allowed me to stop was a suggestion from a doula that I'd hired. She said that what I had to do was take part in a birthing ritual, which involved imitating a water birth, and the idea was [my son] would instinctually know to struggle up to my breast, so he would attempt to climb up and then we could attain a proper latch. She said we might have to do this a few times for it to work. That was about when I decided,

“No, I’m done.” So I paid her, and said, “Ok, thank you for your time.”

This suggestion draws into clear relief the structures with which she was struggling. Claire was meant to feign a natural process, to induce her infant’s natural impulse to struggle to her breast, so that he could then “naturally” learn how to do something that was supposed to be natural, even though Claire’s body could not produce enough milk naturally. This process struck Claire as ludicrous. Perhaps, as her mother-in-law had intimated, “it just wasn’t meant to be.” Perhaps the reason these methods hadn’t worked, and that the struggle had put such a strain on her mental health, was that breastfeeding wasn’t natural for her.

This realisation shocked Claire into action. It had never before occurred to her to give up on trying to breastfeed. It was a prospect she both dreaded and desired:

[It] wasn’t until then that I’d even allowed myself to think about it as an option, but once I did I felt enormous guilt, and I felt that guilt for [most] of the first year of his life, but it was also just a relief of, like, “OK, now I can actually just enjoy my baby instead of it being this incredibly painful, stressful, exhausting experience all the time.”

Although she found the idea troubling, when faced with the dissolution of what she considered to be absolute truth (that “breast was best”), Claire chose to reject her old beliefs in favour of new ones: namely, that she was allowed to bottle feed her child and still be a good mother.

Like Marilyn, Claire now willingly positions herself outside of trialectical space, and what she called “mommy-shaming culture,” saying, “I don’t need that shit.” Unlike Marilyn, Claire’s position was in abject space, and was brought about by the abrupt, but welcome, destruction of an old mental framework. That this particular framework happened to coincide with dominant cultural values is largely irrelevant. Of real importance here is the fact that the structures that she challenged were her own. Similarly, though this next narrative addresses harmful social scripts, what makes the transformative power of *jouissance* so notable is its effect on the narrator’s own sense of self.

Healing

After concluding an interview with one of my participants, I was asked to turn my recorder back on as the participant had more that she wanted to share. The following story stands in sharp contrast to the previous narratives, and serves as a reminder of both the healing potential of maternity, and the newfound connections with one’s body that can be forged from such an experience:

Um, I was sexually abused when I was young, and I had a lot of trouble having sex in the beginning, for a long time, so we had to start out really slow. We went through some hard times. But I found that... After [my child] was born, I almost, it gave me a new relationship with my body. It was actually more positive, and actually brought us to a *way* better place. It almost, like, helped to heal me sexually or something? I felt really proud of my motherly body, and proud that I could produce a child and nurse [that child], and then... It was like I just had so many feelings of shame associated with my body before, and just... It made me very focused on something positive instead.

For this mother, the creation of new relationships with and to her body, the development of a maternal space, and the ability to sustain a body other than her own, together worked to undo the damage done by childhood sexual assault.

It has been well documented that, in Western society, female survivors of childhood sexual assault are often positioned as “guilty victims” (Briggs, Hubbs-Tait, Culp & Blankemeyer; Chandy, Blum, & Resnick; Levett; Warner). In the same way that female-identified adults are often accused of asking for it, childhood sexual abuse survivors, too, are seen as somewhat/somehow complicit in their own abuse (Briggs, Hubbs-Tait, Culp & Blankemeyer). For the survivor, this frequently results in a sense of shame or guilt (Chandy, Blum, & Resnick; Warner). The mother interviewed above was one such woman. Post-abuse, she had experienced both her body and sexuality as shameful, making positive sexual experiences very difficult to achieve. Despite meeting, falling in love with, and eventually marrying her husband, these deep-seated and culturally-enforced feelings of guilt continued. But, carrying a child, birthing it, nursing it: these were the catalysts for a new sense of embodied self. Her body, once a source of dishonour, was now a source of pride, a place from which beautiful and beloved things grew.

