

**Pregnant Pause: Delayed Motherhood and its Connection
to Individual And Collective Complexes**

**A Doctoral Thesis
As part of a study toward a PhD
Cardiff University, School of Social Sciences
2016**

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To remain a child too long is childish, but it is just as childish to move away and then assume that childhood no longer exists because we do not see it. But if we return to the “children’s land” we succumb to the fear of becoming childish, because we do not understand that everything of psychic origin has a double face. One face looks forward, the other back. It is ambivalent and therefore symbolic, like all living reality.

~ C.G.Jung, 1944, para. 74.

ABSTRACT

This research views the problem of delayed motherhood as a complexity of time: firstly, within the life trajectory of the child/adolescent/young woman/mid-life adult, and secondly, in relation to inherited factors that came before her entry into this life, threatening to continue after it. The thesis argues, from an advocacy perspective, for a period of mid-life that we could call a *Pregnant Pause*, which, as the research demonstrates, points to an early rupture in nurturing and relating. The research follows 8 women who have become pregnant in mid life. Using interviews, dream diaries and the Word Association Test, the thesis identifies those factors within personal, cultural and collective complexes influencing onset of late procreative desire. These are discussed in relation to causation and teleological continua. The empirical work yielded data rich in presentations of difficulties with the maternal parent, while the paternal parent remained marginalized. In parallel, the presence of a male sibling was found to have a significant effect on how women unconsciously organized their lives into two parts, "*first Adam, then Eve*", insofar as identities around work and the maternal were concerned. The thesis concludes with a discussion of the interconnection between the individuating woman and the culture in which she is born, arguing that delayed motherhood is both an act of rebellion and redemption. Identification of a *Pregnant Pause* within these life trajectories clarifies three phases of delayed motherhood: before a baby, desperate for a baby, and after the baby. The implications of this research are discussed in parallel as dissociation from trauma, facing into earlier trauma with renewed determination, and transformations inspired by the Trickster archetype. The implications of this research range from, how not to raise a daughter, through

to raising awareness on how the mother-daughter relationship impacts delayed motherhood and thus society, ultimately to address the need to re-imagine a national health service that values the personal and social impact on women who have lived their lives in two parts. This research aims to serve women who have no other means of redeeming their lost years except to find support for a reproductive identity through the NHS.

Dedicated to colleagues, supervisors, patients, and participants, for their cumulative contributions to the observation of the *Pregnant Pause* phenomena as felt experience.

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Chapter 1

Introduction to the Study

“Jung would sometimes speak of the ‘return to the mothers’ which is a metaphorical way of saying that when ego development climaxes at midlife there is no further meaning in continuing to pursue the same old goals...The task now becomes to unify the ego with unrealized potential. This development in the second half of life is the classic Jungian meaning of individuation – becoming what you already are potentially, but now more deeply and more consciously.”

~Murray Stein 1998, p.177

INTRODUCTION

The onset of a *pregnant pause* (Barone-Chapman, 2011) brings to the fore a question that is not so obvious until it is directly posed: What unconscious processes necessitate a narrative shift in midlife that leads a woman to seek procreative identity? Is this “time out to have a baby” only a reparative motif, a belated overcompensation for a previously one-sided, ‘half-alive’ (Seligman, 1985) development of feminine agency? What happened to her generative identity (Raphael-Leff, 2007) prior to midlife to make becoming pregnant something to be avoided until time was running out? No doubt a *pregnant pause*, defined as the onset of strong procreative desire at midlife (Barone-Chapman, 2011), serves some women as a *sous rature* (Derrida, 1978), suggesting a conscious or unconscious attempt to put under erasure a one-sided ego development that arose in the first place out of relational disappointment with the masculine (op cit.) and possibly the maternal. Such a narrative pause, to become pregnant in midlife, while often presenting dichotomous potentials of severe disappointment and great hope, also offers the promise of satisfaction. Healing recapitulations of a female gendered childhood, where events may have thwarted one embodied solution to the

problem of feminine identity, emerge as a right to become pregnant only when earlier psychological shackles have worn thin.

The archetype of the child is a symbol of the self with the features of beginning, futurity and ending (Jung, 1940), with an aim to compensate and repair acquired wounds previously preventing one embodied solution to the problem of feminine identity, the assertion of the right to choose pregnancy or childlessness outside of biological imperatives heretofore time bound.

Jung's (1940, para. 278) assertion the child "paves the way for a future change of personality" imbues the child with a synthesizing effect within the individuation process of conscious and unconscious elements, making it a symbol which unites opposites and repairs division (e.g. either motherhood or career). No matter how 'modern' we become we never fully escape our collective inheritance of "archetypal foundations" without suffering neurosis (ibid, para. 267). The task involves finding new "*interpretations*" at every stage of human development. It is only through the differentiation of consciousness, within the concept of individuation that we find the past living on in the present. Jung found the archetype of the child to be present most often when maturation processes became difficult to achieve, leading to the question, "What is the biological purpose of the archetype?" (op cit., para. 272). The teleological question comes alive around explorations of the *pregnant pause* when the child is understood as a redemptive, unifying symbol.

What happens in delayed motherhood? What happened before it? I defined myself as someone who had delayed motherhood until undertaking this

research. It could be an accident of fate, as it was in my case, to delay motherhood, only to discover a destiny and parallel process with women who delayed motherhood unconsciously, until mid-life. Such a dynamic as a researcher has allowed me to become curious about something I did not believe at first included me. But there it was, delayed motherhood until the fourth decade or more has become a part of the cultural DNA in the West, and brings with it an awakening to a wound that is often held in a shroud of disassociation (Romanyshyn, 2007). Re-visiting affect of this magnitude involves differentiating conscious and unconscious processes in the personal realm against complexes of the collective and cultural unconscious.

Background To A Pregnant Pause

Over the past fifty years, as biotechnology has stretched the span of female age of reproduction, the desire for motherhood and its status has gone through many changes, including idealization, denigration, avoidance, and ambivalence until recently reaching new peaks of idealization. Newspapers and magazines have heralded the “Death of the single girl” and “Motherhood is the new sex” (Watson, 2009, season 3) to promote the glamour and status of the procreative potential within a committed relationship. This represents a narrative shift on a collective level from the neurotic at home mother of the 1950’s (Spiegel, 2001) through the advent of birth control, to the current situation in which young women of a class can postpone babies in favour of opportunities for career advancement (Walkerdine et al, 2001). My hunch is that the desire for procreation at midlife has an inter-subjective field between the individual woman and the collective *culture* in which she lives. This interactive channel of messages given and received, consciously and unconsciously, only requires

two-ness (Bion, 1962; Benjamin, 2004; Figlio, 2004; Raab, 2003) to simulate a response akin to the mother-infant dyad, transmuting culture into a potent close relation.

Delayed motherhood has become a powerful modern discourse since the discovery of the birth control pill and exponentially the advance of Assisted Reproductive Technology (ART). A woman's late desire for fecundity has been on the rise since the baby boom generation (born between 1946 and 1963) began to have options their predecessors never had. The introduction of the birth control pill was intended to create choice – when and how many children a woman would have. Given the 'choice' women remained longer in the work place and set their sights on achieving goals that had previously been the preserve of their male counterparts at every educational and income level.

Statistical evidence bears out a change toward motherhood with a reduction in fertility rates that has not been seen in the United Kingdom and Europe since the aftermath of World War II when there was a shortage of men (Dixon & Margo, 2006). Changing patterns of family life include increasing numbers of people living alone (18% of households consisted of one person in 1971 compared with 29% in 2004) with the average number in a household also decreasing (2.9 persons in 1971 compared with 2.4 in 2004) (ibid.). Marrying later and less often, people are choosing cohabitation to a greater extent and for longer periods of time (Harper, 2003). Between 1972 and 2004 marriages fell by 36% while the number of men and women cohabitating doubled, 25 and 27% respectively (op cit). These are still only symptoms of what was going on twenty years earlier, as divorce rates rose through 1993. Mortality rates aside,

this explains in part *why the percentage of children living with a single parent tripled over the period of 1972-2004 by 24%* (Dixon & Margo, 2006). In 2002 25% of prospective homebuyers traded off marriage and 30% postponed a child to save for the deposit on their first property (Future Foundation, 2002). Could this begin to explain in part the shift toward delayed motherhood?

Fertility figures are demographically important in relation to their impact on housing, education, government spending, and health care. Future Foundation (2002) forecast that 22% of women born in 1990 or later will remain childless, a 22% increase over the generation born in 1970. What this means is that an ageing population creates increased demands on the social welfare state. More women having a first child later in life means they are less likely to have a larger family. Postponing childbirth increases the gap between generations making for fewer generations born in any given time period. These figures are part of a larger story for the Western world, in what Van de Kaa (1993) identified as a "Second Demographic Transition." Defined as a decline in fertility and mortality, the SDT emerged in the 1950's with rising divorce rates, followed by lower birth rates and a disconnection between marriage and procreation (Lesthaeghe, 2010). Within the SDT, delayed motherhood has become institutionalized around medical care. In 2011, 48,147 women had IVF treatment compared to 32,626 in 2005 (<http://www.hfea.gov.uk/1269.html#1278/> accessed 06/04/16, 23:30). The higher rate of female IVF treatment is related to reproductive aging, combined with an increasing demand by older, less fertile women to bear children (Klein and Sauer, 2001).

Liefbroer (2005) found that the decision to have children was the result of benefit/cost weighting, drawing on Van de Kaa's (1993) identification of processes to do with modernisation, secularisation and individualisation in Western societies thus reducing adherence to previously held concepts of normative choices. In parallel, individual autonomy as both a goal and condition is seen to have more value. A study on "Childlessness in the UK" for the Economic and Social Research Council (ESRC)

(http://www.cpc.ac.uk/publications/cpc_working_papers/pdf/2015_WP69_Childlessness_in_the_UK.pdf / ; accessed 06/04/16, 22:50) found 30% of those intending to have children who were childless at age 30 remained childless at age 42 (ibid, p.6, 11). Highly educated women and men were considered more likely to achieve intended childbearing at older ages, whereas those of lower education who were childless at 30 stood a lower likelihood of becoming a parent (p.12). Partnership formation experiences were cited as one reason that childlessness is highest among those married after 30 and later separated. Most startling was the educational factor in the proportion of graduate women remaining childless (25%) who were born in 1970 compared to women with below secondary qualifications (15%) (op cit, p.14).

The Search for Meaning and Purpose in Delayed Motherhood

Dichotomies between masculine and feminine, when reduced to "soft" and "hard" throw off the collective psychic balance, if one or the other is devalued (Paris, 2007). The 'having it all' narrative has been about women's entitlement to what was previously seen as the male norm; the ability to have both career and family. "Feminist anger against patriarchy has been wrongly interpreted as

anger at the paternal principle...The feminine revolution was not a rejection of the paternal archetype, nor was it an empowerment of the maternal principle. [It was] a revolt against a decadent monarchy: the ruling of one gender by another" (Paris, 2007, p. 144). Dominion over another may be part of an idealization of motherhood (Benjamin, 1988) occurring among anti-feminist and non-feminist women to redeem a sphere of influence through female de-sexualization and lack of agency, unwittingly preserving an older gender attitude toward sexuality leaving women righteously clinging to de-erotized caring (ibid, p. 92).

Since the launch of feminism with Betty Friedan's 1963 publication of *The Feminine Mystique*, the state of relations between men and women has changed significantly. Through delayed motherhood a subtle field of emerging shifts in the spheres of social biology, economics and technology brings with it disenchantment with either the traditional route of home and family or the 'having it all' paradigm, when it comes with the burden of working a 'second shift' at home, highlighting the dual demands on working women who are also mothers.

As a clinician, I have found the desire for motherhood to have both an inner and outer construction. It is as much the fear of not becoming a mother; not having a maternal self as much as not having an identity (Barone-Chapman, 2007). It is both personal and social, individual and collective, what two Post-Jungian Analysts, Singer and Kimbles (2004, p. 4-5, 7) refer to as an *inner sociology*, defining it as "...a description of groups and classes of people as filtered through the psyches of generations of ancestors." Delayed motherhood

occupies a relationship to the past that is different from the past of younger mothers, as delayed motherhood must pass through the veil of cultural, societal and patriarchal perceptions of what is considered to be normal and ordinary, perhaps even “good” and “pure” for female development (Douglas, 1996; Kristeva, 1982).

Immersing myself into the subject as a Jungian Analyst, familiar with the pluralities and dichotomies of on-going female development, has allowed me to use clinical thoughts to ask social questions that emerged into research questions. Analysis and insights from Jungian theory and clinical practice, combined with post-Freudian Feminist theorists has allowed for a rich in-depth experience of women who find themselves in a *pregnant pause*. Clinical methods of discovering the “other” through the use of my own affective field of counter –transference, combined with techniques for accessing associative networks, has paralleled observation of the emergence of a self in transformation. In this way it is my intention to do something with delayed motherhood that hasn’t been done in any of the available literature discoverable on the subject; that is, to bring new psychological understanding of the personal, cultural and collective complexes (Jung, 1934a) fuelling the *pregnant pause*. In other words, emergence is also linked to the biological and the social (Goody, 2010).

Motherhood, Identity & Cultural Complexes

Becoming a mother is a form of initiation into a new consciousness that affects personal identity (Huws, 1982). It also comes with cultural expectations around stages of life (Jung, 1930-1931), and may be best understood as an inborn “social

clock” that can impact the age of initiation into emerging identities, such as motherhood (Neugarten, Moore and Lowe, 1965,1996). Jung called this formation of identity, to announce who one is in respect to community and culture, the persona (Jung, 1928a, paras. 243-253). Later Erik Erikson (1950) referred to this on-going process as the development of a *psychosocial identity* with a purpose of limiting social anxiety by acquiring identifiable status in respect to others. However, the concept of the psychosocial in regard to identity formation went much deeper in Jung’s concept of the persona (op. cit.). “It is, as its name implies, only a mask of the collective psyche, a mask that *feigns individuality*, making others and oneself believe that one is individual, whereas one is simply acting a role through which the collective psyche speaks” (Jung, 1928a, para. 245). The role paraded before the community evokes reactions on the part of the unconscious and these together form the seeds of individual development (ibid.). In the ever-changing human equation between the individual and the universal, Jung’s opus matured into a tension between culture and cosmos.

Unlike an individual complex that weakens once brought to consciousness, a cultural complex is more difficult to get hold of because it is embedded within the ideas, language, beliefs, and mores (Neugarten, Moore & Lowe, 1965,1996) of every structure that supports personal and collective experience. While complexes may be attributed to a spectrum of trauma in analytical literature, there is some suggestion that they are also passed through familial ties, usually mother and father, but also they can become acculturated within close relationships. In the normal development of a child into adulthood there will be exposure to the wider culture of school, peers, village, region, nation and what

is gleaned from interactions through cultural differences experienced firsthand, as well in literature, films, TV and other media. After Jung, Joseph Henderson (1984) is credited with introducing the concept of the cultural unconscious he described as “a level of the psyche between the personal and collective unconscious” (Weisstub and Galili-Weisstub, 2004, p. 152). Henderson (op cit) identified four *cultural attitudes* – the social, religious, aesthetic and philosophic – that together makeup a cultural complex, each attitude being acquired through significant relationships.

Later Henderson (1990, p. 103) described the cultural unconscious “as an area of historical memory that lies between the collective unconscious and the manifest pattern of the culture.” Morgan (2002, p. 579) suggested that the cultural unconscious is a level of psyche underpinning archetypal forms, with predispositions, as the archetype moves through the cultural and personal filter in the unconscious. Archetypal theory is not scientific as it cannot be falsified, any more than attitudes, causal attributions or cognitive schemas can be proven, according to Raya Jones (2003, p. 657) who finds all these manifestations enjoying credibility in psychology, alongside atoms, electrons and other invisible objects, ‘discovered’ by science.

Kimbles (2000) and Singer (2002b) enlarged Henderson’s cultural unconscious to include “cultural complexes”, to differentiate cultural complexes from cultural identity/national character, which can include a healthy cultural ego, but find they can also be entwined:

Intensive collective emotion is the hallmark of an activated cultural complex at the core of which is an archetypal pattern. Cultural complexes

structure emotional experience and operate in the personal and collective psyche in much the same way as individual complexes, although their content might be quite different... Like individual complexes, cultural complexes tend to be repetitive, autonomous, resist consciousness, and collect experience that confirms their historical point of view... Cultural complexes tend to be bi-polar, so that when they are activated, the group ego or the individual ego of a group member becomes identified with one pair of the unconscious cultural complex, while the other part is projected out onto a suitable hook of another group or one of its members. Individuals and groups in the grips of a particular cultural complex automatically take on a shared body language and postures or express their distress in similar somatic complaints.

- Singer and Kimbles, 2004, p.6

Cultural Complexes were first discussed by Joe Henderson in 1947 in a private letter to Jung (Singer and Kaplinksy, 2010; Singer and Kimbles, 2004; Kimbles, 2014) as an exercise to overcome the reduction of interiority and the making of a self to a set of behaviors dominating the conduct of the many, to develop a unique perspective on the nature, conflicts and attitudes between groups (Singer and Kaplinksy, 2010). We are privileged to bypass the Cartesian process of separating the person from their culture, to develop a context for understanding how the personal and social (cultural) have informed each other, "...how the group's expectations, its definition of itself, its destiny, and its sense of uniqueness...operate through the group's fears, its enemies, and its attitude toward other groups" (Kimbles, 2014, p. 5).

