Maternal Subjectivity

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As I noted elsewhere,

each and every one of us throughout the generations anywhere in the world has
slithered out of, or been retrieved from a powerful woman’s body. We too swam
in an amniotic sea within a swelling uterus, punctuated by the booming sound of a
life-giving heartthrob until, vernix-coated, we were propelled headfirst along a
tight birth canal, or lifted out from within a slashed belly (Raphael-Leff 2002,
p.45).

Thus, none of us is exempt from the originary mother’s awesome life-and-death power and its
dark unconscious after-effect that compels us to negate subjectivity, not only of the archaic
maternal ‘object’ – but our own, as mothers.

I have spent the past six decades exploring this elusive area of maternal subjectivity –
at first in my capacity as a daughter awakening to and resisting the idea of my own mother’s
personhood; then, as mother to a handful of children, and latterly, as grandmother of seven
girls and a boy. In addition to personal experience, and academic work, my clinical practice as
a psychoanalyst specialising in the emotional aspects of reproduction has included thousands
of hours of ‘nattering’ and empirical research interviewing as well as observing mothers with
their babies and children on six continents (Raphael-Leff 1991a).

Registering the varieties of ways motherhood is subjectively appraised and practiced, I
eventually distilled the vast spectrum of maternal experience into four basic orientations:
Facilitator, Regulator, Reciprocator and Conflicted (Raphael-Leff 1986). Large scale studies
in different societies have confirmed that the underpinning beliefs and representations I
isolated are predictive of both the emotional experience of pregnancy and postnatal maternal
mood, anxieties and interactive style (e.g., Scher 2001; Sharp & Bramwell 2004; van Bussel
et al. 2008).

On the basis of these studies I proposed that an unconscious paradigm informs the
psychosocial structuring of mothers. The gestational ‘containment’ and interchange of
nutrients and waste between pregnant woman and fetus, serves as metaphor/model for
maternal function. Conflation of care with placental process perpetuates expectations of
exclusive and continuous female primary care (privileging biological mothers). On a societal
level, unconscious residues of transactions with female primary caregivers promote women as nurturing/waste-disposing ‘containers’. Collusive complementarity with this projection has wider cultural manifestations. Creative inner space is deemed attainable by internalisation of the primary caregiver’s transformational process (Bion 1962; Bollas 1989). However, it becomes conflated with female procreative space and function, compounding exploitation of women as repositories and transmuters of male cultural productivity and waste products (see Raphael-Leff 1991b) rather than agential collaboration.

Similarly, unconscious internalisation of the contradictory glorification of motherhood yet denigration of mothering has a profound effect on maternal self-esteem and conceptualisation of parenting. One consequence of post-industrial urbanisation is that due to social stratification, geographical mobility, breakdown of extended families and changing social mores, ‘westernised’ women often mother in isolation. Alone, having lost both intergenerational support and traditional community network, a new mother is at risk of being overpowered by the impossible expectations and emotional forces inherent in the childbearing/rearing situation. Paradoxically these psychosocial changes increase each individual mother’s power over her child, but simultaneously exacerbate her own vulnerability. She becomes susceptible to reawakened infantile emotions and regressive splitting with idealisation or denigration of motherhood and self at the very time of greatest demand on her adult capacities.

Maternal power is counterpoised by the power of the infant over the mother. I have proposed a risk of contagious arousal not only through exposure to the baby’s raw feelings, but due to unremitting contact with the smell and feel of primal substances (amniotic fluid, lochia, colostrum, urine, faeces, breast milk, mucus, possett, etc.) implicitly absorbed from the mother’s own archaic carer’s childbearing body. These create an emotional undertow towards procedural memories of primary interaction, embedded in presymbolic experience. A new mother suffering from ‘primary maternal persecution’, as I have termed it (Raphael-Leff 1986, 2003), in fact may be so immersed in unconsciously introjected trans-generational forces and unresolved early scenarios with her own archaic mother, that she is unable to engage robustly with the subjective experience of mothering the baby in her care (for clinical examples, see Raphael-Leff 2000a, b).

Furthermore, whereas traditional societies offer myriad opportunities to work through
early issues in the presence of siblings, cousins and other babies, in small nuclear families many new parents have had little contact with babies until the arrival of their own. Experience thus remains non-episodic, untapped and unprocessed until it erupts in the presence of this baby for whom the mother and/or father has full (and often, isolated) responsibility.

That said, westernised woman has the power to make extraordinary decisions. In the last half century, in addition to complex socio-political developments, eternal facts of life have altered dramatically: an estimated 12% of European women plan to remain childless, relying on efficient female-based contraception and access to safe abortion. Earlier menarche and sexual activity as well as condoned ‘unwed’ maternity lead to a high incidence of teenage mothers. Assisted reproduction brings previously unknown happenings: multiple gestations induced by ovarian hyper-stimulation; donated gametes, surrogacy and postmenopausal conceptions; lesbian egg exchange and same-sex parenting; twins born years apart; pre-implantation selection, corrective fetal surgery; antenatal testing, diagnoses and abortive ‘reductions’ – all contribute to a greater complexity of maternal subjective experience and decision-making processes. In addition, biotechnology can also be employed to realise unconscious aspects of generative identity – to magically reverse anatomical limitations of sex, generation, genesis or generativity, and actualise oedipal desires or play out fantasies of parthenogenesis or rebirth (Raphael-Leff 1997, 2007).

More than ever before, we have become aware that in their pre-conceptual, prenatal and postpartum life-and-death decisions, women do not simply blindly obey hormonal dictates, drives or psychosocial interdictions. Each mother’s stance is a delicately balanced compromise formation between often irreconcilable pressures of multiple internal figures and external dependants, personal desires and unconscious social forces, with constant awareness of the powerful clash between the seductive/repellant pull/push of the baby’s unmet needs (which have changed little over the millennia), and the complexity and urgency of her own (feminist) expectations.

In conclusion, I suggest that dread of the archaic mother on the one hand, and of the dependent baby on the other, are fuelled both by Western valorisation of autonomy, and by the intensely dyadic relationships generated within nuclear families. These present a constant intrapsychic and cultural impetus towards illusory separateness and misogyny, the breakdown of which often occurs during childbearing/rearing. The unconscious
attraction/threat of emotional ‘reengulfment’ in an originary ‘symbiotic’ unit heightens anxieties about loss of personhood and patterns of baby sleep, feeding and excretion, precipitating the high prevalence of both perinatal depression (with its high comorbidity with anxiety and eating disorders) and persecutory emotional disturbance, including detachment, panic, paranoid states and phobias (Raphael-Leff 1985; Sharp & Bramwell 2004; van Bussel et al. 2008). In my view, it is this rich seedbed of subjective experience that awaits closer mapping by today’s researchers.

References

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