Maternal Ambivalence: Revisioning Care as outcome of negotiating capitals and meanings

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In this paper I am arguing that the intersubjectivity between the woman as mother and the infant is a critical factor in the revisioning of care and that we need to provide for non-gendered caring routines so that alterity (or the state of being other) otherness might be preserved for both mother and baby and thus the potential for a renewed sense of the maternal self as well as the basis for an ethical subjectivity in the child.

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I am drawing from my PhD thesis and thus touching on a wide arena in this paper so as to foreground my position. I begin by highlighting findings from a field of research under the banner of Transition to Parenthood (or TtoP) that is said to begin in the pregnancy and go on into the first 18 months to 2 ½ years after the birth. The findings show-up tensions within individuals and within families between gender equity and care and I talk about this in terms of Dependency Theory as argued by Eva Kittay and Martha Fineman (that both the state and the market rely on a gendered family form for the care of dependents (infants, infirm aged and disabled)). I survey both gender equity and gender difference positions that call for an ethics, or a revisioning of care, and introduce work from within psychoanalysis that talks about ambivalence as an achievement that promotes reflexivity (or critical reflection on the self). I then bring attention to intersubjective dynamics between mother and infant, in light of the work of Jessica Benjamin (*Bonds of Love* and *Shadow of the Other*) and Lisa Baraitser (*Maternal Encounters*) focusing on tensions between recognition and negation. I understand that the survey is far too scanty, for anyone who is not familiar with the work, to make an informed response but I think it is important that groups such as ARM have a public presence, like Mother Outlaws in Canada, and that this includes a critique of the social location of care, along with new ways of thinking about what it means to be a mother in the contemporary context.

In my thesis I am arguing that dependency has been historically structured within a gendered family form and based on a misconception of autonomous individualism. And thus many new mothers grapple with issues related to identity as a consequence of a privatization of care, with assumed and gendered roles. Over recent years there have been efforts to reconceptualise care and I

talk about the work that women do as mothers in terms of negotiating capitals (economic, social and cultural) and rethinking meanings (mother, infant and family).

Over the course of the last decades we have lived through a gender revolution. The expectation for a life of one's own, that women often hold today, is a far cry from that of their mothers, or grandmothers, and yet their ability to carry-out these expectations, particularly after the birth of a child, depends very much on a multitude of factors. In 2004 an important multi-nation study carried out by the European Economic Union concluded that:

> A frequently recurring theme across the countries is the ways in which gender shapes parenthood and makes motherhood different from fatherhood both in everyday family life and in the workplace. The transition to parenthood appears to be a critical 'tipping point' on the road to gender equity.

A range of studies carried out in Switzerland, Finland, Sweden, the United Kingdom, the United States, and some work in Australia, generally under the banner of Transition to Parenthood (TtoP) have identified some commonalities from the experience of the early years of parenting and/or mothering. The indicators generally fall under five categories: changes to identity; changes to lif course; changes to relationships (including partner, friends, and family); more housework; and finding a line between self and baby.

An important impetus for the study of issues related to TtoP has been gender equity within the household but further to this, the most commonly referenced authors Cowan & Cowan stated that they were concerned to strengthen the couple relationship and support children. Herein is a key tension that underlies issues that surface in the early years after the birth of a child. The TtoP most often occurs within families and the couple relationship is central to the dynamics. Couples often negotiate issues related to equity and care within a social and economic system that has institutionally structured dependency within a gendered family form. This claim is exemplified by the male breadwinner form of wage-fixing that has given way to the independent worker model. The first is clearly relies on gendered roles and the second does not can accommodate the need for families to care for dependents. This is where the current gender revolution is taking place, within selves, within relationships, and in particular after the birth of the first child. Many of the gendered

consequences, are spoken of in the research in terms of structural, institutional influences, but further to this there is also am emphasis on identity; a clash between expectations and experience, 'a critical life stage' that is often experienced as overwhelming. The Australian sociologists Michael Bittman and Jocelyn Pixley described the disjuncture in *The Double Life of the Family* as an experience of 'cognitive dissonance' or Patrice Di Quinzic as *The Impossibility of Motherhood*. Barbara Pocock says that we are in the grip of a 'care crisis', while Anne Summers argues that we are living under a 'breeding creed' that has led to the 'end of equality'. Cultural expectations are outstripping the ability of the system to change, and consequently, there are high levels of maternal depression along with high levels of marital dissatisfaction after the birth of a child, and these tensions and dynamics are often dramatically played out through dispositions that are socially and culturally constructed.

