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(M)Othering: Feminist Motherhood, Neoliberal Discourses and the ‘Other’

Introduction
In the launch of the previous issue of Studies in the Maternal, ‘Maternal Aesthetics: The Surprise of the Real’, I tagged along to the online discussion to address the fallacy of the so-called ‘post-feminist’ world as argued in the editorial by Andrea Liss. By concurring with her rejection of ‘post-feminism’, I proposed a discussion on negative concepts around motherhood while using case study on feminist activism in Brazil. The case study is based on empirical investigation that I developed as part of my doctoral research to explore the ascendance of maternal mortality as an issue and its neglect by Brazilian public policy. It is oriented by semi-structured in-depth interviews conducted between September 2012 to July 2013 with forty-seven actors across Brazil. The pool was therefore divided and analysed through the division of key policy players in five separate policy groups: (i) policy makers participating in the government’s bureaucracy; (ii) health and legal professionals in charge of implementing health policy; (iii) women’s rights advocates (feminists and non-feminists); (iv) researchers; and (v) members of international organisations (UN agencies and non-governmental organisations working at the global level). This division stresses the different discourses used by each group and the influences these discourses may have had intra-groups and externally. It considers the internal divisions within each group and the extent of its importance to the wide dissemination of the main discourse promoted by each group. Its purpose is to contribute to the existing scholarly debate on social policy and participation to advance knowledge on the dynamics of agenda setting and activism.

Throughout this paper, I rely on this case study to problematise the continuous appropriation, transformation, and re-appropriation of feminist discourses by the different policy networks and its influence in the depoliticisation of the wider women’s rights movement. This historical analysis serves as a statement of the voracious power neoliberalism has over all types of policy making and its opportunistic advancement of certain political strategies created by different individuals and networks involved in the institutionalisation of a human rights-based approaches. The control exerted by neoliberalism over policy and policy discourse is particularly acute in the case of maternal mortality. In its most progressive format, maternal mortality
touches upon politically contentious issues that are often resisted by conservative networks supporting neoliberal control over public health sector reforms, principles, and practices. This debate deconstructs hegemonic feminists rejection of motherhood while also acknowledging the importance of non-motherhood to motherhood debates. Non-motherhood as ‘the other’, I think, as opposed to submissive realities and resistance strategies, represents a move away from patriarchal values and creates a social reality that uses something else as a parameter.

**Feminist Activism and the Rejection and Recuperation of Motherhood**

As Hansen claimed, feminist theory often gravitates around the rejection and recuperation of motherhood (Hansen 1997). But, while arguing for the recuperation of feminist motherhood, Liss (2013) demonstrated the importance of understanding the duality between feminist motherhood and the patriarchal concept of motherhood. Here, I will argue that in recuperating motherhood, feminists and non-feminists alike should also acknowledge the coexisting realities that reject it. I am specifically thinking of feminist non-motherhood but also of feminist notions of pregnancy that reject motherhood. The mother without the maternal bond or even the falling out of motherhood after motherhood.

Social anthropology literature has already explored the existence of fluid and fragile maternal bonds under extremely difficult social conditions (Scheper-Hughes 1992). But the rejection of motherhood is not as foreign as one would imagine. Maternal bonds and concepts can be just as fluid within ‘privileged’ groups shifting from its complete rejection – avoiding pregnancy at all costs – or partial rejection – denouncing it (explicitly or not) anytime after the beginning of pregnancy (reclaiming it later on, at different points in time, or rejecting it entirely) (Hansen 1997).

As mentioned above, this article reflects the findings of my doctoral research. The case study’s interviews are used because they provide validity for this analysis (Mitchell 2006). These are used in their coded format to provide confidentiality to interviewees. This case study is particularly relevant as the interviews achieved methodological saturation, i.e. results arising out of individual interviews re-asserted one another as if constitutive of a series of individual case studies (Small 2009). However, my selection of questions during interviews, as well as my analysis, reflects my experience and my perceptions as a feminist activist and a researcher. In this sense, I do not claim to be presenting objective data (and I hardly think it is ever possible to be apolitical and objective); what I attempt is to present accounts that have otherwise been silenced.
by mainstream accounts of mothering (Blacklock and Crosby 2004). In order to demonstrate my argument, I address patriarchal values on motherhood and its reshaping by neoliberal motherhood. At first, I will contextualise my discussion by presenting the existing scholarly discussion on the universal marginalisation of women through discourse. Then, I discuss neoliberal discourses and their effects over motherhood. This, I argue, considerably transforms the context in which all other concepts of motherhood are inserted into in contemporary times. Subsequently, I present the case of feminist activism and non-motherhood in Brazil. Given the length of the article, I use only a few quotes to illustrate some of my arguments. To demonstrate the importance of the quotes used, I discuss existing theories on feminist motherhood and (m)othering. I conclude with a section on ‘the ‘other’ which explores the importance of understanding negative concepts of motherhood and their marginalisation by/from mainstream discourses.

**Patriarchal Values and Motherhood**

Patriarchal values make no space for the pure exercise of the feminine (Liss 2013). Patriarchy offers itself as the sublime and spiritual ‘truth’ and provides men (particularly those that constitute the political elite and those women associated with them) with the tools for the unequal exercise of power (Irigaray 1993). Language, and therefore discourse, is the main tool put at the disposal of patriarchy (Irigaray 1993). Patriarchal dominance is exercised through a system of rules and conventions that are neither transparent nor available to everyone (Irigaray 1993). At the same time patriarchal power is consolidated, so is the exclusivity of its normative systems and discourses (Irigaray 1993). The political economy of discourses is particularly strengthened by the failure to identify the historical gaps and oversights in these patriarchal discourses or in the discourses reinforcing its beliefs and standards (Irigaray 1993). In most contexts, public discourse is usually encoded by males and women brought up in the male dominated discourses (Ardener 1975). Language is ‘neither universal, nor neutral, nor intangible’ (Irigaray 199, p.23).

