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THE CREATION OF NATURAL MOTHERHOOD: A CALL FOR A REBIRTH OF THE MATERNAL

A THESIS APPROVED FOR THE DEPARTMENT OF HUMAN RELATIONS

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Dedication Page

I dedicate this to the people in my life that have helped shape the woman and mother that I am: my Grandmothers: Effie and Reda, my Great Aunts: Velma, Margie, and Beth, my Parents: Jim and Mary, my Sisters: Velia, Marta, Kim, Lisa and Randi, my Brother: Dale, my Children: Rob, Adam, Shanna, Sonia, Megan, Ian, Octavia, Joseph, and Alex, my Grandchildren: Brendon, Ari, Little P, and all the rest to come, my Nieces and Nephews: Zek, Kylar, Caleb, Elora, Amber, Elyse, Yvonne, and Bradley, my Teachers: Sister Agnes DeSales, Sister Catherine Marie and all women and men who seek to parent in a non-traditional manner to facilitate the personal identity through the lived experience of a mother and practice empowered mothering.

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Abstract

There is considerable intricacy associated to the maternal identity in the modern western culture. One of the most distressing issues with mothering is that it is subject to external influences that conceptualize an idealized mother identity which is likely to attenuate the experiences of mothering and impact the personal identity of a mother. In an integrated review of relevant scholarly literature this paper seeks to explore how the paradigm of the "natural" mother identity was created in relation to psychological constructs that characterize positive states as normative experiences while distinguishing negatives states as uncharacteristic of the maternal identity. The primary purpose of this analysis is to illuminate the need for the creation of a conceptual framework for a developmental process of the actual lived experience of mothers whose realities do not align with the idealized mother ideology.

Chapter 1

Introduction

Background and Purpose

According to the US Census Bureau there is an estimated 43 million mothers in the United States (Martin, Hamilton, and Osterman, 2016). Adrienne Rich, Academic Scholar and Feminist Poet wrote, "We know more about the air we breathe, the seas we travel, than about the nature and meaning of motherhood (1976, p. 11). We know and accept the nature and meaning of the idealized socially constructed "natural" mother. However, we are not as familiar with the developmental process of the actual lived experience of mothering. In this paper "natural" mother refers to the societal identified qualities and cultural expectations grounded in the ideology surrounding traditional motherhood that determines who is a natural or proper mother. There is a need for a reexamining of the maternal that takes into account the nature and meaning of the day to day actual lived experience of mothers who may demonstrate other qualities in addition to those identified within the idealized mother identity. The purpose of this research is to illuminate the need for the creation of a conceptual framework for a developmental process of the actual lived experience of mothers whose realities do not align with the idealized mother ideology.

In the Child Maltreatment 2015 Report (Retrieved from http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/child-maltreatment), 683,000 infant and children in the United States were reported as neglected, abused, or murdered. Over half of those reported

incidents were perpetrated by women in the caretaker role. These findings suggest that mothers demonstrate characteristics other than those identified in the idealized mother identity. Researchers reported we have more knowledge about rodent maternal brains than we do human maternal brains (Glynn, 2014), in addition there is a lack of psychological theory involving the development of a maternal identity (Raphael-Leff, 2010 and Athan & Reel, 2015). More specifically a lack of psychological theories that involve the subjectivity of a woman's identity that conceptualize the magnitude of involvement of negative states in addition to positive states in the development of the maternal identity and how to facilitate awareness and acceptance of the transformative nature of the relationship between the two.

A mother and participant of a study about shock and motherhood shares, "I think I've found the reality of being a mother is a lot different to what I imagined it would be like. I had this ideal in my head." (Read, Crockett, & Mason, 2011). There is a need to gain a better understanding of the lived experience of mothers so mothers can be better prepared to cope with the external influences that affect their internal perception of themselves as a mother which relates to how they engage in mothering in their lived experience. Since the tendency for social discourse is to focus on the positive states of idealized motherhood the lived experience of the mother which encompasses negative states in addition to positive states is likely to be carried out in isolation, silence, and shadowed by shame for fear of failure to meet the unrealistic cultural standards in which to mother an infant/child. Additionally, when mothers find

themselves feeling persecution, isolation, ambivalence, and anger they are likely to hide their shameful negative experiences from people close to them as well as professionals (Raphael-Leff, 2010 and Almond, 2010). This was reflected by a mother and participant in a study in relation to her experiencing being overwhelmed with mothering her 3 children and needing help, "It took me a long time to admit to anyone that something was wrong because, like I said, I was scared. I was ashamed" (Valencia, 2015).

The implications of not meeting the expectations of the idealized maternal identity is damaging to mothers and their infant/children. Meridith Berlin,

Previous Editor-in-chief of Seventeen Magazine and mother of 3 children shared,

"Unless we start admitting to ourselves and each other that it is not always a walk
in the park, our guilt, fear anger, and depression will continue to go underground.

And as we have learned that is not a healthy place for them to be" (Douglas and
Michaels, 2004, p.323). To have a mother, an esteemed professional in the public
domain speak openly of the negative states some mothers experience provides
needed public awareness.

Design

This paper is an integrated literature review as it served to provide the structure in which to ascertain what common ideas and concepts exist that intersect with the attachment theory and the idealistic "natural" mother identity to illuminate a need for a paradigm shift to present a conceptual model for a developmental process of the actual lived experience of mothers whose realities

do not align with the idealized mother ideology. The literature review followed the format for conducting an integrative literature review according to the guidelines and examples of (Torraco, 2005). A comprehensive search of qualitative, quantitative, and mixed method research data in published peer reviewed articles was conducted electronically using the Bizzell Library of the University of Oklahoma. The lack of research in the subject matter proved to be a challenge and texts were incorporated into the search to provide a larger resource pool.

The search was conducted in the following databases: Academic Search Premier, JSTOR, PsycINFO, and PubMed using keywords that queried for the psychological development of the mother. The terminology used in the advanced search option in each database was maternal identity, attachment, maternal attachment, detachment, maternal ambivalence, social identity, personal identity, shame, resiliency, and maternal well-being.

The information was taken from a cross-section of academic disciplines and was reviewed for content and relevance to the topic. The exclusion criteria for text and journal publications was: any duplicated resource, any resource that did not directly relate to the topic and purpose of the study. The texts were accessed through the University of Oklahoma inter-library loan program and some were purchased through Amazon.com. The final number of journal publications used was 42 and texts was 21. The organization of the literature was established using a time frame from the last 65 years to account for mature constructs up to 2016 to account for newer constructs. Then further sorted by decades, by the themes of

attachment, detachment, ambivalence, identity, shame, and well-being. Once the literature was organized, reviewed, and critically analyzed the crafting of the paper began.

Practical Implications

The concept of the idealized mother and the lived experience of a mother need to be shared in an early childhood education setting with the child and the mother. If education of this situation begins with the child then as they grow their awareness of this situation will be a part of their knowledge base. The mothers need to be included in this educational process as well as it could help them frame their experiences as a mother in a more positive manner that encourages them to pursue their health and well-being.

The inclusion of health care workers would be of great benefit in educating women about the idealized mother and the lived experience of a mother. The healthcare professional could be proactive as they could share this information with women who are considering pregnancy. It could also be shared with women who are already pregnant.

Anticipated Take-Away Contribution

The maternal attachment/detachment developmental process represents an internal conflict that arises when a mother is interacting with her infant/child and she cannot get cohesion between her personal identity which involves her lived experience and her social identity which involves the expectations of the idealized maternal identity. The maternal attachment/detachment developmental process is

a new way to view maternal ambivalence. Ambivalence framed in the current understanding positions a mothers needs against the infant/child's needs. This facilitates an abnormal situation which the mother blames the infant/child and creates a separation between her and her infant/child. Where recognizing ambivalence as a struggle within herself, and addressing it as such could possibly bring her to a point of understanding and accepting the lived experience.