The response has been for women to engage in a reappraisal of the meanings and practices associated with being a mother. This is reflected in the multitude of texts on the subject while at the same time there has been a reemergence of feminist interest in the family whereby, the authors are continuing to flesh out interactions between the 'so called' public and private arenas, an institutionalized divide that has bedeviled the field.

In the course of my PhD research I interviewed sixteen women who became first time mothers in contemporary Australia and I have mapped out their responses in terms of negotiating capitals (economic, social and cultural) and rethinking meanings (mother-infant and family) but for the purpose of today's paper I will only refer to an experience of ambivalence that was evident across the interviews. I am not saying that this ambivalence was in relation to their child (feelings about their child) but was a response to the social structuring of care, whereby there was often mixed feelings about the day-to-day functioning of the family after the birth. Across the board the women prioritized the needs, and interests, of their child before their own, with the most common response being, 'you need to become unselfish when you are a mother'. Many of the women saw this unselfishness as a good thing, a moral imperative, and it is this dynamic that I am concerned with today. A dynamic, identified in the TtoP research, and is related to finding a line between self and baby, that importantly overlaps with the psychoanalytic literature. Why is it that women need to take on, what is often seen as the most important of their life's work, within a culture that subsumes their sense of self? What are women doing when they are mothering? There are of course

significant social and cultural influences over every day caring routines that I won't go into today suffice to say that enmeshed within these factors there are critical intersubjective dynamics between the woman as mother and the infant. And, I ask, how and where does the associated practices intersect with values or morals based questions?

Many feminists who fall under the 'gender difference' position have long been concerned with ethics and much work has gone into fleshing out a basis for a woman-centered understanding of morality. Carol Gilligan, an important advocate in this regard, and Nel Nodding outlined the basis for a relational ethics that delineates between the 'one-caring' and the 'cared-for'. Sarah Ruddick, Virginia Held and Caroline Whitebeck are concerned with an ethics of care based on an understanding of maternal experience, and there are a range of feminist positions that are attempting to reconceptualize an ethical foundation to accommodate the needs, interests, and rights of women as a group; all of these approaches, women-centered, striving to validate women's different moral experience.

Within the field of psychoanalysis there have been continuing issues related to a conception of the symbolic whereby the phallus is representative of power; male threat (associated with the law) and female lack. Both Luce Irigaray and Julia Kristeva set out to challenge the paternal emphasis build into psychoanalysis by what they say is writing out the maternal, captured in the phrase 'white ink'; bringing to light the invisible, the unspoken. And the work by both Teresa Brennan and Drucilla Cornell locates psychic processes within the historical and cultural context, whereas an expectation of gender equity is fueling drives for change by equity feminists, such as Martha Fineman or Nancy Fraser. Care, that has been historically gendered, and associated with the feminine, is in the process of being reconceptualized as a social, rather than individual responsibility; a dynamic characterized by Kathryn Abrahams as 'the second coming of care'.

Feminist movements to detach gender from care recognize both the structured constraints and the potentialities that are an inherent part of these core (family) relationships. They form the historical and cultural context for the dynamics between women as mothers and their infants; movements that are testament to a collective recognition of a need for change. The issues, however, go deeper than more childcare and changes to workplace practices, though these are important. There are calls for substantial institutional change that is cogniscent of the central role of care to well-being. There are

calls for an 'ethics of care' to accompany the 'ethics of work' that has followed on from a recognition that the responsibilities have been privatized through the family. Trends towards commodification of care has served to entrench gender and class divides through feminized practices in the workplace as well as gendered caring routines in the home.

Katherine Silbaugh said that there is an overwhelming feminist concern about the gendered inequalities in the current care-work system and a recognition of what was gendered stratification in the family has become inequalities of class and race when care work has shifted to the market. And Nancy Fraser casts this post-breadwinner era, as a challenge, an opportunity for substantive change and talks about a 'universal carer model' of wage fixing. A dialogue between Martha Nussbaum and Amartya Sen in relation to capacities and a reworking of welfare economics is concerned with gender equity and the restructuring of care. This work is critical of contract theory and is building a theoretical framework for reconceptualizing capacities that contribute to wellbeing and human flourishing. Chris Beasley and Carol Bacchi argued for a decoupling of care from women (as evidenced in their emphasis on an ethics of care).