There is a universal marginalisation of women through discourse within the nature/culture dichotomy (Ortner 1972). Every culture recognises a distinction between operation of nature and operation of culture and every culture asserts itself to be superior to nature (Ortner 1972). Moreover, woman’s physiological functions tend in themselves to motivate a view of woman as closer to nature (de Beauvoir 1972). In that sense, ‘biological determinism’ –
the concept of genetically inherent traits that determine an unchangeable hierarchy between women and men – can be reinforced by the affirmative that women’s physiology is more inclined towards reproductive work and men’s towards productive work (Ortner 1972). In that sense, women are then associated with nature and men with culture (Ortner 1972). In such contexts, representations of femininity are reduced and circumscribed by motherhood (Kristeva 1977). This nature/culture divide not only marginalises women to ‘natural’ functions related to motherhood but also mislays the claim that sex and gender can be easily separated from one another (Söderbäck 2010). The analytic concept of gender is meant to challenge ‘biological determinism’ by situating men’s and women’s social roles in terms of its specific socio-historic context (Ortner 1972; Stolke 1993). Gender divisions and relations are a result of political struggles for power and control that define the position of women and men in society at a particular period in time (Petchesky 1990). Gender is and should always be articulated in terms of the different categories that intersect each individual’s subjectivity, position and meaning in a context (Petchesky 1990).

To put it simply, the patriarchal concept of motherhood is based on the notion of women as second-class citizens (de Beauvoir, 1972). Women, as the patriarchal ‘other’, are seen as the natural object for the social construction of a patriarchal future (Irigaray 1993). In patriarchal cultures, motherhood is subjected to a double exclusion: the rejection of women as subjects with their own rights, and the dismissal of female babies as inferior to male ones (Irigaray, 1993). In sum, motherhood becomes a site of domination and surveillance whereby women are objectified as mothers (and mothers only from then on) and their children are judged based on their sex (‘the offspring’). Sex becomes immersed with cultural meanings just as must as gender (Butler 1990). And, female subjectivity is essentialised to retain repetition and eternity in a ‘purpose’ to frame it as a conduit and continuity of society (Kristeva 1980).

The patriarchal concepts of motherhood are reinforced through various practices such as in discourses promoting intensive motherhood (aka ‘the supermom’) (O’Brien Hallstein 2010). Intensive mothering, i.e. the hegemonic ideology that requires women to devote considerable time to attending their family’s needs and put these needs before their own, works as a form of patriarchal control over women (O’Brien Hallstein 2010). As will be discussed below, feminist activism (particularly second wave feminism) used to be placed in direct opposition to intensive motherhood, i.e. as a counter discourse to the mainstream (O’Brien Hallstein 2010). However, as feminist motherhood became more and more common, the feminist movement became more

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aligned with intensive mothering (O’Brien Hallstein 2010). This new alignment in discourses reinforced concepts such as ‘choice’ and ‘having it all’ (Nash 2012). This created a positive form of feminist advocacy that had the potential of debunking negative myths around motherhood and feminism. However, as I observed in the context of Brazil, feminist motherhood has been re-shaped and co-opted to a certain extent by neoliberal discourses as a way to domesticate feminist activism and/or discredit all forms of feminist activism that is based on negative concepts and discourses.

Neoliberal Discourses and their effects over Motherhood

We live in capitalist times. All capitalist projects make use of a political rhetoric that uses cultural images that rely on fear as one of the many instruments used to support a particular discourse and practice that increase economic dependency and the poverty gap (Massey 2013). Modern capitalist projects are mostly known and classified in the form of the cluster loosely named neoliberalism (Hall, Massey and Rustin 2013). The neoliberal project represents the continuity of an exclusive way of policy making and implementation that is run by an elite that is alienated and disconnected from reality (Harvey 2005). This policy praxis results in a lack of commitment to people’s experiences and needs and in a discriminatory and delusional perception of the reasons and the purpose of programmatic targeting and retrenchment (Boesten 2007). Neoliberalism uses discourse (as mere rhetoric) for the promotion of cuts, privatisation and widespread contempt for the poor (Barbieri 2000; Saad 2004). It means shifting the mainstream political discussion from the ethical dimensions of austerity measures to moralistic values of socially constructed roles (Ewig 2010). It purposefully exposes individuals to criticism to protect the corporate determinism embodied in the shift of paradigm performed by policies under neoliberal governments (Harvey 2005). Usually, this does not occur in a visible and transparent manner (and this is perhaps one of the main problems of its rhetorical appropriation) (Hall, Massey and Rustin 2013).

Traditional neoliberal theory relies on the patriarchal family as locus for the diffusion of its processes of economic development (Arriagada 1997). With this aim, neoliberal macroeconomics promote the reduction of the traditional family (with the removal of the extended family from its core); the increase of individualistic values (and the rejection of collective thinking); and the gendered division of labour (i.e. productive work as men’s responsibility and reproductive as a women’ only affair) (Arriagada 1997). According to this

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theory, the family - i.e the heterosexual marriage generating children - is absolutely necessary for economic progress (Arriagada 1997). This almost religious process ‘sanctifying the family is very visible in the Latin American context. For historical reasons, public policies in the region continue to be influenced by stereotypes based on an ideal’ of the traditional family (Jelin 2005). In this sense, the family exists untouched as the most basic social institution while its unequal hierarchies and internal systems of subjugation remain unchallenged (Jelin 2005).