Operational Definitions

The terms that are central to this review and require definition are woman, mother, mothering, motherhood, natural mother/motherhood, and empowered mother/mothering. For the purpose of this paper the term woman is referring to a biological female who possesses the physical attributes to bare offspring. The term *mother* is referring any person self-identifying as a caretaker of an infant/child. The term *mothering* is referring to the everyday practice or lived experience of being a mother (Rich, 1976). The term motherhood is referring to a social institution characterized by specific meanings and ideologies created by the patriarchal social system. (Rich, 1976). The term "natural" mother/motherhood is referring to a mother that is selfless, child defined, without further identity, child centered, accepting of the isolation within the home, and believes her suffering is mutually inclusive with her child's (Rich, 1976). The term "natural" mother/motherhood is distinct from the natural mother movement which emphasizes the logics of behavior of what good mothers do: breastfeed, use cloth diapers, and engage in natural childbirth. The term empowered mother/mothering is referring to a mother that is self-constructed and practices mothering with

agency, authority, authenticity, and autonomy not allowing her state of mothering to define her identity but actively pursuing her selfhood through many venues (O'Reilly, 2008).

Theoretical Foundations

Attachment Theory

John Bowlby (1969) created the attachment theory from his interactions with infants/children in war torn Europe in an effort to enlighten psychopathology as it pertains to child development. It is a comprehensive theory focused on the mother's role in the development of her infants/child's personality and emotional growth that laid the frame work for the psychological development of the infant/child but failed to consider the psychological development of the mother. The attachment theory contextualizes the "natural" mother identity by placing the child in the role of the subject and mothers as the object to ensure the healthy development of the infant/child. The objectification of the mother has fashioned a space in which motherhood is influenced by external forces (social) and not by the woman herself (personal).

The Stressor Detachment Model

This theory was created by Sabine Sonnentag and Charlotte Fritz (2015) to assist workers in mentally detaching in non-work time to allow for psychological resources to rejuvenate. In the event that the worker is rejuvenated they will experience a decrease in stress, an increase in well-being, and their work capacity will increase. This theory was reframed to contextualize mothering as work and

illustrate through repurposing the theory the need for mothers to have the ability to enjoy healthy detachment from their infant/child.

Identity Theory: Social and Personal

Social identity is a person's knowledge that they belong to a social category or group and they act in accordance with that group (Weinreich, 1998). Personal identity refers to a person that identifies as a unique individual and behaves in a manner in which they so choose (Tajfel & Turner, 1979). These theories helped to contextualize how mothers process the expectations of the "natural" mother identity in relation to their lived experience.

The Shame Resiliency Theory

Dr. Brene Brown (2006) created the Shame Resilience Theory (SRT) out of her desire to produce a data driven theory to address how shame affects women. SRT contextualizes the relationship women have with shame. It deconstructs shame through the conceptualization of the theoretical sampling of data and participants' voices. A central theme of this review is the lived experience. The outcomes of this study are based in the lived experience of the participants. Additionally, shame is a significant aspect of motherhood and effects the lived experience of mothering. Last, it presents a conceptualized and practical pathway that allows for shame to be addressed and resiliency to emerge and be cultivated in a way that promotes empowered mothering.

The purpose of this integrative literature review is to illuminate the need for the creation of a conceptual framework for a developmental process of the

actual lived experience of mothers whose realities do not align with the idealized mother ideology. This paper will first examine the common ideas and concepts in the attachment theory as they relate to the creation of the idealized "natural" mother identity. Next, it will illustrate the need for a paradigm shift to create a conceptual framework for the developmental process of the actual lived experience of the mother in relation to their development not the infant/child or pressure from other external influences. Last, it will introduce a new concept, maternal attachment/detachment development process to bring light to the simultaneous occurrence of negative and positive states mothers' experience.

Chapter 2

The Psychological Paradigm of Mother Making

The Attachment Theory

Psychology explores the mind and emotions in relation to human behavior. The idealized behavior for the human mother has been facilitated by way of the attachment theory. The "nurturer" according to Bowlby (1969) fulfills the role in an innate process that facilitates survival of the infant/child through the bond forged between the mother and child. In considering motherhood the actual physical attachment ceases upon parturiency or the beginning of the process of birth up to the time when the umbilical cord is severed then is succeeded by the emotional and psychological attachment.

This chapter is going to review how several significant terms and phrases expressed within the attachment theory relate to and assist in defining the idealized maternal identity by promoting child centered and child defined motherhood. It is going to review the gap in research concerning the role of the father, siblings, and the environment within the attachment process. Then it is going to review how attachment parenting and intensive parenting embody the attachment theory. The significant terms coupled with the gaps and inconsistencies related to the attachment theory promote the "natural" mother identity through the practice of intensive parenting and attachment parenting.

John Bowlby created the attachment theory which is a comprehensive theory crafted from his work with institutionalized and severely neglected infants and children in war torn Europe that focused on the mother's role in the development of her infants/child's personality and emotional growth that sought to enlighten psychopathology. While it has laid the frame work for the psychological development of the infant/child it has failed to consider the psychological development of the mother.

In his theory he postulated that the emotional ties between the infant/child and the mother existed as an evolved response that differentiated from all other needs, including food, to promote survival such as the infant/child clinging and following the mother as opposed to suckling and crying. Therefore the more available and responsive the mother was to the needs of the infant/child the more secure the infant/child was to leave that base and explore the world. Bowlby's attachment theory by declaring survival of human babies depended on the emotional attachment or "nurturing" of the mother to the baby gave way to the modern practices of attachment parenting and intensive parenting. These parenting styles are reflective of the attachment theory. They will be discussed in a subsequent paragraph in this chapter.

It is worthy to note that Bowlby was open to his attachment theory shifting and growing. Where Bowlby crafted and discussed theory, he lacked the empirical data to bring it forth to the scientific scope. His associate, Mary Ainsworth (1974), discovered a way to measure attachment in a natural setting through her "strange situation" procedure. This enabled empirical data to be

extrapolated from the interaction of the mother and infant/child (Grossmann & Grossmann, 1999; Bretherton, 1992).

The theory was considered viable by professionals before the "strange situation" generated empirical data. Which can possibly signify Bowlby's peers were aware of his interest in the subject as he had written papers in the 1940's while working at Tavistock Clinic in London and he was respected enough to receive a commission from the World Health Organization (WHO) to write a report incorporating his thoughts and interests with some of his peers concerning the homeless children of postwar Europe (Bretherton, 1992). "The Nature of a Child's Tie to His Mother" was the first of the five papers Bowlby wrote that positioned the thesis for the attachment theory (1956). The title as well as the paper speaks to the role of the mother, not the father which contextualizes the attachment process as the responsibility of the mother thereby aligning the theory with the concept of the "natural" mother.

The outcome of Bowlby's research was a published trilogy related to his theory: the first was *Attachment* (1969), the second was *Separation* (1973), and the third was *Loss* (1980). The publication of the report the WHO commissioned Bowlby to produce in 1951, "Maternal Care and Mental Health" marked the conceptual framework for his theory of attachment. This publication grounded the attachment theory with the phrase "maternal deprivation". Why did he choose to name this situation maternal deprivation instead of parental deprivation? The children were deprived of their father as well, yet there was no responsibility allotted to the absent father.

"Maternal deprivation" was a blanket term he used for the many situations he encountered some semblance of deficiency in maternal care. When he considered these situations he theorized that the infant/child was left with destructive emotions and behaviors such as anxiety and stealing, among others. The term "maternal deprivation" in and of itself lends to the concept that a mother is the sole individual responsible for her child's physical, spiritual, psychological, educational, and emotional development. The adaption of the attachment theory aided in relegating women to the private sphere.

