

**How are women affected by the transition to motherhood and what is the role of social media engagement to assist in the transition to motherhood?**

By

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This paper is for all mothers and for the mothers my girls may become one day.

**Table of Contents**

- I. Acknowledgements.....2
- II. Abstract.....6
- III. Introduction.....1
- IV. Research Question and Objectives.....1
- V. Literature Review.....2
  - A. Transition to Motherhood.....2
  - B. Defining Identity.....3
  - C. Theoretical Framework .....7
    - i. Symbolic Interactionism.....8
    - ii. Becoming a Mother (BAM).....9
      - 1. Community.....12
      - 2. Grief.....13
      - 3. Societal Romantization.....16
      - 4. Loss of Control.....17
  - D. Social Media.....19
    - i. Definition of Terms.....19
      - 1. Social Media.....19
      - 2. Social Networking Sites.....19
      - 3. Facebook.....19
      - 4. Instagram.....20
    - ii. Social Media Community.....20
    - iii. Accessibility.....23
    - iv. Support.....23
    - v. Confidence.....25
    - vi. Knowledge.....26
  - E. The Role of Social Media in Mother’s Identity Transition.....28
  - F. Acceptance of Transition.....29

G. Autoethnography.....	29
VI. Methodology.....	31
A. Research Design.....	37
B. Questions that will be considered during the evaluation process.....	38
C. Ethics Considerations and Approval.....	38
D. Analysis.....	38
E. Data Collection.....	39
VII. Autoethnography of Melissa Myskiw: A Mother’s Voice.....	39
A. Stage 1.....	40
i. Commitment.....	41
1. Hope.....	41
2. Stage 1 Going on 15 months.....	43
3. Paige.....	46
4. Bree.....	47
ii. Attachment.....	50
iii. You.....	52
iv. Old Haunts.....	52
B. Stage 2.....	53
i. Learning.....	55
ii. Acquaintance.....	57
iii. Loneliness.....	60
iv. Sacrifice.....	61
v. Fears.....	65
vi. Unsolicited Counsel.....	66
C. Stage 3.....	66
i. Black hole and the beginning of Stage 1...Again.....	68
ii. Sheer Exhaustion.....	71
iii. The Need.....	74
iv. The Storm.....	75

D. Stage 4.....	75
i. The outside commentary of <i>MY</i> life.....	77
ii. Societal Dismissiveness.....	80
iii. Media Dismissiveness.....	82
iv. Medical Mystery.....	84
v. Support.....	85
VIII. Epilogue.....	87
IX. References.....	91

**How are women affected by the transition to motherhood and what is the role of social media engagement to assist in the transition to motherhood?**

**II. Abstract**

Women's lives change significantly when they have their first child. Women generally leave work and friendship communities (both physical and virtual) with which they have been involved for some time, and they may be looking for a new community where other new mothers experience the same life transition. This shift can prove to be challenging and feelings of "disconnect" can occur. This paper will examine the relationship between the transition to motherhood and the association between social media platform engagement, positive feelings and the development of community for new mothers. The research will examine how mothers come together to find shared meaning in their new role. Taking an autoethnographic approach, I will share my experience of motherhood in juxtaposition to the academic literature on the four distinct stages of the transition to motherhood: the transition from a professional to a mother. Furthermore, I will explore the implications of loss, loneliness, societal romantizing, transition, identity, the need for community and how these factors are common in both the literature researched and the author's perspective. Finally, I will describe the role of social media in this transition. Future research would involve interviews or focus groups of mothers of children of a certain age to see how their transition to motherhood compared this research and if and/or which social media platforms were engaged to create new or enhance relationships and communities.

### **III. Introduction**

Women's lives naturally change with the birth of their first child. For some women, their lives are radically changed and for others the transition into motherhood comes more easily. During this transition, women may experience feelings of joy, excitement, loneliness and frustration. As women move through this transition, they may seek out and participate in new communities. The goal of this research is to examine the research on women and how they are transitioning into motherhood. What are women experiencing and how are their communities and identities affected by the transition? A review of Becoming a Mother (BAM) theory will be explained in order to achieve an academic reference and thorough understanding of transition to motherhood. The following research presents an autoethnography (or personal account) of the researcher's last five years, when she became a mother of three children within three years. The objective of an autoethnographic method is to compare my experience with the research and examine the parallels or differences of the research and the actual experience. Finally, the research will examine how mothers are using social media to assist with the transition, in particular, how women are using Facebook and Instagram to connect with others who may be going through the same transition or to connect with others and build new networks and communities.

### **IV. Research Question and Objectives**

How are women affected by the transition to motherhood and what is the role of social media engagement to assist in the transition to motherhood?

1. To explore the identity transitions during women's experience of becoming a mother
2. To explore the use and impacts of social media, in particular, Facebook and Instagram, during the transition to motherhood

## V. Literature Review

### A. Transition to Motherhood

The transition to becoming a mother presents a woman with unique and new experiences. This transition is a time of change and learning that may occur at different times and in different ways for women. Women begin to cope and to understand their new status by completing research, speaking with mothers, and spending time with babies and children; however, until a woman becomes a mother, the true experience of motherhood cannot be understood. The experience may begin with pregnancy, adoption or surrogate. Nevertheless, the result is the same: when the baby arrives, the woman has now become a mother. Becoming a mother involves a transition into a new life, identity and very often into several new communities. The experiences during transition may vary between being wonderful, exhilarating, exhausting and demanding. Transition is defined as “A passing or passage from one condition, action, or (rarely) place, to another; change” (Oxford English Dictionary [OED], 2016).

The transition to motherhood may begin for a woman when she finds out she is pregnant or it may occur once the baby has arrived, and as a mother’s family grows she will experience ongoing changes that will affect her transition to motherhood. Ultimately her experiences during the transition to motherhood will affect her identity. Research indicates that as a woman transitions, three significant areas in their lives are affected: 1) her self-image and (how others see her and how she sees herself): 2) her identity and 3) her community (Bailey 1999; Barclay and Lloyd 1996; Darvill, Skirton, & Farrand 2010; Haynes 2008; Ladge, Clair and Greenberg 2012; Weaver & Ussher 1997; Wilkins 2006).

Several factors impact the transition to motherhood. These factors often depend on the mother’s support systems, her current communities, the communities she develops, the accessibility of her

supports, how challenging her child may be, how she identifies herself and how she accepts her new role. If she has supportive friends and family she can turn to these individuals for help. The more support she has, the smoother the transition will be resulting in “better maternal health, relationship satisfaction, child outcomes and parent-child interactions” (McDaniel, Coyne & Holmes, 2011, p. 1509). In addition, a new mother may need to seek out new communities where she feels safe to discuss her transition to motherhood, often women are looking to online resources for this community (McDaniel et al 2011).

## **B. Defining Identity**

Identity is rooted in the Latin word *idem* and that term means: the same (Oxford English Dictionary 2016). However, research about identity consistently refers to the idea that an individual’s identity is continually changing as different situations and a variety of people are encountered in our lives (Ibarra 1992 as cited in Ladge et al, 2012; Craib 1998 as cited in Haynes, 2008; Haynes 2008). These experiences usually affect one’s identity in positive or negative ways and, similarly with the arrival of different children, a mother’s identity continues to adjust and change to her growing family. As a result, a mother’s identity changes and alters to the new experiences in her life. Depending on the support she may have in her communities or accessibility to find help or assistance when needed, a new mother’s identity may adjust in a positive or negative way.

The transformation of a woman’s identity contradicts the idea of the root term of identity being or remaining “the same”. Other researchers have defined identity transition as “the process of disengaging from a central, behaviorally anchored identity while exploring new possible selves, and eventually integrating an alternative identity” (Ibarra 1992 as cited in Ladge et. al, 2012 p. 1451). Transition to motherhood requires that women alter and incorporate new roles and

responsibilities and a new conception of one's self and identity must be acquired. Craib (1998) suggests "identity is distinguished from role (in this case mother) by the assumption that identity is an internal biographical continuity into which different aspects of identity such as role and performance may struggle and conflict but all refer to the story of a single individual within which there is a 'dialectic unity and diversity'" (Craib 1998 as cited in Haynes, 2008, p. 624). In other words, identity is made up of the role of motherhood particularly, how this may look to the individual and the individual's performance and, how the role of motherhood is portrayed. When the role of motherhood is unknown there is difficulty in understanding expectations of the new role of motherhood and her performance or actions. If a mother perceives her performance from others (her baby, husband, mother in law, communities) as positive or negative her identity may be affected in a positive or negative way as well. This reaction from others may affect a mother's identity as she contemplates her known self and the changes that are occurring. As she continues to establish her emerging role, experiences with current communities, and her confidence in her new role may result in a smooth, quick transition. On the other hand, she may struggle, looking for answers, a new community, blaming herself for her child's unhappiness, resenting her husband for his lack of experience or be engulfed in feelings of loneliness and confusion in her inexperience of the new role, ultimately affecting her identity in a negative way.

Haynes (2008) describes identity as being established by a societal influence on an individual and how they receive and understand experiences in life. The feelings that the person experiences from an event begin to affect and ultimately mold the individual's identity. As people establish, leave or reach out to various relationships, the reactions from these encounters further develop a person's identity; "identity emerges from within the relationships between self and society" (Haynes 2008).

Many women's identity and physical appearance are affected as Bailey (1999) explains in *Refracted Selves*. Some women felt 'fulfilled' and that they were achieving a selfless act carrying a baby and in doing this they were increasing their value as a person (Bailey 1999). Some mothers reported they felt that their pregnancy displayed "sexuality and fertility" (Bailey, 1999, p. 340), and some felt as though "their bodies felt 'invaded', both by these other people and by the baby inside them" (Bailey, 1999, p. 340). Many women reported feeling that their needs were secondary to the baby (Darville et al 2010). As a mother begins to see herself as secondary, her identity changes making her child the primary focus. Consequently, her identity begins the transition into motherhood. Wilkens (2006) argues that many women feel the pressure to "'do it right' for the well-being of the baby and also for their own self-esteem in order to appear competent in front of others" (Wilkens, 2006, p. 173). However, what many women were not prepared for was the actual shift in their identity once the baby arrived. Some women felt the "sheer volume and detail of information they were expected to absorb... could evoke feelings of panic and helplessness" (Wilkins, 2006, p. 175) and many felt that 'the reality of motherhood was very different from what they had anticipated, and (motherhood) came as quite a shock to all, compounding their feelings of inadequacy" (Wilkins, 2006, p. 173) and some "felt inadequate as mothers when they were unable to recognise their baby's needs" (Wilkens, 2006, p. 173). For many women, their professional lives provide guidance from mentors, manuals and feedback encouraging them and enabling them to feel confident about their profession. When a woman becomes a mother, access to similarly solid and reliable resources is rarely available. Women can ask other mothers, their mother, review manuals; however, every child is different and each mother is required to engage in her own unique learning process and techniques. Little feedback is available other than a content or a crying baby. When dealing with a baby, love, trial and error, and

support replace all other resources. Wilkens (2006) reports that mothers were seeking “the acquisition of new skills, supported by advice and reassurance that they were ‘doing it right’ were essential to the emotional well-being of the novice mothers in the early days” (Wilkens, 2006, p. 174). This core change may shake her beliefs of her previous identities. Her professional identity may have included recognition as a leader in a particular position, she may have been a resource to other individuals and a specialist in her area. Becoming a mother requires her to take on a new role of which she has no previous experience and she may not have resources to draw upon with as she may have had in her professional life. This can be discouraging, humbling and downright difficult. Overall though, Darville et al’s (2010) research suggests that there is “evidence that the transitional process had an impact on the self-concept of the women” (Darville et al, 2010, p. 364). In addition, over time, mothers became more comfortable in their role and were able to find resources and possibly new communities to feel safe and supported, “they began to reconcile their new roles as mothers with their former lives by developing and integrating new routines” (Wilkins, 2006, p. 176). Women found that it was essential to be in a particular period of their life that incorporated age and roots within the community. Having these in place, it was appropriate to decide to have a baby (Bailey, 1999) and becoming a mother was the next step to be taken in life to show growth and experience (Weaver and Ussher, 1997).

A woman’s identity is determined “in the interactions between mothers as they negotiate and articulate profound shifts in their sense of self” and “the self-identification and articulation of one’s position relative to the group (i.e., as a member, as marginal, as a non-member) are also central to identity- building for women” (Nelson, 2009, p. 15). She takes these perceptions and applies them to her core beliefs of her self-image and what she thinks of herself. Her identity, then, is the culmination of others’ reactions to her, how those reactions impact her identity, and,

ultimately, how other reactions and her identity shape core beliefs about herself. Others' reactions are received and interpreted positively or negatively, incorporate into her self-image, and ultimately affect her identity in a positive or negative way. She may have identified herself as a professional, a wife, a sister or daughter.

Overall, women experience significant developmental changes when becoming a mother. For some this transition begins with pregnancy, and for others when the baby arrives. The transition affects their identity and many aspects of the new mother's life are affected as well such as their body, the communities and their livelihood. As the transition to motherhood continues, women may feel "incompetence and self doubt" (Wilkins, 2006, p.172), "panic and helplessness" (Wilkins, 2006, p. 175), "isolated" (Bailey, 1999, p.345) and "vulnerable" (Bailey, 1999, p. 348), "anger and resentment" (Barclay, Everitt, Rogan, Schmied and Wyllie, 1996, p. 137). These feelings may co-exist with feelings of elation, excitement and joy. All of these experiences will affect a new her identity and her transition into her new role.

### **C. Theoretical Framework**

Many theories have been developed about the transition to motherhood. In one study, Van Gennep (1960) indicates that the experiences of a woman can be described in three stages as they become a mother: "separation; liminality and integration" (Van Gennep 1960 as cited in Ladge et al, 2012, p. 1451). Van Gennep further describes: separation is when a woman begins to see herself as different from others in her social circles as she saw herself before the baby and she begins to separate or detach herself from social roles with which she may have identified. In the second phase, as her role of a mother emerges and her professional identity shifts she begins to move into her new role. In the integration phase, as a professional and a mother, she begins to accept both roles, attempts to find a way to have both represented and assimilate these roles into her identity

(Van Gennep 1960 as cited in Ladge et al, 2012). Van Gennep's (1960) theory establishes how mothers maneuver through various phases when becoming a mother and how a mother's social circles are affected by this transition. His theory in conjunction with symbolic interactionism establish how Mercer's (2004) theory *Becoming a Mother* is most relevant for today's mother.

### **i. Symbolic Interactionism**

Theorist Herbert Mead suggests individuals experience situations in various ways, however an individual's experiences continually affect their identity. As individuals socialize, communicate and interact with others, they interpret and reinterpret what these interactions and experiences indicate about themselves and their identity. The interpretation may be positive or negative but ultimately each experience will impact the way in which the individual's identity is affected (Boylorn & Orbe 2014). Sociologist Mead researched and developed a theory called symbolic interactionism, which focuses on how an individual, specifically how mothers develop, engage and find value within experiences that occur throughout their life (Craig & Mueller 2007). Mead describes the three steps of how an experience affects one's identity as a social act. The social act occurs when an individual acts and another person responds. The act of the first individual and the reaction of the second individual lead to an outcome (Littlejohn & Foss 2011). From this experience of action and reaction, each individual determines whether the outcome was positive or negative and ultimately affects their identity formation. For example if one person acts by waving to another person and the other person reacts by returning the wave or ignoring the first person's action a positive or negative outcome will occur.

If a mother asks for advice and is praised for her vulnerability in asking and given confidence that she will do the healthy choice for her child, she will like react positively and therefore she will

gain confidence. On the other hand if she is laughed at and dismissed, she may begin to question herself and her mothering skills.

Symbolic interactionism describes the dynamic processes that shapes our identities and how each action and reaction develop differently in each mother depending on the communities she has built. The following questions demonstrate the importance of communities in the development of a new mother: do the communities generate feelings of support?; does a mother find support from other mothers and how does she respond to the acts and reactions of the communities and gain sense of support? In summary and most importantly, how do her interactions with her communities affect feelings about herself? Each mother's choices will be different and will depend on how much her communities lend support to her at this time of identity transformation.

Some mothers are using online social media sources to test the waters of other mother's experiences in the transition to motherhood. Reactions from others online, may bring her confidence or may make her feel threatened or inadequate. A positive example of this is through the use of blogging (McDaniel et al 2011), websites (Madge and O'Connor 2006), and online support groups (Hall and Irvine 2009). Mothers are able to use these online sources to engage at a comfort level they feel secure with. Social media offers the option for mothers to read, engage, learn or help with strategies of motherhood, transition of identity, feelings of inadequacy, feelings of loneliness or changes to current communities (Hall & Irvine 2009; Madge & O'Connor 2006 and McDaniel et al 2011).