This study attempts to make an intervention into psychosocial research by bringing it into dialogue with Jungian and post-Jungian work utilizing the concept of the cultural unconscious. To utilize such a framework is to view the inter-active field between the personal and the social, dismantling psyche and social as separate entities, finding instead a unity of inner and outer reality in a third zone, called psychosocial (Andrews, Day, Slater, Rustin, Squire, &

Treacher, 2000). Frosh and Baraitser (2008) take the interactivity of the personal and the social further with the view that both are in effect, made for each other, allowing the *psychosocial* to transcend the individual and work in the social realm (Frosh, Phoenix, & Pattman, 2003).

In keeping with an intertwined view of how the psychosocial operates, perhaps from the beginning of time, this study aims to advance psychosocial research by including Analytical Psychology's methods, reflective of a personal unconscious that is able to receive and respond to a collective and cultural unconscious, as proffered by Jung and post-Jungian thinkers. Jung's empirical studies, beginning with the Word Association Test (WAT), brought into question Freud's etiology of complexes rooted in infantile sexuality, by suggesting there was an unconscious replete with associative networks (George Hogenson on the IAJS Discussion Forum, 03/11/2011, accessed 21:06).

Aims of the Study

The aim of this study is to further psychosocial research through the use of Jungian methods to understand how an experience of delayed motherhood can be understood through the lens of personal, cultural complexes and collective complexes of the unconscious, as a bridge between the personal and the collective. To do this, I will be exploring the unconscious processes of individual, cultural and collective complexes around the experience of delayed motherhood as means of developing a method for researching the unconscious. Complexes, based on Jung's (1918) findings, are images and ideas, gathering emotional tone through the observation of affect, explored through qualitative and quantitative methods to do with inter-subjectivity, (e.g., transference and

counter-transference), a method borrowed from the consulting room (see Chapter 4). In parallel, it is also a study designed to explore women's relationship, responses and reactions to the biologically pre-emptive role of becoming a mother, at a particular time called *midlife*, and how these affects have become acculturated.

The Frame of the Study

My objective is to critique, raise questions and wonder about the effects of technology on the state of play between the feminine and masculine since the 1950's. In one sense, I am infusing into emerging social constructs a form of animism (Tylor, 1871) by linking the time period of my study to Jung's interpretation of UFO sightings in the post war 1950's:

As we know from ancient Egyptian history, there are manifestations of psychic changes which always appear at the end of one Platonic month and at the beginning of another. Apparently they are changes in the constellation of psychic dominants, of the archetypes, or "gods" as they used to be called, which bring about, or accompany, long-lasting transformations of the collective psyche

- Jung, 1958, para. 589

In effect this phenomenon foreshadowed a new age that would see not only a rise in animism, but an unconscious rise in reliance on technology, the logos of science and in its shadow, the magical thinking that anything can and should be possible through science. Max Weber's (1947) phrase, "disenchantment with the world" depicts modernity's demystification of objects in the world as having life, yet it can also be applied to conditions in favour of scientific ways of making life. What delayed motherhood represents is not already known, but is in the process of becoming a modern symbol, juxtaposing life and death. What follows in this study is consideration of delayed motherhood as if we were

analyzing a dream, amplifying the contents through associations and checking these against phenomena revealed through the interviews.

The research follows seven women over a two to three year period from the first birth, taking place after 40. The eighth woman, followed over the same period, is included as she felt she was late to motherhood at 31 compared to her peers. Most of the women came to motherhood after a life-long search to find love. This life-stage ritual carried additional anxieties concerning how the past would interfere with the present once more, while future realities and potentials hung in the balance. Once motherhood had been achieved, the maternal ambivalence Roszika Parker (2005, p. 61) described as a spur toward individuation, threatened their new identity. The working through of such dichotomous narratives represents a different kind of choice from earlier generations of women who had fewer reproductive options. The story and pattern for each woman displayed how, on the eve of destruction concerning their own fertility, the seeds of a fateful catalytic meeting with a new significant other had been planted. Only then did they begin to ask things of these partners they had not been able to ask of early carers.

Evidence of the phenomenon known as *enantiodromia* (Jung, 1956, para. 708) will be found in the stories of delayed motherhood. The very essence of this pattern suggests “every psychological extreme secretly contains its own opposite or stands in some sort of intimate and essential relation to it” (see also the *complexio oppositorum*, alongside “the interplay of yang and yin”, *ibid*, para 790). In the aftermath of the first birth acute changes in the parental relationship took place. If the woman had been happy in her relationship, the relationship came to suffer

from the invasion of a child who prevented what had been a long stretch of narcissistic autonomy. If she was lesbian or bi-sexual, she appeared to magically fall in love with the idea of belonging to a family and living through the veneer of heterosexual life. If she had always wanted motherhood and longed for the day, thus counting the hours until she could discount a career, she argued for the right to work outside the home. The longing for baby during mid-life had supplanted and concretized investigation of existential dilemmas such as isolation and death. The enantiodromia, as a symptom, encompasses a range of affect from acute neurosis to foreshadowing a rebirth of personality (Sharp, 1991, p. 51).

A “second return to mother” (Powell, 1993) in Jungian terms is a return to an original identification with mother and comes after a long attachment period to father. It does not literally mean the biological father, but can represent the favouring of masculine ways and means. This orientation to the masculine is an Oedipal phase, reinforced by patriarchal primacy in cultures (ibid, p. 159) that can linger over an extended period past adolescence and into midlife. In essence, a second return is the profound change of a girl’s identity into a deeper appreciation of herself as an adult woman. Becoming pregnant in mid-life often requires repeated use ART. Stamina, a resource of the masculine principle (animus), is needed in order for a woman to persevere. This form of reproduction can give a woman an embodied sense of what it means to contain both achieving and nurturing, qualities of masculine and feminine. However, this kind of second return to mother may also represent a *deep sea change* in relations between women and men.

SUMMARY

I have set out my stall as a Jungian Analyst on the frame of the research commencing with a question, “What unconscious processes inspire a midlife narrative shift leading women to seek procreative identity?”

Thesis Outline

In **Chapter 2, A Critical Literature Review of Research on Late Motherhood**, I cluster available literature on the subject into seven categories: 1. *The Archetypal-Developmental /Mother-Daughter Relationship*, as formulated by Carl Jung; 2. *Modern psychoanalytically informed literature* authored female researchers and clinicians; 3. *Socially Inspired Perspectives* on the cumulative effect of maternal identity on culture, society and psyche; 4. *Peer Reviewed Studies* concerned with the issues arising due to a woman’s age at the time of late motherhood; 5. *Late to Motherhood*, reviews three particular studies on behavior aroused by IVF as ‘medicine to procreate’; 6. *Kinship Studies* discusses the web of familial relationships created through biological relatedness; 7. *Recent Media Presentations on Late Motherhood* examines editorialized media commentaries as an archetypal form of splitting the feminine.

Building on my findings in the Critical Literature Review, in **Chapter 3, Gender Legacies of Jung and Freud as Epistemology in Emergent Feminist Research on Late Motherhood**, I seek further investigation on the echoes of a patriarchal bias toward the realm of womanhood and with the feminine as re-inventing itself in a bio-technology age and culture, to understand the roots of resistance and ambivalence. In effect I am extending the literature review along feminist lines of thought, though I commence with Jung and Freud, the work of modern theorist and clinicians is included.

On the back of this research, I address the design and methodological choices for the research in **Chapter 4, Developing a Suitable Methodology to Research the Unconscious**. Here I make a case for a clinically inspired three-part funnel design to research (and reach) the unconscious, through plural methodologies. This is a crucial chapter in differentiating understanding of personal, cultural and collective unconscious processes,

In **Chapter 5, The Development of A Maternal Self – Research Findings**, I introduce the first of three chapters on results, and four of my participant's developing narrative of what it was like for them to create a maternal self. Two of my participants provide longitudinal perspectives from the time of pregnancy with material from a prior research to study to the point in time when their eldest child is seven years of age. On the basis of these case studies, I present the finding from Phase I of the research and include relevant related literature to survey understanding of women's procreative desire at midlife.

In **Chapter 6, Trickster Trauma and Transformation – Research Results**, I introduce further research results by exploring key themes coming out of the three part research methodology to present four cases representing aspects of the entire cohort of eight participants leading to some evidence of transformation. Results across the three-part methodology were analyzed to reveal the unique patterns in the phenomenon of delayed motherhood.

In **Chapter 7, The many faces of Trauma and Transformation – Super-Ordinate Themes**, in the final research results chapter, I link data to super-ordinate themes, archetypal patterns and theories of development with emphasis on Jungian and Feminist inspired post-Freudian ideas that include the body.

In **Chapter 8, Concluding Thoughts**, I summarize the findings of the study by identifying personal, cultural and collective complexes of the unconscious, to frame delayed motherhood as a new creation myth in the making of the post-modern era.

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Chapter 2

A Critical Literature Review of Late Motherhood

“For a generation, aging and female reproduction have been lodged within the gendered and gendering debates regarding women’s involvement in the workforce and demographic shifts toward delayed parenting which culminate in discourses on the ‘biological clock’...emerging in the 1970’s to capture the interconnections and fissures between social and physiological domains regarding women’s bodies and reproduction.”

~Friese, Becker & Nachtigall, 2006, p.1551

INTRODUCTION

In this chapter, I begin to set out a frame for the literature on delayed motherhood, which I defined in Chapter 1 as onset of procreative desire at midlife (Barone-Chapman, 2011). This search has necessitated some differentiation within the large field of literature from the experience of being a mother, of being pregnant, reproducing through IVF and all the attending literature of having one’s own baby. As this is a psychosocial study, I needed to wade through a plethora of literature in order to find the precise oeuvre for the topic, older mothers, and in some places have gone wide of the field. Therefore my review covers literatures in seven distinct but related fields. Some fields are expansive, while others are smaller and more indicative of undercurrents not popularly held through conscious awareness.

OVERVIEW

1. *The Archetypal-Developmental Mother-Daughter Dyad*

We commence investigations through a set of observations and theories developed by Carl Jung (1911-12/1952; 1916a/1917a; 1943) with particular attention to his Vol., *Archetypes of the Collective Unconscious*, with his chapter, 'Psychological Aspects of the Mother Archetype' (1943, paras. 148-258), to do with how two female subjects with (or without) biological kinship form a relationship as mother and daughter. Jung's (op. cit.) observations of how mother becomes part of the daughter's internal world through two poles – negative or positive - presents longitudinal ground for a daughter to be like her, or anything but like mother. This work formed an aspect of Jung's psychology concerned with the inherited, collective notion of the Archetype as instrumental in the developmental process that moves from generation to generation. From this cornerstone I consider several of Jung's positions for emerging womanhood in modern culture to find the precepts of delayed motherhood through the following lenses:

2. *Modern Psychoanalytically Informed Literature.* I wanted to find female researchers and clinicians who were not Jungians, but who have considered the trajectory into motherhood and the maternal regarding the impact of the mother-daughter relationship on a woman's relationship to procreative identity. **3. *Socially Inspired Perspectives.*** Here, I looked for established views on the tension between a woman's developing individual identity and her position in her culture and society. I consider recent and historical evidence on the cumulative effect of the maternal as a notion in her psyche. **4. *Peer Reviewed Studies.*** This is where the issue of a woman's age, as discussed in professional journals, has produced a mixed bag of conclusions. In reviewing those, I became interested in their take-up and the possibilities they could

provide for new kinds of social understanding and explanation for delayed motherhood for women going through a pregnant pause. **5. *Late to Motherhood.*** Three studies are reviewed for their specificity on the social science aspect of ‘medicine to procreate’ through some form of fertility intervention. Here I explore how advances in bio-technology have affected construction and discrepancies of identity, and psychological compensations for the aging social status of mothers attempting to mask shame in the delay. **6. *Kinship Studies.*** Bio-technology has created a web of familial relationships and biological relatedness, through which the field of anthropological research and Assisted Reproductive Technology (ART) open consideration of emerging relational change in culture (Inhorn and Birenbaum-Carmeli, 2008). **7. *Recent Media Presentations on Late Motherhood.*** My critical review makes its finale through editorialized media commentaries on the subject at hand. By examining these messages I discovered how media judgements of a woman’s procreative trajectory on a social and cultural level is analysable as splitting the feminine into idealizing (younger baby making) and demonizing (late motherhood).

LITERATURE

1. *The Archetypal - Developmental Mother-Daughter Dyad*

Carl Gustav Jung (1954a, paras. 148-198) was fascinated by the longitudinal effect of mothers upon daughters through his study of the myth of Demeter and her daughter Persephone who had been abducted into the underworld of by Hades. In fact his fascination with women’s development through the archetype of the mother inspired him to develop a hypothesis, often proven, of how the quality of relationship with mother impacted their psychological and

sexual development as they approached adulthood. Most of these were in regard to how women could over identify with mother in negative or positive ways in relation to men, sexuality, domesticity, identity or children.

His thinking on the mother-daughter relationship is included here because a woman's relationship with her mother as primary carer is not only her first love relationship, it is the first archetype she encounters. In previous research (Barone-Chapman, 2007) I saw how the feeling between mother and daughter creates lifelong patterning for emotional and psychological development. Jung's (1934a) work on those complexes, "which have split off owing to traumatic influences or certain incompatible tendencies [which] interfere with the intention of the will and disturb the conscious performance" (1937a, para. 253). But also, in particular to this chapter the negative mother complex as set out below, because it uncannily demonstrates links between the effect of maternity on women regarding time and identity purposes through the affective field of primordial relationships.

Delayed motherhood is a powerful modern discourse since the discovery of the birth control pill and the exponential advance of assisted reproductive technology (ART). In its wake a *neotany* (Bly, 1996) has formed wherein time has expanded and extended the period of 'adolescence', or a period of emergent personal development leading to greater responsibility to be able to form empathic relationships with others.

Jung (1941) linked an expansion of time to the psychological aspects of the mother daughter relationship in his discussion of "The Psychological Aspects of

the Kore" (op. cit., paras. 306-383). [note: a mother-daughter myth concerning Demeter and Kore or Persephone in a younger incarnation] which gives rise to a "peculiar uncertainty as regards *time*...a conviction of being outside time, which brings with it a feeling of immortality" (ibid, para. 316). This description is similar to a definition of a high feeling toned complex in which seconds can feel like hours as he discovered in his Word Association studies (Jung, 1934a). When a complex becomes activated, accessing a 'file of information' associated to that complex becomes burdened with heavy emotions that make accessing the information neither quick nor easy. "Complexes interfere with the intentions of the will and disturb conscious performance; they produce disturbances of memory and blockages in the flow of associations...they can temporarily obsess consciousness...complexes behave like independent beings" (Jung, 1937a, para. 253). Complexes have aetiology in respect to trauma, shock, and moral conflict, ultimately coming from "the apparent impossibility of affirming the whole of one's nature" (1934a, para. 204). Jung knew traumatic effects produced by the mother fell into two distinct camps – "(1) "traits of character or attitudes actually present in the mother, and (2) those referring to traits which the mother only seem to possess, the reality being composed of more or less fantastic (e.g., archetypal) projections on the part of the child" (Jung, 1972, p. 17).

The archetype of mother (and father) are relevant to the study of complexes in that all archetypes of the collective unconscious are believed to be at the centre of any complex as they work through the personal mother and father. The mother archetype includes a living personal mother as well as any relational connection with grandmothers, mother-in-law but may also include a nurse,

nanny or governess, and draws associations across a range of fertile and fruitful imagery in nature, including caves, springs, deep wells and other hollow objects (ibid, p. 15).

2. Modern Psychoanalytically Informed Literature

There is a dearth of qualitative literature on late motherhood (Cooke, Mills and Lavender, 2010; Shelton and Johnson, 2006). What has been published concerns itself primarily with health, declines in population, counselling and media coverage of infertility treatment (see Recent Media Presentations later in this chapter). Little if any psychoanalytically informed research with multiple participants exists to consider unconscious processes in late arrival to motherhood as a consequence of the life preceding the mid-life stage, including social, cultural and collective influences.

Literature on motherhood and maternal experience, while having some crossover currents with feminism (Almond, 2010) does not do justice to the job of seeing into the desire for procreativity in the fourth decade of life. Literature on motherhood in the last thirty-five years may be considered to cluster into three themes. The first calls into question the experience of motherhood as an institution that must be perpetually reproduced as a biological imperative (Chodorow, 1978; Rich, 1977). In the second we find a developmental view of maternal despair and development through psychoanalytical thought (Raphael-Leff, 2003, 2010; Welldon, 1988; Parker, 1995; Asher, 2012) which also touch upon post-modern thinking and feminism (Flax, 1990; O'Reilly, 2006; Kinser, 2010). In the third we find an extension of psychoanalytical thinking on maternal ambivalence (Parker, op. cit.) re-thinking motherhood as an opportunity for redefinition and agency (Abbey and O'Reilly, 1998; O'Reilly,

Porter, and Short, 2005; O'Reilly, 2010) while underscoring the difficulty in acquiring and maintaining maternal subjectivity amid the psychosocial influences of a biological imperative for women who struggle with the desire for fecundity throughout the adult life cycle. The search for material to form a literature review has needed hard definition of discursive parameters relevant to the *pregnant pause* of late motherhood.

In this section, I will commence with those authors who orient themselves to women's problems with procreative activity from a clinically informed perspective, even if they have done empirical or qualitative research, with one caveat. This perspective is strongly biased toward a woman's early development, in particular her relationship to her mother as a basis for a relationship with her self, her body, sexuality and other.

I have organised the review according to the orientation of the author, or a theme surrounding several authors.