The binary of the public and private sphere is one that divides men and women by their work duties. Men are responsible for the duties in the public or social setting where women are responsible for the duties within the private or domestic setting. According to the U.S. Census Bureau in 1967 14.8% of the female population were in the workforce as compared to 43.2% in 2009 (Retrieved from http://www.census.gov/prod/2010pubs/p60-238.pdf). While the U.S. Bureau of Labor Statistics reports in 2013 it had risen to 57.2%. (Retrieved from http://www.bls.gov/cps/wlf-databook-2013.pdf). Those gendered lines have become somewhat blurry with rise of women in the workforce. However, the physical, spiritual, psychological, educational, and emotional development of a child remains a principle duty for women. This notion of women remaining or presiding in the domestic sphere lends to the framework formulating a normative role of a woman's identity to include motherhood as part of the female nature and supports the idealized maternal identity.

Bowlby further solidified the concept of the "natural" mother, within the same publication when he stated, "The infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother substitute) in which both find satisfaction and enjoyment" (1951, p. 13). In considering this statement: first, there is a "should" statement or an expectation that the mother will not only experience a warm, intimate, continuous relationship, but also gain satisfaction from it. The implication is that if she is not experiencing this warm, intimate, continuous relationship with satisfaction there is something wrong. People expect a lot from a mother. "Mothers "should be" compassionate, understanding, caring, loving, and of course, in control of their lives. We can't usually fail and if we do, we are criticized by society." (International Museum of Women, 2006) The second consideration with this statement is his inclusion of the concept of a "permanent mother substitute" as it clearly references the mother. Additionally, the focus and collaboration in research has been primarily on the role of the mother with the child. This supports the traditional view of women as primary caregivers whereby their identity will be defined and centered upon their role as such (Almond, 2010; Blaffer Hrdy, 1999; Chodorow, 1978; Crittenden, 2010, Douglas & Michaels, 2004; & Johnson, 1988).

One could theorize that Bowlby was actually taking into account that a permanent mother substitute could fill the role. However, it is a statement unfounded when also considering his term "maternal deprivation". It is evident by his word choice he was focused on women performing these nurturing acts.

Additionally, the lack of research conducted by himself, Ainsworth, Main, and Hesse incorporating the roles of the father, siblings, and the environment where the attachment took place, as well as the confinement of the attachment occurring within the parameters of the 3 categories secure, ambivalent, and avoidant; disregards mothers as humans with inconsistencies who are coping with chaotic circumstances that effect their level of sensitivity throughout each day and propagates the notion of a "natural" mother selflessly "nurturing" her infant/child to the exclusion of formulating a personal identity as a mother.

The Father Siblings and Environment

Although there is an abundance of research on the mother and the attachment theory it is the lack of knowledge of the roles the father, the siblings and the environment that leave an unfinished deduction regarding the full scope of attachment beyond the role of the mother. First, Bowlby did address the role of the father in the attachment process however, he did not go beyond assigning the father the role to provide the emotional support to the mother so she could carry out her role as the "natural" mother. Despite the fact that assistance can be helpful, it is still a hands off approach for the father and not a functioning reality in modern times as 8.6 million or 4 out of 10 households in the United States with children under the age of 18 are headed by single mothers (Wang, Parker, & Taylor, 2013). Moreover, in homes with both parents present and working outside of the home the principal responsibility for the care of children and house work remains with the mother. A mother spends 14 hours engaged in child care and 18 hours engaged in housework a week where the father will spend 7 hours engaged

in child care and 10 hours engaged in housework respectively (Wang, Parker, & Taylor, 2013).

That leaves a high probability for the incidence of mother blame, "a term that describes mothers being held responsible for the actions, behavior, health, and wellbeing of their (even adult) children" (Jackson & Mannix, 2004, p. 150). What role does the father have in this developmental process and is blame placed on him as it is on a mother. Mother blame is a sexist bias relating to studying the contribution of the mother to her infant/child maladjustment while excluding the fathers' role in the infant/child's developmental process. The term father blame does not exist. This is not to say that father blame is a term that needs to exist but, it is an indication that the term "maternal deprivation" has possibly directed the use of the concept of mother blame through the bonding concept. The deeper responsibility in this dilemma is to move beyond blame of either parent and determine a solution. Blame is not a solution. In this circumstance it is an avenue to perpetuate a normative role of motherhood that is bound in guilt and shame. In addition to the mother and father being a part of the attachment process, siblings also have a role.

Bowlby did not factor the role of the sibling connection in the attachment process. As sure as they exist, they bring something to this process. Moreover, Bowlby did not take into account the environment in which the mothers and infants/children were immersed in while the bonding was occurring. In relation to the environment it is interesting to consider the concept of attachment was empirically backed through Ainsworth's strange situation research which

involved white, middle-class infants and mothers. The fathers were not present during the study nor were they involved in the study itself (Ainsworth and Bell, 1970). This is a reflection of the patriarchal, normative concept of a family. Finally, this theory does not account for the fluidity of mothers and situations beyond the 3 classifications of attachment: secure, ambivalent, and avoidant (Ainsworth, 1970, 1978). Even with discovering a fourth classification, disorganized, the binary of the "good" or "bad" mother as defined by the infant/child remains as the normative standard (Main and Soloman, 1990). The "good" mother being white, middleclass, married, and a stay-at-home mom engaged in selflessly nurturing her infant/child while the "bad" mother is inclusive of all others who do not possess these attributes (O'Reilly, 2004).

It is true for that time period and for all intents and purposes women have been and continue to be the individuals predominately responsible for caregiving of the young. That said, when comparing the gaps of knowledge of the effect these significant people and concepts, in addition to the lack of accounting for permutations of mothers, environments, and situations that occur during the attachment process to the excessive knowledge of the role of a mother in the attachment process allows for the mother to be scrutinized with debilitating expectations and dependent on the data and outcomes that support the patriarchal idealistic view of the "natural" mother.

Attachment in Action

The "natural" mother identity is demonstrated by the popular contemporary approach of intensive parenting, this style is comprised of 3 main

concepts: the mother is the best person to care for the child, the child's needs should define the mother, and the child should be seen as a source of delight while being the center of the parents' world (Schiffrin, Godfrey, Liss, & Erchull, 2014; Hays, 1996). Despite this approach being related to negative mental health outcomes for mothers they continue to practice it because they may believe it makes them better mothers and think it improves their infant/children's development (Rizzo, Schiffrin, & Liss, 2012). Likewise, attachment parenting, is a similar parenting approach that provides parents with an identified skill set to generate sensitivity which involves optimal situations or the seven baby b's: birth bonding, belief in the signal value of your baby's cries, breastfeeding, baby wearing, bedding close by baby, balance and boundaries, and beware of baby trainers (Sears & Sears, 2003). These approaches exemplify the attachment theory because they are child centered and facilitate unrealistic expectations for mothers to conform to.

Ainsworth shared around the time of Bowlby's death that "attachment theory as originated by Bowlby is an open-ended theory—open to extension, revision, and refinement through research" (1990, p. 463). In light of that fact, scholars began to address the role of the father in the attachment process such as Bretherton, 2010; Grossman and Grossman, 1991; Grossmann et al., 2002; and van IJzendoorn and De Wolff, 1997. They also began researching the sibling connection in the attachment process such as Teti and Ablard, 1989; Teti, Sakin, Kucera, Corns & Das Eisen, 1996; van IJzendoorn et al., 2000; and Whiteman

and McHale, 2011. Additionally, Bokhorst et al., 2003; Fearon et al., 2006 began researching attachment and the role of the environment.