While it may not immediately ring as such, this is a deeply revolutionary and rebellious act, and one that is steeped in *jouissance*. Here, this woman allows her experience of entering into maternal space to destroy the cultural scripts that had tied her to the negative feelings surrounding her abuse. Motherhood, and the joy she derives from it (amid, of

course, the frustrations every mother faces), became a gateway to what I referenced previously as bell hooks' "place of radical openness," where the body/woman-shaming rules of the Secondspace have, at worst, lessened, and, at best, lost their control. *Jouissance* here served as a catalyst for a reconnection to her body. It "undid" the harmful scripts that bound her, giving her an opportunity to create a new definition of her self. Entering into motherhood brought about this change.

Like Claire, this mother's moment of *jouissance* released her from guilt and shame while leading her into a more comfortable and peaceful sense of *plaisir*. Because *jouissance* is the flipside of abjection (that is, in order to be *jouissance*, the breakdown in meaning must not horrify, and must be accepted, rather than rejected), it is unsurprising that in my fieldwork its appearances always coincided with pleasant developments. However, once again, this is not a sign of increased agency or empowerment. Mothers who benefit from *jouissance* are no more enlightened than those who enjoy *plaisir*. The key difference remains that they have questioned, and ultimately dismantled, constructs that were harmful to them. Like *plaisir*, the ultimate end of *jouissance* is to grant the subject a liveable life.

Conclusion

The internal workings of maternal space reflect the complexities of the mothers whom it creates and for whom it is created. Understanding how pleasure works – not to constrain or liberate mothers, but rather, to direct their choices – creates a fluid binary that allows for a deeper reading of maternal space as an analytical framework. In the lives of my

participants, *plaisir* and *jouissance* serve not only as motivators, but also as descriptors. While *plaisir* encourages the static, *jouissance* functions as a gateway: a flash of animation, an incitement to mobility. Ultimately that is the great divide between the two: *plaisir* encourages permanence, while *jouissance* encourages change. Neither offers a guaranteed route to happiness, satisfaction, or rightness, but both offer valuable insights into the topography of maternal space.

CHAPTER 8: Conclusions

The goal of this research was to provide an alternative analytic framework for the study of motherhood and maternity, one that steps away from the established mothering/motherhood dichotomy and moves toward a more fluid and inclusive goal. I have termed this analytic framework “maternal space.” Moreover, I have supplemented this structure with an emphasis on the centrality of pleasure, which has the potential to help researchers understand how mothers exist within this construction.

The research on mothering has been slowly growing since Adrienne Rich first published her now foundational work, *Of Woman Born*. Andrea O'Reilly has become “the” name in motherhood studies, and the work she creates and publishes draws quite visibly from the mothering/motherhood divide present in Rich's book. While there are exceptions, such as Fiona Nelson's *In the Other Room*, and although there is value in exploring the mothering/motherhood divide, much of what is published in motherhood studies appears to follow a now familiar formula. Because I hold that there is no culture outside of personal experience and no personal experience outside of culture, I found that these theories lacked a certain degree of nuance. To remedy this, I proposed turning to a framework inspired by Edward Soja's theory of trialectical space.

Soja is particularly concerned with the damaging effects of binaries, arguing that the shifting between binaries, and the resulting “flickering effect,” created “illusory knowledges that ‘embody’ and ‘nourish’ each other. In the wake of this circumscribed

oscillation, [a third term] is unproblematically silenced, pushed [...] to the margins of critical intellectual inquiry” (1996, 72). To remedy this, Soja proposed a theory of “trialectical space,” where the perceived and concrete power of Firstspace existed in tension with the conceptual, institutional realm of Secondspace, and both were joined through Thirdspace. Thirdspace was meant to be seen as distinct from, but a composite of, the other spaces (1996, 62), where the original binary was not completely rejected, but was instead “restructured” with a hybrid end result (1996, 5).

In creating a theory of maternal space, I made use of Soja’s division of space, but rejected the notion that Thirdspace could simultaneously be a space of hybridity *and* a space of “limitless composition of lifeworlds that are radically open and openly radicalizable” (70). This is because its dependence on bringing together both First and Secondspace hopelessly tied it to each of them. Thus, I appropriated Soja’s language and conceptual scope, but not the entirety of his theory. Firstspace became the formalised power that regulated maternity (such as custody laws), while Secondspace represented cultural values and institutions (such as the ideology of intensive mothering (Hays 1996)) that determined acceptable mothering practice and belief. Thirdspace remained a space of hybridity and turmoil, but, as it was tied to the centre, it no longer retained its place as a space of “radical openness” (hooks 1990). In order to create a space where the margin became the centre, I posited the existence of a fourth space, abject space, which formlessly bounds the trialectical spaces.