Through my case study, I was able to observe that neoliberalism, coupled with an ever-increasing neoconservatism, produces extremely negative effects over alternative forms of motherhood. This is because symbolic representations of motherhood are intrinsically linked to the neoliberal standard of the ‘proper’ family (Jelin 2005). ‘Decent’ and respectable women are only those that abide by the ‘natural’ rules on womanhood - i.e. those that are married and with children (Jelin 2005). Patriarchal values of domination are embedded in Latin American policies which alternate between public interventions in the private sphere to avoid the disintegration of the family and non-interventions to protect patriarchal interests over the family (Jelin 2005). These moralistic views on motherhood are also responsible for the complete divorce between the creation of laws based on international human rights and theirs implementation (de Barbieri 2000).

Although this article intends to only discuss the Brazilian case, it is important to note that similar approaches are also present in other contexts. For example, in contemporary England poor black single mothers are demonised as ‘bad mothers’ while no critique is presented against those conditions that might have put that woman in a poor and marginal condition in the first place (de Benedictis 2012). Simultaneously, attempts to criticise the interests that uphold neoliberal governments in power are forcefully blocked (Neuman 2012). The deconstruction of the symbolic meanings of neoliberalism reveals the discriminatory nature of capitalism. It subjugates the feminine and feminist aspirations and choices and it fails to view power as gendered (de Benedictis 2012). Motherhood is used, in this sense, in authoritative terms as a form of representation of women’s predominant and conforming roles and their bounded devotion to a heterosexual male-dominated family (Berry 2010). This re-emphasises the male/female relationship in terms of the nature/culture binary by oversimplifying a spectrum of gendered experiences, disregarding other social categories that impact over women’s and men’s lives and creating artificial groups that are incapable of translating highly transient definitions such as womanhood and motherhood.
Moreover, neoliberal discourses are carefully constructed as to advance a political strategy to advance de depoliticisation of social justice discourses (Sardenberg 2008). There are various definitions of discourse that range from a post-structuralist attachment to meaning and limits of the ensemble of representations, to a purely linguistic sense of stretch of language, then to a combinations of both to establish it as an ‘extended discussion within a particular framework’ (Gasper and Apthorpe 1996, p. 3). Depoliticisation is one of the oldest set of tactics in politics by which institutions and individuals commonly associated with representative democracy look at reducing certain political transaction costs by shifting policy making and implementation discourse from politics to techniques (Flinders and Buller 2006). That is, depoliticisation creates issues based on priorities of political elites as non-issues (anything outside the technical realm) which then become invisible issues or muted discourse (Berry 2010).

The Case of Feminist Activism and Motherhood in Brazil

In spite of profound changes in gender and sexuality during the 20th century in Brazil, patriarchal motherhood is still widespread and visible in ‘machista’ (chauvinist) attitudes towards women (Alves and Corrêa 2009). Although women are more present in work and public spaces asserting their individuality and pushing for the separation of sexuality from reproduction (Alves and Corrêa 2009), these changes, as usually followed by conservative backlashes (religious or not), are rarely accompanied by mechanisms that effectively acknowledge and/or guarantee sexual and reproductive autonomy (Alves and Corrêa 2009). In the midst of these contradictory signs, women are (and keeping in mind that there are different levels of ‘machismo’ across this very large, diverse and unequal country) effectively seen as the second sex (de Beauvoir 1972). As a result, womanhood is only achieved when and if mediated by motherhood (Kristeva 1977). In sum, women are not women until they become mothers. Therefore, perceived notions of women as the bearers of the fruit of future generation echo at all levels, social, cultural, economic and political (Kristeva 1977). In the political arena, policies defining and dealing with motherhood are deeply embedded with sexist values (Galli 2002).

However, public health policies geared towards social justice have no effect if not inserted into a wider culture of political measures for positive change (Mackintosh 2002). In Brazil, the strategies for the improvement of maternal health were largely mediated by organised social groups either through the creation of new political concepts, prioritising or targeting issues (Osis 1998). All social movements, whether in health or not, changed as the political scenario

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changed (Costa 2009). In health, groups initially formed a social justice platform in opposition to the authoritarian government, then took part in open dialogues with the State during the democratic transition and later acted on institutionalised instances of participation (Costa 2009). Throughout recent history, the feminist movement has been quite important in advocating for women’s rights to reproductive freedom and autonomy (Osis 1998).

The Brazilian case study effectively rejects the existence of a ‘post-feminist’ and ‘post-patriarchal’ society (Alves and Corrêa 2009). Feminists’ strategies promoting women’s right to health were and are perceived differently by different policy networks (Mesquita 2011). The different readings of their engagement with different theories of development and their approach to the issue of maternal health incur in different results (Mesquita 2011). Given its volatility to negative readings, feminist engagement with public policy not always helps fostering a better environment for the achievement of women’s right to health to its fullest (Mesquita 2011). Women’s movements, not only feminists, were responsible for bringing about public discussions related to public-private life divide in which women - confined to the private - are invisible and therefore did not enjoy the privilege of having their issues (such as domestic violence, sexuality and women’s health) dealt with by public policy (Galli 2002). It was the activism of feminists that managed to articulate with leftist movements and to actually have gender included into the public policy agenda (Mesquita 2011). Despite strong women’s rights activism, maternal health has risen from invisibility to visibility and then to instrumentality in Brazilian public policy.