## **ii.        Becoming A Mother (BAM)**

The Becoming a Mother (BAM) theory, developed by Ramona Mercer (2004) proves further, elaboration of Reva Rubin's original theory of Maternal Role Attainment (MRA). Rubin's (1984)

research and theory of Maternal Role Attainment provides an important underpinning to subsequent research efforts that clarify constructs related to the development of maternal self-image. The MRA theory was established in the late 1960's and suggests "An ideal image of self as mother is constructed from her extensive psychosocial work during pregnancy and postpartum, and through this image the maternal identity is incorporated into her self-system" (Mercer, 2004, p 226). MRA suggests women pass through several stages, particularly affecting their identity, as they become a mother: "mimicry, role play, fantasy, introjection-projection-rejection and identity" (Mercer, 2004, p. 226) Rubin believes mothers enter each of these stages, starting at conception, researching motherhood and babies, searching for a mentor and daydreaming scenarios of motherhood. As she grows, literally with child inside her and as a mother once the child has been born, the mother looks for feedback from others, observes actions of others, and decides if these actions are appropriate to her idea of motherhood (Mercer 2004). As a mother engages in these stages, her identity forms. "Rubin defined maternal identity as the end point in maternal role-taking, with a woman having a sense of being in her role, along with a sense of comfort about her past and future" (Mercer, 2004, p. 227).

Mercer (2004), Rubin's pupil, expanded the theory of MRA research by studying and reporting observations of a group of women in their first year of motherhood. Mercer found, consistent with MRA philosophy, that mothers maternal identity was now "characterized by the mother's sense of harmony, confidence, satisfaction in the maternal role, and attachment to her infant" (p. 227).

Mercer suggests several factors affected MRA such as "maternal age, socioeconomic status, perception of the birth experience, early mother-infant separation, social stress, social support, personality traits, self-concept, child-rearing attitudes, perception of the infant, role strain, and health status" (Mercer, 2004, p 227).

After Mercer elaborates MRA theory she presents Becoming a Mother (BAM) theory which is similar to other existing stage theories. As discussed, several researchers, such as Van Gennepe (Van Gennepe, 1960 as cited in Ladge et al, 2012) and Rubin (1984), subscribe to the idea of stages of identity development. Mercer broadens her stages which are similar in substance to the theories of Van Gennepe and Rubin, although it must be noted that, each researcher presents their individual findings and interpretations. Mercer (2004) describes four stages that affect a mother's identity. She suggests these changes begin in pregnancy and end around four months postpartum:

The four stages:

1. "Commitment, attachment, and preparation (pregnancy)
2. Acquaintance, learning, and physical restoration (first 2 weeks following birth)
3. Moving toward a new normal (2 weeks to 4 months)
4. Achievement of the maternal identity (around 4 months)" (Mercer, 2004, p 231)

Mercer argues that the timeline is not concrete and may be dependent on several factors.

Socioenvironmental situations play a major role in how these stages form and evolve. Other factors include the mother's familiarity with her baby's needs, her own physical changes and recovery, adaptation to her changed immediate family and her role in this family and to the child and her husband (Mercer 2004), all of which affect her continually adapting identity.

The review of literature and research such as MRA theory, supports the relevancy of BAM and the affected factors as logical and defensible variables that may explain how this transition affects a woman's identity. A consideration of Mercer's BAM theory and Mead's Symbolic interactionism theory together with the previous research, makes it apparent that the following four factors build

upon a mother's transition into motherhood and help to explain how her identity is established. The four factors are; community, grief, societal romantization and loss of control.

### **1. Community**

One of the dominant and emergent factors throughout the literature about identity is the important role of community in determining identity formation. Several themes emerge in the research on the formation of mother's identity. A primary theme is that individuals tend to be members of several distinct and overlapping communities. Other themes include the influences of a child on how relationships develop, how a new mother's identity transforms, and how the quality of support within a mother's communities can affect her identity in a positive or negative way. Barclay and Lloyd (1996) believe that the use of community and other support resources will not only help the mother, in terms of giving her confidence, social support and camaraderie, but they also believe that as the mother gains confidence she will, as a consequence, be a benefit to society (Barclay & Lloyd 1996). "Given the changes and challenges brought on by motherhood, social support for mothers is vital. Social support can come from spouses, family, the medical community, and any number of other individuals in the lives of mothers. One particularly important source of social support, however, comes from other mothers." (Valtchanov, Parry, Glover, & Mulcahy, 2014, p.190) This appears to be particularly evident when new mothers have access to and use social media.

Social network sites such as Facebook and Instagram provide opportunities for mothers to receive support, to feel empowered and find a sense of support through connections that are relatively easy to establish through social networking. (McDaniel et al. 2012). These new online communities provide opportunities for mothers to have a safe place to find advice, knowledge and support in a non-judgmental atmosphere, behind the screen, and allows mothers to test out aspects of their

changing identities (Madge and O'Connor 2006). Accessibility to social media has significant benefits for a new mother and their community as well. "The internet, then, was significant for the women in creating a safe space in which to try out their identity as new mothers" (Madge & O'Connor 2006, p. 210). Hall and Irvine (2009) demonstrate how mothers find community and support through an online group where participants emailed one another during their transition. These authors discuss how email chains provide mother's emotional support and advice, and information and various tactics used by mothers to cope with their experiences. In this way, mothers were able to discover a community and then build up a group of supportive mothers to contact and share in a non-judgemental atmosphere (Hall & Irvine 2009). Overall, communities play a significant role in molding a mother's identity and the use of social media has been demonstrated to as a means to assist her to move in more supportive and empowering directions. Studies conducted by McDaniel et al (2011), Tucker (2010) and Weaver and Ussher (1997) and Wilkins (2006) describe topics discussed by mothers. These include common feelings of loneliness, loss of self, need for a mother's own time, blissful or romanticized aspects of motherhood encouraged by society, self-sacrifice and a sense of loss and grief in the shift of a mother's. All of these feelings may lead to feelings of grief at the loss of the previous life the mother knew, the self she knew and the stress and anxiety over pressures to find and establish a new identity.

## **2. Grief**

As a mother begins to struggle with the loss of her old self and learns to accept the responsibility of caring for a helpless baby, she may begin to have feelings of grief and frustration. Rossi suggests with her priorities changing to focus on the baby, priorities for the mother must adjust because "needs of the baby for mothering are *absolute*, while the needs of the woman to mother

are *relative*” (Rossi, as cited from Barclay and Lloyd, 1996, p. 137). This relativity involves a mother’s feelings of grief over the loss of aspects of her identity that may be disappearing in her new role. The new mother is involved in “a transition (that) requires restructuring goals, behaviours and responsibilities to achieve a new conception of self” (Mercer, 2004, p. 226). Nearly all areas of her life will begin to incorporate a new role of motherhood. Barclay and Lloyd suggest that “first, the mother must deal with the needs of the baby and her entry into developing a role as a mother. Other processes involve shedding parts of her former self which includes; relationships, roles and activities which are incompatible with her role as mother. Feelings of loss may be experienced in these area as the woman undergoes the transition” (Barclay and Lloyd, 1996, p. 137). For example, as a woman leaves her work identity for maternity leave and assumes the new role of mother, she will begin the process of adapting a part of her identity. “[L]ife-altering change in an individual’s non-work self often instigates a need to reorient her work identity” (Ladge et al, 2012, p. 1450). Losing of this prior identity and everything she felt she knew and then beginning a life of unknown and unfamiliar is difficult, lonely, frustrating and full of grief. A loss of self and a preoccupation with the child occurs and these, affect her identity and her need to work through the grief for this loss of self and new responsibility for the child. These feelings hasten the transition of the mother's identity. Various “strategies include recognizing the permanency of the required change, seeking information for construction of a new self-definition, seeking models for a new normalizing and competency testing of self in the new role” (Mercer, 2004, p. 226). Rubin (1984) describes this outcome as “releasing of former historical self-concepts” (p. 48). A mother needs to grieve the loss of her former life that is, what she knew about how to act, her daily schedule, friends and family she may have been close to before the baby arrived and now begin to look for other areas of support to help with her transition. With the help of different supports and beginning

the process of accepting her new role and experiences she will begin to let go of her idea of what life was going to be as a mother, the memories of how her life was before motherhood, and she will begin to focus on the transition into her new role and her emerging identity. For a new mother, “There is a review of a past stage of the life stream, a recognition that this aspect in life space is irreversibly finished” (Rubin, 1984, p.48). The difficulty of letting go of different aspects of her identity can cause an overwhelming sense of grief of the life to which she was expecting to return. But a new mother faces a new challenge in that “the expectation is that many of the activities of self in a world will be resumed after childbirth, another fantasy of how it will be. When these activities are not resumed, as they are not for several months after delivery, these is identity diffusion” (Rubin, 1984, p. 48) A mother’s concept of her identity begins to adjust as she takes on new roles and responsibilities related to her child, enabling her maternal identity to further develop. Some mothers believe that a connection between herself and the baby will be immediate and when this does not occur or she feels the child does not accept her, she may grieve over the anticipation of acceptance by the child. Perceived rejection by the child can negatively affect the new mother’s identity. This may occur when the baby seems to be happier with another caregiver, such as her husband, or the baby may be fussing during activities with the mother. In comparison, the baby may seem to be content with others during the same types of activities (Rubin 1984). For example if the baby has colic, won’t latch or sleep, a mother may interpret these symptoms as failures of her mother technique rather than a trait of the baby. Feelings of grief and frustration regarding the baby’s attachment may begin to form.

In their grief, and in order to claim back some of themselves, mothers are reserving the right to have time for themselves. In order to ‘find themselves again,’ “mothers expressed a sense of entitlement to child-free time to relax, to pursue their own interests and frequently sought and gave

advice on how to get it” (Tucker, 2010, p. 300). Tucker also argues that the pursuit of personal interests is an attempt to gain some of her identity back; “mothers’ claim to identity and the quest for ‘me time’” (Tucker, 2010, p. 301). Losing aspects of their previous professional selves, the disappointment of not attaching to the child or vice versa, the sense that the woman has no time to herself or the ability to claim time to herself, and the feelings of inexperience, loneliness and exhaustion all lead to feelings of grief over a previous identity.

### **3. Societal Romantization**

The third experience when transitioning to motherhood is living up to the socialized idea of what their actions, thoughts and care for their child are expected and chosen to resemble (Tucker 2010). This may be a result of idealized thoughts throughout their own upbringing or from society's perceptions and discussion about motherhood. Tucker’s (2010) and Mitchell and Green’s (2002) research describes how many mothers felt that the idea of motherhood has been romanticized by media, literature and peers and that if mothers do not identify with this social idea then they are failures (Tucker 2010) and (Mitchell and Green 2002). Bernard described how the movement began in the 1970’s where mothers began expressing the frustration with the perception of “gendering care, the ideal of selfless motherhood, and the myths of maternal instinct, maternal bliss and maternal omnipotence” (Bernard as cited in Tucker, 2010, p. 294-295). In response to this idealistic belief of mothers’ natural disposition for motherhood, responsibility as the primary caregiver and romanticized perspective of motherhood, mothers have turned to the use of social media to create a dialogue with other mothers and to share their experiences of motherhood (whether or positive or negative) in order to break the stigma related to motherhood Tucker (2010). “The anticipated regards of parenting are not always evident in the first weeks: crying, wakefulness and refusing to be comforted replace the images of contented bundle” (Oakley as

cited in Barclay & Lloyd, 1994, p. 137). Oakley also suggests, “The anticipated attachment to the baby, of being *in love* with it is slow to develop (Oakley as cited in Barclay & Lloyd, 1994, p. 137), and can be accompanied by confused feelings which include anger or resentment.” (Barclay & Lloyd, 1994, p. 137). As a new mother, the conflict between what has been represented as motherhood in society and what she may expect because of these societal representations may differentiate from her own motherhood experience. This societal juxtaposition can cause confusion and be multiplied by the attempt to establish her new role as a mother to the child which can lead to self-doubt and prolonged despair. Weaver and Ussher (1997) suggest there is evidence to support the existence of an idealized and romanticized perception of motherhood particularly when nearly all subjects in their research reported “motherhood almost always being found to fall short” (Weaver and Ussher, 1997, p. 6). In addition, these researchers found that “[w]omen had been influenced by an idealized societal image of motherhood from the ‘myth of motherhood’ theme, which was centered on the gap between these images and the reality after the baby was born” (Weaver and Ussher, 1997, p. 6). “The myth consists of highly positive images about motherhood, many of these women described disillusionment, and consequently most of their discourse around this theme was negative” (Weaver and Ussher, 1997, p. 7).

#### **4. Loss of Control**

The fourth aspect mothers experience during transition is a loss of control over their lives. This applies to their identity as well as their bodies and communities. Women’s bodies change to accommodate the baby; they have little control over what happens to their body and any medical complications that may occur with the pregnancy. As this shift in the body begins, their self-image begins to alter. As discussed above, their identity incorporates a new life. Finally, the transition evokes feelings “of being out of control of their bodies” (Darvill et al., 2010, p. 361), “mothers

were not in control of their lives; all was dictated by the needs of the infant” (p. 361). As the pregnancy moves forward and the baby is delivered, the intense feelings of overwhelming and uncontrollable transformation intensify. “Women felt that they had lost some control over their lives in the early stages of pregnancy and after the childbirth” (p. 357). The shock of this shift led some women to seek out new support systems and new communities to cope with the feelings that were occurring. “The support of the partner during labour and childbirth seemed to be of paramount importance (p. 362) and “women in this study sought out the friendship of other pregnant or new mothers” (p. 363). Many researchers suggest social supports and a sense of community from family, friends, new baby groups and social media support can be a way for mothers to gain confidence and establish a sense of control again (Bailey 1999; Darvill et al. 2010; Wilkins 2006).

In summary, researchers have found that women’s identities are affected by the transition to motherhood. Many mothers experience feelings of grief for the loss of the life they had, analyze society’s romanticized belief of motherhood and eventually learn to transition into their new role. Finding communities where mothers feel comfortable and supported assists with acceptance of this new role. As a consequence of these experiences and feelings, a new mother adapts to her experiences and her identity transitions to meet her new realities.

Research suggests that mothers use social media to search for a community that can assist them with the transition. Establishing a supportive, safe community through social media can help overcome feelings of frustration, grief and loss of control that are experienced in the transition of identity. Social media allows for the building of community in an accessible that may and offer support, bolster confidence and enhance knowledge.

## **D. Social Media**

Mothers search for community and social support on social media has increased dramatically over the last five years. Women who are online users are using it 12% more in 2015 than in 2010 (Anderson, 2015). The use of Facebook (77%) is by far the most used social networking site, followed by Instagram (31%) and Pinterest (44%) for women (Anderson, 2015). The use of social media has “transformed communication, relationships, and community. They support rapid-fire exchanges among individuals...Social media such as Facebook...may be as important as the physical neighbourhood or workplace in providing frequent contact and information about others” (Rainie and Wellman, 2012, p. 145). These new neighbourhoods are offering community, accessibility, support, confidence and knowledge to mothers.

### **i. Definition of Terms**

Before presenting the benefits of social media to a new mother, it is important to clarify the terms used in this study. For the purposes of this research, the following terms are clarified for the benefit of the reader:

1. Social Media- “refers to the wide range of internet-based and mobile services that allow users to participate in online exchanges, contribute user-created content, or join online communities” (Dewing, 2010, p. 1).
2. Social Networking sites- “These have been defines as “web-based services that allow individuals to (1) construct a public or semi-public profile within a bounded system, (2) articulate a list of other users with whom they share a connection, and (3) view and traverse their list of connections and those made by others within the system.” Among the most popular in Canada are Facebook (as cited in Dewing, 2010, p. 1)
3. Facebook-“Facebook is a website and app that connects more than a billion people throughout the world. It’s great for sharing pictures, life events, games, news” (Kirchhoff, 2014, p. 43)

4. Instagram – “is a way to share your life with friends through a series of pictures. Snap a photo with your mobile phone, then chose a filter to transform the image into a memory to keep around forever. We’re building Instagram to allow you to experience moments in your friends’ lives through pictures as they happen. We imagine a world more connected through photos” (Instagram, 2016).