Through the analysis of my fieldwork I have attempted to suggest that it is the fear of abjection of being ejected from the trialectical space of the symbolic order, that gives Secondspace maternity its power, and keeps mothers like Holly devoted to practices that can be harmful to them. I have also suggested that it is possible for a mother to gain access to the *whole* of maternal space, the culturally sanctified elements of trialectical space *and* the feared abject, through the experience of *jouissance*. *Jouissance* stands in opposition to *plaisir*, which denotes the pleasure of comfort and tradition. In this case, *plaisir* would represent living up to whichever values the mother feels or had been told reflect good motherhood. *Jouissance* is the thrill of rejecting scripts of appropriate values and tastes, of leaving everything destroyed and questioned. It is the opposite of comfort. As there are broader and more specific cultural ideals of motherhood (as in the case of homebirths, which are scoffed at in some circles and greatly respected in others), it is possible to engage in activities that may bring one *plaisir* and *jouissance* simultaneously.

In my sample, each mother displayed a complicated and unique relationship with maternal space, with some participants (such as Elizabeth and Gillian) enjoying a comfortable relationship with trialectical space, and others (like Claire and Marilyn) experiencing more affinity for abject space. Still others (such as Holly) found themselves caught in the middle, ill at ease.

I opened this thesis quoting Elizabeth Badinter's 2010 book, *The Conflict*. Though I came to Badinter's publication very late in the writing process, I found that her work resonated strongly with mine. While I disagree that "naturalism" will inevitably result in women's

“hard-won freedoms [being] eroded” (Badinter 31), I certainly believe that this can and does happen. Further, when Badinter posits that “the greatest enemy of naturalism is individualism and its hedonistic promise” (169), I agree. No mother exists outside of culture, and no mother experiences culture without first filtering it through her own experiences. Entering into maternal space can be an arduous and complicated process. Finding a space in which one can fit is also complex and potentially painful. Extending the right of pleasure to mothers, conceptually and in real life, can help to ease that process. Rather than zeroing in on the correct feeding method, or birthing practice, or sexuality for *a* mother, the focus might more productively be on what is best for *each* mother. It is my belief that only through centralising the analytical potential of desire and pleasure can one ensure that due respect is paid to mothers, while maintaining a critique of the systematic structure that constrains them.

Of course, maternal space is not just a theoretical response to the mothering/motherhood divide, but also a response to the claims of false consciousness that such an expressive/repressive distinction (as articulated in the introduction) might spawn. As I have shown in this thesis, a loss of agency only comes from not having the ability to choose (as in cases of coercive force). We, as researchers, mothers, and/or members of the public, do not have the right to make accusations of dis-empowerment just because we reject a person’s choices. It is important to critique repressive cultural institutions and social bodies that cause harm. However, critiquing the mothers who have no other option than to position themselves in these grids only adds to the pressures and pains they already suffer. Feminist research needs to be respectful of that hypocrisy. Utilising the

plaisir/jouissance binary in conjunction with maternal space is, I believe, one way of changing the rules or language of Motherhood studies from prescription to description.

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Appendix A

Focus Group Consent Form

Title: Feeding: Troubling Breasts, Bottles, and the Mother-Child Dyad

Researcher: Kira Petersson-Martin
 Department of Women's Studies, Memorial University
 749-9079
kpm805@mun.ca

Co-Supervisors:

Sonja Boon, PhD
 Assistant Professor
 Department of Women's Studies, Memorial University
 709-737-2551
sboon@mun.ca

Doreen Klassen, PhD
 Assistant Professor
 Social/Cultural Studies, Grenfell Campus, Memorial University
 709-637-6200 ext. 6306
dklassen@swgc.mun.ca

You are being asked to take part in a research project entitled "Feeding: Troubling Breasts, Bottles, and the Mother-Child Dyad." This form is part of the process of informed consent. It is entirely up to you to decide if you want to participate in the study. Before you decide, it is essential that you understand what it is that you are agreeing to by participating. If you would like more detail about something mentioned here, or any information not included, please feel free to ask. If you choose not to participate, or if you choose to withdraw from the research once it has started, there will be no negative consequences for you either now or in the future.