**Maternalism and Health Policies**

Until 1983, public health policies in Brazil only addressed motherhood under a maternal-child paradigm (Osis 1998). These maternal-child policies refrained femininity to conservative social values that only afforded real value to women as mothers and in their motherly roles (Osis 1998). In 1983, the Women’s Integral Health Program (PAISM) was created to break away from the maternal-child paradigm (Costa 2009). Contraceptive methods started being treated as a mechanism to afford freedom in family planning (Mesquita 2011). Moreover, women’s health was treated in a comprehensive manner which attempted to rescue women from the constraints of patriarchal values of motherhood (Costa 2009). This clear feminist orientation and/or sensibility in public policy has/ve been acclaimed by activists as a step towards a ‘post-patriarchal’ society. By contrast, as affirmed by a feminist academic, although PAISM was, and is,
in fact a policy that managed to encapsulate the entire scope of the concept of women’s rights, the real challenge lies in its implementation (Interviewee 2, 30.10.12).

Recently, in Brazil, as in other places elsewhere, progressive women’s rights policies have been met and overthrown by ‘neoconservativism’ (Young 1990; O’Brien Hallstein 2010). Since 2011, the Brazilian government has re-introduced conservative maternal health policies as part of a wider plan to tackle maternal mortality rates called Rede Cegonha (Galli 2012).\(^1\) This plan partially recognises reproductive rights by affording limited (i.e. maternalistic) protection by creating a new network of family planning and humanised care to pregnant women and their newborn children but it fails to address the need of women that are not pregnant (Galli 2012). Academics argue that the approval of Rede Cegonha represents a step backwards and a re-institutionalisation of the maternal-child approach (Interviewee 1, 14.11.12). On the other hand, health professionals see it as positive as it provides an entry point for a more comprehensive maternal health care and programs (Interviewee 31, 29.10.12). In spite of divergent positions in terms of the usefulness of Rede Cegonha, it is clear that it represents a step backwards towards a new maternalistic rhetoric and the instrumental use of the motherhood for political purposes. In the following sections, I will attempt to demonstrate how the rejection of feminist motherhood and of non-motherhood has contributed to this conservative approach to maternal health policy in Brazil.

**Depoliticisation and the Re-Colonisation of Non-Neoliberal Discourses**

National maternal health policies in Brazil are highly influenced by international development discourse (Galli 2002). Development policy discourse is grounded on the notion that policy practice, as a position supported by persuasive and sophisticated language, does not invite or accept criticism or deconstruction (Gasper and Apthorpe 1996). Its conceptual creation and implementation is neither naively originated nor its strategy devoid of ideological-political meaning (Mohanty 1988). Policy discourse analysis, in a way, takes the standpoint that policy making is not necessarily a rational decision making process but rather a contented and value-oriented process of consensus building through inclusion and exclusion (Shiffman, Beer and Wu 2002).

Mainstream development discourse has been consolidated as a depoliticised arena put at the service of neoliberal donors looking at (re)colonising non-neoliberal discourses (Mohanty 1988). In spite of mainstream rhetoric, neoliberalism reinforces the patriarchal concept of

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motherhood (Sardenberg 2008). It frames parenting in terms of feminist discourses around equality but with the real objective of shielding restrictive and retrenchment policies from criticism (de Benedictis 2012). More importantly, neoliberal thinking shifts feminine subjectivities to frame it in terms of neoliberal interests (Berry 2010). For example, discourses that promote the ‘neoliberalisation of the family’ urge for extreme levels of individualism and self-governance which in themselves remove from the remit of the State the responsibility over deviant behaviour of young adults and place the blame on parents and, more specifically, single mothers (de Benedictis 2012). This, of course, obscures discriminatory politics. But also, it promotes self-governance and individualism up until the boundaries of neoliberal acceptability, i.e. individuality is only acceptable if exercised within the boundaries of the social rules created by the mainstream. In fact, contemporary hegemonic discourses impose stricter moral rules of ‘good’ parenting that permit and intensify external surveillance of society over parents (O’Brien Hallstein 2010).

Indeed, the language of the ‘free’ market produces deep cultural distortions (Scheper-Hughes 1992). Women (and their relationships) are seen as commodities and therefore their bodies are constructed as objects to be controlled (Scheper-Hughes 1992). This silences ‘radically different experiences of reproduction and motherhood’ (Scheper-Hughes 1992, p. 402). And, most importantly, these silences and pervasiveness of language are rarely noticed (Massey 2013). As a result, representations of positive forms of motherhood in the political arena are put into a fragile position; these are either marginalised or co-opted by mainstream neoliberal discourses (O’Brien Hallstein 2010). This unfortunate context, which rejects real autonomy of women, is clearly present in women’s rights strategies in Brazil.

**Feminist Activism and Motherhood in Brazil**

In Brazil, many of the activists pushing for the positive exercise of motherhood (such as the movement for humanisation of birth)2 state that the main obstacle faced in this area has to do with the profit-seeking capitalist system (Interviewee 12, 28.11.12). Private health plans, doctors and women themselves are some of the actors who oppose demands for different birth conditions (Interviewee 12, 28.11.12). Also, activists explain that, although subject to great visibility from the media, there is little dialogue with feminist movements which, in the interviewee’s opinion, are too focused on working with violence against women and abortion, and therefore rejecting or silencing motherhood (Interviewee 12, 28.11.12). Feminists on the
other hand argue that some women’s rights movements such as the one for humanisation of birth were co-opted by conservative networks (Interviewee 9, 22.11.12). This, in feminists’ opinion, meant that the movement became part of a political strategy to exclude extremists and to co-opt moderates (Interviewee 9, 22.11.12).