## **ii. Social Media Community**

Four key aspects of social media have caused an increase in the use of social media for mothers looking for community. While definitions provide clarity as to the what, where and how of social media, they do not provide explanations of the motives, impacts, or effectiveness of social media regarding an individual making a community. For example, definitions alone cannot explain how a blog post from a new mother can provide encouragement, how the accessibility of an Instagram post from a mother of three demonstrating exercises in fifteen minutes can contribute to physical health, or how the humour of a simple status update from one mother can bring comfort to other mothers.

There are four areas of particular interest to understanding the motives and impacts of social media in the transition to motherhood. As discussed the four areas are; accessibility, social support, confidence and knowledge. Major research has described how social media and social networking are affecting society, and in particular, mothers. Rainie and Wellman (2012) suggest that women are using social media tools more than men (Rainie and Wellman 2012) and, in particular, mothers are finding a new outlet and resources through social media. Statistics show that mothers who are geographically isolated from family and friends and, as a result have lower confidence or lack support, are using social media find that support (Parry, Glover and Mulcahy 2013; Valtchanov et al 2014). Shirky (2008) explains that the surge of mother’s interest in social media is having a large influence on the expansion and development of online tools. “When a group of mothers

adopts a piece of technology, it indicates an expression of preference far more serious than seeing a thirteen year old go wild over an Xbox” (p. 202). Shirky suggests that mothers have a large impact in creating and establishing networks to support, empower and increase knowledge and confidence for themselves.

Rainie and Wellman (2012) believe that the “law of social networking is that people need to discover and interact with those who can provide resources” (Rainie and Wellman, 2012, p. 270).

Mothers are finding various groups, individuals or companies to follow on various social media sites such as Facebook and Instagram. Mothers are developing “subgroups based on personal identities and tastes multiply as people use technology to seek out and bond with others who have things in common with them... life-stage similarities” (Rainie and Wellman, 2012, p. 275). Other authors suggest that “convergence-- the coming together of things that were previously separate--is a defining reality of twenty-first century media” (Whittkower, 2010 p. 13). Through coming together online, mothers find one another and begin to discuss their new role, and the challenges they are feeling with online groups, individuals or groups they are following or reading different articles that may be online. Facebook enables women to ‘Share’ blog posts of women struggling with motherhood or specific issues during the transition some may experience such as when they have their third child. As an example, in a blog post written by Chrissy Howe on *Scary Mommy* called *Third-Baby Friendship Blues*, Howe (2016) discusses the minority of mothers, particularly mothers of three, and how life is altered with a third child. Howe discusses how friendships are changed when the third child arrives. A mother rarely wants to go out for fear of losing one of the three and friends rarely want a ‘herd’ of people visiting anymore (Howe 2016). Mothers on Facebook can observe this post forwarded by Howe and they may feel comfort because they are not the only ones with changing communities. Given the accessibility of the media, they can

message, forward or comment on the post and they begin to witness the formation of a small community of mothers who share the same feelings as Howe and themselves.

Women are accessing Facebook as their primary social networking site. These types of articles, and many others that are forwarded, commented on and shared help strengthen the communities that are developing and expanding. Ellison, Steinfield, & Lampe (2007) ) (as cited in Jang and Dworkin, 2014) and Lewis and West (2009) (as cited in Jang and Dworkin, 2014) suggest that social networking sites, such as Facebook “provide opportunities for parents to maintain existing social relationships, build or extend social networks, and seek and share information (as cited in Jang & Dworkin, 2014, p. 489).

While many women develop positive feelings during the transition there are also many new mothers who identify growing feelings of resentment. “[T]he isolation and invisibility of motherhood, decry the lack of social and practical support for the work of mothering” (Tucker 2010, p. 295). Weaver and Ussher (1997) find similar results in their research and find that some women are feeling lonely, lost and discouraged, and additional research argues “Becoming a mother’ for most women caused them to feel isolated, alone and depleted rather than nurtured and supported. This suffering interfered with women’s other relationships. It took time to renegotiate relationships incorporating their new sense of self as a mother” (Barclay et al., 1997, p. 727). If mothers begin to take advantage of social media and networking, they will begin to benefit from the growing access to community support. In turn, they may begin to feel empowered by the support they receive and the support they can offer to others in the same transitioning state.

**iii. Accessibility**

Accessibility is an important component of social media. The cell phone has “modified interpersonal relations, changed roles in the family, (and) re-defined the limits of communicative possibilities” (Fortunati, 2002, p. 21). The cell phone enables accessibility anywhere, anytime to a variety of communication opportunities (such as the traditional use of the phone), the use of text, email, and social media options. Mothers are accessing social media to find support at any place and at any time. Pew Statistics (2016) reports that 75% of parents are using social media for “parenting-related information and social support”, and of this percentage, 53% of mothers are using social media to respond to good news, 35 % to receive useful information, 45% to receive support, 35% to respond to questions and 31% to respond to bad news (Duggan, Lenhart, Lampe & Ellison 2016). The top sites utilizing social networking options that mothers are seeking are Facebook (81%) and Instagram (30%) (Duggan, Lenhart, Lampe & Ellison 2016). Mothers now have the ability to establish a comfortable and safe community in which they are able to look for support and to ask, seek out and themselves provide support in a non-judgemental social networking forum. The ability for a mother to gain support and help in such an efficient and encouraging way was made possible due to the accessibility that is offered through social media. “Being able to access an online community of mothers anytime and anywhere provided mothers in this study with invaluable support, connection, advice and adult social interaction” (Valtchanov et al., 2014, p. 202). The accessibility to social media lends to a sense of ease and a non-threatening arena to connect and communicate; as a result, mothers feel a sense of support.

**iv. Support**

Social media encompasses a vast number of online opportunities that enable someone to gain “trust”, “belonging”, and “support” in the transition to motherhood (Palmen and Kouri, 2012, p.

190). Mothers are experiencing environments that were not as common in the past. Women may find themselves more isolated from their families and this may have occurred due to a move, returning to work or the dissipation of close-knit communities. As society responds to the changes to people's cultural habits, support is not as available or as obvious as it once was from formal community structures such as neighbourhoods, churches and family. Shirky (2008) examines this issue and suggests "modern life has raised transaction costs so high that even ancient habits of congregation have been defeated...houses are often separated from commerce...social interaction has shifted from the neighbourhood to the workplace...interactions at work produce the kind of familiarity and trust that used to be more a part of the fabric of our communities" (Shirky, 2008, p. 201). More women are going back to work earlier, leaving fewer women at home to congregate at community events, public libraries or just for a coffee. Reduced attendance in organized groups such as church can leave women feeling a loss of access to both community and people. Having the internet on hand, at any moment with a vast group of women looking for support or willing to share ideas enables women to find resources and to communicate with others. And this can be accomplished whether it is to encourage, suggest various ideas or just be a listening ear without ever having to leave their home.

Three major community themes are identified through analysis of the use of online social networks: the "virtual neighbourhood, the "accessible online community" and finally, the "supportive online community" (Valtchanov et al, 2014, p. 198). The feeling of support mothers feel with inline networks "increased these women's real sense of empowerment in the transition to motherhood" (Madge & O'Connor, 2006, p. 199). The use of social networking sites may be to exchange information, ideas, and suggestions on everything from newborn sleep patterns to why their toddler having a tantrum. Sadarki and Bremberg (2005) argue that mother's "higher ratings

of self-esteem were related to higher perceived support” (Sadarki & Bremberg, 2005, p. 31).

Mothers may maintain communities from beforehand, such as work friends or extracurricular communities, however social media will help to develop supportive communities that will lend to confidence building and empowerment as a mother. Social media provides a significant element of support in the engagement of new communities that result in experiences of acceptance and encouragement.

#### **v. Confidence**

Many mothers look to the response of their communities to mold their identity “She can increase her self-esteem by reassuring herself that she is a better mother than they are, by critically comparing their own children with her own” (Weaver & Ussher, 1997, p. 14). However, if we help build a mother’s confidence and demonstrate the ease of finding support and knowledge, mothers will not feel the competitive necessity to be a better mother than other mothers, particularly, what they may view via online. Through access to social networks they may develop confidence in their effectiveness as mothers and they will know where to look for further encouragement and understanding. The interaction of mothers helping mothers allows all individuals to feel a sense of purpose and empowerment. To support this point, Palmen and Kouri (2010) found that “the group provided them with companionship, decreased their loneliness and stress, and gave them confidence in being able to cope with the stressful life situation” (Palmen & Kouri, 2010, p. 195). During this life transition, mothers are able to find other mothers on sites such as Momstown.ca and they are able to review various profiles of other mothers. Through this experience, they may find mothers with whom they share common hobbies and activities or mothering styles. The cumulative effect is that these mothers develop the confidence and skills to approach “online profiles (that) gave her confidence to approach other members with whom she shared similar

interests because she knew all the moms were looking to connect” (Parry et al, 2013, p. 35). Similarly, mothers who are working can find medical advice at times when pediatricians are unavailable or they can connect with another mother who may have recently gone back to work. Access to online communities has enabled “working mothers with young children, has allowed the formation of online collaborative environments by which these mothers can share their problems and the results of their information-seeking experiences” (Hall & Irvine, 2009, p. 176). Hall and Irvine’s (2009) research has shown that mothers “used the e-cohort to seek and provide emotional support. They shared their stories and feelings, expressed sympathy, offered accolades, expressed appreciation for shared experiences, conveyed gratitude for support, and shared their beliefs and expectations” (p. 179). Through community building avenues online, mother’s can connect with others who may be in similar situations or may be experiencing similar feelings. When mothers are able to regularly access and feel the support of other mothers, their confidence increases and they can begin to build their knowledge base, enhanced by new confidence and experiences.

#### **vi. Knowledge**

Another benefit of social media is knowledge. Online communities offer women a source of experienced knowledge. This knowledge may cover a breadth of information from breastfeeding, to bottles or looking for specific communities such as, finding an online community for mothers with three children under three years old. Madge and O’Connor (2006) suggest that online communities enable mothers to access information and discover solutions themselves and this; ultimately provides these women a sense of control they may feel they are lacking. Two researchers support this point: “The increased knowledge improved women’s ability to make decisions and feel more in control of their lives as new parents” (Madge & O’Connor, 2006, p. 207). In addition, Madge and O’Connor’s (2006) research found that respondents were using “the

internet as an important source of parenting information compared to their mother (69 percent other mothers (51 percent)” (Madge & O’Connor, 2006, p. 205) and the top two reasons for using online sources were “the most important reasons for using babyworld website were knowledge (78 per cent), support (76 per cent)” (Madge & O’Connor, 2006, p. 205). Through the use of social media, mothers are gaining control of parenthood; they are gaining self-esteem and finding a path to follow in the transition to motherhood. Users of a Swedish website found that “respondents reported high levels of self-esteem, were frequent users of the website, and many of them had organized to meet with one another” (Sarkadi & Bremberg, 2005, p. 50). In their research on the use of parental support via the internet Sarkadi and Bremberg (2005) found that mothers are gaining control of their environments and they believe that social media is increasingly being recognized as a source of community and support “The internet is becoming increasingly recognized as a source of social support” (p. 43).

The opportunities created through social media, in particular, Facebook and Instagram are numerous. Some of the advantageous qualities of social media are mother’s accessibility to information, support and gaining a sense of community. All of these qualities result in opportunities for mothers to gain knowledge. Madge and O’Connor (2006) found that “women felt that they had gained, an empowering sense, from being members of this virtual parenting community through increased knowledge, non-judgemental support and the development of online friendships available exactly when the women need them” (p. 208). Mothers are using social networking sites such as Facebook and Instagram that enable them to relate and develop a rapport with other mothers. This new knowledge and confidence will help build and transform identities and give mothers the “ability to make decisions and feel more in control” (p. 207).

In summary, four key aspects of social media are; community, accessibility, support, confidence and knowledge. These aspects facilitate a relatively new avenue through which mothers are able to connect with other women. Using these connections, they are able to gain a sense of their new role and to explore how to incorporate their new role into their identity.

#### **E. The Role of Social Media in a Mother's Identity Transition**

Stay at home mothers are the future in perpetuating social media and establishing trends for social media tools (Shirky 2008). We have established that women's communities are transitioning as they take on their new role of motherhood. Social media tools enables mothers to incorporate many aspects to establish, maintain and sustain a great community in the midst of their demanding transition. Research shows that social media tools provide access to supportive environments that serve to develop or maintain communities and empower women's confidence. In other ways, social media plays into the romanticized societal belief of motherhood. Finally, a mother's identity can begin to evolve and establish itself as "the mother's sense of harmony, confidence, satisfaction in the maternal role, and attach[ment] to her infant" (Mercer, 2004, p. 227) occurs. As a mother begins to gain confidence in her motherhood role, her identity begins to incorporate new attributes. This new identity incorporates both her previous identity and her new identity. As the woman and her significant other(s) are "becoming a new family, began realigning relationships, developing new routines, and delineating boundaries" (Mercer, 2004, p. 230). The mother continues to grow into motherhood or perhaps becomes a mother for second or third time "an expansion of her maternal identity continues as she rises to new challenges in motherhood by making new connections to regain confidence in the self" (Mercer, 2004, p. 231). When her role as mother begins to become more fluid with experience and newfound communities to assist and support her

along the way, her confidence increases and she has the ability to incorporate her new role into her identity.

#### **F. Acceptance of Transition**

The experience of women is captured in this literature and the approach allows for an exploration of my own experience against the backdrop of the current literature on the transition to motherhood. At this point we move from the academic and theoretical conceptions of the role of social media in the transition to motherhood to a critique on the analysis of the literature by reviewing the experience of mothers; and the engagement of online tools such as Facebook and Instagram. It is clear from the research that becoming a mother is a defining point in women's lives. It will require a transition in women's identity and a remolding of their identity, incorporating both their professional identity, new role as a mother, blending previous communities, and incorporating new and undiscovered communities.

#### **G. Autoethnography**

Autoethnography is a relatively new method of research developed in the 1970's (Jones, Adams and Ellis 2013). Jones, Adams and Ellis argue that four societal events occurred that set into motion the development and the budding acceptance of autoethnography:

1. "A recognition of the limits of scientific knowledge and a group appreciation of qualitative research.
2. A heightened concern about the ethics and politics of research.
3. A greater recognition of and appreciation for narrative, the literary and aesthetic, emotions and the body.
4. The increased importance of social identities and identity politics" (p. 25-26).

The culmination of these four occurrences initiated a shift in how and what was acceptable for researchers to write about. The word autoethnography broken down means “auto-self, ethno-culture and graphy- written” (Adams, Jones & Ellis, 2015, p. 46). Therefore, autoethnography is the written study of the individual, and their personal experiences within society or culture or, as Heider described it as, “a study in which cultural members give accounts about their culture” (Heider as cited by Adams et al, 2015, p. 16). In other words, researchers immerse themselves in their culture and focus on a particular subject enabling their experience, vulnerability, instinctive and involuntary reactions emerge. When feelings and experiences are able to surface and the researcher is able to acknowledge, record and emote these experiences to the writer, autoethnography has succeeded.

Wall (2006) describe the intent of autoethnography to be “to acknowledge the inextricable link between the personal and the cultural and to make room for the nontraditional forms of inquiry and expression” (p. 146). The acceptance of autoethnography has been progressively increasing over the last four decades (Adams et al. 2015). During the 1990’s “researchers began to place more emphasis on personal narratives and the budding autoethnographic movement” (Adams et al., 2015, p. 17). In addition, the first *Handbook of Qualitative Research* (Adams 2015) was published and emphasized “emotional and personal scholarship” (Adams et al, 2015, p. 17) that was later coined autoethnography. During the first half of the new millennium new editions of the *Handbook of Qualitative Research* were printed and conferences focusing on autoethnography and ethnography were developed (Adams, Jones & Ellis 2015). Using autoethnography, the researcher writes and shares their experiences and, in doing so, their story becomes “personally, emotionally, aesthetically, and narratively connected to a cultural group or experience” (Adams et al, 2015, p. 19) and transforms it into applicable research. Finally, autoethnography examines identity, and

uses the researcher's experiences to further explain “how and why identity matters and includes and interrogates experiences tied to cultural differences” (Adams et al, 2015, p. 19). As a result, “the questions most important to autoethnographers are: who reads our work, how are they affected by it, and how does it keep a conversation going?” (Ellis, Adams and Bochner, 2011, p. 284). Through this method of writing researchers are able to “produce analytical, accessible text that change us and the world we live in for the better (Holman as cited by Ellis et al, 2011, p. 284).

