

# Motherhood: From Rights to Choices<sup>1</sup>

Renata Salecl

‘Let’s make a baby! An extraordinary and loving story of one woman’s longing to start a family’, read the title on the cover of one *Observer Magazine*. This was not one of the usual self-revealing stories about a woman who couldn’t conceive, but a special advertisement issued by a middle-aged woman trying to find a man who would be willing to participate in conceiving the child she so desperately wanted. Jenny Withers is described as a “happy, single and soulful” forty-one-year-old woman who never thought about pushing a pram in the supermarket, so terrified was she of the “mundane and domestic”. However, she then suddenly became overwhelmed by the desire to have a child. Tired of dysfunctional relationships, exhausted by her rather self-centered life and apparently cured of her neuroses by long therapy, Jenny decided to find a way to fulfill her desire. After realising that she did not feel like raising a child entirely on her own (which would happen were she to use an anonymous donor), Jenny started searching for man willing to contribute his sperm, as well as be somehow engaged in the child’s life. She almost convinced a homosexual couple to help her in this endeavor, but when this couple split up, she decided to present her idea about the newspaper ad to a journalist from the *Observer*.

What does Jenny want? Anyone responding to her quest is asked to send a photo, a CV and a letter explaining why he wants to co-parent. Jenny, however, gives guidelines as to what kind of a guy should apply:

I envisage a co-parent as being middle class, professional and with values similar to mine. Age and ethnic origin aren’t important. Physical characteristics don’t matter that much, although obviously I’d prefer an attractive father for my child. In fact, the only thing that really matters are shared values. Whether he is gay, straight or in another relationship is irrelevant. I just want someone who’s willing to be a father and a co-parent. I would also like him to offer some financial support.

Jenny’s description of what she wants reads like an advert for a job. Although she appears wholly tolerant as to what type of man she is looking for, she nonetheless has a particular

fantasy of a man. This man would actually be a male version of herself: middle class, attractive, with the same values. With this double, this male alter ego, she then wants to establish a particular contract, which she rightly calls 'divorce before marriage'. This business contract is supposed to clear up all potentially troubling matters, such as other children, or other partners.

Jenny falls into the category of the 'new realist' mothers-to-be. These are women who have observed other women raising children completely on their own and have realised how solitary this experience can be for the mother as well as the child. Having a co-parent of sorts, without being emotionally engaged with him, therefore sounds like a much better solution. With such detailed planning, Jenny hopes to be in total control of the role of the father. She is trying to prevent any contingency and is even thinking about hiring a therapist to help the child deal with the arrangement she has set up. However, despite all her detailed planning, she will need to accept that the other people involved (both her child and the co-parent) will have their own desires and expectations from the arrangement which might very much conflict with hers.

Jenny's case is extreme in regard to how she tries to rationally figure out all aspects of being a parent. However, a similar perception about the power of rational choice has for some time been part of the ideology of the American organisation Single Mothers by Choice. This organisation unites women who have decided to become single parents, differentiating between women who become single parents by coincidence (for example after going through divorce or after her partner died) and women who become single parents through choice. Members of Single Mothers by Choice are women who have in advance envisioned themselves becoming single mothers; their desire to have a child presumably did not involve another person. Even if they later become part of a couple, the very fact that they originally embarked on motherhood on their own gives them the distinctive status that allows them to become a member of the organisation which so much values the idea of choice.

This paper will look at the question of the relationship between reproduction as a matter of rational choice and as an unconscious mechanism. Behind the idea of choice in regard to reproduction we also have a subtle ideological battle over the question of the

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difference between choice and rights, and how the discourse on reproduction reflects this difference.

## I

### **Abortion: from rights to the right to choose**

When I grew up in socialist Yugoslavia, abortion was widely available and contraception was free. My upbringing taught me that having children or not is a matter of personal choice. However, this freedom to choose was not that liberating when I faced the question of when to have children. I felt that the situation was never quite right to have a child. There were always other things to do first – books to write, visiting professorships to accept, apartments to buy, trips to make. From my doctor, I demanded an assessment about how much longer I could wait. From my friends who had children, I wanted a clear answer as to whether they ever regretted having a child. From those friends who did not have children, I was often fishing for a clue as to whether they were content with being childless or not. I was trying to make an ideal choice.