Both the gender equity and the gender difference feminists, are concerned to provide the conditions in which women can both articulate what being a mother means to them as well as promote the conditions for genuine choice. Both argue for fundamental change to the social structuring of care, whereby women can navigate the relations between themselves and their children in a context that facilitates freedom of expression while providing for their care. Proponents within gender difference feminism attribute a moral dimension to care, as with gender equity feminists, though the basis for their moral arguments are different, one individualized through the woman as mother, and the other collectivized and associated with a reconceptualization of welfare economics.

If care was to be disassociated from gender, women could potentially navigate interactions between themselves and their infants in new ways; their sense of self not so closely tied to their child. Thus providing the space for their offspring to attain the ontological security, spoken of in the literature from a secure base that includes non-gendered caring routines. The ties between women and their infants may remain foundational, but the moral association with care, would be clearly associated with the collective rather than the individual, and thus provide a basis for adherence to the social and the potential for greater cohesion.

Here-below I am drawing from work, from within the psychoanalytic discipline, by Rozsika Parker, Jessica Benjamin, Wendy Hollway, and Lisa Baraitser to argue that the intersubjectivity between mother and infant and the associated dynamics of recognition and negation precede the moral realm. When I am talking about morals here I am referring to a code of conduct that is authoritative in matters of right and wrong (Wikipedia).

The maternal experience provides the conditions for the capacity to care, as argued by Hollway however, within this particular historical context the experience of ambivalence and the potential reflexivity is an achievement, not related to the moral but facilitated by the social and cultural context. Therefore, the moral obligation, collective not individual, to provide the conditions that enhance genuine and ungendered choice of action; a reimagining of care can provide for the alterity of both the woman as mother and the infant.

Benjamin talks about the associated processes in terms of dynamics between analyst and patient, but goes on to theorist them in terms of the encounter between mother and infant. She brings attention to the resistant patient and the movement from passive to active, from silence to speech, citing 'self-reflection' "a process of internationalization that implies both tutelage and freedom from tutelage". She goes on to talk about the mother's body as something more than container and refers to the representation of the woman as mother which is linked to recognition. A mother-infant dynamic that does not provide for the recognition of the dual nature of encounters between woman as mother and infant can not provide the space for reflection, the ties solidified through the bond/or-not rather than the active-passive nature of recognition and negation as set out by Benjamin. This can be argued from the point of view of justice, equity and citizenship but what of the well-being of both mother and infant? There is ample recognition of the significance of the early caring routines for the ontological security of the child. The emotional and psychological well-being of the infant is a concern that has led to a range of birthing and child rearing practices and the blossoming of midwifery and parenting programs across the western world. But, how does the mother preserve a sense of self in the face of an overwhelming emphasis on the infant, and possibly a desire to be everything to the child? The reification of the relationship between the woman and her infant which is represented through the abstract concept of the mother, in many ways disenfranchises women. Maternal subjectivity: the traditional meanings and life course

associations often places a barrier between necessary subject-to-subject dynamics between the mother and infant, the free flow of interchange that can accompany engaged and developing subjectivities.

Lisa Baraitser brings attention to the maternal process of holding the subject of the child in the face of their attacks on the mother, as subject, and contrasts Butlers thinking on Hegal and encounters with alterity – processes of recognition and destruction. Recognition and negation, both equally important, and her propositions regarding destruction, alterity, and otherness, thus provide a basis for bringing into existence the ethical other. This is a more convincing argument for an emergent ethical base than the naturalized association between women as mothers and morals. Baraitser talks about the emergence of maternal subjectivity as an achievement, mother-infant/child interactions provide the conditions for the emergence of subjectivity, though the result is not foregone, it depends on the emergence of something different. This process of standing outside of the role of the woman as mother provides for reflection on the self and thus enables freedom of action (a context that is not forced as with the social structuring of dependency) the intersubjectivity between woman as mother and infant provides the conditions for renewal, for creativity.

The social structuring of dependency is clearly being reviewed as evidenced through tensions between work and family. There is talk of a 'care crisis' and there are continuing difficulties in achieving a form of gender equity in the workplace, the current system can not accommodate the competing demands, and there is need for a change. I am saying that nature does not provide women with a unique moral capacity for care because they give birth and the work by both Benjamin and Baraitser provides a framework for understanding critical and relevant intersubjective dynamics between mother and infant that can promote a basis for the development of an ethical subjectivity in the child, while at the same time, provide for the alterity of the woman as mother. The social structuring of dependency has been entrenched through a gendered family form throughout the twentieth century, therefore we need to reconceptualize how, as a society, we can provide for the care of dependents and promote capacities that foster well-being rather than continue to reproduce gendered constraint and ARM or a local Mother Outlaw group could foster a critical discourse in this regard.