The outcomes of this research in addition to the existing research on the mothers role in the attachment process is likely to provide a more inclusive pattern reflective of the myriad of circumstances, environments, and individuals involved in the attachment process. That could permit for the discovery of a shared responsibility for the health and well-being of an infant/child while sanctioning the role and identity of the mother to be self-defined and not defined by her infant/child.

To do this could possibly allow women to engage in empowered self-constructed mothering or a woman who practices mothering with agency, authority, authenticity, and autonomy not allowing her state of mothering to define her identity but actively pursuing her selfhood through many venues (O'Reilly, 2008). It would be helpful to further examine these individuals and circumstances in the attachment process and generate empirical evidence as well as narratives so it might possibly take into account the fluidity of mothering as a lived experience and not experience within the contrived "natural" mother identity.

Chapter 3

Maternal Attachment/Detachment Developmental Process

Reframing Detachment for Mother

This chapter will review the concept of detachment. Then it will be reframed through the stressor detachment model to contextualize it as part of a positive transformative experience of the proposed concept maternal attachment/detachment developmental process. Appendix (1) illustrates the concept of maternal attachment/detachment developmental process. The concept of ambivalence will be reviewed and reframed as an internal battle a mother experiences to position it in a place of agency and not objectification.

Anthropologist Sarah Blaffer Hrdy positions the effect of the attachment theory well in her comment, "By situating the mother (or other primary caretaker) at the center of each developing infants universe, Bowlby's theory of attachment stings most smartly where it pricks, the conscience of every mother who is aware of her infants needs but also aspires to a life beyond bondage to them" (1999, p. 407).

It is in this statement she brings forth 3 important concepts. The first being "pricks the conscience of every mother" or elicits guilt/shame because she does not meet the prescribed standards of satisfying her infant/child's need. The second is "aspires to a life beyond bondage to them" or she desires the agency to cultivate and enjoy an aspect of her identity that does not involve them, is not defined by them or at the very least have momentary reprieve from them. The third postures

the development of the mother's identity against the infant/child's needs. This eradicates the relationship to an external encounter between the mother and infant/child where the conflict actually takes place within the mother. It is the moving of this conflict to the external realm that negates the ability of the mother to transcend to the individuation of her identity due to blaming her child which elicits shame and guilt and allows external forces to impact her well-being and is likely to lead to pathology.

Overall this statement illustrates the concept that a mother has to maintain a healthy attachment to bond with her infant/child but she also needs to be encouraged to practice healthy detachment to resolve the guilt with positive action so as to allow her to pursue, without oppression the aspects of her identity that do not involve mothering. Thus allowing the mother to rectify her identity and the dueling negative and positive states by embracing both to feel empowered to pursue her selfhood, which will promote her confidence and capability and ensure her health and well-being as well as her infant/child.

While there is a surplus of discourse and research in psychology for mothers to raise a healthy child there is little generated to encourage a mother to facilitate her own health and well-being. Mothers as participants in a study about maternal self-care reported that they believed an unhealthy mother would be a less effective mother but conveyed that they believed that selflessness was synonymous with being a natural or proper parent (Barkin & Wisner, 2013). Detachment is an essential element to a mother's well-being. The moment of parturition is a milestone for the mother and child in which they both, from that

moment forward must learn to navigate separation on a daily basis. It is marked by the mother consistently attempting to acquire a skill set to navigate the persistent changes that occur with her and her child. In addition to that she is working to reestablish her identity and individuality while the infant/child is simultaneously working to cope and adjust to its changing environment. Some of those accommodations are filled with joy. However, there is also an element of perpetual mourning due to the loss that those changes facilitate which necessitates a renegotiation of a mother's identity.

This is the space in which detachment occurs to allow for each renegotiation. In the event the mother has unrealistic expectations or not be educated about this process her inability to facilitate this renegotiation can possibly have implications that range from distress to postpartum depression to filicide. A group of Doctors at Mount Sinai School of Medicine in the Department of Health Policy recognized that postpartum women were not prepared for specific, common postpartum physical and emotional symptoms (Howell, 2010). To process these physical and emotional symptoms necessitate some level of detachment. Since detachment has traditionally been associated with the mothering of an adolescent there is a need to research this concept of a mother being in a state of detachment with her child from birth to death of either herself or her child.

Detachment

Detachment is a term that has functioned with the meaning of an individuals' inability to cultivate relationships and engage in appropriate affiliate behavior or behavior that promotes closeness and accommodate changes (Levinger & Snoek, 1972; Birtchnell, 1987, 1996). It is a term that has been traditionally associated with the psychological development of adolescents. Detachment can be further identified to function in the psychological and emotional realms. Psychological detachment is characterized by freedom from self-interest or biased. Where emotional detachment is described as an inability to connect with others emotionally or it is a conscious decision to refrain from connecting with others in observance of maintaining a boundary to preserve a healthy psyche. To engage in mothering, negotiate your identity, and achieve a healthy psyche it is vital to manage the separation that begins at parturition and moves on a continuum through a mother and child's life.

In a performance art piece entitled "Detachment" Maria Adela Diaz provides a 3 minute visual illustration of the detachment between a mother and child that is essential to a healthy separation and forming of the individual identities within the union of a mother and child. This is Diaz's statement about the performance "The most prevalent, and possibly the most taboo, is the separation of ideologies, and disruption of communication" (International Museum of Women, 2006). The performance begins with the camera view looking directly down on Maria and her daughter standing motionless on either side of a white line bound in a cloth dress. Each of them have their own section of

the dress with the sections being connected. As the performance begins, the camera view moves to the side at a high angle to fully capture the ongoing struggle of the detachment. You see Maria and her daughter pulling away from each other in opposite directions while this is occurring the cloth is providing resistance so neither can move without dragging the other in the direction in which they are moving. As they continue to pull away from each other the cloth begins to rip, the sound of the ripping material and some murmuring is the only auditory accompaniment. The performance continues in this manner with Maria and her daughter trying to maintain their positioning over the white line. Throughout the performance they volley over the line and at some point they both end up on hands and knees in their effort to gain independence from one another, each of them pulling with force illustrating the need for them both to achieve the detachment. Their subsequent separation signifies the end of the performance (International Museum of Women, 2006). Although this performance is a depiction of detachment of a mother with an adolescent child it remains as an outstanding representative of the struggle that ensues at parturition and accompanies the lifespan development of a mother and child.

The Stressor Detachment Model

Detachment between a mother and child is essential to empowered mothering. To illuminate the need for detachment to accomplish healthy mothering a review and repurposing of the outcomes of stressor detachment model for workplace detachment will be applied to the work of mothering (Sonnentag & Fritz, 2014). First, by establishing mothering is work. Second, by

showing that it is stressful and last by looking into the oppression of negative emotions concerning mothering which can impede her ability to detach.

To engage in the duties and responsibilities of mothering is work. It consists of training "on the job." This is the case if it is your first child or your third child. Each child is different as each employee is different and must be dealt with according to their working style to ensure optimum production. Where in the case of the child they must be dealt with according to their personality to ensure optimum learning and development due to their differences. In *The Second Shift* the home is depicted as the work shift that a woman begins when she has completed her first shift at her job outside the home (Hochschild, 2012). Feminist Sociologist and Psychoanalyst, Nancy Chodorow (1978) presents the notion that being a mother is work not an innate instinct.

Mothering is a job with nuances in which it is likely no one, neither the woman herself or someone else can help her prepare to the degree needed so she can navigate the magnitude of adjustments that occur to her identity through her lifespan. This unpreparedness creates shock along with various other negative affects or internal feelings or emotions which are usually experienced after a person has failed to complete a task or goal, or when they have completed the task but did it in a way that was below the set standard. This causes stress and affects the mothers' well-being.