In post-socialism, the personal decision to have children or not was presented in the discourse of nationalist right-wing parties as the dilemma between the right and wrong choice. A woman was perceived as being free to choose to be a mother or a career woman with the assumption that choosing motherhood was the right choice. In Croatia, president Tudjman even went so far as to propose that States should limit the right to abortion in order to enhance another right – the right to have a desired number of children.

The Communists were often very creative in their interpretation of rights and choices. For example, when Romanian president Ceausescu was asked in an interview for *Time Magazine* if the ban that he imposed on Romanians' travel abroad was not a violation of human rights, he responded by stressing that this prohibition actually supported another right – the right to live in one's own country! Even in regard to abortion rights, Communists have often shifted their interpretations. Some Communist regimes, for example, allowed abortion since they realised that complications related to illegal abortions were often keeping women

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out of the workforce, while others (Ceausescu's regime in Romania, for example), prohibited abortion in order to increase the population.<sup>2</sup>

In the US context, a significant reinterpretation of the 'right choice' and the right to choose was made at the time of the struggles over abortion rights. In 1977, an important shift occurred when the Hyde Amendment took away Medicaid funding of abortions for poor women. If public discourse at first used the term 'the right to abortion', very soon 'the right to choose' became the dominant way in which the public discussed abortion issues. This shift from rights to choices brought the language of consumerism into debates about reproduction.

In her analysis of abortion rights in the USA, Rickie Solinger points out that the use of the term choice has been from the beginning laden with class content. Middle-class women who were not able to have children were often perceived as women who could play with many options in regard to trying to conceive or, in the case of failure of new technologies, could hire someone else to bear their child or adopt a child from somewhere else. In contrast, poor women were often publicly criticised for making a bad choice when they became mothers, especially as teenage mothers and unmarried poor women were often encouraged to stop reproducing or give their children up for adoption. From public debates about reproduction rights, it became clear that only women who had financial resources were accorded legitimate access to socially validated motherhood, while women who did not were defined as lacking maternal rights.<sup>3</sup> The choice of a poor woman to have a child, to stay at home and to receive welfare was, in the American imagination, increasingly perceived as a bad choice, both the source of her poverty and what impeded her from fulfilling her obligations to be a good consumer. At various stages of the public debate on ways of limiting such choices, there were proposals for sterilisation, long-term use of contraception and especially adoption. But even in regard to adoption, making choices was class-related. Middle-class women were perceived as those who could afford to choose not only to have their own biological child, but also to adopt a child from women who were not supposed to be capable of making rational choices.

A further new reinterpretation of rights and choices took place in the 1970s when there was a large expansion of rights: fetuses were granted rights, and fathers were also understood to have special rights in regard to their children. At the same time the idea of

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children's rights also started developing. But, as Solinger points out, women were only given 'choice', which is 'rights lite'.<sup>4</sup>

## II

### Choice and surrogacy

An example of choice in regard to reproduction has been depicted in the account of a wealthy woman, Amy, who, because of her infertility, decided to hire a poor surrogate mother to bear her child. Amy starts her chronicle about her experience with surrogacy with the following observation:

As the months passed, something curious happened: The bigger Cathy was, the more I realized that I was glad — practically euphoric — I was not pregnant. I was in a daze of anticipation, but I was also secretly, curiously, perpetually relieved, unburdened from the sheer physicality of pregnancy. If I could have carried a child to term, I would have. But I carried my 10-pound dog in a Baby Björn-like harness on hikes, and after an hour my back ached. Cathy was getting bigger, and the constraints on her grew. I, on the other hand, was happy to exploit my last few months of nonmotherhood by white-water rafting down Level 10 rapids on the Colorado River, racing down a mountain at 60 miles per hour at ski-racing camp, drinking bourbon and going to the Superbowl.<sup>5</sup>

Amy further justifies her joy of outsourcing pregnancy to someone else by pointing out that she herself would not have been good at it and her body and psyche would have probably suffered too much over being pregnant, while Cathy was simply good at it. Cathy even jokingly pointed out that she is an 'Easy-Bake oven', and that being pregnant is not a particular bother for her physically or emotionally. On the contrary, being pregnant for someone else fulfilled her desire to be perceived as a giver, as someone who is capable of realising someone else's dream.