JOAN RAPHAEL-LEFF

As a psychoanalyst and academic, Joan Raphael-Leff is oriented toward both a feminist and psychoanalytical orientation to the psychological processes of motherhood. In part 1 of her book *Psychological Processes of Childbearing* (2001), "Pregnancy Expectation", there are important kernels relevant to exploring the *pregnant pause* for it is here the author brings together "primitive human experiences" with the "the most novel and profound psychosocial and ethical controversies of all time" (ibid, v). Raphael-Leff claims that what makes a baby, what influences baby-making, is not ovum meeting sperm, but factors that began "decades earlier from the moment that new born baby is introduced to

the world of parent(s), caring professionals (be they obstetricians, midwives, paediatricians, nurses, GPs, health visitors or others) relatives and friends” (Raphael-Leff, 2001, p.v). Raphael-Leff draws from “recent developments in western society” (ibid, p. 3) to reveal reproduction is not an ‘in-built’ desire as Neumann (1955) might have us believe, as it has “both conscious and unconscious roots embedded in the particular origins of each individual” (op. cit.) including the family and culture we were born into. Thus Raphael-Leff, from the outset, debunks the myth of a ‘maternal instinct’ along with ‘anatomy is destiny’, finding pregnancy and birth both biological and social events with concomitant, ever-present part, life factors.

In Chapter One, “The wish for a baby” (Raphael-Leff, 2001, p. 4) seven ‘motivational’ forces for reproduction are offered without reducing the complexities of personal decision-making. The list commences with *genetic immortality* and the wish to prolong existence by ensuring genetic material goes into the future after death; *becoming adult* follows with the tenet “we never finally achieve true adulthood until we parent our own children” (ibid); *emulating the parents* becomes a rite of passage by assuming a sexual identity on a par with parents; *reciprocating parental care* is a précis for two trans-generational threads – repaying the care and love received and assuming the position of generous parent; *second chance* suggests the compensating aspect of giving a child all that was missing in the parent’s life, reliving their own childhood across a range of processes including resolution, reparation and potential reintegration if one can relive from the position of parent; *love object* in the transference to the indulged infants as an idealized or denigrated baby-self who will return love and warmth despite human lapses sometimes seen as

unconditional love unrequited elsewhere in life; *cultural transmission* refers to the convergence of goals shared by the individual and society to bequeath a legacy of knowledge and experience to the next generation. What Raphael-Leff's (2003; 2007; 2010a; 2010b) work focuses on in the main is the internalization of psychosocial issues around childbearing, 'generative identity' and gender issues. Though Raphael-Leff does not engage with the psychosocial features of latent maternal desire itself, instead she illustrates (Raphael-Leff, 2003, p. 67) two key ideas centred upon the notion of our primordial "internal wildness" which appears relevant to the problem and solution late maternal desire for motherhood represents. If infant carers erred on the side of healthy nurturance they help to transform the *wildness* into creative discoveries that may extend into adulthood to reflect on self-object representations. The second piece of this is "the very process of parenting a baby oneself" (ibid) enables new relationship and insight to the past and the internalized figures affecting us in the present.

BARONE-CHAPMAN, ALMOND, PINES, and SELIGMAN

I have put my own work in a category of analytically informed clinicians who look at phenomena, personal, cultural and collective, to understand what shapes women's longing and fears about mating, let alone reproducing.

Prior research (Barone-Chapman, 2007) on the desire to achieve procreative identity through repeated use of assisted reproductive technology (ART) demonstrated the importance of the relationship to mother and the quality of the mothering received in her early life, influenced a woman's availability to become a mother at a time in her life when she is most fertile. Secondly, the

desire for a baby at midlife created a crisis of infertility, a mask for a crisis of identity with links to the personal mother. At the core of these issues with mother there was an absence of father and a warring intra-psychic couple mirroring the relationship between mother and father, necessitating a repetition compulsion through addictive attachment to repeated IVF. The strong suggestion of parental complexes in and around conception pertains to the role primordial relationships play amidst other cultural influences in the non-uterine choices and psychosexual history of fertile women. Repeated use of ART to conceive a child later in life is in effect a *second return to mother*. The symbolic second return to mother, is a 'deep sea change' (de Shong Meador, 1990; Powell, 1993) requiring ownership of the aggressive component (animus) in order to make the shift toward "valuing and nurturing her self" (Powell, 1993, p. 59). The barrier for women in finding their feminine ground are rooted not only in how mother related to, or cared for her female child, but what valuing messages father also gave her (Barone-Chapman, 2007, p. 494) about her body difference and potential place in the world. Winnicott (1965) identified the role of the father in supporting mother to care for her child and Fordham (1969) found the reason we are still reviewing female development through the life stages; helping the child to find ego strength.

In short, a woman's first experience of her body through her mothering, introduction to menstruation and first sexual experience revealed parallel processes to her feelings about mating and intimacy that would profoundly affect her adult life choices, up to and including the preference of acquiring personal authority through career over relational activity as a priority.

- Barone-Chapman, 2011, p.186

Also present in my earlier research on repeated use of ART (ibid) was a fear held by women of “having a child like me”, a child any mother would find difficult, reflecting how their own mother felt about them. In addition there are also fears aroused by the fascination in literature and culture of monsters, underpinning Barbara Almond’s (2010) *The monster within: The hidden side of motherhood*. Her study, based on women in her psychotherapeutic practice, found a similar fear within her female patients who Almond thought might be deferring pregnancy as they could only create “monstrous offspring.” Almond considers the root of her observation to be based on women’s difficulties in facing the negative aspect of maternal ambivalence. In both works cited here, there is the undercurrent of a dialogue between the personal, cultural and collective surrounding the notion that ‘bad’ is inter-generationally transmitted, arousing ‘monstrous’ fear and rage of having something bad pushed inside. Whether aroused by the reflection in mother’s eyes, literature or culture, the notion of carrying a bad child ‘inside’ (a reference to the film *Rosemary’s Baby*) draws to it an internalized image of bad if good has had difficulty taking hold of a woman’s internalized view of herself. The fear of what procreation might create, approaches the naming of a complex underpinned by the archetype of the witch mother who alternates embodiment with the good mother.

Dinora Pines (1990) in her clinical experience of women who are fertility challenged notes the repeated pattern of mother’s role as controlling and withholding, as if the adult daughters were not yet permitted to bear their own babies by their mothers. Pines (ibid) links the repeated desperate attempts at fertilization, despite earlier failures, to envy of their own mother which pushes them to continue to attain their ego ideal of a maternal self.

In my view the crisis of infertility highlights fixation to an earlier phase of development. A young woman's experience of her own mother and of her capacity to mother, and the way that mother has dealt with her own femininity, is of prime importance in establishing her own female identity.

-Pines, 1990, p. 562

Eva Seligman (1985, p. 71) forecasted that the rise of divorce in Britain would amount to over one million children losing their fathers in the six years that followed "as if he had died, and perhaps, psychologically, in a more dangerous way". Such a number drew her to raise the question of the symbolically missing father, defined as unavailable by both mother and child. She asked the same kind of questions I find myself asking now, "Why is he [father] allowing himself to be, effectively, obliterated? Is he being excluded or is he excluding himself?" (ibid, p. 79). Evidence from her case material suggested unconscious collusion between mother and child to satisfy each other's needs to forestall a phase of sharing and conflict. The title of Seligman's paper uses the phrase "the half-alive ones" to describe the children of such a dyad, is powerful and constricting. It connotes a kind of vampirism, describing "a large number of ego-damaging mothers" as "withdrawn, self-absorbed, efficient but affectionless...rigidly controlling, domineering and intrusive, or else seductive and castrating, puritanical and guilt-breeding or as tyrannising their children by illness, more often feigned than real...others that cannot release a child, exploit or scapegoat him. There are also jealous mothers who vacillate between hostility and remorse" (op. cit., 73). The totality of this kind of mother, the All-Too-Present Mother, is identified by Seligman based on the work of Newton and Refearn (1977), drawn in turn from Mahler, Pine, and Bergman's (1975) research, echoing Jung's earlier warning of the unconscious compulsion for a

child to enact the parent's unlived life (Jung, 1921, para. 307).

...the more unconsciously destructive the mother is, the less the child, even when she becomes an adult, can bear to be separated from her...

- Seligman, 1985, p.73

The rise of single parenting in line with increased divorce rates (see Chapter 1) lead psychoanalyst Paola Mariotti (1997) to discover the one parent fantasy. The finding was not necessarily an external reality, but placed within *a child's understanding* of external events, and found that patients with this internal construct viewed the reproductive process as repetitive rather than procreative. Another way of understanding this internal construct involves appreciating the learnt despair that reproduction would not produce a third new object if there was no one to mate with except the lone parent, as there would be no partner to be creative with. The lone parent fantasy may also have a connection to hopelessness and ambivalence as seen in clinical work, outside of the frame of becoming a mother. From clinical work and this research I have witnessed a link between maternal deprivation as the key influencer of narcissistic injury and/or trauma. With the onset of pregnancy and delivery of a child, maternal ambivalence comes more to the forefront of affective behavior.

3. Socially Inspired Perspectives

Rozsika Parker's work represents a bridge from clinically oriented work to more social orientations in considering women's affective responses toward motherhood.

Artist, feminist and Psychoanalytical Psychotherapist, Parker contributed to art and the women's movement (Parker and Pollock, 1987), took needlework out of a domestic female world into art history and criticism (Parker, 2010) and gave us 'permission' to acknowledge *maternal ambivalence* (1995; 1997). Parker translated a Kleinian outlook on the transition to motherhood from the need for a woman's own infantile issues to be reworked from infantile ambivalence toward her mother to having a developmental purpose to be worked out with the child. Holding what Jung would refer to as a "union of opposites" in the goal of individuation, Parker sought to hold the tension of love and hate in an effort to achieve maternal thought (Parker, 1997, p. 27) by tolerating her ambivalence as part of a desire to know that would lead not only to *thinking* but to creativity.

I include Parker in this literature review because Baraitser and Noack (2007, p. 174) extend consideration of Parker's work by suggesting, "mothers may need to use infants-as-objects in much the same way as Winnicott suggests infants need to use mothers as objects (Winnicott, 1968)." Baraitser and Noack (op. cit., p. 178), perhaps sensing the zeitgeist of delayed motherhood in their observation Winnicott's 'good enough' mother has been called into question (Doane & Hodges, 1992; Parker, 1995; Vellacott, 1995) call upon Susan Kraemer's (1996) work to ask for "more subjectively complex descriptions of mothering within psychoanalytic literature." Salient to late motherhood is the backdrop in Psychoanalytic literature, Baraitser and Noack (2007, pp. 177-178) appraise as problematic, including Klein, Winnicott, Mahler, Bion and surprisingly Benjamin (1995, 1988) in the presentation of an idealized mother who must be resilient to survive motherhood to bring about non-pathological

adaptation in the infant. How can a woman who has barely survived her own childhood feel ready to help an infant survive theirs?

Lisa Cosgrove (2003, p. 94-95) draws on Kristeva's theory of identity (1986, p. 98) to offer an "emancipatory potential" for psychological research to investigate "how ideologies of motherhood function to regulate subjectivity" (ibid, p. 95). Here Cosgrove (op cit.) after Moi (1985) and Weir (1996) calls for a mother that isn't bound up with the negative concepts of Psychoanalytic literature, but with mother considered as a subject in her own right with desires which cannot be totally defined by a "phallic economy" of words – repudiating, merged, omnipotent, phallic, death, witch, etc., Cosgrove's (2003, p. 95) citation of two quotes from Kristeva are worth noting for the case studies to come: "The loving mother, different from the caring and clinging mother, is someone who has an object of desire (Kristeva, 1986, p. 251)." And as if to root this perspective, "Nobody knows what the 'good enough' mother is. I wouldn't try to explain what that is, but I would try to suggest that maybe the good enough mother is the mother who has something else to love besides her child, such as her work, her husband, her lovers, etc., (Kristeva, 1984, p. 23)."

Wendy Hollway's (1997, 2001, 2006) clearly framed psychosocial approach to motherhood warrants inclusion because of her in-depth analysis of what constitutes maternal subjectivity. Her chapter 'Susie Orbach talking to Wendy Hollway' about mothers, parenting, gender development and therapy' in her edited book *Mothering and Ambivalence* (Hollway & Featherstone, 1997), addresses the desire to be the good mother, often the better mother than her own mother without conscious links to identification with the child yet

intolerant of the child's feelings, which arouses some shame (ibid, pp. 89-90). Throughout the book, the vicissitudes of good and bad turns in mothering take account of the tension between various dichotomous instincts and feelings summarized as ambivalence, but in effect opposing ambivalence itself through demonstration of high affective conflicting states as a normal part of motherhood if mothers are to continue to develop their own subjectivity (ibid, p. 91). In *The Capacity to Care* (2006) Hollway asks whether human beings, in particular women, are born with an in-built ability to care for another. Through the works of first and second wave feminists, commencing with Simone de Beauvoir's (1972) assertion, "mother's feeling of being a valuable human being 'is only an illusion'" (ibid, p. 514) as and against Chodorow's (1978) position that inequality is engendered through caring. Hollway separates the trajectories of girls and boys, making a case for shared parenting in order for both genders to enjoy advantages of connection and autonomy in childhood (Hollway, 2006, p. 25). Harvard researchers (Gilligan, Lyons, and Hammer, 1989) found that girls lost their authentic 'voice', the very nature of how they communicated in relationships until adolescence, when they began to interact with boys as members of the opposite sex, preferring not to speak out, for fear they might hurt someone's feelings (ibid). These findings raised questions as to the measure of an authentic self when faced with social pressures seen to be compromising "leaving a further lacuna in the understanding of psychological health in girls' (and boys') development and its relationship to their capacity to care"(op. cit., p. 27). Such socially constructed gendered trajectories, it is argued, impact on whether there develops an experience of self-worth in a child, "the basis of a capacity to care" (Hollway, 2006, p. 55). With self-worth, maternal subjectivity enables seeing a child accurately such that s/he can move

through omnipotent struggles to individualization, improved gender relations where women are subjects not objects (ibid). Hollway (op. cit, p. 105) has embraced object relations for an understanding of early development including the move from self-centered infantile love into genuine love by means of the capacity to be concerned for another “without intruding into their otherness” as ‘love’s knowledge’.

Erik Erikson’s (1950/1963; 1968) stages of identity may not apply to female definitions of identity and achievement (Belenky, Clinchy, Goldberger and Tarule, 1986; Chodorow, 1978; Friday, 1977; Brown and Gilligan, 1991; Gilligan, 2003, 2013; Jordan, Kaplan, Miller, Stiver and Surrey, 1991; Miller, 1976). Strict definitions along the lines of finding basic virtues such as “love (aged 18-40), “care “ (aged 40-65) or “maturity” (aged 65 plus) within predictable time frames becomes fluid since the discovery of the birth control pill and the exponential advance of ART. The question of a female’s desire for fecundity (maternal self) has been on the rise since the baby boom generation (born between 1946 and 1963) began to have options their predecessors never had. The introduction of the birth control pill was intended to create choice – when and how many children a woman would have. Given the ‘choice’ women remained longer in the work place and set their sights on achieving goals, including models of (feminist) identity (Downing, 1985) previously the preserve of male counterparts at every educational and income level. A recent study (Liss and Erchull, 2012) among two cohorts, self-identified feminists (344) and non-mothers who desired children (361) asked about feminist beliefs along actual or anticipated poles on two key themes: division of labour after children, and child surname choices. The study (ibid) revealed liberal feminist beliefs were higher

among women who were not yet mothers, while cultural feminist beliefs, such as valuing care, communal traits, including the role of women as mothers, were higher among actual mothers. Feminist women who are not yet mothers, the study concluded, may experience unanticipated social pressures.

Over time the individual and the social frame of Baraitser's (2009b) work has added meaningful context to the social barometers between women. "Rupture between women is made most visible through the marker of age of first-time motherhood, which has come to code for social class and employment trajectories" (Baraitser, 2012, p. 4). It remains to be seen in this research if the second part of her statement holds true, "...emerges out of an increased participation by women in further and higher education and employment" (ibid) to be in itself a psychological basis for late motherhood.

In another construction of the maternal, Baraitser, Pollock, and Spigel (2009a, p. 5) after Forcey (1994, p. 357) perceive mothering as a social construct with an activity set involving nurturing and caring for people, but not limited to children. It is this reflexive widening of the meaning of the maternal in relation to maternal work, practice, desire, identity, subjectivity and materialism (op. cit.) psychosocial literature that is of interest in this research because it holds the tension within the *pregnant pause* of desire without goal, goal without a timetable, longing without certainty, nurture without specificity. The cultural aspect of sex roles and their accompanying gender structure has come under review for Baraitser as part of an evolution commencing with women getting the right to vote, inherit property, attain higher education, equal pay, enjoy sexual freedoms unheard of before the birth control pill, and with assisted

reproduction technology expand the developmental trajectory of their lives and those of their children with the choice of purchasing and choosing genetic material.

When does an individual choice of gendered options reflect internalized femininity or masculinity, and when do the expectations of others prevail? How does the behavior chosen by individuals impact the expectations of others, and eventually institutions themselves? When are gendered choices the only ones ever imagined?...Can we explore when people refuse to do gender whether they 'undo' it or simply do gender differently, forging alternative masculinities and femininities that are then internalized as identities? And when does changing social policy effectively change the expectations people hold for others, or for themselves?"