In a grounded study some of the negative affects that were revealed mothers experienced were feeling unprepared, a sense of loss, isolation, and

drained (Barclay, Everitt, Rogan, Schmied, & Wyllie, 1997), while another study discusses the role of shock and reports that it was a term used frequently by the participants to depict their reaction to motherhood (Read, Crockett, & Mason, 2011). An overarching theme was the women experienced discomfort when discussing their feelings of inequity and anger about mothering. This was because it framed the negative aspects of their mothering experience that did not coincide with the "natural" mother myth. This rigidity of maternal beliefs does not allow for acknowledgement and ownership of these negative aspects and the need for a mother to detach.

Sonnentag and Fritz (2014) in their stressor detachment model frame the ability to detach mentally in non-work time allows for psychological resources to rejuvenate, a decrease in stress, and an increase in well-being and work capacity. Additionally they site workload as a predictor of low levels of detachment which predicts high level of stress and poor well-being. In a recent study mothers were less happy, more stressed, and more fatigued in the time they spent with their children than the fathers (Musick, Meier, & Flood, 2014). This was due to the fact that the mothers' performed basic child care, child management, cooking, and cleaning while the fathers' time was spent in play and leisure. Thus illustrating Sonnetag and Fritz's concept that the workload of a mother is reflective of high stress and poor well-being. While the fathers' experienced more happiness and less stress because of their ability to detach from basic parenting responsibilities and engage in play when interacting with their children. Mothers need a time in which they can safely detach.

Some steps to take to facilitate healthy detachment to allow for psychological rejuvenation and stress reduction would be to value the mother as a person by accepting the concept her identity incorporates her role as a mother but does not define her, to be valued but not defined by the work in the home and with the children. Another step would be for the mother to be able to equally express the negative states with the positive states that arise from mothering "on the job". Were mothering looked upon for importance of its own sake and not from the infant/child's sake, empowered mothering would be more likely to occur making for a healthier mother thus a healthier child.

To allow mothers to experience detachment would aid in releasing them from that "natural" mother role so they could embrace the negative and positive states that inform their identity. Thus this would allow the maternal attachment/detachment developmental process to occur as a normal transformative element in the development of mothering. This would allow a mother the freedom to embrace the full spectrum of mothering without shame or guilt.

Motherhood can be described as an "all-encompassing, guilt-provoking, unrelenting, labor intensive, and emotionally charged" role to fulfill (Jackson & Mannix, 2003, p. 32). The role of a mother requires a multidimensional approach to existence. The role of attachment in that existence is dichotomous. On one hand the mother is to create a prescribed level of attachment to ensure a healthy development of her child however she is also to detach to the point of viewing her child as an individual but not an extenuation of herself.

In this maternal attachment/detachment developmental process she would be exhibiting a freedom from an ascribed role to pursue self-governance while allowing her child that right, to the same end. It is likely this process is neither confined to the firstborn, as every child is different, nor to the post-partum time frame of six months, but begins at each parturition and functions on a continuum throughout the lifespan of a mother and child. This is due to the growth of the never ending tasks related to motherhood that forces a mother to constantly negotiate her inner conflict of expectations and the interplay of positive and negative states. The relationship between a mother and her infant/child is bidirectional, the mother is learning from the infant/child and the infant/child is learning from the mother and each of them are learning and growing on a continuum. The developmental process is simultaneously occurring in the child and the mother. Thus when considering the relationship it is important to include the mothers individual attributes in combination with the behavior of the child (Atzaba-Poria, Deater-Deckard, & Bell, 2014). It is because the relationship is functioning on a bidirectional continuum that proposed maternal attachment/detachment developmental process occurs and necessitates the mother renegotiate her identity.

Ambivalence

It is this state of maternal attachment/detachment developmental process that I frame as the basis of the ambivalence of mothering. Although most scholars (Almond, 2011; Blaffer Hrdy, 2009; LaChance Adams, 2014) define the ambivalence of motherhood as the needs of the mother postured against the needs

of the infant/child. I contend that it is the mother experiencing an internal conflict in which she is positioning against herself in a struggle with the expectations of her personal and social identity to rectify her positive and negative affect states regarding her role in the maternal attachment/detachment process.

This is reflective of Jung's theories of anima/animus and shadow/light which frame the occurrence of human interaction as being of a polar nature that balances out the psyche of the individual. The mother works to balance the negative and positive states through the maternal attachment/detachment developmental process to rectify the internal struggle she is experiencing. Much like the imbalance in the psyche of an individual assists in their eventual balance, a similar harmonizing process occurs in the chaos theory. The chaos theory reflects this imbalance when there is a catastrophic change because of this change an attractor disappears which creates a structureless system, thrusting it into transient chaos until another attractor joins the system.

To apply this theory to the development of the mother it would translate as such: when the system (the mother) experiences a catastrophic change (becoming a mother, adjusting to the learning curve, negotiating daily caretaking demands, and lifelong relationship demands) the attractor (identity) disappears leaving little to no structure and situational chaos until another attractor (reformulated identity in adjustment to the change) is situated within the system (the mother). In trying to organize all the different aspects of life, the developmental need for chaos, and how it propels us forward to grow as people or in this case as mothers is overlooked and is perceived as a negative thing.

To become a mother is to experience substantial change to identity and be propelled into an initial catastrophic identity crisis when she learns of the pregnancy, throughout the pregnancy, with the birth, and throughout her life as a mother. A mother is faced with continual changes to adjust to and cope with that occur throughout her life as a mother which range from positive to catastrophic to diminutive that create periods of situational chaos thus requiring renegotiation of her identity. The struggle or inability to renegotiate the identity is the area that needs to be explored to discover the states that drive it. Then those states need to be named and evaluated as these or the denial of these could possibly be some of the extenuating dark forces behind the occurrence of maternal psychopathology.

As Jung discussed, it is important to engage the shadow to refrain from denying it because that aspect of who we are can become more powerful and dangerous. Thus, to frame the mother in the "natural" mother identity that is associated with positive states is to facilitate the denial of the shadow or negative states and aspects of mothering. Thereby, it can facilitate a separation between the idealized experience of motherhood and the lived experience of mothering. This can cultivate an environment for the mother to experience maternal ambivalence.

Ambivalence framed in the current understanding positions a mothers needs against the infant/child's needs. This facilitates an abnormal situation where the mother blames her child which creates a separation between her and her infant/child. Where recognizing this ambivalence as a struggle within herself, and addressing it as such could possibly bring her to a point of understanding and accepting the shadow aspect of her mother identity. Moreover, this need to

organize and label mothering according to the positive states related to the "natural" mother identity promotes stereotyping, oppressive, and non-inclusive thought patterns that inform behavior with possible psychopathological consequences.

The oppression consist of silencing, downplaying, and shaming any negative emotions that presents in conjunction with the act of mothering.

Motherhood is a lifelong, life altering role that is characterized with the notion that it is a purely joyous occasion or it is riddled with postpartum depression with no discussion or warning of the range of negative emotions that can be experienced between these two extremes. This oppression of the presence of the negative state can cause the mother to remain silent and internalize the belief that she is alone in experiencing it which can lead to psychopathology. The silencing leaves a void for this narrative to be shared with others so as to inhibit embracing the transformative process of becoming a mother and assist in preparation of experiencing this struggle. The transcending and accepting of the positive and negative states involved in mothering are essential to the development of an empowered mother.

One researcher frames it as love and hate counter balancing each other to which the mother must not act on her hate but embrace it to assist in the successful separation between herself and her infant/child (Winnicott, 1949).

Research indicated that women's mood state in the postpartum period is better characterized by a combination of positive and negative affect than a pure state of sadness and anxiety (Wilkinson, 1999). Additionally, positive psychologists

theorize life satisfaction, positive affect, and negative affect are different but interrelated aspects of well-being (Diener, Oishi, & Lucas, 2003) A mother's well-being is also related to how she perceives her self-efficacy concerning her social and personal identity as a mother.