If one compares autoethnography to the theory of symbolic interactionism, one will see that they are similar in terms of both incorporate an individual's experiences and examine how these cultural experiences have affected their identity. As Blumer argued “the sense of self emerges from a process of definition/redefinition that occurs through social interaction. In other words, identity is negotiated--formed, maintained, and modified-- through our interactions with others” (Blumer as cited by Boylorn & Orbe, 2014, p. 29). There are many ways that an author and researcher can develop their autoethnographic research.

## **VI. Methodology**

The method used will be autoethnography, which incorporates elements of autobiography and ethnography (Ellis, Adams and Bochner 2011). Past memories and experiences were recorded and reviewed in order to gain an in depth understanding of a woman's transition into motherhood. The primary focus was the framing of personal experiences and behaviors in relation to the academic literature and relevant transitions theories.

The following section sets up how my identity has been affected by the loss of my mother and how the loss of a mother compounds a woman's identity loss when having a baby.

I lost my mother. I lost her at 25. Something that should not happen. People need mothers. They need the unconditional love and emotional support of a mother, particularly, at a vulnerable time.

I feel that so much of becoming a mother is what having a mother is about. I feel that the changes a person experiences when becoming a mother, when she doesn't have her own mother, are harder and take more time. I am also struck by the parallel experience and emotions that I felt during the loss of my mother and the transition to motherhood. I, essentially, lost the identity I was familiar with when I lost my mother and experienced a very similar identity loss when I became a mother.

### **Loss**

*The day started with me waking up from an awful sleep at my brother's house, in my nephew's room. He was only four and had been having a bad dream so I lay down with him until he fell asleep. In my exhaustion of the last week, in and out of hospital, praying my mother didn't pass away on my birthday, I woke up soaked from a little boy who hadn't remembered to get up and go pee. I woke up knowing, in the back of my head, today was the day and that today was the day my life was going to change forever.*

The day started with an uncomfortable sleep. Nearly every sleep at 9 months pregnant is an awful sleep, however this was different, this was preparation for the moving and restless baby that had grown inside me for 9 months telling me it is time to prepare for a change. I was a week early and, having no experience with labour, I really had no idea what was happening. But something told me, if I had listened, that today was the day my life was going to change forever.

*Remembrance Day 2002, the day my mother, with the humour and wit she had, was going to say goodbye so that we always 'remembered' it was her day. The last two*

*and half years of illness, hospital stays, hospital visits had built up to this day and that nagging feeling in the back of my head was there to tell me it was time to prepare for a change. As I lay in bed, I thought about how this change is one you can't go back from, that will shake you to the core, that will have you evaluate each and every decision, person, experience you have from that moment forward.*

*That is when I heard the yell from my sister at the bottom of the stairs "she's gone". I thought "you could just lie in bed, still and quiet and pretend you didn't hear". Maybe nothing would change, the influx of my last two and half years would remain. But eventually my mind forced me to move forward, to acknowledge the change was happening, the next stage had already begun.*

*She was gone. I had to get up, go to the hospital, start making calls, call work, email, professors, funeral arrangements, clear out all the new furniture she bought two months previously, arrange for movers, get back and write papers. All of it was hitting me, running at me as though it had all waited for this moment. It was as though a cauldron of horrible experiences had finally finished brewing and the worst experience was waiting to be tasted. This isn't like the other three times you thought she was close, this time it was real, she would only come back to me in my dreams, in my memories and the small signs I took the time to notice.*

*I knew this was inevitable, we had been told she was terminal months earlier. She had sold everything off and moved to the coast. And honestly, my mom moving was a relief. For two years, I watched my mother struggle and fight to beat this thing called cancer. I was 22 when it started and I had visited hospitals, was told she wasn't going to make it three times, asked my brother to fly in because it may be the*

*last time he sees her, asked my sister to come and help because I couldn't handle it. I was in University, I had to work and on my down time I was at the hospital.*

St. Patrick's day 2012. I had no idea what was happening. Was it Braxton hicks, was it the general aches and pains of pregnancy? We went out and bought a child car seat that day and as my husband installed it, I text my girlfriends to get an idea if this was real, what was happening, was this baby coming earlier than I thought? A change that you can't go back from, that will shake you to the core, that will have you evaluate each and every decision, person, experience you have from that moment forward.

Something was happening to my body; I had no control over, I couldn't stop, I couldn't do anything to make it feel better. The feeling took me back to a childhood game I would play with my siblings when they would grab my arm, twist the skin opposing directions, and look me in the face and say "snakebite!", although this felt like it had electric shocks attached to my body. It was twisting, squeezing, screaming for the change that was going to occur.

When Hope was born, I had to learn so many things so quickly and I was so confused because I thought so many things would have come more naturally and instinctively. I had to learn to hold the baby, breastfeed, bathe, dress, and sleep with the baby. I was so happy that my husband stayed with me and grateful for how helpful the nurses were. I was so scared and had no idea how to handle such a tiny, little dependant baby. My husband was so confident and seemed to take each step at a time. I remember thinking, why isn't this all coming to me, why isn't it instinctive?". I tried breastfeeding. The baby latched no problem and I remember thinking, "I have got this". Then the visitors started arriving, my room was full, I was half naked and the nurse decided it was time to teach me how to breastfeed as apparently what I thought "I had" I didn't. She pulled my shirt down in front of everyone and I remember thinking "am I supposed to be embarrassed, is this what

motherhood is, your body is for the baby and you don't have pride or humility anymore?". From that point on, every nurse that came on a shift had a different way to hold the baby, hold your nipple, position the baby, position your nipple, different noises to listen for, and the whole time I kept thinking "I thought this was going to just "happen".

This is the point that I began to realize, motherhood, a baby, is nothing that is portrayed in reality or television. It wasn't for me anyway. I second guessed every decision I made; my husband wanted to leave for a bit and I remember feeling bad for wanting him to stay. I was so scared, humiliated, worried and I just needed someone to be there and he just needed to leave.

I need to literally be sewn back together. Not only was my body cut apart, but my mind and spirit were getting rocked, rocked beyond what I could have thought. At least with death you knew you were supposed to feel sad and have grief but with a baby, that was supposed to be joyous and a miracle, I just kept thinking "I can't do anything right, the baby won't feed, I can't walk to the bathroom, I am bleeding everywhere, I don't know how to put the babies shirt on, I can't wipe her bum well enough, this IV hurts, I am so tired, I am so wired, I want to go home, I never want to leave".

*Nothing could have prepared me for the empty sensation that was left of my life. A shell. The feeling of loneliness was engulfing. It was deafening. The fear of how I would deal with the death was eroding me. Now it was my brother's job to take care of her in her last months. It turned out it was only a few months and she was gone. I didn't know what to ask of people, if my feelings were wrong because she was my mom and she was dying but it was so hard on me and hard on her to both know that the end was inevitable.*

I was a shell, in literally speaking my body had a cavern where the baby used to be, nothing to fill it, my spirit was left wide open, waiting to be washed over with the water of intuitiveness that never came. Mentally, I so scared I wasn't meeting the needs of this little baby that I became all consumed with trying to meet what she might need. This left my needs to fall into the vast cavern of that shell and my needs were not be found for nearly four years.

I lost myself, the person I know was gone, I had to be the woman that made the world safe for her, let that baby know she would always have someone, build her up, to find her help, to listen, to tell her to come home, or deal with it. It was all up to me, to be that person for this little person I had created.

I need my mom. I am a mom.

*I lost myself, the person I know was gone, the woman that knew she was safe, that she would always have someone, someone to build me up, to find help, to listen, to tell me to come home, or deal with it. That person was gone and it was all up to me. I needed a mom and what was I going to do, I didn't have one.*

The moment my mother died and the moment I had a baby are two moments that have altered my life in unbelievable ways. They are moments in one's life that change everything. Any normal you once knew will never again occur and will be forever replaced with a new normal. I had to learn to navigate, balance and find happiness and peace with these moments. I didn't know what to do, the vacuum that was left in my life was so similar to the feeling I had after giving birth, and I can't explain it. At your child's birth you literally become a shell of your previous self. What once filled you is now gone. Similarly, this love that my mother filled me with, was gone. She was there in spirit but she was gone. I was lucky to have unconditional love from a woman who really knew how to be a mother. I have no idea if she lacked confidence to be a mother, I have no idea if she

was scared, alone, worried or unhappy. All I knew was love. Sometimes I feel shortchanged that I didn't have a longer time with that love but now it is my turn to love. As hard and confusing and all-consuming and wonderful as it is, I still wish I had her here to tell me it is going to be ok, what I am doing wrong, what I am doing right and just tell me I am a good mom.

My research has suggested that mothers experience four stages that last from pregnancy up to four months postpartum. I have taken the research and written my experiences within this framework.

In summary, I am presenting my autoethnography through these phases identified in the literature.

#### **A. Research Design**

The research design was exploratory in nature, taking an autoethnographic approach to explore and share insights on changing identities as they were experienced through my own personal transition to motherhood. This approach was chosen because through my research of academic literature, studies suggested particular stages and time frames mothers may experience in the transition to motherhood. I noticed there was a variance between my experience of motherhood and the research. My objective is to give mothers a perspective other than the research, and consider perceptions of motherhood portrayed through digital communications. The time frame of my narrative covers March 2012 to October 2016. During this time period, I had three children within a three year period, maintained my academic studies and experienced an immense identity transition. Sociological theory is the framework that these questions were established. The same framework will be applied to the findings in order to determine results. The reflective journal will be kept by the author using retrospect and current experiences, feelings and analysis of various moments in the last four and half years. The journaling will occur over from June 2016-October 2016, Monday to Friday daily consisting of approximately half a page up to two pages a day. It will look retrospectively at the researcher's experience over the last four and half years, review past experience with Facebook and Instagram and establish a vulnerable and open perspective that other mothers may relate to and readers may gain

perspective of one mother's experience. Finally, using the methodological approach of autoethnography using two different approaches.

- a. Analytical-interpretive approach (Jones, Adams & Ellis 2013) that would consist of finding themes in reflective journal entries and compare and contrast academic research and literature
- b. Imaginative-creative style (Jones, Adams & Ellis 2013) that would incorporate four poems that describe the researcher's experiences.

**B. Questions that will be considered during the evaluation process:**

2. Are new mothers looking for a community and are social media tools facilitating them in the search for it? How are they using social media during to transition to motherhood?
3. An analysis of personal journal entries was used to: identify feelings mothers are experiencing and determine whether the role of social media applications, in particular Facebook and Instagram. How does the role of social media in the transition to motherhood within the academic literature compare to the researcher's journal findings? Do mothers feel they have lost or gained communities? And how do social media tools contribute to the development of new communities?

**C. Ethics Considerations and Approval:**

The Autoethnographic method does not require ethics approval as the data collected, reviewed and analyzed is the researcher's own experience and interpretation of that experience. The data collected is from the researcher's own experiences and the reflexive journals and review of social networking communities is from the researcher's own account or available in a public space.

**D. Analysis:** I kept a journal of my feelings and experiences over a seven month time period. Some of these feelings and experiences were reflections of the previous four years and some were current and in the moment. Following this, I analyzed my experiences, stages and transitions against the transition and identity literature and compared the experiences.

**E. Data Collection:** A review of reflexive journals, dated June 6 2016 - October 6, 2016 was reviewed. Common themes and meanings emerged that provide insight into the experience of transition to motherhood and how/and if her identity was affected. In addition, attention is paid to how social media played a role during this transition. I reviewed the transition and identity literature and compared the stages to my own experience. I found a strong juxtaposition in the results, particularly, the time frames that were stated that mothers may experience certain stages of transition in their identity.

## **VII. Autoethnography of Melissa Myskiw: A Mother's Voice**

Autoethnography is an individual's written experience. I chose to write about my motherhood experience so that other mothers may understand that they are not alone in their transition to motherhood. My experiences speaking to other mothers has made me realize that so many mothers are confused, tired, lonely and afraid to speak about the challenges of motherhood. Society has romanticized and idealized what becoming a mother is for women. In my experience, this idealization has not coincided with my experience or with the dialogue mothers are having. My objective is that this section will allow mothers to feel camaraderie and compassion for themselves and other mothers. Primarily, my goal is for the motherhood culture to learn from one another and to share words of support and encouragement rather than words of judgement and disdain.

I am experiencing a radical moment in a lifetime. The debates at the American party conventions in October of 2016, Presidential Debates, continuous running CNN coverage, partisan slagging or criticism, emotional discussions at dinners all seemingly focused on who will become the next president of the United States. It is a monumental time in history as a woman fights for the seat of one of the most powerful positions in world politics. Watching Mrs. Clinton's acceptance speech to become the democrat candidate, I couldn't stop the feelings of pride, disbelief and

excitement at the potential prospect of a female president. Her life was and continues to be dedicated to helping others. My anticipation was heightened by the thought that my girls would witness the inauguration of a female president; they are so young, they wouldn't remember a time when a female couldn't be president of the United States.

Why is the election and the candidacy of a woman running for president so important? It is important because as I look back on my life I realize that the power that has made me who I am does not come from a man or a group of men. This power comes from a circle of women coming together to give love, support, unconditional respect and encouragement to other women. As the mother of three girls the capacity to meet, to share and to support is a priority for me. In the current social and political context, issues for women and especially for mothers may either be dismissed or brought to the forefront of the ongoing discussion. I believe it is important to recognize the need to give women, particularly mothers, a voice and to listen to that voice in a time when so many feel dismissed, disengaged and hopeless.

**A. Stage 1: Commitment, attachment, preparation (pregnancy)**

**Or in My words: Constant worry, detachment from old beliefs, preparation and experiencing the biggest change of my life (timeline: the longest 4.5 years of my life)**

Stage one for most women starts the moment they found they were pregnant. This wasn't my experience. In hindsight, I feel this stage remains surreal. I am sure many women would disagree with me; however, as my body, my eating habits, my mobility and my thought processes incorporated the thought and growth of a baby, I experienced a stage of transition when my babies were born. Yes, I did all the necessary appointments, preparation, readings and a lot of thinking of how this baby would alter the course of my life. However, there is absolutely no way, I was prepared for the massive, immense and colossal changes that would occur to utterly every aspect of my life.

I am an incessant planner. I had two gift registries and bought everything I would need for the first three months. I even sent out an email to all the mothers I knew, asking them the top three things they would suggest to me that were vital in the first three months. I remember one friend saying, “all the baby really needs is you” and I thought she must have an alternative way of mothering! You need a breast pump, swing, baby carrier, bottles, formula, soothers, clothes, blankets, crib and the list could go on and on.

What I hadn’t planned for was how unequivocally my identity would alter and that I would not be prepared in any way for the transition. I would be floundering, emotional, alone and unprepared for the changes and, for me, the enormity of the impact this transition would have on both my life and the core of my being.

In hindsight, the commitment, attachment and preparation for the rest of my life began when each baby arrived, some on their own time, some when medically induced.

## **i. Commitment**

### **1. Hope**

The day we brought Hope home, I was a nervous wreck. I was in an incredible amount of pain from having stitches as a result of an episiotomy. I was exhausted from waking up all night to see if she was still breathing and in the moments that I did drift off, she would cry to be fed or the nursing staff would need to make their rounds.

As we arrived in our kitchen and put the baby down in her car seat, my husband Kevin remarked “something seems different”. He was joking and referring to the baby in the house, however, I was so consumed with pain and the anticipation of having to take care of her without someone to help that I was delayed in comprehending his humour. I replayed the conversation in my head a few hours later and finally understood what he meant. In hindsight, this was foreshadowing my

future. Something was different and I had not yet realized how, I didn't understand how much my life had and was going to alter, just as I did not know how much my life had altered ten years previously with the death of my mother and how much I needed her now to show me the commitment that motherhood entails.

I was so committed to breastfeeding; I had been told and I thought it was natural and I could not imagine that I wouldn't be able to feed my child. Little did I know that not all babies and mothers are compatible matches and it wasn't until Kevin said "just quit" after four months of anxiety and stress that I was finally ok with the fact that I wasn't going to breastfeed her.

A day after we arrived home, the public health nurse came, I cried and cried and cried, I was so emotional, confused and tired that I couldn't pull myself together. In my attempt to control whatever I was able to control in my given situation, I made a list of questions, questions that were filled with fear that if I didn't do something right, the baby wouldn't be right and that would mean I wouldn't be right.