- Risman and Davis, 2013, pp. 14-15

4. Peer Reviewed Studies

Karen Henwood's (1993) study on "Women and Later Life: The Discursive Construction of Identities within Family Relationships" paid particular attention to mothers and daughters accounts of their relationship and whether they were complicit or resistant to a 'femininity discourse' of relational mother and daughter closeness. Henwood finds mother daughter closeness to be "located within a socially or culturally organized framework for understanding which prescribes women's identity and conduct in terms set by gendered social institutions and relationships, such as those of family life" where themes of complicity arise around endorsement or challenges to what is considered the "normative framework" (Henwood, 1993, p.306). Here interpretative discourse analytic techniques were used to "illuminate how the women's experiences may be rendered meaningful within their own accounts, local features of the interactive context, and wider systems of social, historical and cultural

relationships" (ibid). Citing Feyerabend (1975) an implied conceptual lens was used on 'reality' to impart experience and knowledge. One such system the research explored was the long standing assumption in social science (Young and Wilmott, 1957) that a shared feminine identity and gender role creates a "unique closeness" between a mother and daughter, as a "lynchpin" within the life of the family (Henwood, 1993, p. 309). Henwood found a "significant minority" of women spoke of their mother or daughter in "highly negative terms", with mothers 'couching' their negative views while only the daughters spoke a "clearly negative perception" particularly among older women whose mothers were already deceased (ibid, p. 310). The implication in this study suggests that actions and activities of female family members must be made accountable and judged (op. cit, p. 312), but also they appear in Henwood's findings as resting on an assumption that women's conduct and identity are unequivocally defined along traditional, gendered roles and institutions, even though these definitions may no longer be held outside of the private domestic domain (Henwood, 1993, p. 314).

The rendering of the "good and the bad mother" followed explication from cultural representations of women as "evil, possessive and dominant figures who exploit relationships with their children in order to serve their own emotional needs" or "idealization of maternal figures as self-sacrificing angels" a dichotomy more prevalent in older women than younger who "as part of the workforce and as busy, efficient working mothers" become part of "new, evolving images of younger women" (ibid, p.316). What makes Henwood's research poignant to the *pregnant pause* is her finding older women "are still defined primarily within traditional gender framework where women are

either good or bad mothers and wives. Moreover, since older women no longer occupy a central reproductive function, there is a dearth of positive images of them and the social positions they can occupy" (op. cit, p. 316).

In this section, I will demonstrate how an aspect of the literature on "late motherhood" seeks to concretize the reasons for delay as part of a social construction of higher education and personal development in relation to financial security, for example. Such studies are often reported in topically oriented publications such as population and demographics (Bloom and Trussell, 1984; Vere, 2007), mental health and patient counselling (van Balen, 2005), the out-of-sync pros and cons of postponing motherhood (Poelker and Baldwin, 1999), aging (Koropecky-Cox, 2007), nursing (Cooke, Mills and Lavender, 2010, 2012) and medical ethics (Purdy, 2006).

One study, " 'Having It All' No Longer: Fertility, Female Labor Supply and the New Life Choices of Generation X" (Vere, 2007) concerns itself with differentiating Generation X from the previous 'baby boom' generation (1946-1962). The study seeks to demonstrate how fertility decisions made earlier than a previous generation of recent college (university) graduates made a significantly reduced contribution to the labour force, and a reduced and possibly sustained decline in the female labour force extrapolated to indicate "a drag" on economic growth (Vere, 2007, p. 827). The data show a significant shift on the allocation of time between the experience of motherhood and participation in the labour force, which peaked in 2000. The article uses the pejorative term "have it all" to convey the combination of achieving

motherhood and a “high-powered career”, with the latter definition of ‘baby boom’ achievement lacking differentiation as to what this means. Yet the context and impact of the labour choices made by baby boom generation are overlooked. In fact, these choices spurred the economic rise of the middle class following World War II with a cumulative effect on women having to create family on ‘two incomes’ in order to survive and maintain what their own parents worked hard for them to ‘achieve’ through higher education (Bell, 1976). What is important to note from this study is a trend of reversing declining fertility among higher educated women for those born in the mid-1960’s (op. cit, p. 824). However, it is significant that the data is in part relying on “total intended fertility” to measure the freedom of Generation X to feel fecund.

The study “‘Informed and uniformed decision making’ – Women’s reasoning, experiences and perceptions with regard to advanced maternal age and delayed childbearing: A meta-synthesis” (Cooke, Mills and Lavender, 2010) offers three items of interest highlighted on the first page of their paper in the *International Journal of Nursing Studies*, under the heading “What is already known about the topic?” – 1. Delayed childbearing beyond 30 years of age is a global trend. 2. A quantity of methodologically limited studies have reported on maternal and neonatal risks with advanced maternal age by health professionals labelling older women as ‘high risk’. 3. A dearth of qualitative research on this topic gives little understanding of women’s experience and views.

Their meta-analysis and synthesis of 12 papers culled from 2,686 papers, was aroused by a desire to discover why women are delaying and how aware they were about the risks in order to provide “meaningful interpretation of the existing literature...and deeper understanding of women’s experience” (ibid, p. 1318). Ages of the women involved in the analysis across four representational countries were between 32 and 37 years of age, with one study considering the experience of childless women over the age of 60. The findings showed the pursuit of education and career to attain independence and stability before motherhood was unlikely to change. The authors found delayed childbearing as a trend likely to continue, and in their minds, necessitating the need for informed reproductive decisions.

Following this analysis the authors conducted what they believe to be “the first UK qualitative study of women’s views of delayed childbearing (Cooke, Mills and Lavender, 2012, p. 37) and made the following conclusions (ibid):

- Women do not have ultimate choice or control over the timing of childbearing
- This is a new concept not found in existing literature
- While UK media analysis suggests women *choose* to delay having children due to education and career, this was opposed by cohorts
- Instead the cohort of women taking part in the study claimed a “complex interplay” of factors determined *when* they had a baby, which included relationship, stability, health and fertility
- Women perceived an element of chance was involved, as all the factors would need to be in place in order to have a baby at the selected time

- Delayed childbearing is rarely a conscious choice
- Some form of control is in place but it is believed to be 'subconscious'
- Trend for increasing maternal age at time of first birth set to continue
- Health professionals have pre-conceived ideas why women delay and these need to be reassessed
- Clinicians need to understand the complexity of factors affecting women's decisions rather than working on assumptions
- Health professionals need to provide appropriate information with sensitive support in light of varying perceptions of risk

In a study called, " 'I Think Motherhood for me was a bit like a Double-Edged Sword': The Narratives of Older Mothers" (Shelton and Johnson 2006) the aim is once more to explore the transition toward and lived experience of delayed motherhood. Interviewing five women over 30 prior to the birth of the first child a predominant tone of maternal ambivalence at the interpersonal level was found. The paper highlights the contradiction between societal idealizations of the 'perfect mother' against the hidden realities of motherhood, a theme also appearing in Almond (2010) regarding the state of motherhood as under pressure with a mother to be "forever improving" or else she could harm the child. Shelton and Johnson's (ibid) study emphasized a need to portray delayed motherhood as "more realistic" to address a theme found in many of the women's stories: resistance and undermining of dominant societal expectations about motherhood (op. cit, p. 327). Working with the *progressive narratives* (Gergen and Gergen, 1986) of participants the authors of this study found a developmental narrative as a pervasive societal narrative (Lee, 2001); certain goals would be achieved at various points in life. While the women

spoke in positive terms about their readiness for motherhood in terms of advanced age, “the tone and metaphors used emphasized the prominence of a ‘double-edged’, ambivalent storyline (Shelton and Johnson, 2006, p. 327). Citing Berryman (2000) to underscore the view delayed motherhood is more socially acceptable today they ultimately conclude “the dominant developmental narrative positions motherhood as part of a natural progression in women’s lives and the telling of a progressive narrative of maternal identity integration could be viewed as being central to ensuring that women live up to this developmental imperative” (op. cit).

5. *Late to Motherhood*

Three studies caught my attention to do with the experience of “older motherhood” or “late parenthood” or even being a “real mum”. What these studies have in common is the emergent new language brought on by biotechnology in service to reproduction and procreative identity.

The first, “Older motherhood and the changing life course in the era of assisted reproductive technologies” (Friese, Becker and Nachtigall, 2008), is one of the few that treat emerging bio-technology head on as a shape shifter of social identities and the definition of old age. Their cohort of 79 was seen to represent a new ‘middle age’ responding to “changing social, cultural, physical and economic realities...potentially extending much later in the life course” (ibid, p. 65), is consistent with the experiences of some of my participants when they talk about “managing stigma” and “normalizing older motherhood” (op. cit. p. 70). Problem areas were identified in terms of being asked if the older mother would have another child, living in an area where older motherhood is seen to

be more normal. Other remedies for stigma were found through means such as altering their appearance to present themselves socially as a younger mother. The inference in the research is suggestive that doing what one can so as not to appear as the grandmother in future photographs goes hand in hand with destigmatizing looking like an older mother (Goffman, 1963). The authors (Friese et al., 2008, p. 72) reference a body of literature described as “impression management and stigma” to account for the gap experience between social identity and self-definition (ibid; Miall and Herman, 1994; Snow and Anderson, 1994). Citing Goffman (1963) as the defining author on stigma, we get a view of a social process co-existing with the thinking of symbolic interactions to consider stigma as representing a discrepancy in the service of a “pass” to avoid stigma. There were other strategies observed in coping with age discrepancy of a more psychological nature, such as “cohorts [who] took on a more socially defensive position of hyper-validating notions of exceptional status [and equally] both strategies allowed women to feel legitimate as the mother of a family (Becker et al., 2005), in terms of a self that happens to be an older mother (Travers, 1995).

In ‘Late parenthood among sub fertile and fertile couples: motivations and educational goals’, van Balen (2005) found more “common ground than differences between younger and older first-time mothers” concerns itself with two groups of women around the age of 30 and another at 40. In the study, the implications are that women aged 20-25 felt they are not ready for a child and this coincided with the desire to enjoy life and career first, including establishing themselves financially (ibid, p. 276). First time mothers above the age of 35 are referred to as “primiparas” (op. cit, p. 277) in this study which

included the observation first time parents over the age of 35, were more effective in family functioning to do with problem-solving and affective responsiveness (Kooij, Bukman, Hoek, Heineman, and Tymstra, 2005). The primiparas, though displaying less of a traditional maternal role had a high professional status and were more self-assured and independent. More important to this study was the finding that “a rather large part of initially voluntary childless women, change their mind and come late to motherhood” (Friese, Becker, and Nachtigall, 2006). The finding that “older fertile mothers had less traditional reasons for motherhood and reported less feminine characteristics” (van Balen, 2005) places late motherhood in the realm of an individuation process (personal) at a time when modern science was shifting toward transformation of the collective psyche (Jung, 1958, para. 589).

The third study to be included in this extremely focused section on the comingling of medicine and social science, comes from the prolific authors Friese, Becker & Nachtigall (2006) cited above in Van Balen (2005), “Rethinking the biological clock: Eleventh-hour moms, miracle moms and meanings of age-related infertility” (op. cit). This highly relevant study captures the “eleventh hour” impulse for procreative identity in midlife, which can feel like the onset of a complex under which a woman has little or no control. It is often the case that a diagnosis of age related infertility is the first time a woman discovers she is no longer still young. The 79 US couples conceiving post donor oocytes (eggs) gathered from 12 different fertility centres were reported on along two narrative engagements. The first set of responses clustered around what the authors call, ‘eleventh-hour moms’ who discovered later in the process their only hope for conception was a resort to donated oocytes for a second chance.

The second group clustered around the author's other term, 'miracle mom', reflecting the narrative of women who were biological older and who mostly knew using their own eggs would not yield a pregnancy to term. Unusually for medically trained researchers, the term 'symbolic' has been used as carrying more meaning than the act or thought itself, regarding the elusive awareness of diminished ovarian reserves rooted in the language of "old eggs" rather than menopause, which has more social stigma. These observations reflect the internecine problems for women in midlife around aging and time. "Women described a condensation, shortening, or curtailment of their reproductive years that was experienced not only as premature aging but as having lost time or being in a state where precious time was constantly slipping away. For some the lost time implied waste: in time, opportunity, or eggs" (Friese, Becker & Nachtigall, 2006, p. 1554) and by extension, self-blame.

6. *Kinship Studies*

The first "test tube" baby came into life from in vitro fertilization in 1978 from a process that became known as assisted reproductive technology (ART). ART is may be considered to be "a key symbol of our times" (Inhorn and Birenbaum-Carmeli, 2008) representative of the burgeoning importance of biotechnologies in the arrangement of identities in individual, familial, and collective life. In a review highlighting over 50 anthropologists, Inhorn and Birenbaum-Carmeli (ibid) synthesize the effects of scholarly work on the effect of ART modalities across social existence in the areas of kinship, family, gender, marriage, religion and biomedicine. Their findings "bespeak both the destabilizing and generative impacts of ARTs at the interface between science and society" (op. cit, p. 177). Debates from these rich studies have aroused and evolved into ethical and legal

reactions to assumed binaries involved in sex, procreation and gender identity in social, secular and sacred preserves. Everyone knows someone who has in the last twenty years engaged in some form of IVF treatment and how this presents a quandary for families of every description in an emerging context of legal fluctuation moving from anonymity to mandatory disclosure of the child's biological origins. It is believed the plethora of ART technologies "provide a lens through which to view the relationship between science and technology" (Inhorn, 2006a, 2007a).

What began as a sexual revolution, has emerged as institutionalized procreativity, designed to overcome biological restrictions to deliver children. The higher rate of female fertility treatment, 47,442 UK women had IVF treatment in 2012 over 32,626 in 2005, (<http://www.hfea.gov.uk/8828.html>) is related to reproductive aging, combined with an increasing demand by older, less fertile women to bear children (Klein & Sauer, 2001). Within science and technology studies (a nexus known as STS) there is an broad assumption "that technologies are deeply culturally embedded, intimately linked with power relations, cultural norms, and knowledge systems...[and that] these are eventually accepted...only when perceived as reasonable in the context of existing social relations, cultural norms, and knowledge systems" (Webster 2002, p. 178-79). The authors of the meta analysis under discussion here (Inhorn and Birenbaum-Carmeli, 2008) situate technology as a part of networks of knowledge and power at the intersection of cultural and social order that have been deemed to be acceptable by those in the upper echelon of financial influence – professionals and potential recipients.

The global ART industry participates as a “seat of patriarchy” (Ghoussoub and Sinclair-Webb, 2000) in gender scripts regarding the continuation of long-term marriages while repeating cycles of ART treatment (Inhorn, 2003a; Birenbaum-Carmeli & Dirnfeld, 2007) despite less than 27% of all IVF resulting in live births (op. cit. 2008). Since IVF treatment can involve gender scripts of up to three mothers – egg donor, surrogate uterus, and primary carer, it becomes relevant to this study how ‘new kinship studies’ have gained prominence over psychological and psychoanalytical analysis of how the childless state seems to effect women (Barone-Chapman, 2007).

Strathern’s *Reproducing the Future: Anthropology, Kinship, and the New Reproductive Technologies* (1992) is credited in Inhorn and Birenbaum-Carmeli, (2008) as helping to arouse anthropological interest in how these technologies would redefine our ideas about kinship and relatedness, while at the same time destabilizing the biological aspect of birthing a child (Bonaccorso, 2008; Clarke, 2006a, b., 2007a, b, 2008; Inhorn, 2006a; Roberts, 2007). Feminist scholars (Thompson, 2002) have acknowledged that ART imposes “motherhood mandates” and we may consider this inherent due to raised, often repeated cycles of hope and disappointment with every embodied invasive procedure. What seems to happen is an expanded individual tolerance of failure to achieve procreative identity is offset by acceptance of expanded views of what is a biogenetically related child, and these expanded views are sufficient (Inhorn, 2003a; Ragoné, 1994). “Conception is no longer an effortless natural occurrence between a man and a woman; it is something that is achieved through intensive work on the part of the intending parent(s), with sperm and/or egg donors and/or surrogates, and team of clinicians” (McKinnon 2015, p. 466). The

connection between biology and nature as a foundation of kinship has transformed the new kinship studies in ways that parallel the creativity of the technology through plural frames. It does this first by seeking out the connections between people that are traced back to eggs, sperm, and womb recognizing new kinds of relatedness have been created through fragmentation of what constitutes “new kinds of biological relatives as well as new kinds of biological relatedness” (ibid p. 467; Franklin, 2013). The intention to clarify natural kinship IVF based on creative substance of bodies appears to confound the world of nature and bio-capitalism by domain crossing. “This doubling effect of IVF...replicates a process I describe as ‘biological relativity’ through which biology now exists as a more explicitly contingent, or relative, condition” (Franklin, 2013, p. 16; Mc Kinnon, 2015, p. 469).

What is at stake is the conflation systems that have heretofore operated without biological and monetary overlapping between “reproductive liberties and opportunities these technologies are able to support and the reproductive injustices they so often entail (op cit, p. 477). Redfearn found “Scientific medicine may have helped to cut us off from actually experiencing our bodies, certainly in so far as bodily experiences are related to feelings and emotions” (1985, p.58). If technology now stands in for ‘other’ it is easy to see how a rise in divorce rates and a fall in the number of marriages between 1972 -2004 coincides with an increased drop in fertility rates experienced in the same period as reported by Dixon and Margo (2006). The drive to create a child at all cost, whether a woman is married, single, straight or lesbian, in a relationship or not, has become big business and a readily accepted fact of life if not affluence.