Chapter 4

Identity in Relation to the Woman as Mother

The Social and the Personal Identity

Mother by the very word creates expectations for the personal identity and the social identity, which can generate fear if a woman is not experiencing the normative idealized mother experience. There is a disconnect between the idealized social identity of the "natural" mother and the lived experience related to the personal identity of the mother. Social identity structures encompass biological constructs such as sex and sexual orientation. They also contain culturally determined constructs like race, marital status, socio-economic status, religion, gender, and others. The culturally determined identity structures are more likely to be affected by social forces. Motherhood is one of those social identities that is primarily based in culturally determined constructs therefore it is strongly affected by social forces. Biologically, sex determines that women are the host for the offspring and as such it is the basis of oppression for all women because it intersects with the nurturer role of the infant/child.

This chapter will consider the social and personal identity as it informs women's identities in relation to the concept of the "natural" mother. It will discuss how the processing of the idealized maternal identity is a central part of women negotiating external (social) influences on the conceptualization of their maternal identity. While they are focused on adhering to the external influences the internal (personal) influences are silenced resulting in shame.

The Personal Identity

The personal identity or identity theory involves a person's self-image, self-esteem, and individuality (Weinreich, 1998). The self-image of a woman as mother is reliant upon how she sees herself and how others perceive her. Closely tied to this is her self-esteem which depicts how she feels about herself as a mother and how she believes others feel about her maternal identity. Individuality is her own unique traits that formulate who she is as a mother. If she is struggling with aligning her self-image with the idealized maternal identity it is likely she will fall short of its expectations which will negatively affect her self-esteem. Where if she engages her individuality with her self-image she can create her subjective maternal identity and increase her self-esteem creating a space for empowered mothering to occur.

Each woman needs her own subjective contextualization for the role of the mother and formulate her identity in conjunction with it. Academic Scholar and Poet, Adrienne Rich believes "to 'mother' a child implies a continuing presence, lasting at least nine months, more often for years" (1986, p.12). According to Professor bell Hooks motherhood needs to be recognized and praised yet it needs to be open to encompass a decided choice to conceive and occur in avenues where oppression is not in existence (1996). These definitions are reflective of each of their lived experience and represent a diverse narrative of mothering. They allow for the capacity of each woman's subjective perspective and lived experience of mothering.

In an interview Anthropologist Dr. Sarah Blaffer Hrdy said, "A woman who is committed to being a mother will learn to love any baby, whether it's her own or not; a woman not committed to or prepared for being a mother may well not be prepared to love any baby, not even her own." (Caba, 1999). This indicates a woman needs to make an informed decision to be a mother and not choose motherhood because it is the acceptable social belief and practice that a woman is a "natural" mother.

A woman that complies with the idealized maternal identity is placed in a' mom box' or a one dimensional space characterized by symmetrical self-sacrifice and never ending love to the demise of her agency and selfhood. While being held within those lines of conventional expectations she is then restricted to carry out these unchallenged duties in conjunction with whatever her cultural life experience has deemed appropriate for motherhood. No matter the definition, a mother is faced with sorting out her identity concerning motherhood.

The Social Identity

Social identity theory propagates that the in group will discriminate against the out group to enhance their self-image (Tajfel & Turner, 1979). In saying this, the romanticized "natural" mother represents the in group while the mothers grounded in the lived experience of everyday practices represent the out group. It is the contradictions of the lived experience with the normative concept of motherhood and the moral contexts surrounding it that lead women to question

themselves and other women while they avoid addressing the idealistic unsolicited "natural" mother identity.

A woman's identity is partially negotiated in relation to motherhood. She is judged if she chooses not to be, is forced out due to health issues or if she chooses to be a mother. If she opts out or is forced out of motherhood the belief that is held is she must be an unwomanly, unnatural, and selfish person (Ganong & Coleman, 1995 and Almond, 2011). If she chooses to have children then she is expected to center her world on them and shower them with unconditional love or she is unnatural and selfish (Ganong & Coleman, 1995). The normative relationship a woman is expected to have with motherhood is due to the indisputable fact that she is the genetic host for the child. The societal expectation of a mother is to love her offspring unconditionally and selflessly as she is responsible for promoting its survival. To promote survival a mother has to be able to secure resources. Middle class standards govern the idealized mother identity.

Social stratification frames what a mother is or is not based in middle class principles. In the 2008 PEW Report, Inside the Middle Class: Bad Times Hit the Good Life 53 % of adults in the United States self-defined as middle class with a breakdown of 50% being Black, 54% being Hispanic, and 53% being White (p. 29). In addition, 4-in-ten of those individuals with incomes below 20,000 and a third of those with an income above 150,000 considered themselves middle class (p. 13). They identified middle class characteristics as follows: upward mobility, having homes, having material items, having free time, having children, having a

successful career, being married, doing volunteer or charity work, living a religious life, and engaging in social competition (p. 53). These characteristics idealize and romanticize motherhood and contextualizes mothers that cannot or do not embody them into a "bad" mother. This creates a space where "good" motherhood can be unattainable because of the social status a mother must gain to be a "natural" mother.

The intersection of the Social and Personal Identity

Adrienne Rich (1976) presented with the concept of "mothering", a term signifying the everyday practices in which mothers engage. In this approach of viewing mothering through the lens of everyday practices she opened the door to embrace the personal maternal identity while negotiating the social maternal identity. She presented mothering as a lived experience that has little to no room for ideology. The range of narratives around mothering needs to be expanded to break the "myth" of "natural" motherhood and embrace the lived experience of mothering. If these oppressive concepts can be addressed and transformed women could accept themselves and each other while discrediting the idealized maternal identity. That would allow mothers to work together to generate realistic narratives that include the mothers who do and those who do not embrace the romantic, idealistic concepts of the "natural" mother.

We are enmeshed in thinking that women have progressed, that mothering has changed, and freedom to choose motherhood is prevalent. Thinking is the beginning of progressive change, but to remain ruminating, is to accept the

idealized maternal identity as the normative standard and until thinking advances to transformative action, change is virtually improbable. The Shame Resiliency theory can help with actualization of the transformative change to empowered mothering.

Chapter 5

The Shame Related to Motherhood

The Shame Resiliency Theory

Shame is a daily human emotion that we cannot escape unless we do not have the capability to experience empathy and connection. Dr. Brene Brown posits that shame is not hidden away as we would like to believe, but it is a central part of our daily life (2006). The Shame Resilience Theory (SRT) was created out of her desire to produce a data driven theory to address how shame affects women. SRT contextualizes the relationship women have with shame. It deconstructs shame through the conceptualization of the theoretical sampling of data and participants' voices. Additionally, it presents a pathway that allows for shame resiliency to emerge and be cultivated.

This chapter will consider the shame resiliency theory in relation to the concept of the "natural" mother identity. This relationship will be illustrated by reviewing the idealization of motherhood through the psycho-socio-cultural construct of women's identity as defined by the shame resiliency theory. As well as reviewing the processing of shame as a central part of women negotiating the many external influences on their conceptualization of their maternal identity. In addition it will discuss the value of the application of vulnerability and mutual empathic relationships to assisting in the forming of an empowered mother.

A person is not only ashamed of the situation, but is ashamed of being ashamed, and probably ashamed of the shame that will be aroused in the people in

which they are interacting (Scheff, 2000). If a mother is experiencing shame due to the negative states she is experiencing while interacting with her child then what are the effects this is having on her child. That said, shame is a layered experience that is further complicated through the rigid socio-cultural expectations or the marginal ideals ascribed to women based on their identities and the roles that they fulfill. Motherhood being one of these identities. More specifically, for this research the "natural" mother functions as the idealized patriarchal maternal identity that is imposed and enforced by family, friends, partners, co-workers and is further solidified by way of mass media.