According to an activist and birth attendant, the movement for humanisation of birth is a political construct created by the federal government aimed at gaining wider political support (Interviewee 12, 28.11.12). The activist is the founder of one of the many groups that fight for better birth conditions and choice but denominate themselves as network of users and/or ‘consumers’ who are activists (Interviewee 12, 28.11.12). Their goal is to draw attention to high rates of caesarean sections and provide information to those women who are looking at alternative options (Interviewee 12, 28.11.12). It is a digital social movement articulated by middle class white women who primarily use private health services (Interviewee 12, 28.11.12). It is clear that the use of ‘consumer’, i.e. neoliberal, language is highly linked to the discourse used my upper classes in Brazil. This demonstrates how diverse women’s rights activism may be across the country, movements and classes. The presence of this duality in discourse, particularly through the expression of business-oriented values, is quite clear in activist’s discourses for maternal health in Brazil. Neoliberal discourses often focus on the rights of the collectivities while also using language such as users, consumers and choosers (Massey 2013). Traces of these discourses can be observed in the voice of activists in Brazil. For example, the discourse used by the aforementioned activist – leader of one particular sector of the movement for the humanisation of birth which is dominated middle-class women – particularly focuses on groups’ rights as ‘consumers’ of health services. See below:

Interviewer: So, how do you define yourselves?

Interviewee: We are a network of activists who are consumers of health services. We are a wide movement mainly composed by middle class women who have undergone traumatic birth experiences. (Interviewee 12, 28.11.12)

This group articulates their agenda among themselves and with others through the use of international language and tools:

Interviewee: We are a ‘grassroots’ digital articulation that attempts to demonstrate the cracks in the biomedical model of maternal care by providing women with information. (Interviewee 12, 28.11.12)

When inquired on the reason for using this type language, the same informant demonstrates hesitation and confusion. See the excerpt from the interview:

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Interviewer: Why use the word consumers which seems to relate more to a service provision relationship and not users which is related to health as a human right?

Interviewee: Oh, I did not know that. Then please change it to users not consumers. (Interviewee 12, 28.11.12)

Later on, while reading the written mission, objectives, values and principles of this particular group, I could verify that this was not a mere confusion related to the interview setting. The group’s written objective claims to aim, for instance, at providing ‘high quality products and services’ for the promotion of a healthy attitude towards birth and pregnancy. This demonstrates the pervasive use (intentionally and/or unintentionally) of neoliberal language throughout the spectrum of maternal health activism. At one side there is the objectification of individuals by neoliberal policy networks for market purposes but at the same time there seems to be a certain confusion surrounding the uninformed use of widespread mainstream neoliberal language. It completely shifts the relationship from one based on rights and entitlements to one based on the provision of consumerist services. And, in turn, it affects the language used in differing discourses offering diverse effects to political strategies using and/or relying on them. In a sense, this produces a mentality that is quite characteristic of the market: individuals are objectified and their health decisions become numbers. On the other hand, this produces a perception in the public sector that the private sector is capable of absorb the remaining health demand and do so in a better way. However, data is seldomly produced differentiating health outcomes on the private sector and public sector. This is often confirmed by global initiatives. This lack of appropriate information and misguided action result in all sorts of negative maternal health outcomes.

Feminist Motherhood

For feminist theorists, maternal subjectivity, in all its ambivalence, needs to be articulated as an act of resistance (Baraitser 2009). Feminist motherhood reclaims maternal subjectivities by moving away from negative and violent discourses around motherhood (Liss 2013). It aims to rescue mothers from their silences and assert a space for the exercise of positive forms of motherhood (Baraitser 2009). It recovers the singular value of women amidst motherhood (Irigaray 1993). In recovering feminist motherhood, some scholars have even acknowledged that maternal subjectivity ‘only happens to some of us, some of the time, and arises out of an encounter with alterity’ (Baraitser 2009, p. 9). In fact, there is no unified maternal subject; in fact one that is always fluid, divided and in process (Kristeva 1977). But, as argued above, claims for

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the positive exercise of motherhood not always produce positive outcomes. Feminist motherhood is in this sense problematic as it can amount ‘to defining oneself in relation to the other sex rather than oneself’ (Irigaray 1993, p. 126). This is because feminist representations of femininity are placed in poles: one rejecting or negating motherhood, and the other accepting (consciously or unconsciously) traditional representations of a fantasised motherhood (normally attributed to hegemonic feminist motherhood) (Kristeva 1977). The key lies in repeating and acknowledging that while feminist motherhood is absolutely necessary, so are other forms of feminist exercise that reject motherhood. This is crucial to avoiding women being (re)confined to motherhood.

**Feminist Motherhood and the Brazilian Context**

In Brazil, segmented political claims arising out of the broader women’s rights movement are embodied roughly in the separation of: (i) freedom of choice and legal abortion advocacy, (ii) activism for the humanisation of birth, and (iii) demands for the visibility of issue of widespread violence–domestic, sexual and/or institutional. Feminists are usually positioned politically in terms of the first (although might also work with the second and third) and do so by demanding the full recognition of sexual and reproductive rights and the availability of services that guarantee their enjoyment. In working as activists for the humanisation of birth, feminists attempt to deconstruct and (re)construct motherhood in a positive way. The feminist sector of the movement fights against the ‘perinatal paradox’, i.e. the high medicalisation of birth being associated with higher maternal mortality (Interviewee 18, 01.11.12). Another activist also explains that the National Network for Humanisation of Delivery and Birth (REHUNA) is not exclusively feminist: it includes several social groups progressive and conservative such as religious organisations (Interviewee 44, 07.11.12). Claims are heterogeneous but mostly demand for the return to the model where midwives and traditional birth attendants are the majority of health professionals dealing with births (Interviewee 44, 07.11.12). Obviously, this strategy faces serious resistance from private sector companies and in particular from doctors (Interviewee 44, 07.11.12). In the midst of these discussions feminists are perceived to be polarising the discussions in terms of the extremes (Interviewee 20, 05.11.12; Interviewee, 28, 26.10.12). The perception that feminists have created for themselves of extremists does not help them to create political alliances and alternatives in the face of a more conservative environment.