The nurse came in and looked at Hope and I said to the nurse "what did we do?", I had no idea what I was doing, and I was so scared. I remember I ran around, never sitting, trying to get things done. Looking back, I see these were the only things I could control. I tried to be prepared by reading everything, I kept track of feeding schedules. I knew it was important for skin on skin for attachment and I tried this. My commitment was there but the attachment and the preparation I had tried to find in myself wasn't working; everything I tried to prepare and execute to attachment, in my mind, failed. As I write this and repeatedly type the word tried, I notice that if you rearrange the letters it spells tired. I was completely rearranged, a shell both physically and emotionally and I *tried* so hard *and* I was so *tired*.

I struggled so much with her crying as it not only set me apart from others whose babies did not cry, but it also isolated me and left me feeling absolutely helpless. I constantly had to have Hope strapped to me and I had to be in continual bouncing motion in order for her to feel comfortable in hopes she would stop crying. I was always by myself in the morning because my husband left before 6am. Every day I would wake in the morning and dread the first whimper, whine, wail or outburst as I knew, after the first one, it wouldn't end till she went to sleep at 8pm. I felt as though I was being punished for something I did; no one deserved this. I looked online, spoke to the doctor, friends and read blogs on how to help her. Everyone tried to give advice to me but really it was just a waiting game and a great opportunity to learn to ask for help.

## **2. Stage 1 going on 15 months**

I was pregnant with my second baby with her due date coming near. I was holding my first little baby, Hope, crying and thinking that we didn't have enough time; did she have enough time to receive the love and attention she deserved? If only we had waited longer to have a second. My first was only 15.5 months old and it wasn't until my other two children approached the same age as Hope when I was pregnant with them that I realized how demanding and truly silly we were to move on with our family so quickly. I felt so much pressure with my age, trying to balance a career, a master's degree and a family, that it seemed Kevin and I went into making a family blindfolded and hoped for the best.

The second pregnancy was challenging in that I was already moving beyond the stages of many mothers in my mom's group. I was losing connections with other mothers as they returned to work and I was expecting my second and no one else in my group was yet pregnant with their second. I saw few people for these reasons and also because I was in school and pregnant. I also didn't have the energy or the time to connect with others anymore. I was still working on my

masters, I had a 6 month old and was pregnant again. I had to give up my position at work and that was hard. It was as though a final part of my previous identity had finally been chipped away, and the erosion of my former self was slowly worn away by the relentless tides of motherhood.

When I was 8 months pregnant with my second, Hope was then 14 months and at home and I was starting the final Spring Session of my Grad program. It was a three week intensive study where I finished two classes and had to present my final capstone project. The stress and anticipation around these three weeks continued to build because I wasn't only trying to finish my class work, but I had to consider childcare in addition to maintaining life through a pregnancy. My sister from the United States and my mother in law took time off work to help with Hope while I completed my coursework.

Three weeks previous to beginning my Spring Session, I rolled my ankle while carrying Hope, my diaper bag and my laptop. For three weeks I had to ice and limp as I began school, with a new cohort, I had a computer that did not work and was pregnant, I was now limping around campus and trying to ice my ankle during class. It was as though my body knew it had to move forward and produce a baby, my mind had to move forward and produce intelligent thought and physically I had to keep moving on, just like when my mom was sick, keep moving.

I was extremely apprehensive about my second spring institute. I expressed to a colleague of mine that I was more anxious for the spring institute than I was of the impending birth. I wanted the three weeks to be about me, I wanted to count on help from my husband to take care of Hope and our household while I took the next step in my academics and I took care of the baby I was growing. I didn't know how to express this need though; the last 14 months had been about

establishing a home for my new baby, creating a new baby and struggling with the loss of the career I had to give up.

Throughout those three weeks, my husband went out every weekend. He was a teacher and it was a busy time of year with grad season, soccer season, football practices and the list went on and on and on. I was so upset with him and I felt, without him saying as much, that his actions had placed not only me as second or third after our child and my education meant nothing, the work that I had put into the last two years for school and taking care of our family was irrelevant to his need to “network”. As you can imagine, my feelings did not play out well for a pregnant woman or for our marriage. I knew I had to take care of myself and my girls, I told him that this is not what I was looking for when I created a family with him. Networking was not a priority.

Luckily I married a very smart man and when my spring session was over, and weeks later we were able to talk less emotionally about our new realities, he started to understand my needs. We realized together how much things had changed and that if we were going to raise a family, we both had to remember that our “old normal” was slipping away or, for me, had been scoured out of my life. Our new normal had to be experienced together if we were going to make it. I look at this as a turning point for Kevin and me. He saw my limitations and I saw them too. I don’t know that I will understand or move past the fear and anger of the feeling of being placed secondary. The one thing it did make me do was to demand more. That is what commitment was and is for me: expecting more. I don’t know that commitment from anyone can be fully experienced until the baby has arrived, or in our case, we had a baby, the second one on its way including the demands of a three week intensive masters course.

### 3. Paige

We went in at 4am after I had gone to the bathroom and was convinced my water had broken.

Arriving at the hospital they told that it had not and that I needed to go home. I said no. I

remember so clearly not wanting to be sent back home. This is another sign of commitment to

myself, this baby and our family. I would circle this hospital until the baby came. Looking back,

I see this as another stage of standing up for myself, something I would not have done with the

first. I said no. I know my body and I was not going back home.

The nurse was very inexperienced and was clearly not comfortable giving an internal as I was

there an entire shift and she never checked me once. My second nurse was very experienced,

shifted my position and my second child arrived within an hour and a half of the repositioning.

This was really a reminder of how I had grown from my first baby and through my experience,

with my second, I could be confident with the experience that I had gained and content with

where and what I had achieved in the few months since my last labour. This isn't as easy to see

when you're circling the delivery floor, in pain.

This time, I knew better but not entirely. I was recovering from the birth on a gurney in my

hospital room, a catheter was being inserted as I couldn't go to the washroom, my second was

only three hours old and my husband suggested we needed to think about having a third. Instead

of yelling and screaming or telling him to leave, I told him very calmly "pregnancy was really

hard on the body". I wish I could have told him, to express gratitude and love, and not what he

wanted or needed. I wish I could have told him "I have been through an extremely difficult

fifteen months and I need your help and support rather than your next expectation of me and my

body". However, I sat dumbfounded in the hospital bed as the nurse took my vitals. Slowly, very

slowly, I was learning what I needed as an individual to be a better mother and to fill the shell that still lingered prior to having a baby.

#### **4. Bree**

This third baby is one of those baby stories you hear about from a friend or you watch as a comedy without the truth of the struggle of real life.

Paige was 10 months old, Hope was two years and two months old. I had transitioned from a woman who had purchased my own home, car, had a career, was working on her masters and had a healthy social life to a woman who others viewed as capable of only having children. I was learning to acknowledge the right and wrong judgements on which I was the receiving end. I was literally gaining wisdom as a result of my academic life, I was acquiring a certain radar regarding which of my parent friends had parallel parenting philosophies similar to mine, which was quickly diminishing my social circle and I was painfully *and joyously* absorbing motherhood.

I was discovering a new role for myself in the communities I had created for myself in the past few months and I was attempting to develop new ones. But most importantly, I had begun to accept, adore and appreciate the family and the situation in which my husband I found ourselves. This was the beginning of May.

It was the middle of May, I was sitting at the Royal Alberta Provincial Museum, with a friend as our children running around us, trying to enjoy a cup of coffee. As I tasted the bitterness of the bean and the smoothness of the cream I knew I was pregnant. I don't know if it was mother's intuition, but it was as though I could feel the baby being created. I was not sitting with my friend and telling her how excited I was; I was telling her how terrified I was and I didn't think I had the strength in me to get through another year like the year I had just been through.

I bought three pregnancy tests and each week I tested myself. Each came back negative. I had two weeks where I still knew in the back of my head I was pregnant and although these tests said no, I was still so certain I had already altered my diet.

One morning, I went to pick up Paige from the crib and I felt a twinge in the right hand side of my abdomen. As I picked her up, I knew, I absolutely knew, what the feeling meant. I recognized the feeling in my body. I had this sensation so many times during my pregnancies with Hope and Paige. The small bit of anticipation that I had that these previous pregnancy tests had been correct, melted into tears on my face. I ran to the bathroom, placed my little baby on the floor, and peed on a stick. As I sat there, I prayed, literally prayed, that I would not see two lines come up.

I had only had two weeks of space that there was light at the end of this long and difficult tunnel. Knowing that if this pregnancy was real, it was my fault, my carelessness, weight to bear for the next ten months. As the time counted down, I looked down, and those two lines were so clear: there was no question. I was pregnant. The weight from the last two years, had been set ajar with the idea of hope and belief in my capability as a mother. As I saw the two lines on the pregnancy test, the weight came down on me so fast it was as though I blacked out. It was as though that small light of hope that I could see was whiffed out in seconds and my happiness was taken with it. I went to tell my husband and until he saw the stick he didn't believe me either. I have no idea how he felt, we still have never spoken about it, but we both knew it was a life changing moment for our family.

A pregnancy, a new life is supposed to be a celebratory occasion, or so society ensures you believe: you better be happy. The guilt that spilled over me only added to the weight of anger I had for my carelessness. I resented society for the feeling that a pregnancy can only mean

happiness. Through the eyes of the world, if I was not happy about a pregnancy, I was selfish, ridiculous and silly. And the feelings, the struggle and the suffering I experienced in the last few years, was my own fault; my perspective and not something that I was truly deserving of feeling. The acknowledgment that I was going to have to sift through the darkness over the next year and half before I could possibly see that light of capability again was insurmountable. I didn't stop crying for three months. I was so angry, I was so mad, I was livid with myself. How could I be so careless and let this happen? I felt that it had taken me 26 months to heal and begin to piece things together again and just like that, I knew I would not be happy for another 18 months. I was going to *have to be* patient again, I was *a* patient again. The meaning of patient is one who suffers; I knew my family was going to have to struggle through this next direction.

In hindsight, this pregnancy was difficult because I had to grow as an individual and recognize my limitations, whereas the first two pregnancies I pushed through my limitations thinking I could do everything. I had to start asking for help, and as my research and social circles tell me, the first person you ask for help as a mother is your own mother, an additional reminder of the loss of my mother but also a dead end. I asked for help from family, friends, doctors, psychologists, cohorts, advisors- anyone I could think of. The toughest aspect of asking for help is hearing the word no, or worse, hearing the word yes, feeling the reassurance of yes, and when help is truly needed, the yes turns into a quick, dismissive excuse. The humiliation and defeat that goes along with a yes, followed by an excuse is one of the most disparaging feelings a mother can feel. Without a mother I looked to those closest to a mother. I would ask for their help to either watch the girls for an appointment or even if they came over for dinner to help with the girls. Often, I was met with yes' but then when the day came they were unavailable or I would receive a negative comment rather than positive feedback. At this point I stopped asking

for help from certain individuals and looked to others I could count on. This is difficult because as the mother, you are supposed to be the helper, the one that says yes to these little people. Not having a mother to say yes to me and having to look to others only to receive disappointment, is crushing.

I did receive help and these came with many new faces, the new faces that were smiling, encouraging and brought hope and small twinges of laughter. These new found people are where I focus my time and energy, the people I make time for in everyday life and the people that I will go above and beyond for, as they did for me.

I found encouragement, humour and motivation online. As I worked on my Masters, I created a Facebook question in my 'status update' that I would put out to mothers that are my 'friends' on Facebook. It was fascinating to see the similarities, differences and community that was built with these mothers. Some mothers didn't even know one another however they were able to find camaraderie through these online discussions.

## **ii. Attachment**

Hope had a severe case of colic. The trouble with colic is that there really isn't anything you can do but wait it out. To compound the non-availability of treatment, many people have different personal judgements and disbeliefs where colic is concerned. As a new mother, who was struggling with many aspects of motherhood, having a baby with colic felt like a punishment. Her colic lasted from six weeks to six months and it was truly unbearable. Not only was there nothing I could really do for her; it is hard to see your child so upset and be unable to soothe her. Hope's cries became so ingrained in my mind that I would hear them when I was showering. With each consecutive birth I waited the first 6 weeks in utter fear of colic. Anxiety was wearing away at my mind in my waking hours and stressful dreams were filling my nights. When Hope

was colicky, I truly had no idea what to do. As I didn't have a mother, I started looking to other sources online and in face to face situations. I was with my sister's mother-in-law and she was bouncing the baby, facing forward. And she wasn't crying. I learned something that day. I learned to watch others, ask for help for something that my baby needed to make her happy.

As the threat of colic had subsided with Paige and Bree, I felt that I had permission to strip away my fear and learn to attach to the baby. I feel that I was unable to give my children every ounce of myself as suggested by so many people and society, but I truly feel that whatever love inside of me was exponential with each child. I feel that they taught me to look for the good *in* people and to look *for* the good people.

Attachment can mean so many things. As motherhood takes over, you lose attachment to things that may have seemed so important to you at one time: such as going out, your body, and friends. You don't lose these without a sense of loss but this has to do with the commitment; the commitment to keeping moving forward even after the loss, even after recognizing that things will never be the same and rather than focusing on your own happiness you may find meaning in a small someone.

I didn't realize the suffering that I experienced in losing my identity in both scenarios: of first losing my mom and then becoming a mom, I learned that these struggles and the suffering I experienced were essential to growing.

**Stage 1 Commitment, attachment, preparation (pregnancy)**

**Or in My words: Constant worry, detachment from old beliefs, preparation for the biggest change of my life (timeline: the longest 4.5 years of my life)**

**iii. You**

I have been waiting to hear you tell me what to do  
I am waiting to understand  
I am not sure what I need  
What should I do?  
I want to hear your voice  
To understand  
Breathing stops  
Time Stops  
My body frozen  
Looking for answers  
Both at the hospital  
Helpers can't help  
No one understands  
For every life there is a death  
For every death there is a life  
Physically and metaphorically  
With you came peace  
With her the unknown  
Will I be good enough to get through this  
Without you?

**iv. Old Haunts**

Mystery. Unaware.  
Familiar. Empty. Full.  
A walk take me there.  
An old walk haunted with memories.  
Memories of you, memories of me.  
Memories of dreams. And nightmares that came true.  
Old professors.  
Old acquaintances.  
New husband.  
New little people,  
Because of me  
My job, to stay alive and healthy

**B. Stage 2 Acquaintance, learning and physical restoration (the first two weeks)****Or in My Words: My body is in so much pain!, Do all babies cry like this, Insecurity**

Physical restoration is difficult to achieve after labour. When I returned home from the hospital, my new little, tiny baby and I would sit in the house. So quiet, so still, I was so nervous and felt as though I needed to be doing something all the time but coincidentally I felt as though I had no time. I remember thinking how busy Hope kept me and that I really didn't know, for example, if I was ever going to be able to pluck my eyebrows again. How was I going to be able to put Hope down? How would she be okay without being in my arms? I don't remember her sleeping all the time, but she must have slept enough for me to run around so that my stitches still did not heal after two weeks. I was so anxious and worried, and thought about all the things I should be doing when she slept that I literally did not sit down for the first two weeks of Hope's life except when I desperately tried to breastfeed her.

Finally, I had to go and get more medication from the pharmacy because I still couldn't walk properly as a result of my episiotomy. The pharmacist saw me limp in and commented on "how painful it looked" I couldn't even comprehend what she was saying and viewed it as another failing on my part. If I couldn't look after myself, how could I look after a tiny baby? I limped to my car, cursing under my breath from the pain. I eased into the driver's seat and started to cry.

I didn't eat for 6 weeks. My anxiety was so crazy I just couldn't sit down and take care of myself. People commented on how quickly I lost my pregnancy weight. I simply replied "I didn't lose it in a healthy way". No one asked any further questions.

I was so worried about breastfeeding and my ability to feed Hope. As a pregnant woman you hear, read and watch how easy it is to breastfeed. But in reality, breastfeeding is incredibly difficult. I was so embarrassed to feed in front of others I would lock myself in Hope's room, sit

and try to get her to latch. After all my scabs on my breast were reopened I would sit and cry from the pain while she fed. I visited a lactation consultant who explained to me that any woman could breastfeed. So why couldn't I?

I wondered if I should try formula and so as I got out the container and began to read the instructions. The words glared at me, telling me what a failure I was, considering formula. "Breast is best". My understanding of these words? You are a failure if you give your child this formula.