7. Media Presentations On Late Motherhood

There has been a steady increase in articles offered by fertility experts warning women of the social and economic costs to late onset of motherhood after the age of 35 (Smajdor, 2009). The national press has regularly reported on some aspect of late motherhood in terms with a rather pejorative and damning tone, “Fertility experts urge end to ‘selfish’ late motherhood” (Foggo and Rogers, 2006) and “Late motherhood as ‘big a problem’ as teenage mums” (Templeton, 2006). Media framing of assisted reproductive technologies by Patricia Campbell (2011) has not only brought the focus to “older mothers” who are postmenopausal, but the discovery that a discourse of risk emerges whenever technology and its users disrupt the stability of sociotechnical discourses leading to public re-examination of the technology and user in question to recreate a new debate centred upon the associated risks. Campbell (*ibid*, p. 270) cites the case of Ranjit Hayer as providing “insight into the complex, broader debates surrounding ARTs. What is ‘natural’ reproduction? What does it mean to be a mother or a father? What counts as a family? Whose knowledge and experience counts in assessing technological risk?” As these and other questions become publicly debated, uncertainty and discursive tensions rise, destabilizing what has come to be seen as “routine” use of ART (*op cit.*). What I am building up to in this short discussion of media framing is how the media report on late motherhood has affected woman and how her society and culture view and relate to her.

In “Motherhood on ice? A media framing analysis of older mothers in the UK News” Shaw and Giles (2009) reported on a dominant negative discourse circulating throughout the media on the claims of “selfishness” on the part of

older mothers who “delay” as a violation against the natural order. The authors focused on the negatively framed articles because they appeared to follow a narrative trajectory that doom would come to indulgent young women with “surprising force” (ibid, p. 231). Furthermore the authors found particular re-occurrence of photos depicting older mothers waiting at the school gate with younger “yummy mummies” (op cit) shunning them as contributing to negative views about the advanced age maternity arousing anxiety in expectant older mothers. The framing of these results include mention of feminist research on motherhood as raising awareness that motherhood is less than idyllic and that maternal ambivalence as reported by Parker (1995) has become a widely accepted understanding. However, their conclusion on the media framing of older mothers reveals adherence to the ‘normative’ concerning women’s development, which includes the notion of the ‘perfect’ mother, prevail in cultural constructions of motherhood. Shaw and Giles (2009) leave us with the contradiction of a nostalgia for earlier ideas of motherhood against advances in science, uncertain whether future representations of late motherhood will be affected more positively as technology becomes an enabler for more women to have late motherhood.

Maternal confessional works (Quiney, 2007; Cusk, 2001a) occupy a subversive voice in literature on motherhood, let alone delayed motherhood, and in this case I make no distinction in classification due to the cultural conditions prompting “maternal writers [to] engage with the longstanding feminist fight to write the unspeakable, those abject discourses of (traditionally feminine) experience and emotion that transgress gendered and social norms to the extent that they are denied or forcibly repressed...” (op cit, 2007, p. 20). As a body of

literature commencing with Rich (1977), Wolf (2001), and Slater (2003) it is a “type of autobiographical writing which signals its intention to foreground the most personal and intimate details of the author’s life” with a view to making it public (Felski, 1989, pp. 87-88). Quiney (2007, p. 22) finds the female audience for this kind of confessional “mass-marketed maternal works, suggests a contemporary invocation of childbirth and mothering as traumatic experiences around which an even broader, general public might gather” has produced a *trauma culture* around the maternal body. Parker (1995, p. 4) found mothers in her practice to believe in the concept of the ‘Good Mother’ yet angrily located her as someone separate from them. Intimate subject matter in this genre predictably enters the field of classification as “writing of the maternal abject” (op. cit, p. 26).

New in press is the book, *Selfish, Shallow, and Self-Absorbed: Sixteen Writers on the Decision Not to Have Kids*, edited by Meghan Daum (2015, Macmillan and epicador), received an early review on line through the publication, *The Atlantic* (“Why Women Aren’t Having Children”, by Sophie Gilbert, April 17 2015, 10:27 AM ET). Gilbert’s (ibid, p. 3) editorial on the cultural observation proposes the world might be a “better place” if women did not feel “compelled” to procreate while their means and resources were not yet fully realised. “Many of the writers in *Shallow, Selfish and Self-Absorbed* discuss their own traumatic childhoods, and how they were made to feel responsible for their parents’ failed careers, or failed relationships, or unhappy lives.” The over-riding impression of the book from this and similar editorials is the authors are proposing it would be far better if women questioned the assumption of the biological imperative to procreate. This “need” to have children is perpetuated by the

myth that “having children is the single most important thing a person can do with his or her life, and that not having children leaves people sad and empty” (op cit, Gilbert, p. 4).

Recent observations of articles on motherhood on the occasion of Mother’s Day in the USA, was discussed on the social network, *facebook*, revealing a backlash in favor of childless women, to refute accusations that a childfree woman is “selfish” or that women who are mothers are more special than other women who are not. In ‘Why I hate Mother’s Day’, Anne Lamott writes, “I did not raise my son, Sam, to celebrate Mother’s Day. I didn’t want him to feel some obligation to buy me pricey lunches...” (facebook, Saturday, May 8, 2010 07:08 pm BST). Her argument is women with children are no more important than women who don’t have them. Another piece, “Sorry about Mother’s Day, my childfree girlfriends: Moms aren’t any more special (or unselfish) than you” (facebook, Friday May 8, 2015, 06:51 pm BST), asserts Mary Elizabeth Williams. As a mother she writes poignantly against the cloister of *some women* “who circle the wagons and shut out their childfree friends once they cross over to Motherland”. Resistance to claiming special status via motherhood begins to construct itself in opposition to a special place for special women belonging to an imagined place known as *Motherhood*, which provides the feeling of belonging to a supportive community.

SUMMARY

There is a tension running through the critical literature review on the *pregnant pause* constellating two tales of good and bad in relation to aspects of the feminine. The first is what is a good or bad mother, and the second is what is a

good or bad woman. Motherhood idealized and denigrated (Welldon, 1988) is at the crux of the two tales depicted in this critical literature review, demonstrating a larger ambivalence may be at work around the phenomenon of late motherhood. Motherhood as a difficult task has come to the forefront of psychosocial literature wherever maternal subjectivity is included. The tension extends from the psychoanalytical consulting room, to academic scholarly literature through to psychosocial/ demographic/ counseling studies, to the way media reports on late motherhood. Differentiating good from bad has been found to include mother as too much or too little, father as present or absent, pressure from society to be a perfect mother, maternal subjectivity versus preoccupation, an ever improving mother to prevent damaging the child, and how media framing creates an affective field for a woman as to when and how she uses her biological imperative.

“The pregnant pause asks for ‘the third’, ‘to imagine different kinds of relationships and to reflect on one’s own psychic life’ (Colman, 2007, p. 572). ‘For Jung, the space of the third begins as a gap of opposition and misunderstanding and grows into a space of conversation where new things happen’ (Bedford Ulanov, 2007, p. 589). In later discovery of women with procreative longing, I saw they were reaching for something else through ART that was beyond identity as to what is female or male, conscious or unconscious. Women in midlife were looking for a new perspective regarding what their bodies were capable of, and to essentially, humanely, experience what being both feminine and masculine, in this way, which would reflect back to the culture that produced them something that was valuable (Barone-Chapman, 2011, pp. 188-189). Negative media’s view of women *choosing* to have IVF in

their 40s rather than taking time out to have children earlier, is a bias against women who do not follow essentialist female identities. This form of social bullying against a prior normative set time for age appropriate development, a “social clock” (Neugarten, 1986, 1996), reflects an ignorance/denial of unconscious processes in female embodiment at work across the life-span, becoming more visible in a bio-biotechnological culture. But if women were secretly harbouring conflict and resistance to dominant societal expectations, and the “normative framework” (Henwood, 1993, p. 306), as this Critical Literature suggests, it was time to look into the problem on a gender basis. The discursive parameters of the *pregnant pause* and its field affects surrounding the phenomenon of late motherhood appear as conflict, resistance, and longing against a purpose as yet not known. All these point to implications for a research methodology that can withstand the tension between maternal subjectivity/preoccupation and independence, as a Janus gate looking backward to a woman’s own childhood at a time in her life when she must also be forward looking. In the next chapter I extend the critical literature review to focus on the cultural problems with the feminine found in this chapter, by commencing with the gender work of the mind doctors, Carl Jung and Sigmund Freud, amplifying their theories through current literature.

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Chapter 3

Gender Legacies of Jung and Freud as Epistemology in Emergent Feminist Research on Late Motherhood

“Self-development is a higher duty than self-sacrifice”

- Elizabeth Cady Stanton, pioneer feminist, 1848
(Gilligan, 1982, p.129)

INTRODUCTION

The Critical Literature Review (Chapter 2) has pointed the way to excavating a problem with the feminine continuing through current times (Kast, 2006, pp. 115-116). My aim in this chapter is to closely examine the plural definition and uses of the feminine in Analytical Psychology (ibid) and Psychoanalysis in particular, distinguishing the making of a complex between personal experience, cultural and collective contexts in order to define a feminist ethos for this research. More so, as it would appear the first analytical fathers offered us a useful theory of patriarchy (Mitchell, 1975) along with other documented effects of ‘the mind doctors’ on women (Appignanesi, 2008; Chesler, 2005) studying the literature on the feminine becomes an important epistemology to examine delayed motherhood. *Female* diseases, such as depression, promiscuity, paranoia, eating disorders, self-mutilation, panic attacks, and suicide attempts, whether reported/treated or not, are all female role rituals (Chesler, 2005, p.

110), to which I'd like to add one more in the age of biotechnology: the expectation of fertility after forty years of age.

The two analytical engagements bearing evidence of a patriarchal bias, such as Jung's mytho-poetic tension between symbolism and enactments with *the feminine* (e.g. Spielrein, Chapter 8) and Freud's (1933) supposition that a denial of the feminine was necessary for psychological and emotional development will be examined in this chapter. In particular the thematic evolution of psychic bisexuality producing a 'feminine' that is "thereby displaced from its forced equivalence to the object and from its inevitable localization in the woman" (Glocer Fiorini, 2010, p. 87) provided longitudinal perspective in the 21st century of Jung's (1948, paras. 24-40) anima/animus problem (Kast, 2006).

My aim in this chapter is to find the female body with a voice, missing in the one-sided perspectives of Analytical Psychology, and the subject of delayed motherhood across all psychoanalytical literature.

Discovery Process

What is determined to be masculine and feminine behavior, expression, and choices continues in post Jungian psychotherapies as a question regarding development, even when these are attached to archetypes (Douglas, 2000; Roland, 2002). The biological difference in women with an implied imperative to reproduce opens the depth question of a woman's unconscious use of her body as a means of separation, individuation and psychic growth (Pines, 1993, p. 83). Delayed motherhood in a bio-technological age may be yet another form of power and control (Swartz, 2013; Showalter, 1992; Oppenheim, 1991). At the

other end of consideration of motherhood in a technological age we have Jung's (1998) 1930's Visions Seminars, an early working through of his ideas on the "contra-sexual within" of anima and animus, drawing from his real world experience of what a lack of procreativity meant for a woman.

...then you get into a special kind of hell...For a woman there is no longer any way out; if she cannot [does not] have children, escape into pregnancy, she falls into hellfire...she discovers that she is not only a woman, she is a man too.

- Jung, 1932, p. 794

The feminine principle equating to female inferiority by the founders of both Analytical Psychology and Psychoanalysis, appears along a continuum ranging from Freud's perspective of causation, for example his penis envy/castration theory was grounds for hysteria based on a phallo-centricity (Fiorini and Abelin-Sas Rose, 2010) to Jung's invisible realm of the collective unconscious through the use of mytho-poetics, *as if* to rationalize logos as the sole propriety of men and Eros to women as a universal structuring element of psyche conceptualized as animus and anima respectively. Jungian Analyst Polly Young-Eisendrath (1984) frames these ideas as androcentric in their ignorance of the woman's experience, her social context, and the nature of her female gender identity in context to traditional sex roles. Without conscious feminine experience "an anxious middle-aged woman, identified with the idea that she is inferior intellectually, may be called 'animus-ridden' by a Jungian psychotherapist because she speaks in an opinionated and insistent manner about a general or vague idea" (ibid, p. 23).

Feminine Riddles Into Myths

Image, emotion, behavior, ritual and belief are intermingled in these theories reifying mental phenomena, blurring the lines between illusion and reality. Jung and Freud appear as early social scientists looking to explain the split between matter and mind. Once Freud's descendants opened the gate to allow for the impact of culture on phenomena observed by the analytical founding fathers the very essence of feminist research methods, such as embodied subjectivity, laid the groundwork for feminist inspired psychoanalysis to evolve into psychosocial research.. "For example, for Lacan, the Oedipus complex becomes not simply the exclusion of the child from the mother-infant dyad and parental couple which is thought by Freudians to be crucial for developing personality, but more a depiction of the beginning of the *acculturated individual* – that is, the entry into, and the reproduction of, *culture itself* repeated in the development of each human being" (Hauke, 1998, p.294). Culture reproducing itself also extends to mothering (Chodorow, 1978/1999) and will be considered within a literature review on Mother, Motherhood and Mothering in Chapter 4, where I will be taking up some of the findings of Psychoanalyst Joan Raphael-Leff (1984) on myths surrounding the feminine, femininity and motherhood. What follows is the effect these analytical ideas can have on society, the very essence of this chapter.

...some psychoanalytic concepts have taken on the quality of myths. I define myths as symbolic representations of cultural ideologies, reflecting unconscious dynamics. As with individuals, sometimes stale and outgrown myths persist, sustained by inherent societal forces even beyond their point of usefulness, resistant to change and often obstructing growth and creativity. Most psychoanalytic concepts originate as explanatory hypotheses. However, once formulated and disseminated, they become rooted both in theory and in society, acquiring an explanatory force, generating

self-fulfilling prophecies and remaining unchanged as long as the myth serves a purpose...even when there have been changes in phenomena upon which the initial observations *were* made, the original hypothesis, reified and elevated to the proportion of a myth, remains immutable, sustained for the social, economic, political or psychological purpose it now serves.

- Raphael-Leff, 1984, p.8

Though Freud is credited with asking the question, "What do women want?" he never found an answer to the "riddle of femininity" (ibid) and neither did Jung except through personal foibles (Cowan, 1994/2000/2003). The favouring of Jungian Psychology I had intended for this research was discovered to be insufficient to reflect on an emerging cultural problem with the feminine. There was danger of falling into Jung's earliest reifications of gender on archetypal and functional levels underpinned by his interest in alchemical processes of the solar king meeting the lunar queen (Plaut, 1998, p.282-284). Jung's (1911-12/1952a, paras. 4-46) identification of two kinds of thinking along gender lines of masculine and feminine was classified as "direct" and "indirect" (feeling) thinking is a case in point where early psychological typology function was confused with gender function. Indirect thinking was deemed to be intuitive, irrational, pictorial, diffuse and symbolic. Jung assumed it was the foundation of feminine psychology (Samuels, Shorter and Plaut, 1986, p. 54), under the principle heading of Eros, to include psychic relatedness, love and soul which also put women under pressure to perform as such in the activities of wife, consort and mother. Direct thinking, logical, goal oriented, rational, differentiated, and spoken skills, gathered together under the principle of Logos became the expectation the masculine principle was the proprietary right of

men. Jung assigned words like judgement, discrimination and insight as well as spirit to 'maleness' (Jung, 1911-12/1952b, para. 87).

My sense of Jung is that he read into the reproduction of gender performance and culture *as if* his identification of its' contents was fact; confusing fears and fantasies with real women (Young-Eisendrath, 1984). Not all post-Jungians read gender the way he did, but of those women thinking of themselves as Jungian feminists, such as Cowan (1994/2000/2003), Douglas (1990/2000), Kulkarni (1997), and Anthony El Saffar (1994), few, other than Young-Eisendrath (1987, 1997) are known in the larger context of feminism, I believe, because she draws from social constructivism to assert the 'feminine archetype' is a product of patriarchy, while the Jungian imagination mainly relies upon the reading of materiality, including embodiment, as purely symbolic of psychic processes. Yet Kulkarni (1997) was among the first to lay down a paradigm for a research that "marries Jung's respect for psyche with feminism's insistence on context" (ibid, p. 218).

"One is not born, but becomes, a woman" (de Beauvoir 1949, p. 301) a favoring of lived experience which inspired emerging feminism to make the distinction between sex and gender, an idea meant to "secure internalization of contrasting patterns of behavior...thus to displace the role of biology in determining 'masculinity' and 'femininity' (Segal, 1999, p. 39). To evolve as a Jungian feminist one must first and foremost hold fast to an anima and animus as the soul and spirit of psyche, rather than a reification of a split between mind and matter, inner and outer, us and them, man and woman, leading to gender inequality. Such a post-Jungian perspective would have placed inner and outer

on equal footing, so that embodied experience in culture held as much weight as the collective unconscious. The feminine is now more topical from a wider perspective in Analytical Psychology since women authors have taken on Jung's theories in argument while reclaiming the feminine from a contra-sexual proprietary rite of a man's inner woman. A few clinicians with these theoretical interests come to mind, Sylvia Brinton Perera (1981); Polly Young-Eisendrath (1984); Eisendrath with Florence Wiedemann (1987); Clare Douglas (1990; 2000); Claudette Kulkarni (1997); Lyn Cowan (1994, 2000, 2003); and two academics Demaris Wehr (1988), and Susan Rowland (2002, 2005, 2006).