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An obstetrician who provides legal abortion services elucidates that this type of activism was also oriented by personal experience and opportunity (Interviewee 16, 19.11.12). His activism nonetheless resulted in a very strategic and structured medical practice based on evidences and on a discourse that relies on the law to avoid possible moral or religious resistance (Interviewee 16, 19.11.12). This not only helped him to create strong links with the movement for humanisation of birth but also some connections with feminists (Interviewee 16, 19.11.12). This bridge-building is unfortunately not the rule. As will be explored in the following section, hegemonic feminists rarely articulate their agenda with the movement for humanisation of birth (Interviewee 12, 28.11.12) Consequently, radical feminist motherhood is marginalised from the hegemonic movement for humanisation of birth and from the hegemonic feminist movement which rejects motherhood all together. These shortcomings affect not only strategies pushing for radical feminist motherhood but also those focused on rejecting patriarchy based on non-motherhood.

It can be seen that convoluted language and confusing representations of motherhood reflect difficulties of women have in self-identifying as feminists and therefore accept pre-packaged neoliberal ‘feminist’ discourses (Nash 2012). This accommodation of motherhood with essentialised feminine aspirations is often labelled in Western societies as a ‘post-feminist’ choice (Nash 2012). It nevertheless ignores the fact that little or no real choice is made available and that essentialising is the extreme opposite of feminism political philosophy (O’Brien Hallstein 2010). Alongside this postmodernist account of motherhood, there is the increasing objectification of maternal subjects which particularly places women in inferior and subservient places in relation to the foetuses and, in fact, society (Nash 2012). This drive to dominate real feminist discourse end up hyper-feminising motherhood and reinforcing the patriarchal standard of male dominance (Nash 2012). It is therefore absolutely necessary to deconstruct violent hierarchies to make evident the failure of such standards (Butler 1990). Such deconstruction must be pervasive to all areas of institutionalised knowledge on motherhood: patriarchal, neoliberal and feminist. This will serve to challenge mainstream assumptions by feminists and of feminists based on heterosexual, patriarchal and/or neoliberal discourses (and all the racist and classicists incumbents that are associated with them) (Butler 1990).
(M)Othering

Scheper-Hughes (1992) explores maternal thinking under scarcity. She contends that the ‘political economy of emotions’ in contexts of severe economic and cultural deprivation profoundly affects maternal practices and bonds (Scheper-Hughes 1992). Her analysis demonstrates that the links between (m)other love and child death in Northeast Brazil are characterised by detachment (Scheper-Hughes 1992). There, the death of a child seems a relief or a God-given gift which reflects on a certain level of resignation or indifference to death or even value of personal life or the survival of the rest of the family over the deceased child (Scheper-Hughes 1992). This might also be understood as an expression of resilience or even women’s tactics of survival in the face of such a rough social environment (Scheper-Hughes 1992). This analysis provides grounds for challenging maternal thinking and practice, there and elsewhere. Its basic premise is that there is no singular or ‘natural’ conception of motherhood (Scheper-Hughes 1992). It particularly challenges hegemonic ‘modern Western bourgeois’ assumption and values around the universality of maternal ‘nature’ (Scheper-Hughes 1992). I would argue that these findings not only recover silenced and marginal views of motherhood but also implicitly provide a framework for understanding non-motherhood. Moreover, I would say that not only material conditions determine maternal thinking and practice but also social conditions shape positive or negative relationships with motherhood, even when economic resources are not scarce. Indeed, in some cases in urban wealthy Southeast Brazil (one of the main hubs for women’s rights activism) for maternal thinking is not too different from Scheper-Hughes’ (1992) accounts of the rural poor Northeast.

Different Feminisms and their Influence over Policy Making

Feminist activism in Southeast Brazil is intensively focused on influencing public policy (Mesquita 2011). The policy process includes or excludes various groups which in turn shape policy itself as well as the expectations of those looking for future engagement with the State (Haas 2010). The feminist community, as a part of the wider women’s movement, is devoted to transformation of the unequal gender relations and power though radical and/or moderate strategies (Costa 2009). It seeks through a plurality of ‘feminisms’ and feminist movements to eliminate power inequalities and, in so doing, seek full and equitable incorporation of all individuals citizens and in this sense become a critical force for policy change (Haas 2010). In Brazil, as in all of Latin America, the women’s movements gained particular visibility in the
1970s and the 1980s during the moment of democratic transition (Blacklock and Crosby 2004). This political clout led by feminists has not been successfully translated into sustained political influence and gender sensitive policymaking (Htun and Power 2006). Since the consolidation of democracy, there was a reduction in visibility of feminism as a source of political pressure for policy reform either due to the fragmentation of the movement, the resistance of political parties to incorporate a feminist policy agenda or to co-opting of its key members by the new institutional political structure (Haas 2010). In some cases, feminists strategies have become too narrowly focused and cut off from the base serving as a ‘vehicle of choice’ for non-radical government gender policies and undermining feminist participation in wider issues such as positive motherhood (Fraser 2013).