The researcher will:

- Discuss the study with you and answer any questions
- Keep confidential any information which could identify you personally
- Be available to you during the study to answer any questions or concerns

Introduction:

I am conducting a study on infant/child feeding practices in Newfoundland and Labrador. This study is part of my requirement for the degree of Master of Women's Studies. It is independent of any government department and is being supervised by the Department of Women's Studies at Memorial University. The study will be a detailed investigation of i) how women see themselves, maternal bodies, and mothering in general, ii) the

physical/sensual associations women have with their breasts before and after becoming mothers, iv) the possibility of sensual and/or erotic elements related to breastfeeding, iv) the ways in which mothers perceive and/or judge potential transgressions of mother-child intimacy among other women, and v) the various management techniques mothers use to give positive meanings to their relationships with their bodies and their children's bodies. Your participation in this study will include a focus-group session. You may also be asked to take part in a personal interview. Participation in the focus group does not require participating in the interview.

Purpose of study:

To better understand the interrelationship of feeding practices, the maternal body, the experience of maternity and motherhood, and the sensual and/or erotic elements of the mother-child dyad.

Description of the study procedures:

You are being asked to participate in a videotaped focus group. Your participation is free and voluntary. If you consent to participate, how much and what you want to say is up to you. Discussion in the focus group will be centered around contemporary cases of dilemmas surrounding breast and/or bottle feeding, intensive mothering, and mother-child intimacy. During the focus group, you will *not* be asked any questions pertaining to your own experiences, though you are free to reference them.

You may refuse to participate in the discussion of any of the suggested topics, and are free to withdraw from the research project at any time. If you withdraw before the end of the research project, you have the choice of either allowing the researcher to keep all materials you have provided up to the departure date, or to have everything destroyed. If you choose to have everything destroyed, all references to your participation (including your statements, and your presence in the pseudonym master list) will be erased. Comments made by others in conversations which you have taken part in will be preserved, but any direct references to you or your statements (e.g. "As Susan said," or "I think she's wrong") will be deleted.

Length of time:

The focus groups component of this research will take approximately 30 to 60 minutes.

Possible Benefits:

It is not known whether this study will benefit you personally. However, your participation will allow for a better understanding of feeding practices and mothering in NL. This research may offer some useful insights to new mothers and other community personnel (i.e., health care personnel and government) when addressing the needs of mothers and young children. This study will address gaps in the literature on mothering and breastfeeding in NL.

Possible Harms:

Mother-child intimacy is a sensitive topic. Either during the interview or after, you may have feelings of discomfort or anxiety as a result of the discussions surrounding this and related issues. As a researcher, I am not in a position to offer any advice or guidance. If

you feel that you need to avail of their services, there is a Mental Health Line: 1-888-737-4668. The Mental Health Line is an anonymous service, but in cases where they feel a threat may be posed to you

or others around you, they may attempt to obtain your information. There is some history in the United States of legal issues arising from contacting counseling services in reference to maternal sexuality, though to the best of my knowledge no such incident has occurred in Canada. Despite this, if you should feel that you do require support and are uncomfortable contacting the Mental Health Line, the St. John's Status of Women Council runs a Women's Centre in the city that may be of use to you, which can be reached at 1-709-753-0220.

Confidentiality:

The list of participants will be kept confidential and neither your name nor any identifying information (e.g. blonde-haired and blue-eyed woman with a British accent) will be used in any of the reports or publications produced from this study. Each focus group participant will be assigned a pseudonym; the list linking these pseudonyms with participants' names will be stored in a separate location from the interview notes, transcripts and tapes. Access to the list, as well as videotapes, will be limited to only the researcher. Once the information on the videotapes has been typed up, the videotapes will be stored in a locked location for five years (in accordance with MUN policy), and then destroyed.

Anonymity:

Given the nature of focus groups, it is difficult for the researcher to guarantee complete anonymity. While you will not be asked about your personal experiences with the sensual and/or erotic elements of breastfeeding and mothering during the focus group session, it is possible that such topics may come up during the course of conversation. If you do choose to take part in this portion of the discussion, please note that I have no power over the behaviour of other participants, especially outside of the focus group. Although discretion will be strongly encouraged, I cannot control what other participants choose to share regarding their involvement in the focus group.