Hope stopped breastfeeding when she was two weeks old and we ended up in the hospital for a week. It was horrible. I had to weigh her before and after each feeding. She had to lie in a little plastic bed all by herself and I had to come down from another floor every four hours to try to breastfeed her. I was so determined. But I felt so judged. I tried pumping and I got less than an ounce. As a new mother, I didn't realize this was a small amount but I could tell by the look on the nurse's face that this was a waste of her time and her plastic bottle. The pediatrician commented on how I changed the baby. I needed to use about 20 wipes to my 2 wipes. Seriously, could I do anything right?

I am sure there was encouragement, love and compassion for me as a new mother and for my daughter who was only two weeks old and getting stabbed with an IV. But I couldn't see anything positive in my haze of acquaintance, learning and restoration none of which I was experiencing.

My husband wouldn't come to the hospital. He told me it was because he was sick. I didn't believe him. I remember questioning him in my mind and then I would question myself, if I was being fair to him. Damn right it wasn't fair. What I was thinking was that it was ludicrous that

my husband wouldn't come. He is an incredibly reasonable person, and I still don't understand the reasons to this day and I really don't think he knows why either. Perhaps he thought I was crazy to have taken her there, or that I was overzealous, maybe he doesn't like hospitals or maybe he was just selfish.

Reflecting back, why did I question myself? I didn't know what I was doing; I was just trying to take care of my baby the best I could. I went to a breastfeeding clinic and they suggested that because she wasn't feeding I should bring her to the hospital. So, if I had professionals suggesting I take her into the hospital, and when I did take her in they admitted her into the hospital for a week, why did I question myself?

**i. Learning**

The overwhelming feeling that I was on my own was compounded by my continuous questioning of myself. This is learning, learning to trust yourself and who else to trust and from whom to request more from. I have learned from this situation, and it didn't take long... or maybe it did.

The night of Paige's first birthday we were having a birthday party in our backyard. The theme was a luau and everyone was dressed in their Hawaiian garb, playing games and swinging on our treehouse park. I was bringing out the food when I heard a scream. I suddenly realized it was Hope and she was crying a distinct cry I hadn't heard before and I realized something was wrong. She was holding her arm, and I knew we had to go to the hospital. Not one of the thirty guests had seen what happened so off we went and when we arrived at Emergency in the hospital, I couldn't even tell the nurses what happened. I was terrified and the long line-up for Emergency moved quickly and Hope was given some pain medication as she came in and out of consciousness. This second visit to the hospital was as awful as the first but at least this time they

knew what was wrong. We went in for X-rays and I wasn't able to stay with her because I was pregnant with Bree. We waited in the hospital for three days for her to receive surgery. This visit was different than the last. I took control. I asked every nurse I saw when we could expect her surgery and I was very quick to ask Kevin to come to the hospital with her daily so I could get a break. I also chose to go home after her surgery rather than wait until the next morning. I asked help from my brother and sister-in-law to stay with Paige as she was sleeping and asked Kevin to pick us up. During those two years, I learned to have expectations and to ask for and expect help. I was more confident in my role as a mother

Kevin learned too. He learned that when your child is in the hospital it is his responsibility too, to be there, to take care of Hope and me. I remember thinking that it took Kevin 9 months after the birth of Hope to begin to change. I thought this made sense as it took 9 months for me to adjust and to grow a baby, and then still further time for adjustment and ultimately to recognize changes to my identity. Change is hard and it is hard on the whole family, from conception, to birth, to additional children; all members of the new nuclear family must adjust, mold and flex to the next stage. This takes learning; such as learning the needs of others, your partner, your children and yourself. I believe mothers forget to learn how they are adjusting or at least I did. The learning is the hardest and takes the longest. It is especially difficult for a woman who researches, prepares and may look to a mentor within a professional context. I believe this is because when you are employed you have a manager, colleagues and resources to help you learn. With a baby, everything changes, including everyday changes in the baby. Something you read and tried one day may not work the next. Resource books generally focus on one type of child and there is no blanket cure-all for a baby, your partnership or your growing family. There is only time, accommodation and learning.

**ii. Acquaintance**

Acquaintance goes hand in hand with and is related to learning. As all my girls grew, I had to learn and acquaint myself with each one's preference- breastfeeding or the bottle. Such preferences were very different for each child, took different times to teach and for each baby to learn. And I received different societal pressures for each choice I made to meet the needs of my babies.

Hope did not take to breastfeeding but preferred a bottle and a soother. Paige had to be held a certain way when breastfeeding and I knew I had to stop breastfeeding after 8 months when I had an image of my negative experience flowing from my mind, into my breast and into Paige. I knew it was time to stop breastfeeding and give her a bottle. And for my last baby Bree, I had to stop eating tomatoes, dairy, and wheat in order for her to breastfeed; now she loves a soother and a baby blanket. Each baby had a need that I had to learn and to acquaint myself with. This takes time and many, many attempts at various, different actions. It is not an innate skill as society can make you feel. Every baby is different and they are not like the one on a diaper box or the perfectly positioned sleeping baby on your friends Instagram account.

I remember going to a meeting with a group of mothers and watching twenty or so infants lie on the mat, staring at their mothers. Some were falling asleep, some cooing and some just lying there. I stared at these children and their mothers in disbelief, in jealousy and in resentment. These feelings would bubble up and explode as deep wrinkles of frustration on my face. I couldn't hold a poker face, the result of my crying, colicky baby was etched as stress on face and would be discussed in social circles for the next two years. I would question myself incessantly. What was I doing wrong? Why did I get a baby that had to be walked around so I couldn't meet

or speak with anyone? Why did I get a baby who needed so much? Would I be alone forever? When would this ever go away?

I called my girlfriend one afternoon whose son was a year older and he was also colicky. I was sitting outside on my front porch, I had finally managed to put Hope to sleep and I needed a moment to feel ok. I didn't want to talk to anyone so I barely went out because I couldn't talk to anyone and I didn't want the baby to cry and disrupt the quiet time or another person's happy baby. I didn't want to talk; I wanted to zone out on some awful television show and live through someone else's troubles that I could simply turn off when I got sick of watching it. But I had to talk to someone who had been through what I was experiencing. I asked "how long does the colic last?" And she replied, "Probably 6 months". I was crushed. Even the sun shining down on me and the triumph of getting Hope down didn't take away from the anxiety, fear and hopelessness I felt with my situation. I was facing six long months of struggling to help my colicky baby.

Looking back now I can see that I did get something of benefit in that desperate time or at least later when I could look back and take a breath. I learned that I got a baby who slept. It is all a trade-off. I tell new mothers when I see that look on their face that I had on mine during those meetings, that everything isn't perfect in that mothers world. You just can't see it. They are struggling in some way, but at least you are talking about your struggle to someone. This was something that took a lot for me to do, to call a friend and just have her listen.

Kevin and I struggled with the decision as to whether or not I needed to go back to work. At one point I put together a chart incorporating, my career, my masters, and the question of having an additional baby right away and how much money we would lose if I chose either not to return to work or to take employment insurance and childcare costs. I took the decision very seriously and

this was part of why we had another baby so quickly. I would go back to work sooner if we waited and I wouldn't lose too much time from the workplace. I was hopeful someone would hire me after I had been out of the workforce for four to six years raising our girls.

The day I went into the doctor and told her I was pregnant and wouldn't be returning to work right away, she was very supportive and encouraging. As I left, I put on my coat and looked at her and asked, "What do I tell people I do now?" She looked at me with disdain and curtly replied, "You say you are a mom". For some reason, her response hurt me, the look she gave me, gave me the feeling that I was asking a ridiculous question. Her response cut into me and left a mark, a memory that I can't get out of my head. I don't know if it was the way she said it, as though I was not comprehending my role, or whether she was impatient because she had to get to her next appointment. Or did I take the response hard because my identity was shifting not only was I now becoming a mother of two and I hadn't even reached acceptance of my life change with my first and now I no longer had a career. I couldn't tell people I was on maternity leave and I couldn't find value in my career anymore, but more importantly, in a society that values career and professionalism so much, I didn't have one. A decision had been made, a door had closed and I couldn't see if there was a window to open. I also didn't see anyone else in my doorway to say "it will be ok, maybe not right now, but you will find your way and everything will be ok". Not even my doctor was able to reassure for me that day.

I wish I could have told that poor mother who was me to relax. Everything will be ok. Feed the baby formula; there is absolutely nothing wrong with formula. Sleep when the baby sleeps. No, for real, just go to sleep. Your baby has survived off of you for the last nine months and both of you will be okay and you will figure this out. Listen without feeling judged, and don't listen to people who are not kind, compassionate and helpful. Find the helpers. Lose the people that make

you feel judged by or that make you believe that you are not being the best you can be. Instead, I have learned to do this for others now. But it takes a lot, sometimes, to be that for another person, when I don't feel I had it myself.

### **iii. Loneliness**

Vulnerability comes with the feelings of loneliness; the feeling of loneliness palpable. As your identity begins to crack and your old self becomes a sieve. You watch pieces of your old self and fragments of your identity slip away. You grasp at it, at people, at any form of wisdom you can gain in order to retain a piece that you may recognize. But the only thing to fill the holes of your sieve are loneliness. This is how I felt in the first two and half years. I felt that I wasn't myself and that the person I once knew was gone. The vulnerability in not knowing who you are as person anymore and the sense that the only thing that defines you anymore is a baby. Society inundates you with the idea that you are a bad mother if you don't identify yourself as a mother first and foremost and you are a bad woman if you don't hold a sense of yourself as well.

So in the time that you are learning and getting acquainted with this baby, you must be learning and acquainting yourself with your new self. Physically it is nearly impossible to restore yourself because you are tired in a way that you have never experienced before. Given the constant need to support, provide and physically be there for your child, it is a wonder that more mothers aren't screaming "STOP!" I can't handle the societal pressure; there are too many things to consider with such an exhausted mind space. Literally, things are moving at a pace that you are unfamiliar with and you must pick up the pieces of your identity, your new maternal identity, your family, relationship, external relationships and activities and smile while you do it because there is someone around every corner ready to tell you "this is the best time of your life lady!"

The sense of pressure from society, the immense learning curve, the loss of your identity and any recognizable social circles you may have once had, leaves one feeling exceptionally lonely. I remember reading a book that described loneliness as a person who comes in, puts their feet up and starts smoking a cigar. I felt as though loneliness and hopelessness had taken on personas that waltzed into my life like frat boys at a party and wouldn't leave. They sat on the sofa, drank, smoked and jeered at me. Never offering help, only judgement and leaving me with the haunting feeling that they were going to linger forever.

I tried every possible way to meet people. I remember staring out my window watching people walk by and wanting desperately to talk to them and to find out if it was as hard for them as it was for me. At the same time I was afraid to hear their answer in case it wasn't what I wanted to hear.

I would speak to cashiers, as sometimes these were the only adult conversations I could have. I would go online, hoping someone commented on my witty Facebook post. But at the same time, I didn't want to talk to anyone. At my mom's group I would leave early if we had a meet and greet. I would pretend to be super busy with my baby so I didn't have to talk to anyone.

I resolved to complete activities on my own; I just didn't want to bother anyone with my colicky baby or have my two toddlers destroy another person's house.

#### **iv. Sacrifice**

I found that a major learning curve after having a baby was recognizing and acquainting oneself with the sacrifice that a mother faces. The sacrifice starts with her body at the moment of conception.

There were many arguments with my husband about how much I have given up versus what he has given up. For me the discussion was taken to an additional level as I gave up my career. I gave up my pension, a social and support group and a piece of my identity. In addition, I have given up nearly all social circles I had before children. Many of these relationships continue but they are permanently altered.

I try to find moments to get physical exercise, follow through with commitments of extra-curricular activities; I have founded book clubs and dinner clubs and I tried to join boards just to find a piece of myself.

I am a creative person. I used to paint once a week and when I committed to pursuing painting, I had an art show, was published in a local magazine, and produced about 6 paintings that year with only a weekly commitment. Painting requires too much set up, prep, clean up and way too many opportunities for your children to get into things. I have struggled the last four years to find a creative outlet.

I am an organizer, so I have tried all sorts of things and nothing has stuck. I have recently started working with fibre arts. The interest I have in this area is steadily growing. I feel the excitement of organizing, searching, creating and planning for future endeavours of fibre arts. I have involved my children, but only to a small point as I really want this to be my escape and my experience. I have also started slowly, something that I can do in a 30 minute time increment and that doesn't require too much prep or clean up. My continued enthusiasm is a huge step for me. Previously, I would consider this one more thing to do but now I anticipate and feel elated when I can find the time to work with fibre arts.

My sacrifice came with a sacrifice to my identity. I lost this creative side of me, in order to just produce. Produce food literally and figuratively, produce a home and a loving family. I took care of people's wants, needs, and demands with the result that my needs were being placed last.

Children take a toll on a marriage, so I sacrificed part of the relationship I had with my husband. Other relationships that have survived my children have been altered in terms of the time I can spend with people or how we feel about one another. My husband and I try to anticipate one another's needs, but the needs of our children and our family have always take precedence over our relationship. Some say this is not a good idea, but it is the sacrifice we have managed over the last few years.

My social circle has gradually dwindled to small, to smaller and then really very small. Having three children, particularly so close together, it is difficult to get an invite to places. Even if this does occur, there is the challenge of managing my children and the host's child and so rarely do the host and I visit; we manage.

As a mother you sacrifice yourself and your intelligence. You don't lose your intelligence, others view you as not being intelligent. You are left with the impression that the only goal in life was to be a mother, the only thing I can discuss is being a mother, that I may need additional explaining or worse, I am treated as irrelevant. Many times I have been asked what I would like to drink and my request has been forgotten. I have been asked if I need help going down the hall to find a room. I have been spoken to condescendingly, without patience, dismissed and yelled at. All at the expense of motherhood.

I am not sure when this changed. Was it when women went into the workforce and some individuals were threatened? Was it guilt from a mother, husband, and family member that

children weren't enough for any mother? Is it a way for others to feel superior and a way to reflect on themselves by identifying you?

The hardest sacrifice is time. On one hand, wishing time to go so quickly and that your children will finally be independent and, on the other hand, wishing for time to stand still and moments to last forever. When things get really busy moments are lost and I have had times where I think to myself, "remember this, remember the moment, it may not come back."

I particularly remember one evening on holidays putting my three year old down. She was giddy with excitement of holidays and her "big family" around her at every moment. She was exhausted and spent from the activity of the day and the sun, water and fresh air. She had such a hard time bringing herself down to a calm moment where sleep would come over her. She was in a new bed, her sister wasn't with her and her emotions were surging through her. She flipped over and over, bum in the air, hand stand, talking, talking, talking and finally, she took a few deep breaths and was able to lie still. As a mother putting down your child, you pray she will go to sleep quickly, fight the urge to fall asleep yourself and lie there planning the next ten things you can achieve once you finally get this little girl to sleep. I was getting to the point that I was going to tell her BED NOW!!, when she took a few more deep breaths, deeper than the last and she finally fell asleep. As she stirred for the last time, she threw her little leg over mine. I remember it so clearly thinking "I am the luckiest person in the world". I don't know why this moment meant so much to me, in part that she was finally asleep and, I didn't fall asleep, but I think it was that I was so lucky to have this little girl as mine and with patience and love, she finally gave up and fell asleep. She felt safe and content and wanted one last moment of connection as she drifted off.

These are moments that are hard to explain unless you have experienced motherhood. The moment your newborn falls asleep on you, when you see your husband hold your baby and a connection is hanging in the air that is palatable. When they stand up and do a dance for you and the look in their eye, when you cheer and look in their eye is immeasurable.

Time has many clichés written about it, but I would argue that many of them have been quoted by a mother who recognizes these moments and the little time she has to enjoy them. The guilt of which moments she didn't pay attention to and the expectation and prospect of future moments she will miss and the speed at which time passes.