In Haraway’s (1998) opinion divisions among women, in particular among feminists, generated a crisis of political identity whereat the construct of ‘women’s experience’ became elusive serving most of the time as a justification for the creation and/or maintenance of a system where women dominate one another. Haraway (1998) also uses an analogy to support her arguments, the cyborg. The cyborg is a concept that binds imagination and material reality arranging a strategy where possibilities of historical transformation form new identities that are contradictory, partial and strategic. Haraway’s (1998) cyborg is a son of militarism and patriarchal capitalism. This type of false strategic discourse is embodied in early feminist strategies.

As often explained by academics, in spite of a largely feminist participation in the development of strategies and programs promoting women’s right to health (such as PAISM), most feminist movements\(^3\) decided to emphasise other components of sexual and reproductive rights like sexual violence and legal abortion instead of prioritising maternal mortality (Interviewee 29, 22.11, 12). This is also recognised by many sectors of the women’s movement; for example, a specialist of maternal-child health and member of the movement for humanisation of birth (Interviewee 10, 28.09.12), argues that this meant the ‘ghettoisation’ of maternal health as if reproductive rights were only applicable to cases of non-reproduction. Academics argue that for feminists it was extremely important to oppose everything that represented the maternal-child paradigm and at the time safe motherhood was almost placed outside of the realm of the sexual and reproductive rights discourse (Interviewee 29, 22.11.12). A law professor and a judge disputes that maternal health (in particular mortality) became a ‘non-issue’, completely invisible and depoliticised (Interviewee 21, 09.11.12). It is possible to note that, in the opinions of academics and those often in charge of implementing human rights law like

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judges, this feminist strategy of disengagement was a failure to balance political activism (Interviewee 21, 09.11.12; Interviewee 29, 22.11.12). A coordinator of a maternal mortality committee, agrees that feminists focused too much on abortion leaving the problem of unresolved maternal mortality aside (Interviewee 42, 29.11.12).

On the other hand, a prominent political scientist claims that women’s health political project lost momentum once it was institutionalised (Interviewee 13, 14.11.12). Arguably, in the case of the movement for women’s right to health, these processes were not synergetic because the creation of PAISM culminated at a point when movements and subjects were still being constructed (Interviewee 13, 14.11.12). In other words, movements were still trying to understand the political scenario and the political opportunities available to them. Strategic and philosophical constructions such as radical feminism and its relationship to feminist motherhood and non-motherhood were still unclear.

All the same, a public health specialist and activist of the black women’s movement, says that because the field of women’s right to health incorporates so many emerging issues it is inevitable for there to be divisions within the movement itself (Interviewee 22, 17.09.12). Nonetheless, a professor emphasises that the political and strategic divisions within the feminist movement weakened the political project and limits its scope of action (Interviewee 37, 27.09.12). For instance, the separation between claims of violence and humanisation fails to explore their commonalities (Interviewee 37, 27.09.12). For example, the definition of maternal mortality remains limited to an epidemiological frame of action when in fact it holds a much more political standpoint (Interviewee 37, 27.09.12). Are pregnancy related deaths always synonymous to maternal deaths? Is the maternal omnipresent? In the midst of all these questions, issues like the rise of violent acts during pregnancy by women’s intimate partners are given double invisibility (Interviewee 37, 27.09.12). In sum, feminists’ full rejection of motherhood failed to help them effectively claim spaces in the construction motherhood as they did not advocate for a definition to guarantee the acknowledgement of negative forms of motherhood and negative relations with motherhood. And, the rejection of non-motherhood by the activists pushing for the humanisation of birth allowed for the marginalisation of invisible experiences such as non-motherhood. In the following section, I will explain the importance of understanding these processes of marginalisation by relying on Foucault’s (1980; 1991) theory on the operation and unequal exercise of power and subjugation through discourse.
The ‘Other’
Non-motherhood, as the ‘other’, understands the self as relational and unstable and therefore completely dissociated from neoliberal individualist accounts on motherhood (Kristeva 1977). It emphasises the material and cultural symbolism associated with women’s bodies, in particular maternal bodies (Kristeva 1977). It recognises that nobody is devoid of cultural meaning and that the exercise of bodily functions is mediated by discourse (Butler 1980). In neoliberal contexts, each discourse is individualised and fragmented to prevent social mobilisation and to depoliticise social justice demands (Neuman 2012). That is, depoliticisation creates issues based on priorities of political elites as non-issues (anything outside the technical realm) which then become invisible issues or muted discourse (Berry 2010). This occurs because mainstream discourses of ‘truth’ delegitimate and marginalise minorities (Foucault 1980). Foucault (1991) asserts that ignoring or concealing this unstable characteristic of knowledge is not only misleading but also dissimulating as it attempts to convey the existence of one universal history (or truth). As a consequence, discourse may achieve the status of a monument only to be described in its intrinsic configuration but never to be challenged (Foucault 1991). Truth (or what is deemed to be ‘truth’ at any point in time), he argues, is not a singularity but a system that is the result of multiple forms of constraints and power struggles that exist differently in each society and time (Foucault 1980). Indeed, discourses are not only constituted by constructs and concepts but also by the processes of their creation (Bakker 1994). Neoliberal discourses have embedded motherhood with re-privatisation interests that mostly benefit the reconstruction of patriarchy (Bakker 1994). These discourses are framed in terms of a reinforcement of the male standard of political and economic citizenship (Bakker 1994). Here, it is useful to apply Foucault’s (1980; 1991) theory on discourse and hierarchical power. The analysis of maternal health activism in Brazil demonstrates that feminists full rejection of motherhood failed to effectively claim spaces for the construction motherhood acknowledging negative forms of motherhood and negating motherhood. At the same time, the rejection of non-motherhood by the activists (feminists and non-feminists) pushing for the humanisation of birth allowed for the marginalisation of non-motherhood. In this context, as elsewhere, mothers continue to be seen as serving other subjects and not as a subject in their own right (Baraitser 2009). Non-maternal bodies become therefore the object of disgust and rejection (Kristeva 1980). This violent rejection of women that do not self-identify and/or are not identified as equals to the mainstream neoliberal ideal mothers is used to marginalise all undesirable discourses (Kristeva 1977). The symbolism in this rejection...
must not be ignored. All that is not contributing to the postmodern neoliberal motto of producing and generating capital must be unquestionably rejected and obliterated (Petchesky 1990). This demonstrates that choice, in a feminist sense, is nothing but a discursive construction (O’Brian Hallstein 2010). That is, ‘choice’ is only available to those that are willingly to conform or that have ‘chosen’ a lifestyle that can be associated with conformity (O’Brien Hallstein 2010). In terms of motherhood, conformity means abiding by rigid patriarchal constructs of femininity and/or not challenging neoliberal feminine constructs (Baraitser 2009).