It is through the endowment of what Brene Brown designates as an "unwanted identity" (2006, p.46) that women become most vulnerable to shame because of their inability to negotiate through the socio-cultural expectations that discourage them from sharing opinions that do not align with the status quo and make people uncomfortable. The negative states that are involved in the lived experience of a mother make people uncomfortable, create feelings of shame within the mother, and consequently silences them. Although the rigid maternal beliefs affect women differently there are characteristics that all women can relate to shame, however, there is no universal trigger to shame as it correlates to the individual woman's relationships and culture.

In a historical review, shame is defined as "the large family of emotions that includes many cognates and variants, most notably embarrassment, guilt, humiliation, and related feelings such as shyness that originate in threats to the social bond." (Scheff, 2003, p. 255). Isolation is one of the side effects mothers

reported experiencing. This isolation could possibly be related to the inability of mothers to share the negative states they experience. Possibly because these negative states are considered unnatural they remain silenced within mothers due to the repercussions they could pose for them and their child if spoken out loud. Brown defines shame as "an intensely painful feeling or experience of believing we are flawed and therefore unworthy of acceptance and belonging" (2006, p. 45). Therefore, mothers will keep the experience of the negative states to themselves as they is likely to believe no one else has experienced them. This perpetuates the isolation and keeps mothers from discovering that it is a normal part of mothering.

The Shame Resiliency Continuum

SRT presents shame as a psycho-social-cultural construct that occurs on a continuum. It is psychological in that it addresses the emotions, thoughts and behaviors related to shame. It is social as it is experienced through relationships and connections that women make. The cultural aspect presents the real or perceived expectations that generate the shame women experience due to failure to live up to them. The continuum is represented by the feelings of being trapped, powerless, and isolated at one end while the other end is comprised of empathy, connection, power, and freedom which are the concepts that promote shame resiliency and can be applied to achieve empowered mothering.

In keeping with the SRT continuum theme the main feelings located at one end relate to shame; they are feeling trapped, powerless, and isolated. These are

feelings in which mothers reported due to a lack of preparation for the duties of motherhood which left them feeling trapped and powerless which led to their experience of isolation (Declercq, Sakala, Corry, Applebaum, & Herrlich, 2013). The components of feeling trapped are expectations and options. For example, women feel trapped when expectations are of an unreasonable nature, like fulfilling the "natural" mother identity and when they are unable to meet those selfless nurturing components that are characteristics of the idealized maternal identity their options become limited as they remain quiet and do not reach out to ask for help (Liss, 2013)

The components of powerlessness are consciousness, choice, and change. For example, when experiencing shame women are either unable to identify why they are feeling the way they are feeling; such as the negative states of mothering because they are not discussed there is a gap in knowledge. Sometimes they can ascertain the emotion but are unable to make choices that would help navigate changes necessary to make the situation one in which they feel powerful; such as they recognize the negative states they are experiencing but they are in conflict with the ascribed positive states that motherhood is depicted to generate so they remain silent. This keeps them from making the changes they need to make to feel powerful. In some cases if they choose to divulge these states it could possibly lead to their child being removed from the home.

Isolation is the final component and the byproduct of feeling trapped and powerless. Women do not feel that it is acceptable to share their experience of those negative states with others. Simply said but not simply experienced when

women are in a position, such as maternal attachment/detachment developmental process that is characterized by a lack of power, connection, awareness, and limited options in conjunction with the inability to make changes, the natural result appears to be isolation. The term condemned isolation or the feeling that one is alone, isolated, and feels like they are cut off from the human community is a good description for maternal isolation (Baker-Miller, 1976). It is the experience of this triad of feelings that render shame as a powerful inhibitor to women's authenticity as an empowered mother thereby affecting their well-being and overall health. Further solidifying this idea was the discovery of authenticity as one of the strongest predictors of well-being when the Authenticity Scale was being developed (Wood, Linley, Maltby, Baliousis, & Joseph, 2008).

The other end of the SRT continuum is where the constructs that facilitate shame resiliency reside. Shame resiliency is based in empathy, connection, power, and freedom. Empathy is what the participants of Brown's (2006) study reported to be the opposite of shame. Empathy, or the ability to see a situation from another person's point of view, when at the receiving end, whether it is from another person or a self-expression of empathy, enables a woman to enjoy a deeper sense of connection and power. A mother engages empathy when dealing with her infant/child, yet, to meet the standard of the "natural" mother she is afforded little self-empathy or empathy from external sources as the expectations for her role are believed to be immutable. However, mothers experience it at a higher level when it is expressed to them by another person which was what Bowlby suggested was the role of the father.

Connection is achieved through mutual support that assists and encourages the ability to explore and engage in options which facilitate freedom, for instance embracing the negative states with the positive states of mothering and acknowledging the concept of maternal ambivalence is better framed as maternal attachment/detachment developmental process leaving the conflict with the mother and not placing it externally on the infant/child. With freedom comes power. Power is comprised of awareness, access of choice, and the ability to affect change. For example, if a woman is able to recognize and admit she is feeling shame about the negative states she is experiencing as a mother, along with the inner conflict she is experiencing, then she is more likely to navigate through the situation. In choosing to act in a manner that will strengthen her shame resilience such as admitting her vulnerability as a mother, learning the social influences affecting her maternal beliefs, forming alliances with other mothers that create their own maternal identity, and discussing the negative states of mothering with those mothers. SRT incorporates each of these components to inform the cultivation and practice of shame resiliency.

Cultivating Resiliency

SRT provides the avenue to facilitate shame resiliency through a continuum that propagates the cultivation of vulnerability, critical awareness, reaching out, and speaking shame. The vulnerability continuum addresses the ability to express and embrace personal vulnerability. This is important because if a mother can involve vulnerability in a situation that is creating shame for her like experiencing negative states she can navigate through it with better outcomes.

The next is the critical awareness continuum which involves a mother's awareness of the external or social and cultural forces and internal or personal influences and how they inform each other as well as individually. To possess that critical awareness is to possess the capability to link the personal aspects of shame to the debilitating socio-cultural expectations concerning motherhood that exacerbate shame, allowing it to be deconstructed which in turn will normalize it through understanding there are others coping with these circumstances.

Reaching out is the third continuum. It refers to expressing empathy to others as well as receiving it or cultivating mutual empathic relationships. It is "crucial to a mature sense of mutuality is an appreciation of the wholeness of the other person with a special awareness of the other's subjective experience" (Jordan, 1986, p. 2). This further demonstrates the need of reciprocal empathy and the need for mothers to share their lived experiences concerning the negative and positive aspects of mothering. The final continuum is speaking out. It concerns the familiarization of a language that expresses shame resiliency as well as shame. It cautions that shame is expressed as embarrassment, guilt and other terms representative of emotions that can create confusing and avoidant behavior which can possibly cause psychological imbalance. To be knowledgeable of this practice can build shame resiliency and an empowered mother.

Chapter 6

Implications

Theoretical Implications

The attachment theory functions with the overarching theme of being child centered because it is focused on the development of the infant/child. Second, it is child defined because there is no consideration for mothers' developmental process, feelings, or needs as a woman. The intensive and attachment parenting styles are child centered and reflect the unrealistic expectations of the attachment concepts. Next, it is accepting of the isolation of mothers and children because it does not acknowledge negative states in a positive transformative experience in relation to mothering. It does however transmit "should" messages that a mother is to experience a continuous, warm, intimate satisfying relationship implying there is something wrong with her if she is not (Bowlby, 1951). Finally, the term maternal depravation signifies mothers and children cause each other's suffering. The attachment theory exemplifies the "natural" mother identity because it is focused on the development of the infant/child. Furthermore, taking into consideration the volume of mothers in the United States and the considerable number of them that are neglecting, abusing, or murdering their infants/children it would benefit mothers and children to develop a conceptual framework for the psychological development of mothers with regard for their lived experience.