### **Stage 2 Acquaintance, learning and physical restoration (the first two weeks)**

**Or in My Words: My body is in so my pain!, Do all babies cry like this, Insecurity**

#### **v. Fears**

I am alone  
In a cold, metallic room  
My life is turned inside out  
Perfection on the screen  
Clean homes, perfect children and just so hair  
I am vulnerable  
I am vulnerable in a way I didn't know possible  
Broken but told whole  
Others smiling  
I smile to hide the panic  
Of how do I move forward  
How are they doing it, how have others?  
They have it all, a house, a home,  
A family, clean house, perfect child, perfect husband  
Do they smile all day?  
Do they cry?  
Are they lost?  
Are they like me?  
I look for a sign, a gesture we are the same  
I grasp for anything  
And they turn  
Into an ostentatiousness life I do not understand

The anger and humility burns  
Burns into a scar of failure

**vi. Unsolicited Counsel**

The baby must be cold  
You could lose ten pounds  
Do exercises while she cries  
This music would drive me crazy  
You need to relax  
You need to wash your hair  
You are domesticated  
Oh how you have fallen  
You probably have some guilt  
They need to be separated  
They eat so little  
She will be hefty  
I know you like a lot of activity  
Go in and take care of your kids  
You are a great role model  
Should a baby be in here?  
What would happen if she didn't nap?  
That sounds competitive  
Oh three girls  
Laughter  
Lies  
Solitude  
Silence

**C. Stage 3 Moving toward a new normal (2 weeks to 4 months)**

**Or in my Words: the longest four months of my life**

Within the three years of my children coming into my life, my new normal surfaced so clearly it was as though I was I had been struggling to stay above dark, cold murky water and someone threw me a lifeline and the water became clear and calm. As I frantically grasped onto this moment I could feel the weakness in my body, trying to pull me up and take a long awaited

breath of peace. This moment was so distinct, the feeling of peace bubbled up and I knew things were going to be alright.

The beginning of May of 2014, I was sitting in the backyard on a beautiful spring morning. I was sitting on the edge of my red adirondack chair, on the southern edge of our patio and Hope, was 26 months old and Paige, then 10 months old were playing in the raspberry branches that were preparing to bud in the next few weeks. The warmth of the sun was sending a soft glow down on the girls and filling me with warmth and hope and I thought "I might be able to do this". This was the first time in 26 months after the birth of Hope that I felt my confidence creep back in just as spring was creeping back into Alberta. I was tired, exhausted really, but the hope that came with this moment was so distinct and memorable I felt as though I had really come to a new place.

Over twenty six months I had "survived" several important events:

I survived the first six months of Hope's colic.

I survived the dreadful trips my husband would go on when I would have no help and no one to talk to for days on end.

I survived the dreadful trips my family and I had to go on, where nothing was consistent for me or my child, where I would watch the time waiting for my husband to come home and relieve me, and when I would sit in rooms by myself because I was in charge of the baby or babies.

I survived being considered a controlling wife and demanding more from my husband. I didn't care what people thought of me anymore, I needed to take care of myself and my family.

I survived waking up at 6am every day, not to be relieved until 7pm.

I survived a spring institute for grad school and three additional classes.

I survived the judgmental comments that seem to fly your way as a mother, from strangers that feel what they are saying to you is coming from a helping place when really it is just a judgemental place that makes a mother feel bad. If you want to help, offer to carry my groceries out, offer to carry my diaper bag, offer credit and admiration, not advice, suggestions or the benefit of the doubt to those who aren't helping.

During these months I would ask for help, I would accept help, I would feel bad about taking help. I would support people, I would let people support me. Most important though, I had found my new normal, I had found who I could lean on, who I could ask for help from, I was inching closer to finding me again, or remembering there was a me and that I needed to find steps back to her. My cavern left over from the shell shock was starting to heal, my spirit could see that it wasn't so dark anymore. But this was about to change.

I experienced these feelings for two weeks, and then found out about the third pregnancy I spiraled, hurtled, sped into an agonizing Stage 1 again multiplied by Stage 2 with Paige and Stage 3 with Hope.

**i. Black hole and the beginning of Stage 1...Again**

I had never heard of anyone having three children under the age of three. My trepidation for this inevitable event was multiplied by wanting to ensure this baby was healthy, that Paige, now my middle baby, would not be overlooked and that my family could get through this.

Little did I know, everything in my life would alter and have to adjust even more than it already had with Hope and Paige. My home, my vehicle, my friends, my family, my time, my expectations, my husband, everything.

We had to look for a home. Our little house we spent time renovating had to be sold, we spent months looking and settled on one in our neighbourhood that could lead our family into the next few years. It was really old, needed over \$100,000 of work but it had the room we needed. I was 6 months pregnant when we moved and I had to clean our house because the cleaning company we got did not clean it. My body was so sore, I drove around my neighbourhood with the heated seat on for 30 minutes, as this was as close to relaxing and taking care of myself I could get.

When Hope and Paige were too rowdy to handle and would take down the baby gate I had set up in the playroom, I would pile them in the car, strap them in, stop at a Starbucks and get two waters and a coffee and drive for a while. This was the only way I could rest, know my girls were safe and hydrated, and as a bonus, I was able to have a hot coffee.

I would go to bed at 8pm knowing I would be up in the night with one of the girls or because my body was in so much pain from the pregnancy. I did this in an attempt to function behind my curtain of exhaustion. I would avoid the stairs, at all costs. To try and hurtle my pregnant body and the little body inside me up the stairs was too difficult. If I did go upstairs, another little person was likely to follow and it would be a tiring fight to get all of us down the stairs again.

When my mother-in-law would take my girls so I could go to an appointment, I would sit and have lunch and be mindful of every bite.

This is what my new normal was. The terrifying part was that I would soon be incorporating Stages 2, and 3 again and I hadn't even had a chance to hit Stage 4 with either of my first two children even though I was having my third child.

I think Kevin was excited to be having a third baby. It was an opportunity for him to possibly have a boy. He loves his girls but coming from four boys and playing and loving sports he would

have loved the experience of a boy. We weren't going to find out if it was a girl, but as I was sitting with the technician I was watching the ultrasound, watching her. I do not know if it was from the experience of having two girls or from intuition but I knew it was a girl. When she asked me if I wanted to know, I told her to tell me, I couldn't wait. But I immediately starting crying when she said it was a girl. I cried for me, for him, for all the flack that I was going to take, for how hard it is to be a girl. All of it came out right on that exam table as she glided over my belly with the machine and the warm gel. I wanted to be happy, excited and was dying to meet this little girl but for me this was another challenge.

When it became publicly known that we were having three girls the comments came at me from everywhere as if I was a standing target: laughing, snickering, sexual demeaning, horrible comments said to our faces, via social media or just in passing.

I still receive judgemental comments and I haven't come up with a witty retort to these awful comments nearly two years later. Sadly, I know if my mom was around, a mother of three girls, she would have something very clever to say.

I didn't know what normal would be. I just knew that normal would be hard. Two is hard, staying at home is hard, dealing with children and a marriage and balancing life, is hard.

My new normal involved following Florida, Bora Bora, Palm Springs, Nelson and Greece weather patterns on the Weather Network app on my phone. This was my mediocre form of escapism. I would look these up and follow the weather patterns while planning the best times to visit these countries in a life and time, seemingly other than my own, when I would be able to visit these countries.

I would use Instagram to look at pictures of these faraway lands and think of peaceful water washing up on shore. I would look at pictures of other mothers and wonder if their lives were as peaceful and simple as they looked on Instagram. I would follow home style guides planning out furniture and decorations for the time when my children wouldn't expel bodily fluids on them or knock over kitschy knick-knacks for which I really have no use.

I would shop online and make wish lists of books I wanted to read, when I wasn't so tired that I would give up almost anything except the safety of my children in order to go to bed at 8pm.

## **ii. Sheer Exhaustion**

The feeling of tired lived in my body from the summer of 2011 until the summer of 2016. It is difficult to explain to someone the extent of exhaustion one's body can feel. Motherhood is not only physically demanding but motherhood asks so much of one's body from pregnancy onwards. Until your children reach a certain age or you have help in order to get some sleep, the weight of the exhaustion hangs as though it is a stage curtain. It feels as though the stage curtain can open at any moment and you are unprepared and forgot your lines for the performance. But you must perform. Either your body performs in creating this little baby or you are responsible to fulfil the needs of these helpless little people and you are doing both at the same time with each consecutive child. Because we had children so close, my stage curtain was continually opening. The curtains would hang off to the side, as though I could see the chance, the opportunity that they may close and give me a rest. They seemed to be permanently pulled aside and I was expected to perform and make everyone happy.

This past summer I noticed that every time I sat down, this curtain of exhaustion would swing over me, reminding me that I haven't quite left the stage. However, some of these little people have stepped in to help, they have learned some responsibility and now have the ability to help. I

have a stage hand, my husband, and I am not afraid to ask for help. This is growth, and I have learned to ask for help and clearly I have done something right if my girls have learned some independence in routine acts...right?

The fall of 2015, I began to experience a new normal twice a week. I was able to put two of my girls in playschool, twice a week, for 2.5 hours. I took Bree down into the river valley and I would turn to nature, literally. Bree would sleep and I would breathe with the wind, smell the decaying leaves, and listen to the rustling of the leaves that were left and stare at the golden trees that were preparing for winter. I was able to take these moments and breathe, I would post pictures of my walk on Instagram because in these moments I remembered myself, something bigger than myself and was literally able to take a breath having only one child to care for. My posts were hashtagged #Breeth. My little lady and I had a few weeks where these moments meant everything to me. It was these small moments she and I were able to share and, as a third child myself, I know these moments come few and far between.

Kevin and I finally found some formal help. We hired a nanny to come for three hours, every Friday afternoon. She would take Hope and Paige out to play with other children in the neighbourhood. I savoured these three hours as though they were a lifeline. I would lie in my bed upstairs, watch Netflix or doze off with my new baby sleeping on my chest. These three hours allowed me to finally have a moment where I could take in the moments of a newborn. I had gained confidence in my ability to have a small baby and I had known what to ask for, but primarily, I was able to savour these moments on newness, of love and gratitude for my sweet baby Bree. I was given the time and space for love. Love for myself and love for my new baby girl.

Because my girls were born so close together these stages really all melded into one for me. When I thought I was moving to one I fell back and when I was stuck in one stage I would propel into another stage with one of the girls. It has been hard; being a mom is hard. Each stage is taxing and realizing your new normal is nothing like you imagined is the largest part of the battle.

The climax of my feelings of family friendly escapism, as I learned to call it, was Christmas 2015. I began to daydream about getting sick. Not really sick, just sick enough that I would have to go into the hospital for two weeks, have people visit and go, have my food brought to me, be able sleep, and just lie there without guilt because I was the sick one. After two weeks they would tell me I was healthy and could go home again. I laugh at this now. I still can't think of an incident or series of events that brought me to this feeling and I just remember it being a running thought through my mind.

I think this running thought was enough for me to get through and move to my acceptance stage. During the last ten months I felt as though I could say, I may be moving into stage four. I have been enjoying motherhood, my girls, their energy and their individual personalities so much. As Hope comes closer and closer to turning five I find myself realizing what all those comments really mean about the time moving so quickly. I asked her the other day "Will you stay my little girl forever?". She replied, with her quick wit, "no mom, but I will be your little big girl forever". These are the moments, the moments you live for as a mother, the ones that will carry you through the next child melt down or heartbreak. These are the moments that you never get back.

**Stage 3 Moving toward a new normal (2 weeks to 4 months)**

**Or in my Words: The longest four fucking months of my life**

**iii. The Need**

The need to

Fall

Crumble

Cry

Sleep

Whine

Moan

And stunted by parenthood

Parenthood that I do not receive.

Death and abandonment cause this need

And stop this need

How does it work like this

Does it work like this for everyone?

The need to

Fear

Jealousy

Envy

Hate

Longing

Resentment

Anger

Exhaustion

Caused by them

By me

By life

What lesson is this?

What blessing is this?

The need to

Know

Discover

Wonder

Ponder

Search

Establish

Push and fall

The need for it to stop

Move on to

The need to

Love

Embrace  
Hold  
Smile  
Cry  
Deepen  
Learn  
It's him, he is my blessing  
These three are my blessings  
And the fear creeps in.  
Starting the cycle. Again

**iv. The storm**

The storm finally ended,  
After 25 months  
I was able to come to the surface and breathe  
For two weeks the feeling hung over me like a light mist  
Rehydrating and adding a slight glisten to life  
I felt ok  
I could move on  
I could do this  
I was going to be alright  
The sun shone its strength into my being  
Hope, literally flooded my soul  
I was going to turn the next Paige of my story  
I turned for a moment and  
The sky darkened, the wind swept up  
I couldn't see, I was drowning again  
The Tempest had hit  
Over  
And Over  
And Over  
Another storm  
This one lasting 28 months  
I nearly drowned

**D. Stage 4 Achievement of the maternal Identity (around 4 months)**

**Or in My words Boundaries (4.5 years)**

There are many moments, experiences and milestones I can identify with my realization that I have accepted and moved into my maternal identity. My experience did not coincide with the

research in terms of four months because I believe my journey was four and half years. Some of the major shifts for me are moving on from relationships that do not make me feel good. Several of my relationships existed online, face to face or a combination, or both. I had to, and still have to, determine how to navigate actions that are not positive, sometimes even hurtful. As offensive and hurtful as some relationships have become, these moments allow me to create and build boundaries and to maintain and build strength in myself.

I had two self-professed close friends who never made an effort to come and meet my last baby, Bree. I do not know how they justified the blatant disrespect of our friendship to themselves. I am sure the word busy came up often but I was hurt, offended and I couldn't believe that I had been fooled for years, that these people were my friends. In an attempt to take my strength back, I removed them from any online communities. If they weren't going to make an effort to meet Bree and see how their 'friend' was doing, they certainly were not going to be voyeurs of my life via online tools.

Recently I had a social occasion, a very surprising and sorrowful occasion. I went to sit down and one of these friends was sitting nearby. The partner of my friend said hello but my friend didn't look or acknowledge me. After nearly 2 years of choosing to not recognize I had a third child, and at an event that generally brings people together, this person could not even get over themselves to make an effort to ask how me or my family were. As I sat there, with the heaviness of the event, I realized I didn't need an additional reason to feel awful and I moved across the building. The interesting thing is when I moved, I ran into a group of old friends who were kind, sensitive and circled around me, sat with me and made me laugh. I know I made the right decision and I have found that I am again choosing the authentic doors to walk through. Seeing

this individual reminded me how far I had come and how far I had risen and I believe I was rewarded by renewing caring connections.

Looking back now, I realize it has been almost a year since I started to feel as though I was beginning to see a glimpse of my altered identity and to find and to understand myself. This is when I started closing some of those voyeuristic social media windows and I chose to connect with new profiles or with individuals who made me feel good. Some may say I may have had an obligation to accommodate these individuals, but I took my power back and I didn't tolerate their hurt anymore. Social media is an interesting window into the worlds of individuals. To my benefit and through social media, I found out that one of these obligatory individuals had lied to me. I confronted the person about this matter and I took a stand that definitely clarified expectations and created strong boundaries that still are in place today, protecting me and making me happier.

Overtime, I dropped people from social media, I didn't return calls or messages, meetups or make plans or go an extra mile for certain people; instead I went the extra mile to take care of myself. As these groups and individuals slid into a pile of ashes and were forgotten, I was able to more clearly see what individuals were interested in me, my family and my life. I began to meet and connect with new people that made me feel valued. I began to find new interests and to question older interests. I started finding communities of like-minded, kind, and caring people. I started connecting.

**i. The outside commentary of *MY* life**

I still deal with comments about motherhood, that I am a stay at home mother, and with suggestions and statements about my children, remarks about having three children and other anecdotes that my three children are all girls.

How do I know I am moving into the acceptance of motherhood? It took a long time, but it was a defining moment that I knew that I could do this and that I was a good mother and I wasn't going to take flak from anyone anymore.

Allow me to take you back to the fall of 2011, I was enjoying a walk in a green space, my second walk of the day because, as I mentioned, walking and movement were the only ways to soothe Hope and help her to stop crying. Moreover, I found relief in these walks; they gave me purpose and made me pay attention to something other than my colicky baby. I was just coming around the last bend in the path, enjoying my last few moments of the sound of the leaves which were turning a glistening gold, the smell of fresh cut grass as the city took care of the walkway, when I saw someone and gave them a nod, in order to acknowledge them but not wake up the baby.

As I walked by, the person said something to me and I didn't turn back because initially I didn't know it was for me. As time slowed down and the initial foggy reaction dissipated I comprehended the comment as, "You could lose 10 pounds". As I thought about this and the fact that he said this to a woman, a mother of an infant and someone who was out exercising, I couldn't help but let the tears fall. How had I disappeared so much that my friendly nod was returned with a comment about my weight.

Of course the further I walked away, I thought of several responses to say to this offensive individual. Anger and sadness flooded over me. These feelings washed over me like a wave reminding me that as a mother; I was an open target, I was fair game for others to offer advice, to criticize, to be told what I was and what I wasn't. This individual didn't perceive me as a mother trying to get through the day the best way I knew how and keep my child happy and safe. To this person I was an overweight mother who needed to do something with herself.