Cathy therefore formed a particular fantasy of what it meant to be a surrogate mother. She did not simply enjoy the act of receiving money for her labor, but also the perception that she was doing a good deed for someone else. One wonders what kind of personal story was behind this fantasy of realising someone else's dream; was it something in Cathy's upbringing that triggered her desire to be seen as a giver? Was there a particular person in her own

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childhood to whom she continued to offer this gift of a child? Whose dream was she actually trying to realise? In the psychoanalytic literature, the decision to become a surrogate mother is often discussed in relation to a fantasy that a person forms around her willingness to bear a child for someone else. Such perceptions of sacrifice and fantasy are also similarly present in the way some sex workers justify their trade, regarding their job as being related to doing a good deed. They might have a fantasy that they are helping impotent men or that they are repaying some debt to some man from their childhood who appeared powerless and whom they feel they have failed to help in the past.

Amy's account of hiring a surrogate mother strangely has an explicitly exploitative tone and somehow pictures surrogate pregnancy as a particular type of job that should have been fully embraced by liberal-minded people. As one hires people to do a variety of tasks for oneself in other domains of life, a busy, wealthy woman decides to look at surrogacy as a treat a wealthy consumer can give herself.

### III

#### **How to choose oneself through choosing a child**

Choice in matters of reproduction, however, does not only involve parents choosing to have or not to have a child; when they are making a choice in favor of procreation, they also need to somehow 'choose' to become a parent and identify with the role of the mother or father. Sometimes this 'choice' is not made and a mother, for example, decides that she would rather act like a sister to her daughter, or a father might decide that although he is biologically a father, he is not willing to take on the paternal role. Quite often now one encounters tragic searches for fathers. For example, *The Maury Povich Show* on US television offers people a free DNA test when there is a dispute between a man and a woman over who is the child's father. But being recognised as a biological father and taking on the role of a father as caregiver are two very different ways to be a parent.

An example of where these dilemmas come to the fore arises when a woman chooses to bear a child from the sperm of a dead man. In such cases, the question with regard to the

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nature of consent of the dead person has often been argued in courts. In France, a legal dispute emerged over the right of the child to bear the deceased father's name when the mother used frozen sperm. In Israel, a court ruled that parents could use their dead son's sperm to inseminate a woman he never met. The parents argued that such a ruling allowed the family line to continue. Although there had been no written expression of the son's desire to become a father, his family claimed that this had long been his wish. In a similar case in the United States, a court decided that after a 21-year-old man was killed in an accident, his mother had the right to keep his body preserved in such a way that it will be possible to harvest sperm from his body. The mother claimed that her son had told her that he wanted to have three sons and that he had even chosen names for them. In order to at some point fulfill this wish and to keep a piece of her son alive, the mother then turned to court to grant her the permission to store the sperm.

Such choices in regard to reproduction try to keep a person symbolically and genetically alive after they have died. It is often the remaining relatives that cannot deal with the loss and thus try to find a solution for it, by keeping the genetic material of the deceased. French philosopher Luis Althusser, however, suffered a slightly different problem with a dead man. As a young woman, his mother was in love with a man named Luis. After this man tragically died, she married a man she did not really love, and then decided to name her son Luis. The choice of this name forever marked young Luis; he felt as if he was a stand-in for a dead lover. In this case, too, we have a person who could not deal with loss and has tried to keep this person symbolically alive by passing on the name of the dead man. The problem, however was that the boy who took on this symbolic role of the replacement for the old flame lost the possibility to have his own symbolic identity and to become an object of his mother's love untarnished by her lost lover. In the case of children who will be conceived from the sperm of dead men, one might also ask how will they be able to distance themselves from the dead fathers whose memory they have been entrusted to perpetuate. Will these children perceive themselves as harvested individuals, whose role is to mask the loss of someone else and who were desired as a particular kind of replica of the dead person? Carrying the burden of such a purpose is not easy and it might turn out that some of the children born with the help

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of sperm from dead men will be weighed down with the fantasies of people who have brought them into existence.