Questions:

You are welcome to ask questions at any time during your participation in this research. If you would like more information about this study, please contact:

Kira Petersson-Martin
Researcher
(c) 709-749-9079
(e) kpm805@mun.ca

Doreen Klassen, PhD
Thesis Co-Supervisor
(t) 709-637-6200
(e) dklassen@swgc.mun.ca

Sonja Boon, PhD
Thesis Co-Supervisor
(t) 709-737-2551
(e) sboon@mun.ca

Appendix B

Interview Consent Form

Title: Feeding: Troubling Breasts, Bottles, and the Mother-Child Dyad

Researcher: Kira Petersson-Martin
 Department of Women's Studies, Memorial University
 749-9079
kpm805@mun.ca

Co-Supervisors:

Sonja Boon, PhD
 Assistant Professor
 Department of Women's Studies, Memorial University
 709-737-2551
sboon@mun.ca

Doreen Klassen, PhD
 Assistant Professor
 Social/Cultural Studies, Grenfell Campus, Memorial University
 709-637-6200 ext. 6306
dklassen@swgc.mun.ca

You are being asked to take part in a research project entitled "Feeding: Troubling Breasts, Bottles, and the Mother-Child Dyad." This form is part of the process of informed consent. It is entirely up to you to decide if you want to participate in the study. Before you decide, it is essential that you understand what it is that you are agreeing to by participating. If you would like more detail about something mentioned here, or any information not included, please feel free to ask. If you choose not to participate, or if you choose to withdraw from the research once it has started, there will be no negative consequences for you either now or in the future.

The researcher will:

- Discuss the study with you and answer any questions
- Keep confidential any information which could identify you personally
- Be available to you during the study to answer any questions or concerns

Introduction:

I am conducting a study on infant/child feeding practices in Newfoundland and Labrador. This study is part of my requirement for the degree of Master of Women's Studies. It is independent of any government department and is being supervised by the Department of Women's Studies at Memorial University. The study will be a detailed investigation of i) how women see themselves, their bodies, and their mothering, ii) the degree to which

they experience any stigma associated with child feeding, iii) the physical/sensual associations women have with their breasts before and after becoming mothers, iv) the possibility of sensual and/or erotic elements related to breastfeeding, and v) the various types of meanings and management techniques mothers use to give positive meanings to their behavior and relationships with their bodies and their children's bodies. Your participation in this portion of the study will include a personal interview.

Purpose of study:

To better understand the interrelationship of feeding practices, the maternal body, the experience of maternity and motherhood, and the sensual and/or erotic elements of the mother-child dyad.

Description of the study procedures:

You are being asked to participate in an audio-taped interview. Your participation is free and voluntary. If you consent to participate, how much and what you want to say is up to you. If you do not wish to be audio taped, hand-written notes will be taken. You may refuse to answer any of the questions and are free to withdraw from the research project at any time. If you withdraw before the end of the research project, you have the choice of either allowing the researcher to keep all materials you have provided up to the departure date, or having everything destroyed. In the event that you should choose to have everything destroyed, you may decide whether you wish to keep your focus group participation intact, or if you wish to be selectively edited out of those transcripts as well.

Length of time:

The focus interview will take approximately 60 to 120 minutes, dependant on participant interest.

Possible Benefits:

It is not known whether this study will benefit you personally. However, your participation will allow for a better understanding of feeding practices and mothering in NL. This research may offer some useful insights to new mothers and other community personnel (i.e., health care personnel and government) when addressing the needs of mothers and young children. This study will address gaps in the literature on mothering in NL.

Possible Harms:

The sensual and/or erotic element of mothering is a sensitive topic. It may be difficult to discuss some of your experiences with breastfeeding or postpartum life in general. Either during the interview or after, you may have feelings of discomfort or anxiety as a result of our discussion. As a researcher, I am not qualified to provide guidance or advice, but there are some community resources that may be of use to you.

Mother-child intimacy is a contentious and often misunderstood issue. There is a 24-hour anonymous Mental Health Line that can be called (1-888-737-4668), but the person who answers the call may or may not be equipped to deal with any issues you may have surrounding maternity with sensitivity. While the Mental Health Line is an anonymous service, in cases where they feel a threat may be posed to you or others around you, they

may attempt to attain identifying information. There is some history in the United States of legal issues arising from contacting counseling services in reference to maternal sexuality, though to the best of my knowledge no such incident has occurred in Canada. Despite this, if you should feel that you do require support and are uncomfortable contacting the Mental Health Line, the St. John's Status of Women Council runs a Women's Centre in the city that may be of use to you, which can be reached at 1-709-753-0220. The Women's Centre offers peer support and guidance but does not have a counselor on-site.