Four years and three kids later, with my strength returning, I was able to handle a similar situation in a healthier way. I knew my children were happy and I was able to experience moments of confidence. This confidence led to moments of happiness and to further develop into stages of happiness.

I took my three girls out to a public space and I had two comments directed my way, one passively and one directly. One individual directly commented on my mothering skills and I looked at her and asked her to not offer advice unless it was requested as it is rude. When she didn't acknowledge my response, I went up to her, three kids in tow, and repeated myself. She backed down immediately and wouldn't look at me. I was so tired of people making me and my mothering the object of ridicule that I responded politely and sufficiently loud enough for my girls to hear so they learned that when someone was being rude you can be respond, and say that you don't appreciate their rudeness. And when my reaction was ignored, I reminded this individual again that her rudeness was unacceptable. I have no idea if a lesson was taught to any other adult that day, but I knew that I had changed. I had accepted my role, my place in life and how I was as a mother. I am a great mother and if you want to say otherwise I will defend my position.

After that, I did something I rarely do, I posted my experience on social media. I was overwhelmed with the amount of support I received from people defending me and responding about how they, too, had experiences of bullying as a mother. I was again reminded that I made the right decision. I wasn't going to carry sadness and resentment around as I did with my first experience. I was now going to carry around confidence and pride that I did the right thing and expect that any person would think twice before offering a suggestion to another new mother. I felt confident and satisfied after not only defending myself and my choices, but also having so

many people in my online community share their experiences. I learned that I am not the only mother who sometimes experiences negative behaviour and that it was nice to have the camaraderie but also to have others say, “You are a good mother!”

A comment that impacted me more than others was from my dad’s girlfriend. She wrote to me and said that ‘You are a good mother’. As I read these words, hot tears fired up in my eyes. It is not that I don’t know this or recognize I am a good mother, but that I never see or hear the actual words. My husband says it to me sometimes and I feel that he is saying it to appease me when I am upset. I believe he thinks it, but he is saying it in order to settle me. When I read the comment from my father's girlfriend, I believe it could have been said in a similar placating way, but for whatever reason, I felt that it came from a sincere place. I felt that, as a mother and a grandmother, she has seen and heard and been through the hard stuff. She said it to me so it really and honestly must be true. Even while writing this, I tear up. When I observe any mother having a hard time, I try to say in a non-condescending but truly sincere way, “you, my sweet lady, are a wonderful and good mother”.

It makes me sad because I don’t have my own mother to tell me that I am a good mother. I will never hear her say the words. I know she would be so proud of me and love my girls fiercely, but I will never have this amazing source of knowledge, love and support beside me to say “you are a good mom”. This is both heartbreaking and heart wrenching with the ability to destroy, but with an accepting community and by reaching out to others I have found peace and support for myself as a mother.

## **ii. Societal Dismissiveness**

Recently, my girls started preschool. On the first or second day, they were asked what they would like to be when they grow up. I do not know how the conversation started, whether there

were suggestions or pictures of careers students could choose, or if there was even was a conversation. Two months later my daughter clearly had an idea of wanting to become something in her mind. She stated she wanted to be a zoo keeper. I told her that is wonderful and that I thought she would make a great zoo keeper. At that point she looked at me and said, "Mom, why are you nothing? Are you just a mom?" Looking at these words on print or hearing this story from another person as the mother would make my heart drop, take my breath and break my heart. For some reason I didn't feel this way, I felt bad that she clearly didn't see what I am doing as something of value, such as a zookeeper. Is this my responsibility to teach her? Yes. Are we, as a society, teaching the idea that a mother has no worthiness in the future? Yes. Is society teaching that motherhood is not a respected, talked about or praised role in society? Yes. What can I do, as a mother to increase the understanding and acceptance of the importance of motherhood? I can start this conversation and be a role model for her. I know that my mother who stayed at home and later become a teacher was a positive influence, she was everything: to me, my family, her students and to others that were lucky enough to meet her. Sometimes it isn't even comments, it's the dismissiveness of motherhood, as though mothers have nothing to offer. It seems as though the only thing I am able to discuss is mothering or children. I can only hope that if my three girls become mothers and are treated this way, they will know that the actions of individuals are about those particular individuals and not about a mother's choices. As my daughters' mother, I hope to reassure my girls about the total unacceptability of notions about dismissiveness and beliefs that motherhood is invaluable. Mothers need support, love, and to receive recognition for the work they do. Mothers, I believe, need to start by doing this for themselves and for one another.

### iii. Media Dismissiveness

Another moment that occurred when I realized I had accepted maternal motherhood was October 13, 2016 while watching Grey's Anatomy (Klein & Mahoney), episode *Falling Slowly*. The description on the ABC website for the episode was "Jackson and April adjust to their new normal with the baby" Found November 1, 2016. The scene begins with April standing in the foyer of the hospital, holding her newborn baby. I guess that the baby is approximately 6 weeks old, as she can hold her head up and April hasn't returned to work yet. April is standing, watching employees of the hospital rush around helping patients. April becomes increasingly agitated watching everyone work and when she sees her baby's father she quickly hands the baby off to him and states she "just needs to work a bit".

I became so angry watching this scene. It was a visceral reaction that swept over me and was continued by a nagging annoyance of how this episode continued to play out. April complained at how she was so bored at home, watching the baby sleep and watching the baby watch her, and for her to feel content with herself she had to be at work. To me this suggests that April's identity is completely dependent on her work. As the description of the show suggests "Jackson and April adjust to their new normal" April was not adjusting, she was simply going back to her old identity. This does not empower women or mothers: it implies that in order for a mother to have worth she must be doing something other than mothering. They didn't suggest she was having trouble with the transition to motherhood, just that she was bored staring at her child.

This episode was followed by Oct 20, 2016 episode *Both Sides Now* (Driscoll & Wilson, C.) April returns to work and her first scene is describing how she couldn't talk to herself anymore and that is why she came back to work. Perhaps she could have spoken to other mothers, or found a new interest for herself or gone shopping. Anything other than representing motherhood

as a secondary, unfulfilling obligation. If they had shown her struggle with her identity I think the scenes may have been more relatable, however what I took away from these scenes was not April trying to adjust to a new normal, just looking for the old normal to make her feel better.

April kept telling us how much she loved her baby but she needed more, yes we all need more but does it have to be your job, is that the only way for a woman to identify with herself.

I have reflected on my reaction to these two episodes. I feel that previous to last Christmas I would have taken these scenes personally considering that I must be missing something as 'just a mother'. The storylines seem to imply that I am supposed to be desperate to return to work and find meaning only in employment. Instead, I regard the storyline to be redundant in the portrayal of mothers on television. Such a portrayal supports the romanticized idea that a mother's identity can be fixed with returning to the old you and that the transition can be easily fixed without growth.

The stages of growth and transition came slowly and, for me, changed with each child.

Sometimes I am still paralyzed with the massive amount of responsibility. I struggle with what I should do if I have some time to myself: work on my paper, go and get groceries or sit and stare at the wall in silence. Many times, other people's thoughts and expectations factor into my decision, sometimes it is plainly necessity that we actually need diapers. Other times, I just cannot work, my mind blanks and I can't work on anything so I end up staring at the wall. I have watched endless television shows at all hours of the night to slow my mind. I have attended mindfulness retreats, practiced yoga and prepared positive motivation statements. Often, I am interrupted by someone else's need and have to move on to the next moment. But I do know my

time will come, and tasks such as this paper will be complete and my children will grow into three healthy and loving, young women who one day may choose to become mothers.

My three girls are awesome. I am a great mother. I don't feel I have to justify that I like colouring, that I like doing crafts and singing silly songs with my girls and yes, I am even beginning to like pink. Now I look for others who are like me. I found a crafting community online and have taken up weaving and I have found people who inspire and respect motherhood rather than believe the job of mothering is 'nothing'. When I once asked someone what their friend did, I was told that she was a mother and did nothing: she is a stay at home mom. I believe that in the role of a stay at home mother, you have both a responsibility and a privilege that not everyone has the honour of receiving.

#### **Stage 4 Achievement of the maternal Identity (around 4 months)**

##### **Boundaries (4.5 years)**

##### **iv. Medical Mystery**

7am

No papers. The stench of ketchup

The chit chat

Parking. Surgery.

Questions

Name called and still a mystery

Bag here. Head here.

Don't move.

Stench of your stale smoky fingers.

A sign of your process

Of dealing with the mystery

Your fear in my nose

Up. Down. Whirring.

What is happening?

What do you see?

Fear. My girls. My life.

Abandonment. Again.

**v. Support**

In a world that is hard  
Hard on women, mothers, girls  
Let us be a gift to one another  
Let us be the backbone and the support  
The Love and the Kindness  
Let us offer words of Encouragement  
You are doing a great job  
“What a nice child”  
“You got this girl”  
“This too shall pass”  
“Everything is going to be ok”  
“You are not alone”  
“This is hard”  
“You got this”  
“You are a great mom”

As I work through this paper, I suddenly realize the coincidental, and serendipitous time of the collision of the American presidential race with my task of writing a narrative about motherhood.

As I watched the election on November 8, 2016, I am amazed, and perplexed about what the United States wants for their future. From what I observed, a woman who had fought for others for forty years was fighting for the chance to fight for an entire country. She supported minorities in every sense including LGBTQ, race, religion and feminism and was supported herself by a team that believed in her and the rights of all individuals. Individuals stood by her with a loyalty I have never seen nor experienced, and she lost. She competed in one of the longest and harshest rounds of politics in history in order to continue to give and to support others. I have to question what it will ultimately take for women to support women, men to support women and for all of society to support, encourage and rally behind mothers.

As a mother of three girls I watched in awe as the United States elected Republicans and worried with a gut wrenching, anxiety how my girls would believe they should be treated as they grow

into women. The morning that I woke up and saw the final numbers and awaited Hillary's concession speech, I felt that awful feeling in the pit of your stomach after the break up with a first love, the feeling that we can never go back, how will we go forward and how long will this feeling last. As I watched her speak and she looked into the camera, it was as though she was speaking to me and my three girls... "to all the little girls who are watching this, never doubt that you are valuable and powerful and deserving of every chance and opportunity in the world to pursue and achieve your own dreams" (YouTube Hillary Clinton, Concession Speech, 16:44 November 9, 2016). This is the message women can take away as women and as mothers. You are powerful, you grew a person and now you are raising a person. This alone takes, guts, stamina, patience, organization and love. It also take all of these attributes to be a woman, so let us be kind to one another and help one another along with support, gratitude and encouragement.

The fear I have is that my three girls will not grow up with this message of worthiness. My fear is mixed with anxiety and concern that the support we had as women has been crossed out literally on each and every voting form. The pounding on my forehead is as though a gavel is hitting my sensibilities to remind me that people have already fought for equality. This may not seem to be your job, but as a mother it is and as a person of a culture and society it is. All that we can hope is that the people our children surround themselves with will help them learn that they know they are valued and important. Worthy of every dream there is. Even if that dream is to be a world leader or a mother because both of these roles are relevant and significant.

If you are a mother, or are considering becoming a mother, rally all the women around you and become their biggest support. When or if you are a mother, be the biggest support you can be.

Oh and lastly, don't offer advice to mothers, they really hate that.

Be kind to yourself, have a little Hope, the Paige will turn tomorrow and Breeth.

### VIII. Epilogue

As I come to the conclusion of my academic journey around motherhood and identity, I feel myself hesitating. When I think to myself why I am hesitating, I realize I am uneasy of what I will tell people when they ask the dreaded question “what do you do?”. When I respond that I am home with my kids and I am a mother they react with the smallest twinge, the faintest adjustment in their face, so minute you could miss it if you were not confronted with it on a daily basis. This small but heavy reaction affects my identity. The twinge reflects a judgement, a reaction or a discomfort that they do not ask about or respond to; rather they make excuses for: “Oh, your kids are so young,” or “The time goes so quickly” or “I can't wait to see what you do next, you are so talented.”

In the five years I have been at home, not one person has asked me why I choose to stay home. To listen to my thought process regarding my decision, through my writing, the research and the camaraderie associated with the project, I still feel both judged and as though the position of motherhood needs to be justified. As my identity continues to shift into the acceptance of my position as a mother and no longer as a graduate student, I anticipate discovering peace in my new identity and excitement for the new journey I will face. My goal is to sit with motherhood, sit with the feelings and reactions and grow stronger and settled by not having to satisfy the needs of others to justify my decision to be a stay at home mother.

I have learned so much on this journey. I have had the pleasure of speaking with many wonderful people, being exposed to many amazing ideas, discussions and I have found a tremendous amount of support. I have discovered new communities, both face to face and online, that have given me confidence, motivation and strength.

My hope and goal for writing this paper was to give voice to my experience. My ultimate hope is that my writing and experience resonates with one other mother, to give her a sense of peace of mind and confidence that the struggles she may be experiencing are real and justified. The love she is feeling is insurmountable and sometimes, ironically the experience of motherhood may also feel insurmountable.

Sheena Wilson and Diana Davidson (2014) in *Telling Truths, Storying Motherhood* eloquently acknowledge the struggle mothers experience in their book *Telling Truths, Storying Motherhood*:

“And finally, there is the plight of almost all mothers who parent in the shadow of imaged and imposed social dictates around how mothering should be practiced; and these notions of motherhood engender shame and confusion, and create fractures amongst communities of women based on false visions of what defines motherhood” (Wilson and Davidson, 2014, p. 2).

Communities need to continue the open and often difficult conversations of motherhood. If these conversations continue, mothers may not feel that they are not being judged or that they have to justify their choices and actions; rather they will feel confident to surround one another with communal support, encouragement and ultimately, kindness.

Despite the completion of a comprehensive literature review, analysis of personal journals, review of social media use and analysis, I am still driven by the expectations to include sections labelled “Discussion”, “Findings”, “Further Areas of Study” as if I have not already substantiated, with evidence, my research, experience and reason for exploring the topic of motherhood.

Through wonderful discussions with other academics, who are mothers, I realize that adding these traditional categories and headings is not necessary. I realized that, to do this, was analogous to endorsing the continued bogging down, societal pressure, and notions of motherhood. The research clearly states that motherhood has been romanticized and mothers are

feeling isolated, lonely and judged. My own experience and my involvement in mothering communities, online and face to face, adds an additional layer of evidence to collaborate with the notions around motherhood I have researched and experienced. It is not necessary for me to continue to provide proof of these findings through the use of imposed and less appropriate language. The key findings are: 1) women experience the transition to motherhood in individual ways. It may depend on their child, the support they have around them, their own life experiences, when and if other children follow the first, 2) stages are driven by individual experiences, and their experience of motherhood may be enhanced by exploring social media communities that support and encourage them as mothers 3) women have the power to be active change agents in creating their environments, using social media or face to face communities, through the language they use. If women build a community of acceptance, love and encouragement, mothers will have access to the support they need to successfully transition into motherhood.

After some time of thinking why I felt this need to prove my research I came upon the following from Fiona Nelson's *In the Other Room: Entering the Culture of Motherhood* (2009):

As long as mothers occupy a dimension of social space that is populated by other mothers, they remain in a situation where only other mothers can truly understand the experiences they speak of and the languages they use to do so. As long as mothers, what they do, what they experience, what they say and what they feel, are devalued, ignored or ridiculed, women will be left in the ironic position of needing and seeking affirmation of those reviled and stigmatized aspects of their lives but being able to find such affirmation only from other people from whom they must distance themselves because they, too, are the reviled. I suggest that it is a victory of patriarchy where women have so internalized misogyny that they must simultaneously seek affirmation of their devalued experiences while rejecting and disavowing the very people who can offer such affirmation. (Nelson, 2009, p. 106).

In light of the last year, and the politics that surround women, this feeling of justification for our rights may be highlighted or demeaned. As a collective group, we need to find our footing, strength and pride and move forward stronger than ever. It is essential that we do this for ourselves, and as a mothers, we do this for our children. Begin by finding your physical communities, your neighbours, your best friend from high school, or your virtual communities you find on Instagram or Facebook, or start with this paper. Recognize, that you are not alone and that you are worthy of each and every feeling and experience you may encounter.

Motherhood blesses us with the highest highs and sometimes the lowest lows. Surround yourself with others who build you up and take a moment each day to acknowledge yourself and another mother next to you. You may never know how much a gesture, comment or an acknowledgement of understanding can mean to another person.

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