Many people today are trying to figure out rationally what will be the best ways to conceive children. In the United States, a male gay couple decided to have a child by finding one woman to donate the eggs and then another to bear the child. The couple also decided that the 'genetic' mother would be allowed to get in touch with the child only when they were six years old, while the mother who delivered the child would get the opportunity to see the child only briefly at the time of birth. Such a complicated arrangement tries to diffuse the problem of who is the mother as well as limit her potential claims on the child. While the couple hopes to solve the problem of the child's mother rationally, they may not be able to control the way the child will create his or her own dilemmas in regard to their mother's role in their existence.

Psychoanalysis recognises that a person's decision to have children has many layers that cannot be at all explained using the vocabulary of rational choice theory. First of all, one's decision can be heavily influenced by one's parents. Behind a woman's or a man's desire to have a child might be the desire of his or her mother or father. A son might thus present his child as some kind of a gift to his mother. A daughter might diminish the parenting role of her partner and biological father of the child by placing the grandfather in the role of the most powerful paternal authority. A woman might also insist on having a child because she wants proof of what kind of an object of desire she constitutes for her partner. She might say to her partner: 'If you love me you will have a child with me.' With such a demand, she is not expressing her own desire for a child but rather questions her partner's desire for her. A man whose partner demands a child might very well lose his previous love for his partner after she becomes a mother. This man might have idealised his partner before and felt strong love for her, but when she becomes a mother, all kinds of unconscious desires that he had towards his own mother might come to the fore. His own mother is off-limits for him and when his partner becomes a mother she takes the role of that prohibited incestuous object. Freud pointed out that some men solve this dilemma by splitting the object of their love into a virginal, idealised woman (who is off-limits) and a whore (a woman the man debases, but whom he can also sexually enjoy).

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In the cases of women searching for a sperm donor, one finds a desire to find an idealised person who will, however, forever be off-limits. *The New York Times*, for example, reported how some women who search for sperm donors first want all kinds of information about the donor (from his SAT scores, to his smile, physical build and so on). Quite often these women fall in love with this idealised donor, and the fact that this donor is inaccessible only adds to their loving feelings. However rational the choice of a woman for a particular donor might seem, this choice touches intricate levels of desire; a woman might pick a donor who resembles her father or her lost lover, or she might pick a donor who will offer no competition for the child's love. She might also pick a donor because this anonymous man will in a particular way be forever hers; since he is out of reach, the fantasy she has about him will never be shattered by reality. The question remains, however, of how an individual child will respond to the diverse forms of desire his or her mother felt on bringing him or her into existence.

#### IV

#### **From desire to demand**

The birth of octuplets in the USA sparked new debates about choice and demand in reproduction. The very fact that mother of the octuplets, Nadya Suleman, is a single mother who already had six children, all conceived through in vitro fertilization (IVF), opened up the question of whether there is a limit to how many children one can conceive through assisted reproduction and especially how many fertilised eggs can be implanted at the same time. At the time of her last IVF treatment, Suleman was implanted with six of the fertilised eggs which were left over from her previous treatment. Two of these eggs later divided, which is why in the end she gave birth to eight children. Suleman answered the question of why she had so many fertilised eggs implanted by saying: 'Those are my children, and that's what was available and I used them. So, I took a risk. It's a gamble. It always is.'

Suleman expressed an insatiable desire to be a mother. All she ever wanted to have was a big family. Since she was an only child and did not feel much connection to her parents

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during her upbringing, she very much wanted in her adult life to repair this damage by becoming the most devoted and loving mother she could be. Angela Suleman, Nadya's mother, pointed out that Nadya turned her boyfriend into a sperm donor for all 14 children, but refused to marry him: 'He was in love with her and wanted to marry her,' said Angela. 'But Nadya wanted to have children on her own.' It is important to point out that Nadya Suleman is a religious woman, which is why all of the octuplets got Biblical names. And when asked whether she ever thought about the fact that she has no financial resources to provide for such a large family, she said: 'I just kept thinking God will provide.'