But some of these post-Jungian explorations by women on anima and animus remain tethered "in the father's house" for their feint revisions, in complaint and disagreement rather than evolving Jung's theories of the feminine and masculine into a contribution toward feminism in the wider world. I realised from this research my (Barone-Chapman, 2013c; 2014b) own contribution toward this endeavour through application of Queer Theory to Jung's (1935-1943 and 1929-1954) alchemical opus is but a small drop in the ocean of Jungian feminist work yet to be done, in part because of tacit agreements to understand Jung's virtuosity as a mercurial pluralist rather than to criticize him for emergent, one-sided gender consciousness. Whereas Freudian Psychoanalytical theorists have gone further than Freud's ideas of the feminine, by contributing to developing feminist theory aligned with clinical and social psychology theorists. Raphael-Leff's (2007) inquiry into femininity, the unconscious, gender and generative identity in a biotechnological age argues that a basis of psychoanalytic theory in place throughout Freud's life was the limitation of femininity and masculinity on original bisexuality. She lays claim

Freud's bisexual fluidity concept was ultimately eroded by occluding "reification of body-based dichotomies" (ibid) leading to multi-layered views of fantasies/relational configurations/identifications proffered by Harris (1991), Dimen (1991), Benjamin (1996) and Sweetnam (1996). Raphael-Leff further frames Freud's notion of bisexuality through the dichotomy of conscious unity twinned with unconscious diversity to Person (1999) based on Goldner's (2005) notion of culture as authorizing agent. Her synthesis of 'sex' as an accommodation between chromosomes present at birth, and gender as a self categorizing of a psychosocial construct (Raphael-Leff, 2007, p. 500) produces new categories for 'gender role' and 'sexual orientation': "*Embodiment* (femaleness/maleness), *Gender Representation*' (femininity/masculinity) and *'Desire'* (sexuality)." Organically this becomes understandable only when we consider Freud's earliest repudiation of the feminine (Schaeffer, 2010, p. 129) against Jung's tendency to appropriate the feminine as a man's anima while projecting the masculine as woman's animus as a detriment to her character (Wehr, 1988; Cowan, 2000; Douglas, 2000). Can Jungian feminist literature ever be on par with mainstream feminism? David Tacey (2010, p. 308) finds it far "from mainstream feminism..." Jung's dichotomous idealization of the feminine as a man's anima while denigrating the masculine in a woman (animus) as a character flaw, at first blush creates a problematic for the researcher who wishes to use Analytical Psychology as the theoretical basis for emergent *feminine feminist* psychosocial dilemmas, until we shortly come to discussing his alchemical works. Jung's mytho-poetical views, theories, imaginations, foibles and proclivities regarding the feminine, along with Freud's fluid notion of bisexuality, are both offered as evidence; acceptance of the feminine as different but equal remains a long standing difficulty for both

genders, inspiring perhaps the intra-psychic and inter-subjective cultural phenomena of a *pregnant pause* (Barone-Chapman, 2011) to revision the feminine out of patriarchal paradigms.

The Feminine and Feminism

By emphasizing the *feminine within* feminism I am including ways of incorporating agency and nurturing through the holistic union of Jung's essay (1911-12/1952a) 'Two kinds of thinking' in addition to feminist concerns of equality with men such that *productivity identity* does not become equated to essentialist gender norms, nor to performance in male terms. Holding on to the *feminine within feminism* allows for sexual difference and keeps in mind the ways in which the *feminine* has long been suppressed in culture (Anthony El Saffar, 1994), her wound the subject of myths and fairy tales (Braverton, 1998, p. 193-94). I discuss this thought further in a later section on Feminine Ethics and Feminism. Without this view it would be all too easy to see women who fell into delayed motherhood as one more 'father's daughter' who abandoned the archetypal feminine to pursue career rather than respect the body that Marion Woodman (1994) likens to the Mother in ourselves. As we will discover later (Chapters 5, 6 and 7), what actually happened to women caught in this *pregnant pause* is far more complicated. Up close, late motherhood doesn't appear as a conscious betrayal against the feminine. Seen as a collective phenomenon through statistical evidence it takes on the complexion of a rebellion against a 'repudiation of the feminine' leading to adult choices that would necessitate a late search for the "mother within" for procreative identity. Through this lens feminism has been both the problem and solution to the "one sided ego development" of the individual woman and the culture into which she is born

into as a bio-technological age and culture. A feminist view of the psychosocial aspects of a woman becoming a mother, for the first time (Hollway, 2016) is made more complicated as she ages. The female body with a voice was missing in the one-sided perspectives of Analytical Psychology and Psychoanalysis on the subject of the feminine, until a whole view of psyche's discontents in Feminist inspired Psychoanalytic theories from both schools on the female body were included. The search paralleled how the female body had been dis-included in culture paralleled how she found herself *out of time* as she aged.

While aspects of Analytical Psychology have been relevant, I also needed to seek out *feminist inspired* Psychoanalytic perspectives to make two halves of analytic history a whole view of psyche's discontent with patriarchal views of the feminine. Analytical psychology has a proud history of finding truth in the cosmos through archetype and image "rooted in the unconscious as transcendent of knowledge" (Rowland 2002, p. 143) while Swartz (2013, p. 41) reminds us "Feminism has a proud history of interrogating the truth claims of psychiatric science, and of foregrounding the ways in which the machinery of psychiatric diagnosis and treatment has been used to obscure or amplify the psychological effects of patriarchies", for which she credits Chesler (1972/2005), Smith (1990) and Ussher (1991). In particular, in reviewing psychiatric diagnosis from a feminist perspective, Swartz (op. cit) gives credit to Jessica Benjamin's (1998) work concerning the long history of patriarchal domination where feminists have challenged Freudian psychoanalytic diagnostic premises and opened up new ideas on the formation of female identity such that experiences as mother, sister, wife, or daughter can no longer be automatically synonymous with a lack of agency. Freud and Jung's views became evidence

of patriarchy as background while extension of feminist inspired psychoanalytical thinking, Queer theories and Creation Myths allowed new meanings of the embodied feminine to emerge through a recapitulation of a union of opposites as a union of epistemology and ethos. The essence of Jung's mid-life theories, altered by modernity and eclipsed by female advancement, remain replicable and paradigmatic outside of essentialist gender performance. Brooke (1991) defended Jung's seeming neglect of the body, not as a schizoid psychology, but because Jung's approach to psyche "subsumes the body so that the body merely tends to remain [un-themed] in his work. He assumes it as the "natural face of mind (a Merleau-Ponty expression" (Roger Brooke January 25, 2008 IAJS Discussion List, 20:38:39 -0500).

My purpose is not rapprochement between Jungian and Freudian theorists and clinicians, but observation of how the views of Jung and Freud as men continue to provide grounded evidence of a long-standing problem for and with the feminine.

Given the nature of this study, to explore delayed motherhood and its connection to individual and collective complexes, and the long history of women being diagnosed as 'prone to depression' (Swartz, 2013, p. 23), it is important to clearly differentiate the identification of a complex from a diagnosis. In a diagnosis the root of the disorder is placed within an individual while social, cultural, political and collective contexts remain as background or in ignorance (ibid). Delayed motherhood in the 21st century begins to appear more as an emerging 'epidemic' coming from dis-ease between the sexes (Barone-Chapman, 2011) rather than a disorder, though it may have been

viewed in this way by Freud and Jung at one time. Identifying a complex through the study of affective behaviors provides a way to see into emotional rupture as phenomenon, which does not originate in the individual alone, but through a network of associations involved in memories with others. These 'others' do not only contribute to personal complexes, as they may be unknown to the individual, but because they occupy a place in the social through the cultural unconscious (Henderson, 1984; Singer & Kimbles, 2004).

When the social/cultural is included in what happens when a woman is unconscious toward her body, (colloq. *unable to think below her neck*) we must consider the feminine in context to patriarchy, and by extension compensating feminist ideas. It must be noted patriarchy does not always have a penis, nor do feminists always come with a vagina. As I write this, *The New York Times* (August 13 2013) has just published a story with the headline, "Germany Fights Population Drop." Though Germany seeks to increase fertility with a system of tax breaks and benefits to include stay-at-home mothers as well as married couples, demographers say, "that a far better investment would be to support women juggling motherhood and careers by expanding day care and after-school programs." The Berlin Institute for Population and Development referred to statistical data revealing the higher the gender equality, the higher the birthrate.

DEFINING PROBLEMS

Woman as subject, object, abject, Mother, other, caregiver, mirror, animus ridden, anima woman, framed as receptive, castrated, empathic, relationally oriented, envious of a penis, an uroboros for renewal and imaged as the contra-

sexual unconscious, is a cross-section of how both Analytical Psychology and Psychoanalysis refer to the female body as part object and part symbol, with a purpose for her existence, “another subject whose independent center must be outside her child if she is to grant him the recognition he (she) exists” (Benjamin, 1988, p. 24). The use and relationship to the ‘feminine’ in all its variations, including ‘femininity’ emerged as the ‘last straw’ turning Freud and Jung from sparring partners on ‘universal principles’ to ‘warring opposites’. Both men were caught in the prejudices of patriarchal culture to do with rights, roles and conduct of women in relation to men, pleasure and becoming a mother, until the mother-son incest taboo provided grounds for their ultimate parting of ways (Anthony El Safar, 1994, pp. 46-47).

For Jung, mother-son incest functioned as a mytho-poetic in intra-psychic life toward the borderland of enactment within his counter-transference dynamics with patients, such as Sabina Spielrein. His wife Emma, consort Toni Wolf, and a collection of female colleagues known as the “Jungenfrau”, all allowed Jung to be convinced “that the father’s law against incest is regularly broken on the symbolic level, and that regression to the womb is also part of the hero’s journey to rebirth” (Anthony El Safar, 1994, p. 46-47). Whereas in Freud’s (1933, p. 133) thinking a girl’s cure for narcissism is not only founded on the discovery she does not have a penis, but on the move from mother to father to husband where her triumph and cure is the production of a son (op. cit, p. 42) with whom she can “transfer to her son all the ambitions she has been obliged to suppress in herself...” (ibid, 1933). Freud’s thinking is a natural wellspring for feminism, whereas Jung’s continues to entice women into believing they could be a man’s muse and inspiratrice, just as Echo helped Narcissus to continue

looking at his image, believing it to speak to him in his favor (Graham Fuller & Robinson, 2003).

One of the first Jungian Analysts to question the masculine psychologies of Jung and Freud, James Hillman, (1972, pp. 291- 292) finds in Freud' (SE 23, p. 219) a definition of the conditions under which an analysis may end, based upon the achievement of 'feminine inferiority' finding it to be 'the root of repression and neurosis...bringing about both our psychic disorders and method of analysis aimed at these disorders' (ibid).

...one reaches the 'bedrock,' the place where analysis could be said to end, when the 'repudiation of femininity' both in a man and a woman has been successfully met. In a woman the repudiation of femininity is manifested in her intractable penis envy; in a man his repudiation does not allow him to submit and be passive to other men"

- Freud, (ibid)

Thus the repudiation of femininity is suggested to be biologically founded and part of the natural psychological world (Hillman, 1972, p. 292) whereas for Hillman "the end of analysis coincides with the acceptance of femininity" (ibid). Hillman takes on the 'bedrock' of misogyny by undermining its basis on the "biological aspect of the female" finding instead a psychological basis of an 'Apollonism' as the 'bedrock' of the "first-Adam-then-Eve" perspective. This Apollonic archetype seeks physical form through "an objective and detached selfhood, a heroic course of...quest and search...above all the ego-Self as its carrier, and analysis as its instrument" (Hillman, 1972, p. 293). Putting aside the relational aspect of the feminine acculturates life in two parts, "First Adam-then-Eve"; creation is out of the head of Zeus. From just the small glimpse into Freud's thinking of the feminine through one of his last writings in Vienna, it

may be possible to see the necessity of feminist thought to salvage Psychoanalysis from Freud's complaint "psychology cannot solve the riddle of femininity" (Freud, 1933, p. 149).

For Jung the analytic process reaches its ultimate goal in conscious bisexuality through the alchemical image of the coniunctio / the conjunction (Hillman, 1972; Samuels, 1989; Barone-Chapman, 2014b). Rowland, (2002, p. 145) redeems Jung for feminists in analyzing his work as a whole, and in particular on alchemy where there is "recognition of the limitations of heterosexual opposition...what is cast out, what is structured as an abject body, must be reconfigured *within*." This is the maddening aspect of Jung, saddling Analytical Psychology with his biases of appropriating the feminine as a hidden virtue of men with the anima concept only to find him projecting onto women the worst attributes of the masculine with the concept of animus, opposite and not equal yet destined for bilateral unity, requiring slow careful reading of Jung as a *trickster* (Rowland, 2006) writer to be read for multiplicity as an evolving narrative rather than authority (Rowland, 2005). "Jung's writings are characterized by an entwined dual purpose in which an acknowledgement of the roots of his ideas in his individual experience (personal myths) work with, and against, a drive to universalize and construct a comprehensive psychological scheme" (ibid, p. 25). Nowhere is this more evident than on his move from neurotic opposition on gender to alchemy's subtle body and external reality to social discourses (Rowland, 2002, p. 145). Samuels (1985a) questioned whether Jung's concept of anima and animus/femininity and masculinity entwined in the syzygy to endure the alchemical processes of differentiation in an effort to re-unite as an androgynous pair of opposites, was

a bonafide work on gender, “Jung often spoke as if he were unaware of the distinction between gender and sex, which is, by contrast, biologically determined” (Samuels, Shorter and Plaut, 1986, p. 60). The feminine as an aspect of men and the masculine as an aspect of women became tangled up in Jung’s reflections between biological bodies, the embodiment of archetype and effects of culture and the collective unconscious. This is no different to what happens to anyone when the principle of ‘masculine’ and ‘feminine’ is concretized as first Adam then Eve. A false adaptation to compensate for psychic wounds to sexual identity, aroused by conformity to cultural stereotypes can confound gender, sublimating the feminine such that men find they want babies and women are afraid to have them (Barone-Chapman, 2014b). When the feminine in either gender is denigrated things go wrong, a link to the alchemical subtle body becoming physically and psychically blackened, precipitating a sulphuric decay to rise so that the problem as it is felt can dissolve (ibid). Usefully Verena Kast (2006, p. 118) draws from Jung’s *Mysterium Coniunctionis* (1954) to demonstrate how fluid the notion of masculine and feminine has been throughout Jung’s explorations, reaching in his final book the notion “that the animus compensates for female consciousness” (op. cit), to which Kast adds, “Anima and animus can be seen as representing the unconscious at any given moment...often discovered in the form of projections onto other persons” (Kast, 2006, p. 119).

In feminist inspired Psychoanalytical literature, longitudinal consideration has been given to self-images of feminine and masculine internalized through separation-individuation rituals within family as part of an evolving acquisition of gender-role identity commencing with “differential permutations of

mother/father-boy/girl interactions, with the 'feminine' situated in the historical fact primary caregivers were invariably women" (Raphael-Leff, 2007, p. 503). Raphael-Leff's (ibid) links a mother frustrating dependency, to Dinnerstein's (1976) view of her becoming the confusing feared and desired catalyst for counter denigration of that which is designated female. Here, in Raphael-Leff's view mothers, carry reproduction of the patriarchal social order of inferior social position, through unconscious same-sex identification with their daughters (op. cit, p. 503). She takes a teleological view in the way this manifests later in life through threats to reproductive body integrity (Klein, 1945), preferred female relatedness (Irigaray, 1985) and an ego with porous boundaries like mother (Chodorow, 1989), which when taken together present a compelling presumption a daughter must give into/resign herself to, the patriarchal social order (Mitchell, 1974; Orbach & Eichenbaum, 1982), an outcome that resonates with the personal battles within case study material.

Confounding Gender

Returning to amplification of Jung's alchemical opus, as a process of psyche involving extracting the gold and liquefying the dung within primal matter, included elevating the 'opposites' to the regal status of Sol King (conscious) and Luna Queen (unconscious). Appearing in every culture, these motifs were intuitively drawn over millennia to signify psychic renewal, forecasting how dominant factors in the psyche undergo processes of decomposition and clarification by fire, out of which emerges the 'new king' or new consciousness (Barone-Chapman, 2014b). My point is Jung's alchemical opus was a gendered paradigm for the individuation processes of midlife (ibid), a time when embracing the opposite of one-sided ego development may include desire for a

new consciousness, prior to the concretized form of a baby in an biotechnological age. This is the new king (dominant desire) of the midlife *pregnant pause* coming into mind after years of licking the wounds of modern cultural conditioning to favour the masculine over the feminine for economic performance. In this way women's lives, in growing numbers, have the appearance of a structure in two parts: first Adam then Eve. This is perhaps the basis for Jung's (1948, paras 29, 4I) quandaries between the Logos of a monotheistic God with "his essential separation from nature [which] sponsors rationality as dependent upon a division from matter and body and the need of Eros to be connected and related as the Mother Earth (Rowland, 2006). "Jung's early disposition for gendering opposites, with varying degrees of denigration and idealization, though evidence of extraordinary early work on identifying contradictions in nature seeking reconciliation" (Barone-Chapman, 2014b) appears to be underpinned by a mytho-poetic defense of misogyny and female inferiority in the collective unconscious (Hillman, 1972, pp. 215-298).

Jung's entire project, I am suggesting, is, in mythical terms an attempt to re-balance modernity that has been brought to crisis by an over-valuing of Logos at the expense of Eros-relating...[essentially through] the creation myths, he is able to stabilize the masculine signifying he wants to retain it, while insisting upon its re-formation to include the feminine, which remains marginal.

- Rowland, 2006, pp. 290-291

The Complexity of Time

When a complex is activated by, for example, by a word, associations to that word will take longer to process the more affect-laden memories are attached to it. In studies, such as Jung's Word Association Test (1905), the reaction time can range as much as 60 seconds. Compared to the years of repressing a desire to

procreate, time is relative to the degree of unconscious processes working within the personal and collective complex. When an affect-laden complex kicks in, time changes. Psychological reality replaces biological time. Time is lost. Activities take longer. Immediate requirements are overlooked, forgotten or turned into pathology. Though the personal and collective unconscious is not easily differentiated (Huskinson, 2010, p. 82), the sphere of culture, operating at the personal level, provides the lens through which a changing relationship to motherhood is investigated in this study. Without inclusion of time within the Jungian canon on the identification of complexes, there would not be enough tangible evidence other than affect. Affects alone are not complexes, unless the affects observed may be said to form a pattern (see Chapter 6).