The need for a paradigm shift from "natural" mother to the lived experience of the mother was established through the topics within each chapter

and their relationship to each other. The framework began with finding the common themes present with the attachment theory and the "natural" mother identity with the implications presented in the previous paragraph.

The gap in the research concerning the lack of inclusion of the father, siblings, and the environment in which attachment takes place indicates the need for additional focus on all the aspects of the developmental process and all individuals that are present or absent, not just the mother. Reframing detachment through the stressor detachment model first, aided in contextualizing mothering as work then seeing it as a job that creates stress in which detachment is required to improve their well-being. Additionally, it assisted in shifting the concept of detachment from a negative experience to a positive transformative experience. Reframing ambivalence from an external experience to an internal experience provides agency for mothers to rectify their negative states with their positive states in relation to their experiences of mothering.

The concepts of social and personal identity illustrated the significance of the empowerment that occurs when ambivalence is an internal experience.

Bowlby positioned ambivalence externally which pitted mothers' needs against their child's needs. Removing ambivalence to the external allows the mother to blame the infant/child which does not facilitate a solution because the infant/child holds the agency in the situation. When in actually the mother is experiencing ambivalence as an internal conflict between her expectations related to her social identity and expectations related to her personal identity. To bring the experience of ambivalence internally provides agency for the mother to resolve the

ambivalence. Thus creating the proposed concept maternal attachment/detachment developmental process. Last, recognizing that shame is a prevalent negative state mothers experience when they are negotiating the expectations of their social identity and personal identity provides the clarification that it is a normative state and allows for them to embrace their lived experience as a mother and focus on creating an empowered mother identity.

Implications for Future Research

Based on the information reviewed additional research is recommended:

Additional research is needed to determine what role the idealized mother identity plays in the belief system of mothers that neglect, abuse, or murder their children.

Additional research is needed to further explore the role of the siblings, fathers, and environments in the attachment process to gain a better understanding of the development of the child in relation to all involved factors not just the mother.

Additional research is needed concerning a mother being in a state of detachment as a positive transformative process with her child from birth to death since it has traditionally been associated with the mothering of an adolescent and functioned in a negative connotation.

Additional research is needed to develop the maternal attachment/detachment developmental process to gain knowledge on the occurrence of

Practical Implications

The concept of the idealized mother and the lived experience of a mother need to be shared in an early childhood education setting with the child. If education of this situation begins with the child then as they grow their awareness of this situation will be a part of their knowledge base throughout their life.

The inclusion of the idealized mother and the lived experience of a mother needs to be shared at the high school and college level in a basic psychology course, possibly a developmental psychology course, or a family life course. This would capture the age groups that have not been included in the early childhood education sector which. Additionally, at these age levels the concepts could be explored on a deeper level.

Mothers need to be included in this educational process as well as it could help them frame their experiences as a mother in a more positive manner that encourages them to pursue their health and well-being and engage in empowered mothering.

The inclusion of health care workers would be of great benefit in educating women about the idealized mother and the lived experience of a mother. The healthcare professional could be proactive as they could share this

information with women who are considering pregnancy. It could also be shared with women who are already pregnant.

Conclusion

There is a lack of theory concerning the developmental process of a woman's lived experience as a mother. Motherhood is a concern as it a confinement of all women whom do not fit into the "mom" box. Women are placed into the "mom" box as they are working against being defined by the normative standards of motherhood embodied by the attachment theory and propagated by the idealized maternal identity. They are working to define themselves as to what is actually acceptable to them in terms of motherhood and their concepts of mothering. Women are affected as they constantly undergo the pushback of being presented with untruths or "myths" about the roles and identities ascribed to them as mothers. Bowlby solidified the concept of the "natural" mother with his attachment theory by placing the child in the role of the subject and mothers as the object to ensure the healthy development of an infant/child. The objectification of the mother has created a space in which motherhood is defined by external sources (social) not by the woman herself (personal).

This leaves women struggling to meet the unrealistic expectations of motherhood while trying to create their personal identity through formulating their self-image and self-esteem from their lived experience. In their pathway to meaning making when navigating the "natural" mother identity and a self-

constructed maternal identity women blame and single out other women who live differently as mothers or women who do not have children, all the while upholding those untruths "myths" of the idealized maternal identity instead of working to unite in reframing their perspectives to be inclusive of each woman's right to define herself in terms of mothering and what actually does constitute a "good" mother or a "bad" mother according to their lived experience.

Additionally, in their struggle to contextualize the maternal identity they are faced with processing their negative states with their positive states related to the events and changes that ensue with mothering. Mothers need to detach in a positive transformative way that empowers them to resolve their ambivalence as the maternal attachment/detachment developmental process allows and not in popularly characterized way which pits the mothers' needs against the infant/child needs that takes away her agency and creates a space of shame.

Shame is part of the range of human emotion that is unavoidable. It is only a matter of when and how often a woman will be contending with it in her lived experience as a mother. The Shame Resilience Theory provides explanation and assistance with those moments when shame does come to intermingle with a mother's life. SRT deconstructs how shame affects mothers. SRT contextualizes the relationship mothers have with shame step by step. It provides a structured conceptualization for the cultivation of shame resiliency as well. It offers an avenue to explain the manner in which mothers negotiate the unrealistic expectations of motherhood placed on them by society while trying to formulate their personal maternal identity and fulfill the roles they have chosen or the ones

that have been ascribed to them. This encourages the acceptance of claiming and experiencing the negative and the positive states of mothering to reach empowered mothering.

Despite mothering occurring through on the job learning in day to day living, because the "natural" mother identify is the exemplar there is a need to gain a better understanding of the lived experience of mothers. This could better prepare mothers to cope with the external influences that affect their internal perception of themselves as a mother which relates to how they engage in mothering in their day to day lived experience.

Limitations

Although this research was carefully prepared and has fulfilled the stated purpose, there were some limitations. First, synthesizing and utilizing secondary research allows for a margin of error in interpretation by the researcher. Second, the gap of primary research in some topic areas could short site the synthesizing of information and it is likely they need to be filled by conducting further research.

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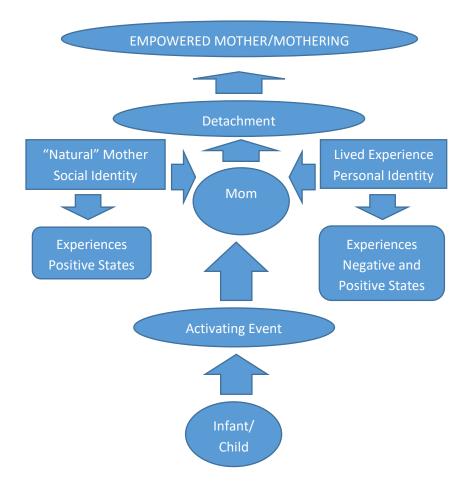
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Appendices

Appendix (1)

Maternal Attachment/Detachment Developmental Model



<u>Personal Identity</u> = Lived Experience = Positive and Negative States (actual) derived from activating event that generate from the actions or behaviors of the infant/child.

<u>Social Identity</u> = "Natural" Mother = Positive States (ascribed) derived from activating events that generate from the actions or behaviors of the infant/child.

<u>Personal Identity + Social Identity = Maternal Ambivalence</u> experienced as an internal struggle between the lived experience of actual positive and negative states and the ascribed experience of positive states related to the "natural" mother.

<u>Detachment</u> = psychological space to process the maternal ambivalence in a positive transformative accept the lived experience to engage in empowered mother/mothering.