Suleman's case opened a variety of questions about limits in regard to choices over reproduction. First, there is a question of the authority of the medical profession and its capability to impose limits on a patient's demand for IVF in cases when the person already has a substantial number of children, or is deemed economically or psychologically incapable of providing for the children. Second, there are questions related to limits on the number of fertilised eggs one can have implanted at one time. Since implantating a large number of fertilised eggs carries a strong risk of harm to mother and children alike, this question very much involves predicting potential danger. Thirdly, there is the question of a limit imposed by the donor, the biological father, on how many times his sperm can be used in the process of insemination and what limit there is or should be on how many children he can father in general and with an individual woman in particular.

If we look at these questions through the lens of psychoanalytic theory, the dilemma also emerges as to whether, in the case of a woman who ends up with so many children, we are not dealing with a psychotic structure<sup>6</sup>. When a person shows such an insatiable quest for children, the question emerges of what kind of object the child constitutes for this person. In Suleman's case it is troubling that she regarded fertilised eggs as extensions of herself that are not to be wasted, that she never questioned what her donor might say about the fact that he is now biologically connected to so many children, how her children might respond to her choices to have so many of them, and how to financially support her family. A number of commentators on this case pointed out that Suleman's face looks strikingly similar to Angelia Jolie's and that she may have undergone plastic surgery to achieve such look. Since Jolie also

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keeps expanding the number of children that she has, this might provide a point of identification for Suleman.

In explaining her motives, Nadia Suleman predominantly uses the term 'I want'. Such an idea of wanting is very different from a desire to have a child. When we are caught in a dialectic of desire, we usually do not rationally know what we actually want. We might go from object to object and have an endless feeling that this is not it. Which is why one's dealing with desire is often full of dissatisfaction.

Nowadays, psychoanalysts observe a change in the formulation of the quest to have a child among some middle-aged women. The question of whether or not one should have children often involves deep dilemmas for the prospective parent. He or she might very much question the nature of his or her desire to reproduce. A career woman might be perturbed with anxieties about the future of her career; a married woman might question how having a child will affect her marriage; a single woman might deeply fear how she will cope with a child alone<sup>7</sup>. These troubles with the desire for a child might push someone to undergo psychotherapy in order to try to figure out whether she truly wishes to have a child at all. Such a person might, in her analysis, deal with the question of how she was desired by her parents in the first place. This question can, of course, open up a traumatic acknowledgment that one has not been desired at all and that parents actually in an open or hidden way rejected the child. In order not to make the same mistake, a prospective parent therefore hopes to explore her desire for the child.

Lacanian psychoanalysts have observed a peculiar shift from desire to demand. Instead of having patients on the couch who are uncertain about their desire, they deal with patients who demand a child under any circumstances. Quite often such a demand is formulated in the language of rights. A woman might say: 'I want to have a child. It is my right to have one, but my husband is preventing me from fulfilling this right.' Sometimes it is a doctor who is perceived as obstructing a woman's right. The ideology of choice has influenced this turn from desire to demand, but the question now is what kind of an effect this will have on children? It is one thing to approach the question of how one was desired by parents but quite another to accept the manner in which one was 'demanded'. The woman who 'demands' to have a child might very well perceive that the child will make her

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complete. She might have difficulty separating herself from the infant, which in turn might be suffocating for the child.

## V

### **Impossible choice**

Many women who struggle with a conflict of desire in deciding whether or not to have children often confront, consciously or unconsciously, the question of whether or not they were desired by their parents. When unable to decide, many women point out that they have pondered the nature of their own mothers' desire and that their decision (or the lack of it) to have children has been influenced by how they have interpreted their mothers' wish for them.