Yvette Weiner's (1996) exploration of two dimensions of time within the psychotherapeutic process brings an understanding of time at midlife as the convergence of Chronos and Kairos. Chronos, the god of linear time, with both destructive and constructive aspects, and Kairos, the god of the opportune moment, come together to compel seizing the opportunity to do what has not already been done. Paul Tillich (1963) is credited with naming Kairos as "an opening in time, pregnant with the promise of meaning" (Stein, 2007, p. 87). Assisted Reproductive Technology stops linear time to create an opportune moment for a pregnant pause. Chronos and Kairos bring on a "memoire involuntaire" in order for something unique to happen. To the naked eye a pregnant pause comes on as passionately as first love, with all the high feeling tone affects of a complex that has been activated.

Murray Stein (ibid) finds the uniting of the time-bound ego and the timelessness of the Self, to be necessary for initiation into the spiritual realm where one may “put existential anxiety to rest” (ibid). Stein finds the midlife period to be a point in time where many do gravitate toward initiation into the spiritual but emphasizes the spiritual as being beyond the comprehension of ego consciousness and outside social intent. Initiations therefore fall into two categories: intentionally calculated and purposeful or arising spontaneously from unprompted impulses. Stein (2003, p. 78) describes entry into the time of mid-life as if it was a geographical ‘liminal’ space between two points in space and time, announced through loss, defeat, mourning and death. This eruption of the unconscious brings forth what has been previously rejected, cast aside or scantily considered in fast-forward modern Western life, to sow the seeds of the future. The experience of liminal space can be likened to psychological floating bringing an awareness of impulses ordinarily unattended to in periods of great stability. But in midlife, Stein (ibid) goes on to suggest, acting on impulses for reasons that know no explanation can be distinguished from the “acting out” defences of denial, repression and projection, through “conscious wish-fulfilment” (op. cit, p. 79) of the Self. The unconscious, acting upon the conscious, is viewed as a signal, of what one needs to feel complete.

Beverly Zabriskie (1997, p. 37) explored the concept of *unconscious time* through a Jungian clinical lens where parallelisms from the “frozen world of an early accidents” manifest as “amplified quantum events” in the present. These phenomena, first discovered in the consulting room as transference and countertransference affects, lead Jung to view psyche as “a source of space-time...the conscious realization of time is ‘engendered’ in the intersections of

the conscious and unconscious psychic systems” (von Franz, 1992a, p. 34). Zabriskie posits with Jung, “an archetypal referent gives access to a trans-conscious that is larger than conscious understanding, through a cultural image or narrative which casts a wider light” (op. cit, p. 37). At the archetypal level of unconscious there is no conception of time (von Franz, 1992b, p. 72). Psyche does not fully reside in time, but partly outside of it, and “comes into being with the time bound order of our consciously experienced world” (Zabriskie, 1997, pp. 35-37). A psychological moment ripples over decades gone by until the mid-life pregnant pause.

An *abaissement du niveau mental* is a term used by Jung’s mentor, French Professor Pierre Janet to describe the symptoms of hysteria and other psychogenic conditions. I include a definition for this diagnosis here as “a relaxation and an uninhibited letting go of psychic restraints; reduced intensity of consciousness characterized by absence of concentration and attention: a state in which unexpected contents may emerge from the unconscious” (Samuels, Shorter and Plaut, 1986, p. 7) because it may be useful to understanding the pregnant pause as a phenomenon of the unconscious. The condition of an *abaissement du niveau mental* brings to consciousness latent desires and “a relative reversal of values” (ibid), as the tension of opposites, normally keeping these ideas in check by one-sided ego development transform through the ‘changes’ at mid-life.

Queer and The Feminine Hero

Queer theory emerges in personal identification and political organization as non-normative performance in a range of experiences of being and doing,

inspiration for intra-psychic unions where achieving and nurturing, penetrating and receiving, are un-assigned to gendered bodies but co-exist in any body (Barone-Chapman, 2014b). Citing Queer theorists Elizabeth Freeman and Judith Halberstam, Emanuela Bianchi (2012, p. 41) presents a movement “From Feminine Time to Queer/Feminist Time” (ibid) to examine how temporality in Queer strays from the normative, “unaccountable and dilated time” (ibid) arguing that pregnancy and mothering both participate in temporal counter-normativity. When viewed as a formulation of women’s time’ in concert with “women’s characteristic capacity to be interrupted, by the demands of family, by pregnancy...” (op. cit, p. 43) “we take into account the necessity for protecting against hostile and unwanted interruptions *as well as* promoting a [liberator trans valuation] of interrupted time...to strange new, queer formations of kinship, gender, and social life” (Bianchi, 2012, p. 43). From clinical experience, when gender performance enacts a great leap of faith outside of predictive maternal identity as biological destiny, delayed motherhood appears as the struggle to achieve and nurture, penetrate and receive; a modern developmental task for the feminine hero.

The assumption of heterosexuality and gender certainty is a problematic of classical Jungian canon. Despite my and other Jungian Analysts’ criticisms of ‘gender certain’ contra-sexual opposites, the archetypes of anima and animus, continue to appear in dreams to reveal shadow aspects, those parts of the self that are unknown, unwanted and un-integrated, as principles of both *agentive* and *allowing* energies seeking conscious integration in men and women. To dismantle gender performance from procreative identity and sexual desire is a

pre-requisite for analyzing the embodied feminine as she courses her way through association networks and inter-subjective affective fields.

I stand in the center of this research as one who could not consider motherhood until I was in the fourth decade of my life. In effect, I am making the definition of feminine feminist research as having aspiration for political and social change according to Mies (1991) “the personal is the political and the political is the personal”. Recognizing “the effect of the patriarchal animus on generations of women” (Douglas, 1990, 2000 p. xviii) Jungian Analyst Clare Douglas examined the outmoded aspects of Jung’s theories including the ephemeral, contaminated, and biased, to find the kernel of theory with “the possibility of freeing women and the feminine from the very patriarchal formulations that surround them” (ibid, p.x). Gray (2008) sets out to examine, in philosophical terms Jung’s *individuation* idea next to the subject of the feminine by drawing from Irigaray’s work.

Individuation, I claim, is the telos of Luce Irigaray’s ideal of a feminine-feminine symbolic/imaginary or system of meanings and significances which arises out of sex/gendered embodiment and collective responses to it...lest this reading of Jung be interpreted as re-inscribing masculine notions of the feminine, I take a new look at the idea of essentialism, which has plagued Jung’s own theoretical construction of the feminine and ‘woman’...and also Irigaray’s approach to the woman question.

- Gray, 2008, p. ix

Jung perhaps explains the problem best in describing his view of opposites followed by the problems he finds when the opposites are not in their ‘right order’.

...woman’s conscious is characterized more by the connective quality of Eros than by the discrimination and cognition associated by Logos. In men, Eros...is usually less developed than Logos. In

women on the other hand, Eros is an expression of their true nature, while their Logos is often a regrettable accident.

- Jung, 1948, para. 29

...instances to the contrary leap to the eye: men who care nothing for discrimination, judgment and insight, and women who display an almost excessively masculine proficiency in this respect... wherever this exists we find a forcible intrusion of the unconscious, a corresponding exclusion of the consciousness specific to either sex, a predominance of the shadow and of contra-sexuality...

- Jung, 1954b, para. 225

In her chapter on the 'Feminine Hero' in *The Presence of the Feminine in Film* (Apperson and Beebe, 2008), Jane Alexander Stewart analyzes the role of Clarice Starling (played by Jodie Foster) in *The Silence of the Lambs* (1991, Jonathan Demme, Director) as a "new heroic journey of the feminine" (ibid, p. 95). Clarice's story in the film begins with her lifting herself out of a chasm to stand at the top of the hill prepared to go forward. Stewart makes meaning of the scene in that "Clarice begins her story where classic stories of the heroine's journey end; at the return to ordinary life after the descent...from a metaphorical feminine center...a heroine making a return from the deep process of self examination and affirmation" (op. cit, p. 96). Though the context of her meaning making resides in the modern American landscape where "invisible killers haunt" her real message is not so much a geographical basis but an endemic fear of psychological and physical denigration of the feminine.

Not only do they fear men's attacks on their bodies but also they face denigrating social systems that reinforce a second-class status and devalue what it means to live through a feminine point of view.

-Alexander Stewart, 2008, p. 96

These dangers, horrors and defilements have been described and examined by both Kristeva (1982) and Douglas (1966) within a frame of prohibitions leading to abjection on a frame of incomprehensible fear for the dangers facing the feminine if it is not pure. With Clarice Starling we get a character who succeeds because she manages to claim and hold fast to, what Alexander Stewart (2008) refers to as “a set of feminine ethics” to “create hope for the safety of a feminine presence in our society” (ibid, p. 96). Clarice defies conventional wisdom on what is safe for a woman in a man’s world, by not behaving like a man who fears for his survival. Instead Clarice chooses to trust what the feminine has to offer, “her inner forces (for example trusting in intuition, in revealing herself and interacting on the level of intimacy)” (op cit, p. 99) traits that invoke fear for her and of her, a greater threat to her survival than Hannibal Lecter himself, including “searches for meaning from the way his actions make her feel” (2008, p.104).

Students in mythology find that when the feminine principle is subjected to sustained attack, it often quietly submerges. Under the water (where organic life began) it swims through the subconscious of the dominant male society, occasionally bobbing to the surface to offer a glimpse of the rejected harmony.

- Barbara Walker, 1983, p.1066

DISCUSSION

The feminine hero may be different from the heroine in my observations. The heroine comes up believing it is safe to be female because her nurturing early environment made it so. Throughout her development she does not cower at real life challenges, even those threatening her with domination and sublimation rituals (Benjamin, 1988). Whereas the feminine hero has had to learn how to have a relationship to her body, the root of having what Jung

called a Self (Plaut, 1998, p. 282). But as the feminine body can be interrupted through “punctuations” of menstruation, penetrative intercourse, becoming pregnant and breast feeding, rhythms resonating with vulnerability (Bianchi, 2012, pp. 39-40) it can take time to make or find a Self if it hasn’t been installed in early childhood through conducive social interactions (Zinkin, 2008), altering the lived experience of temporality. An unconscious relationship to her body difference from the masculine counterpart, including her vagina, womb, breasts and ovaries, may indicate her feelings are as an unknown aspect of self, therefore making her unavailable for relationship or procreative identity until how she appears to others, how she fears she will be used/not used, no longer betrays her loss of integrity through some kind of violation (Beebe, 1992), even one of abjection, but emerges in synthesis toward the primary task of finding integrity within herself. The dichotomous struggle to achieve equality in political, social and economic fields between the sexes only to abandon the struggle in the sexual realm only confuses the need to uphold sexual difference (Schaeffer, 2010, p. 139). In this dichotomous state are the ingredients for an individuation process: psychic-physical tension with the potential for a union of opposites. “Creativity springs from the resolution and the reconciliation of opposing psychic forces within an individual” (Seligman 1985, p. 83). This creativity is at the heart of the conclusion of the fairy tale feminist Jungian Analyst, Polly Young-Eisendrath (1984, p. 18) draws from in considering the ‘Story of Sir Gwain and the Lady Ragnell’ regarding what women really want: sovereignty over their own life. Here then lies the ethical methodological junction, where feminist inspired Psychoanalysis and feminist leaning Analytical Psychology join up to design a feminist ethos to access intra-psychic

associations and inter-subjectivity as a research model. The tension we are holding is when the body matters and when it doesn't.

Commencing with the gender neutrality of Merleau Ponty's (1968, p. 263) non-dualist understanding of corporeality as the body in an environment, later affiliated to feminist and post colonial thinking regarding critical potentials of phenomenology as embodiment and embodied experience (Simonsen, 2012), I seek to develop an ethical subjectivity in my methodology where the subjective and affective spaces of the body contain *living meaning* (ibid, p. 17). In this space action/lack of action is an ever-flowing both/and articulation of emotions "simultaneously passive and active" (op. cit).

But the bodies' situatedness in intersubjective fields and socio-corporeal hierarchies not only brings about incorporation and sedimentation, it also gives rise to personal experiences of fragility and vulnerability. The flesh is vulnerable to material as well as symbolic pain...The bodies are marked by others, such that the different bodies are recognized and categorized, disciplined and excluded. The relationship between power and experience draws attention to encounters with *different* bodies... Merleau-Ponty's idea of the social body as a body opening-up into the fleshy world of other bodies; for this world is not a general world of humanity, but a differentiated world...

- Simonsen, 2012, p. 37

Reflexivity as a way of being with affectivity is not limited to feminism or feminist topics, though it is perceived as central to a feminist research (Tickner, 2005). When inter-subjectivity and reflexivity have a central role, reflexivity becomes a sympathetic introspective self-scrutiny for self-analysis within the researcher (England, 1994, p. 82). As psychosocial research draws more from the consulting room, a researcher's reflexivity of affective states becomes a cohort in meaning making. But here the very use of the word *feminist* too easily

connotes the patriarchal line of what the feminine does that is different from the masculine, automatically *en-gendering* a predictive androcentric subject; research on and by the oppressed (Routledge, 2007; Barone-Chapman 2013b), underscoring why it is important for feminists to consider what knowledge is within specific contexts and circumstances (Harding, 1987; Stanley, 1990) Three questions underscore Wickramasinghe's (2010) *Feminist Research Methodology: Making Meanings of Meaning-Making*, a theorization of ontology to create an epistemology that is at once credible and suitable for feminist research at a time when new paradigms are emerging:

1. What are the 'realities' that are part of an impact on the research process?
2. How do they do so?
3. How should researchers engage with the implications of these 'realities'?

Wickramasinghe's makes a foray into gender through Immanuel Kant's situating ontology as epistemology and comes out the other side with multiple, *subjugated knowledges* (Foucault, 1980b, pp. 81-82) in order to counter positivist / empiricist paradigms. The foundation here is of a feminist epistemology or meaning making based on the premise "It is being / doing women, which gives women privilege knowledge about gender as a construct / concept (*savoir*)...and the interpretations of realities (though often contested) form the foundations for feminisms, feminist knowledge and meaning making" (op cit, p. 95). Being and doing is the essence of Jung's syzygy of masculine and feminine in union, similarly to Jung, Wickramasinghe brings holistic attention to meaning making through parallel forms of knowledge, including research that "is widely influenced by researcher's intuition, and is sometimes instinctive rather than a formal, theorized, methodological process" (Wickramasinghe, 2010,

p. 112). However, I found her definition of *feminist research methodology* drawn from the DNA of 'women's intuition' to be dichotomous against the clearly stated intent to give evidence feminist research methodology can withstand scrutiny from positivist /empirical quarters. Gendering intuition relegates it to a feminine stereotype, undermining the gender knowledge women researchers bring to the being/doing of women subjects. When feminist research methods attempt to hold a feminist line against the prioritization schemas of patriarchal epistemologies, some premises become a willing target for criticism against a history of epistemology where feminine intuition has been viewed as hysterical and irrational behavior (Appignanesi, 2008; Barone-Chapman, 2013b). Here then is one of the 'realities' I found in reflecting on Wickramasinghe 's three questions – can a woman do credible feminine feminist research without putting herself and her subject under patriarchal interrogation? To engage with this 'reality' requires a relationship to psyche capable of manifesting observable phenomena from the borderlands of consciousness, where the truth of image, perhaps of God, enables her to find for herself, what makes her desire for motherhood feel profoundly liberating. From years of examining her roles as daughter or sister unable to believe she could become an autonomous partner/wife and mother, she commences the very rudiments of feminist psychoanalyst Jessica Benjamin's (1988) project of reconciling inter-subjectivity with intra-psychic theory. In reformulating the classic Freudian Oedipal model of father-son dominance followed by revolt, Benjamin (ibid, p. 134) found "...the identification and closeness with the mother must be traded for independence; it means that being a subject of desire requires repudiation of the maternal role, of feminine identity itself."

“A complex...results from the blend of an archetypal core...and human experience particularly in the early years of life” (Samuels, 1985, p. 6). It is both these ‘complex processes of psychic development’ this research seeks to bring together – *is delayed motherhood a revolt against domination of the biological imperative to reproduce sooner rather than later?* This is an ethical question to do with non-normative sexual behavior, which is where Queer theory began its’ linguistic life before moving into gay and lesbian caucuses, then feminist politics and academic institutions, in parallel to rising awareness of AIDS (Jagose, 1996) before turning on gender itself as an encasement of an “oppressive system of classification – both heterosexuality and homosexuality ...as artificial categories (Young, 1992, p. 29). The ways in which identity, in particular gender identity is formed came under the purview of Judith Butler in *Gender Trouble* (1990/1999) and destabilized prior notions of subject formation through observation of the disparity between identity and performance. In Butler’s analysis of linguistic processes the conditions precipitating emergence (Entstehung) of a subject and their identity could not be reduced to a historical moment as fact any more than fabrication (ibid, p. 15). Queer is evasive. ‘Just what “queer” signifies or includes or refers to is by no means easy to say’ (Abelove, 1992, p. 20). ‘ Queer is ‘a relation of resistance to whatever constitutes the normal’ (Jagose, 1996, p. 99), the ‘open mesh of ...excesses of meaning where the constituent elements of anyone’s gender, anyone’s sexuality aren’t made (or *can’t* be made) to signify monolithically’ (Sedgwick, 1993a, p. 8). Queer as a theoretical and *non-predictive-performative* condition may be emerging as a new signifier of normative behavior. In this way Queer undermines notions of feminine, masculine and eclipses both the conflict and union of opposites, something Jagose (ibid, p. 107) describes as ‘holding open a

space whose potential can never be known in the present.' Yet, "the conceptual slippage in Butler's theorizing of subject formation has resulted in 'a lack of clarity [regarding] the capacity for action held by subjects relative to the power that enables their existence in the first place (Brickell, 2005, p. 28)'" (Morrison and Macleod, 2013). The use of Queer Theory and consideration of Butler's later elucidation of a "'third way' between voluntarism and determinism" (Cadwallader, 2009, p. 291) is as much about *reconceiving* agency (Dow Magnus, 2006; Morrison and Macleod, 2013) as holding an ethical position against attributing pathology onto women who discover the need for motherhood and partnership later in life. Thus we may be seeing the upside-down making of individuation in mid-life for women challenging the characterization Jung imagined as integrating the repressed masculine to make a shift from an identity centred upon dependence and accommodation as nurturer to one of agentic "embrace of one's own development" (Young-Eisendrath, 1984, p. 87).