The importance of the ‘other’ in maternal studies and activism is precisely justified by this fierce rejection of dissent in behaviour. If the exercise of motherhood is based on ‘exclusion’ that leads to ‘transgression, denial and repudiation’ of non-motherhood, then this ‘abjection’ must be met with an equal response, non-motherhood (Kristeva 1980, p. 6). Non-motherhood is not only heretical but also assertive in the sense that it rejects to use patriarchy as a point of comparison (Irigaray 1993). I would like to argue that the act of rejecting motherhood also amounts to the rejection of the (re)colonisation of women’s bodies so pervasive in neoliberal discourses and practices (Berry 2010). However, this rejection, already fiercely articulated by the feminist movement, must exist with its coupling with feminist motherhood. That is, it is important that all feminist notions of motherhood, feminist motherhood or non-motherhood, are paired for them to complete and, therefore, inform one another. In my opinion, by placing these issues outside the patriarchal realm, this would strengthen not only the exercise of radical feminist motherhood but also the whole feminist project aimed at deconstructing patriarchal strategies that aim at controlling women.

Conclusion

In conclusion, sadly, there is no such thing as a post-feminist society in Brazil. The Brazilian case study demonstrates that, in fact, public policies, and the discourses built around them, are still oriented towards a neoliberal re-packaging of patriarchy that partially co-opts feminist motherhood. This demonstrates the persistence of discriminatory and/or gender blind attitudes towards women and motherhood. Moreover, neoliberal individualistic and profit-seeking values increase discriminatory practices by fragmenting social demands for equality and contributing to the corrosion of social solidarity. In such context, feminist claims are demonised and dismissed as aggressive, individualistic and unnecessary. This not only fails to acknowledge the philosophical underpinnings of feminism as a social justice project aimed at the equality of

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outcomes for all men and women. But also, it discredits feminism as a political project and challenges the intrinsic value of policies that benefit only women, without instrumentalising women for childrearing or other family oriented goals.

In such context, feminist motherhood is then appropriated and transformed by the neoliberal project as a welcomed change to feminist discourse. That is, neoliberalism partially accepts feminist motherhood as a way to reject all other feminist claims. This political strategy is pervasive to all areas of policy making. All concepts are transformed and re-inserted into the mainstream to make them ‘adequate’ to neoliberal mentality. At the same time, hegemonic feminists continue to advance an agenda that completely rejects all forms of motherhood and, in this sense, fail to acknowledge the co-existing realities that exist alongside patriarchal and neoliberal motherhood. Non-motherhood then exists as ‘the other’, muted and disregarded as a non-discursive realm. This muted discourse not only fails to acknowledge non-motherhood as part of marginalised realities but also puts the wider feminist agenda in a politically vulnerable position. Therefore, I argue that it is crucial for feminists and non-feminists alike to acknowledge and accept all concepts of motherhood, positive and negative. That is, it is absolutely necessary to recognise the ‘other’ so as not to contribute to further marginalisation of non-motherhood attitudes as promoted by neoliberal policies and discourses. This should be done in a way to afford visibility to diversified points of views and also to avoid the (re)colonisation of discourses around motherhood.

1 Rede Cegonha can be roughly translated as Stork Network. It is a federal programme created in 2011 by the Ministry of Health aimed at the humanisation of assistance through the expansion of antenatal care and obstetric services (Cook, 2008). The feminist critique to Rede Cegonha mainly lies in the fact that it infantilises women (clear in its name and symbols) and deals with pregnancy only from a conservative and maternalistic perspective (Galli, 2012).

2 According to the Network for the Humanisation of Delivery and Birth - REHUNA, the movement for humanisation of birth was created to challenge the medicalisation of health and demand for a more active and independent role of women in childbirth. It extrapolates ideas from a 1950s movement called Delivery without Pain to push for alternatives to the biomedical model of childbirth. The movement is very complex and its demands are equally diverse. The later can range from demands for the reduction of caesarean sections and the implementation of educational programmes to the expansion of home births. For more, see http://www.rehuna.org.br.

3 There are many different ways to express and represent ideals and this is flagrant in the divisions that exist within feminists in Brazil. Grupo Curumim of Pernambuco is cited by many activists as an exception to the mainstream
feminist approach to maternal health. Curumim has been working with maternal health since its creation in 1989 and particularly with humanisation of birth from 2000.

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*Studies in the Maternal*, 5 (2), 2013, [www.mamsie.bbk.ac.uk](http://www.mamsie.bbk.ac.uk)


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