Alternatively La Leche League Canada (<http://www.lllc.ca/chapter-group/st-johns>), offers mom-to-mom support.

Confidentiality:

The list of participants will be kept confidential and neither your name nor any identifying information (e.g. blonde-haired and blue-eyed woman with a British accent) will be used in any of the reports or publications produced from this study. Each interviewee will be assigned a pseudonym; the list linking these pseudonyms with participants' names will be stored in a separate location from the interview notes, transcripts and tapes. Access to the list, as well as audio tapes, will be limited to only the researcher. Once the information on the tapes has been typed up, they will be stored in a locked location for five years (in accordance with MUN policy), and then destroyed.

Anonymity:

Due to the way you were recruited, and the nature of your previous participation in the focus group, it is difficult for the researcher to guarantee complete anonymity. However, your decision to take part in the interviews will not be shared with anyone outside of my thesis supervisors and myself. Additionally, absolutely nothing said in the interviews will be attached to your name or likeness. You will be given the opportunity to review and edit any interview transcriptions before the writing of the thesis begins.

Questions:

You are welcome to ask questions at any time during your participation in this research. If you would like more information about this study, please contact:

Kira Petersson-Martin
Researcher
(c) 709-749-9079
(e) kpm805@mun.ca

Doreen Klassen, PhD
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(e) dklassen@swgc.mun.ca

Sonja Boon, PhD
Thesis Co-Supervisor
(t) 709-737-2551
(e) sboon@mun.ca

Appendix C

Focus Group Schedule

(Subject to changes during the discussion process. Print-outs of all articles were provided to participants at the beginning of the meeting, and outlined as we move through the session.)

Topic One: Kathryn Blundell

- Article: I formula-fed. So what?
 - Transcript here: <http://www.lactivist.net/?p=1155> (Accessed October 22nd, 2010)
- Potential discussion of the article's message, and various reactions to it.
 - Is the article's approach to breastfeeding valid? Why or why not?
 - Was the backlash deserved/fair? Why or why not?

Topic Two:

- Lynn Stuckey and Jacqueline Mercado
 - Outline of Stuckey case: <http://www.cbsnews.com/stories/2002/11/22/national/main530620.shtml> (Accessed October 22nd, 2010)
 - Outline of Mercado case: <http://www.dallasobserver.com/2003-04-17/news/1-hour-arrest/full> (Accessed October 22nd, 2010)
- Potential discussion of both cases:
 - Is eight too old to breastfeed? Why or why not?
 - Why did police consider photographs of breastfeeding sexual?
 - Should the legal system have been involved in either of these cases?

Topic Three:

- Denise Perrigo
 - Perrigo's story excerpted from *Mass Hysteria*, by Rebecca Kukla (Rowman and Littlefield Publishers Inc., 2005)
- Potential discussion of Perrigo's case:
 - Why was Perrigo's situation approached as it was?
 - Does Perrigo's experience affect perception of the earlier topics?

Topic Four:

- "Tran"
 - Anonymously authored and excerpted from Fiona Giles' *Fresh Milk* (Simon & Schuster, 2003).
- Potential discussion of both cases:
 - How do you feel about Tran's use conflation of sexuality with breastfeeding?
- What does our reaction to this story suggest about how sexuality and breastfeeding are related in the public sphere?

Appendix D

Interview Schedule

(subject to changes during the interview process)

All participants:

- Background (family, religion, family history of breastfeeding, and education)
- Family life (marital status, sexual orientation, other children, do they breast feed, why or why not)

Mothers who breastfeed:

- Why did they choose to breastfeed?
- How long have they breastfed and how long do they intend to do it, and why
- Do they enjoy breastfeeding, why or why not
- How would they describe the physical sensation of breastfeeding

Mothers who do not breastfeed:

- Why don't they breastfeed, and do they feel it was a positive choice for them
- How do they choose to feed their children
- How do they feel about breastfeeding in general (not just for themselves)
- Do they feel there is a connection between sexuality and breastfeeding

All participants:

- How breast feeding could have or has impacted their sex life
- Questions relating to breast and nipple sensitivity
- How they felt about their breasts prior to and after giving birth