American psychotherapist Phyllis Ziman Tobin conducted a number of interviews with women who had difficulties deciding whether or not to have children<sup>8</sup>. Often women referred to the ambivalence of their own mothers in regard to this question. This was especially the case with mothers coming to terms with the conflicting cultural stereotypes that were present in the 1960s and 1970s. In their inability to make a decision, many women pointed out that they were afraid of the change and the loss of control that change brings. They were also worried about the change to their bodies and their life-styles; they were anxious about things that could go wrong with the baby. Many women expressed a dilemma in regard to what the term 'mother' actually means; that is, how a mother is supposed to behave, feel and look. 'I don't want to look dumpy like my mother,' was one often-expressed response to the question of why some women could not decide to have children. For the psychotherapist, this question was related to the question of what looking like her mother meant for a particular woman. One patient, named Jean, revealed that her own mother felt depressed after childbirth, as did her grandmother. Jean was worried about repeating the family history of maternal depression. At the same time, Jean's mother let her know that she sacrificed herself for her children by staying home and that she was happier when she went back to work as a teacher. Another patient, Diana, could not decide about children since she could not deal with the risk of being left holding the baby all alone – as her mother was with her. This image of potential loneliness was coupled with the fear that her marriage might collapse if she were to have a child. Reflecting on this fear, Diana realized that she did not

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want to repeat her mother's story, frightening away her husband and then ending up a miserable divorced woman. Since Diana's mother unconsciously blamed her daughter for her misery, Diana's decision as to whether to have a child or not was deeply related to her progress in working through the question of what in the end she represented for her mother. However, when Diana's husband fell ill of cancer, she finally decided to have a child. Now the issue of loss emerged in a new way. If the potential of loss at first prevented her from having a child, later this very same fear incited her to go ahead and become pregnant.

Although women try to rationally decide when it will be best to have children, choice is often made for them by circumstance, when for example a spouse or parent becomes ill or dies. Such moments of loss are often dealt with in an unconscious way by creating new life. When a woman finally decides that she would like to have a child but is then unable to conceive, she suffers another trauma. A woman might especially feel a loss of the much-treasured sense that everything is possible. In today's ideology which promotes the idea that one can 'have it all', the sense of loss feeds a corresponding feeling of powerlessness.

## VI

### **Conclusion**

Choice in reproduction is a very powerful tool. Although the choices we make in regard to having children are often not conscious at all, we cannot give up on the power that stems from the very presumption that we have choices. Even when we are unable biologically to have a child we might find satisfaction in the perception that it was nonetheless our choice. It is not unusual for an infertile couple to continue using birth control even after they have learned that they cannot conceive; using contraception in this case is a sign that they still take reproduction as a matter of choice.

Reproduction and choice in a variety of ways includes the problem of loss. In pondering long and hard over whether or not to reproduce one must often confront the fear of losing autonomy, overloading a relationship, losing control, losing one's body in the state one might prefer to perceive it, losing one's own inner child. Simultaneously, not having a child constitutes a loss of an imagined future: losing a dreamed-of bond with another, an idea of

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continuing one's family line, a gift that one wanted to give to one's parents or partner. It can even mean the loss of a narcissistic image – the picture of one's own younger self in daughter or son.

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<sup>1</sup> The paper was delivered at the Mother Trouble conference at Birkbeck College in London in 2009. A later version of it is included in Salecl, R., 2010. *Choice*. London, Profile Books.

<sup>2</sup> More on this in Salecl, R., 1994. *The spoils of freedom: Psychoanalysis and feminism after the fall of socialism*. London, Routledge.

<sup>3</sup> Solinger, R., 2001. *Beggars and choosers: How the politics of choice shapes adoption, abortion, and welfare in the United States*. New York, Hill and Wang.

<sup>4</sup> *Ibid.*, p. 193.

<sup>5</sup> Kuczynski, A., 2008. Her body, my baby, *New York Times Magazine*, Nov. 28.

<sup>6</sup> Here I refer to Lacanian theory and its definition of psychosis. In contrast to a neurotic who is full of doubt, a psychotic has certainty and that radically changes his or her perception about reproduction.

<sup>7</sup> If one were to look more broadly, one would also need to analyse how lesbian mothers, gay fathers, mothers who have children from previous partnerships, women who are forming blended families with men who have children from former relationships and so on, come to a decision about reproduction. In many ways, these new family forms are complicating the psychic picture even further.

<sup>8</sup> See Tobin, P. Z., with Aria, B., 1998. *Motherhood optional: A psychological journey*, New York, Jason Aronson.