SUMMARY

Initially I did not enter into the research fully convinced the topic of a *midlife pregnant pause* (Barone-Chapman, 2011) was a feminist issue. Rather my initial thoughts (Chapter 1) lead me to see how cultural complexes with hooks into personal complexes and the collective unconscious were getting in the way of a female adhering to a developmental aspect of an archetypal pattern. Through my clinical practice, I came to see women as struggling with "indigenous" cultural assumptions about their bodies being ordained for motherhood, extending a long period of adolescence while striving for accomplishment in the masculine world, coming to motherhood later than was considered the norm in personal, social and cultural contexts. I came to wonder if there might

be a reparative process at work the closer in age women came to embodying the “older woman” archetype of Witch/Crone. In looking more closely at feminist literature, written in the main by women, I also discovered in Freud and Jung similar problems with the feminine, at different points in their professional development. In feminist inspired literature, I found the body of the woman who had lost time during her most fertile years through conflicting messages between ego and self. In short, I came to see Jung and Freud as reproducing what has been long standing in civilization, the feminine split between denigration and idealization, and have used these theorist’s words as evidence of patriarchal privilege as the screen through which each man analyzed their female patients.

Freud’s method of studying and amplifying the content of the unconscious found focus on the patient’s personal history structured by manifestations of psychosexual history seen through concepts such as repression and repetition compulsion, which Jung referred to as the reductive method, preferring to concentrate on universal symbols of the collective unconscious to find primitive aspects of psyche according to the teleological principle where symptoms carry a symbolic function of meaning for transformation, thereby making it a prospective method; together their individual work forms a whole view of psychic life (McFarland Solomon, 2003). Yet both these backward and forward perspectives, one concretized and the other mythologized, were pre-occupied with the feminine in mutable and evolving expression, repression and emergent integration of the masculine, as the basis of bisexuality prohibited by 19th century culture and society, prompting a need to incorporate consideration of Queer non-normative performance and androcentric time into this examination.

Delayed motherhood in a biotechnology age is a pause out of time – requiring a non-pathos ethical position regarding non-participation in essentialist notions of feminine performance.

In feminist inspired analytic literature I found the body of the woman who had lost time during her most fertile years as context for lacking a relationship to the messages from her unconscious. It is my belief the work of Jung and Freud was the beginning of a longer work on the reproduction of misogynistic culture. In the remarkable findings of this extended literature review on women and gender I set out an ethos and epistemology to finding a research methodology that can bypass issues of power, control, defense, separation and repair. To achieve this I had to let the older mother speak herself, make associations to things she could not otherwise speak about, and to dream the dreams that might point the way. In the next chapter I discuss such a methodology for researching the unconscious.

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Chapter 4

Developing a Suitable Methodology to Research the Unconscious

*“But the troubling question for Jung was:
‘What was the psychic lesion or conflict
that led to the disruption in psychological process?’”*

~ Donald Kalsched, 2013, p. 257

INTRODUCTION

In this chapter, I will argue that researching the unconscious through dialogical means alone is insufficient for identifying complexes aroused through irrational affect within inter-subjectivity. The discovery of the unconscious emerged into modern clinical understanding with Charcot’s (1885) observation that hysterical paralysis originated as a split-off fragment with autonomous capacity to form spontaneous ideas with a disturbance that was separate from the ego and organized over a long period of time (Ellenberger, 1970, p.149). “Later, when Jung defined what he termed a ‘complex,’ he equated it with what Janet had called the *idée fixe subconsciente*” (ibid).

Methods such as Sentence Completion, Picture Stimulation, and Rorschach ink blots, rely on cognitive processes to stimulate responses in the hope of reading meaning through cognitively formed language. A method for reaching the unconscious must bypass the route of cognition to find the hidden feeling and associated memories within the network of associations behind the affect for it to produce person-centered research results. For the results to be authentic, affect must arise in a similar manner.

Initially I considered the Thematic Apperception Test (TAT) developed by Murray (1943) at Harvard University. The TAT relies on the sensitive observation, linking and interpretation skills of the researcher or clinician, and as a teaching tool in developing such skills the TAT may be excellent. However the reliance upon interpretation of responses to drawings 50-60 years old stylistically, interferes with the participant's personal frame of reference, on subjective and objective levels, due to a perception of society and culture in the stimulus drawings that no longer exists. While the mores and norms of 50-60 years ago will still impact current populations, the important difference between then and now is the rise of feminism, the role of women at work, in the home, and in partnering. Even the TAT methodology was dependent on the usual psychoanalytic frame of interpretation of affect, and still the affect around the research subject would not necessarily be seen without leading the participant into pejorative positions and calling them affective states.

Indigenous cultural assumptions about the female body, the feminine and femininity have been and will continue to be called into question. Suspicions have been aroused around the topic of resistance from both subject and object positions, through the lens of gender bias in culture. Since the early post World War II years, motherhood has evolved from a biological pre-emptive normative identity to a challenged concept. It has contained not only ambivalence in opposition to maternal pre-occupation; latterly it has been re-formed into maternal subjectivity. The idea of the 'perfect mother', let alone one that is good-enough, has become a minefield of uncertainty between women seeking comforts in groups with other mothers and the isolated mother who has difficulty feeling she is the right age to be among such a group. The problem of

delaying motherhood often leads to the use of biotechnology to overcome the secondary problem of aging.

Max Weber's (1947) depiction of modernity's de-mystification of objects in the world in favour of scientific ways of making life, applies to the subject of delayed motherhood as context to "a transformation of the collective psyche" (Jung, 1958, para. 589). Biotechnology in the form of IVF treatment may have become midlife's animism for the woman who is attempting to create and connect to soul by making life in a new way. I have defined my approach as drawn from clinical skills and techniques as a Jungian Analyst familiar with symbol formation and complexes on the premise that mid-life longing for motherhood is connected to the idea of being under a spell of dissociation from the self. "Jung's practice of psychotherapy posited a concept of possession by complexes and a principle of relatedness and intra-psychic equilibrium which answers to it" (Stephenson, 2009, p. 142). Whereas, "Moreno's model emphasized and accounted for psychosocial phenomena such as scapegoating as mechanisms which groups unwittingly exercise in the interest of reinforcing cohesion...locating the self externally...psychosocially in roles" (ibid). The method I will shortly discuss contains both these ingredients a means of identifying the source and nature of a complex and edifying its presence in psychosocially through amplification of how the role of mother becomes psychosocially performed.

However in seeking to learn what the connection is between delayed motherhood to personal and collective unconscious complexes, I began with a phenomenology replete with a high level of feeling toned affect on a subjective level first observed when I was conducting mind-body workshops with women

at a fertility clinic. I neither wanted nor expected participants in this research to tell me why they have delayed procreation. What I wanted to understand was if, where and how, a complex had formed that influenced their relationship with making a family by tracking their affective field. From a wide arena of relational inter-subjectivity through to stimulation of associative networks funneling down to where there is only the dream ego to observe, I wanted to understand how their experience of panic at midlife caused them to act with a reproductive response.

Jung (1934a, para. 210) considered the complex, not the dream (Freud, 1900, p. 769) as the *royal road* to the unconscious. The desire for procreation at midlife has an inter-subjective field between the individual woman and the collective culture in which she lives. Delayed motherhood is a powerful modern discourse since the discovery of the birth control pill and exponentially the advance of assisted reproductive technology (ART).

In seeking to learn the complex nature of delayed motherhood I have reviewed literature in Jungian and Psychoanalytical frames, explored the value of feminist writings in both camps and within psychosocial research where psychoanalytical thought has prevailed. In this exploration my attention has been drawn to the inter-subjective field, where projected unconscious contents form a relational dependency. This has aroused an interest in extending the dynamics of transference and countertransference phenomena from the consulting room into the research framework. Through the complexity of time, gender identity, and confusion, the etiology of delayed motherhood becomes more three dimensional, intra-psychically, relationally and culturally.

What interested me all along was the meaning and purpose of motherhood in midlife to the individual psyche as revealed on an affective level. I wanted to learn what the attending complexes might represent in the personal realm, and how these might be mirrored as cultural and collective unconscious complexes in parallel. Within this frame we are exploring a woman's unconscious use of her body during the period of a *pregnant pause*, with some kind of relationship, as yet unknown, to the biological pre-emptive role of becoming a mother in the age of bio-technological advancement. The female body may be the single most important evidence we have of where a culture places value, and in parallel how such value creates an affective field of inter-subjectivity in psychosocial life.

The methodology I was seeking had to be one that would allow the unconscious to speak for itself and be able to differentiate between personal, cultural and collective dimensions. I wanted to be able to see the unconscious without having to find it buried within narrative memory and discursive text. All complexes are part of the psyche and have three qualities – **a root** system indicating something in the past; **a nature** in how that affect is displayed; and a mode of **expression**, dependent on circumstances, that is 'negative' (shadow), 'positive' (hero) or 'bipolar' (a combination of both). What is important to keep in mind as you read the results is how complexes of the collective unconscious are not considered pathological unless they are connected to a personal conflict (Jacobi, 1959/1974). Throughout this research I will therefore be implicitly asking, *Is delayed motherhood a personal area of conflict with a connection to the cultural and collective unconscious?*

Understanding clinically and theoretically the root, nature and expression of complexes would not be enough. The subject of delayed motherhood has gathered cultural popularity. Many write about it as a phenomenon with little psychological appreciation for the epistemology and etiology of a gendered complex and the acculturated patriarchal license that has encouraged the root, nature and expression of the delay itself. Through the window of a complex, delayed motherhood contains a rich complexity of affects circling around, over time and changing through relationships. To view affective communication solely as a defensive operation (Zepf 2007, p. 106) misses the teleological purpose of habits, fears, avoidance, bodily symptoms erupting chronically or spontaneously, and in liminal space through fast and slow decisions, responses, and include those that hide within associative networks. To be understood fully, affect is a survival operation in the present with a link to the personal past, connected to a cultural context rooted in the archaic level of the collective unconscious.

As I will soon discuss and demonstrate (see Chapter 6), the more emotion is present in the file of memories and experiences, the longer it takes to make a connection to consciousness and return to equilibrium in the present. Affects, as unconscious contents, appear with a high feeling tone, ranging in reference from 'energy' and 'value', to 'imagery' and 'new consciousness'. Significant to our enquiry, affects demonstrate "...that causal connections exist between the psyche and the body which point to their underlying unitary nature" (Jung, 1954d, para. 768) and so "...every instinct is linked *a priori* with a corresponding image of the situation" (1954c, para. 602). Some affects have a "numinous – 'divine' or 'sacred' quality (Jung, 1937b, para. 448) because they raise particular

contents to a higher degree of awareness causing other potential conscious contents to return to the dark recesses of the unconscious. Affects constellate around the nucleus of a complex. This nucleus is theoretically associated to particular archetypes as a *symbolic* representation of the complex.

Affect, in the Jungian branch of the psychoanalytical family, is not limited to Wundt's (1902) understanding of affect plus ideation, nor to sensation and ideation linked via fantasy (Walkerdine, 2010), but to the invasion of feeling states that temporarily take over the ego of an individual (Samuels, Shorter & Plaut, 1986, p.11). When he wrote 'A Review of Complex Theory' (Jung, 1934a) Jung's ideas had developed further as he witnessed the sentinels of fear and resistance guarding the road that lead to the unconscious. It was only then that he understood why Freud first conceived the unconscious as filled with immoral contents that needed to be repressed (ibid, para. 212). Jung differentiated feeling from affect on the premise that we can have command of our feelings whereas affect is an intruder upon our will (op. cit.). Such moments find their character at any point in time when our adaptation is at its weakest, and may be exposed (Jung, 1934a). Affects can have an explosive quality as well as an imploding resonance, catching us off guard and taking over our understanding of our relationship to our inner and external worlds. These findings, from Jung's experiments with the Word Association Test, began to reveal a connection to mythological patterns that lead him to begin identifying motifs he referred to as archetypes. Jung's associative method was not the free associations of Freud's method, which in the main linked back to earlier points in life. Jung was interested in looking forward, in verifying the link between affect, association and a subsequent change in energy.

For instance, Jung never believed, as did Freud, all pathology could be reduced to a sex drive. He began to build his ideas of pathology along similar lines to Janet's view of psyche's capacity to dissociate, as well as a desire in him personally to reconcile religion and science through mythological ideas. Jung reconciled a form of anthropology over a lifetime of work through observing the patterns of *archetypes*. These unseen but felt images are viewed in Jungian lore as the nuclei of a complex, acting as conductors between the divine and their human form, such as Mother, Father, Sister, Brother, Child and in non-human forms such as Trickster and Shadow, to give depth to the nature of embodiment on a transpersonal level of experience.

We may also wonder if the *drive to delay motherhood until mid-life (35-50)* is a body of evidence of a female complex beyond the personal, belonging to the cultural and/or collective unconscious (Jung, 1928b, para. 590), an aspect of an a priori condition to resist the notion woman = mother, as a pre-emptive biological destiny in its own right, since the advent of technology. If the delay of motherhood has become so acculturated that the idea "becomes associated with the ego...felt as strange, uncanny, and at the same time fascinating...the conscious mind falls under its spell" (ibid) of the affects within a personal complex, which may have become hidden within normative gender performance identity. Differentiating the personal from the cultural and collective complexes is the substance of this psychosocial study on delayed motherhood through replication of a psychodynamic between inner and outer processes.

RESEARCH OBJECTIVES & QUESTIONS

My goal is to reach the objective level of psyche, through amplification of inter-subjective psychodynamic material and a network of associations unconsciously held in clusters of feeling and ideas linked to the dream as a portal to the unconscious, in order to learn how the trend of delayed motherhood may have been formed within the family of origin, culture and society and how this may be changing the notion woman=mother. Practically this means there are two primary tasks in this study:

1. To identify thematic complexes around this subject area and the relationship between the individual and the cultural and collective unconscious.
2. To demonstrate a suitable methodology for researching the unconscious.

The formation of a self is key to the enlarged idea held within the unconscious that “other” does not only appear in the personal realm, nor is it necessarily known by name in the present or the past. It can be taken up unconsciously as “culture” or “social” as an aspect of the long inherited archaic sub-strata of knowledge held in the collective unconscious. The purpose of this research is to discover through high feeling tone affective communication what may be influencing a woman’s desire for motherhood at a mid-life, as well as what tethered her from achieving it sooner.

On the basis of the above considerations, my thoughts developed as follows:

1. *What experiences, choices and unconscious processes preceded becoming a mother at midlife?*

2. *Can a child repair early affective states and serve a woman's need for adult relationship?*
3. *Can a child return a woman to a more youthful experience of her life?*
4. *Is there evidence of a reparative procreative identity at work?*

In time I discovered my own unconscious processes became more interested in broader questions and this list of questions turned into a frame of discovery, a lamp in the dark between my own considerations of a bio-technological solution for delayed motherhood and the realized solution for these 'other' women. Also in time I found feelings of gratitude for the way the maternal operated in my life to be able to have a distance from the object of my curiosity. All of this led me to a plural clinically informed methodology within a Jungian framework to discover how the "child" archetype induced transformation through the catalytic use of the Trickster archetype (see Chapter 6). While all of these questions are relevant I needed to find one that would act as the main question under which these others would follow:

5. *How to research a woman's unconscious use of her body (Pines 1993) when her mind and body has been acculturated to a process that has longed defined women as woman = mother (or daughter)?* This question became a synthesis of so many others that had been ruminating in me, such as:

1. Is delayed motherhood connected to a personal area of conflict?
2. What is the culture saying that cannot be expressed another way?
3. What archetypal themes and patterns are involved?
4. What happens to women at mid-life who have not yet conceived, to prompt a *pregnant pause*?
5. What issues come up around gender, "the feminine" and other?

6. What traumatic influences have been split off and are attempting to re-integrate?
7. How has relationship to a partner affected a delayed motherhood?
8. How does motherhood at mid-life affect self-esteem, identity and a conscious relationship with the collective?
9. Has the production of a child at midlife healed the totality of the self?

A woman's relationship to the personal and the collective is an exploration of factors invoking a double imperative: a woman's rising desire for motherhood at mid-life against the biological pre-emptive role of motherhood and how it may have changed in an age of biotechnology. Implicit is the cultural status of mating and partnership vs. autonomy and independence, and whether children are a natural outcome of a primary relationship or if their status has eclipsed adult relationship relegating children to an acquisitioned status.

Ideally, what I was looking for was one question that would encompass my goal of identifying thematic complexes while demonstrating a suitable methodology for researching the unconscious. Along the way, I wanted to be able to discover participants' relationship to the biological pre-emptive role of motherhood and how it may have changed in a bio-technological age when the cultural status of mating and partnership was in flux. On the weight of my discoveries the meaning and purpose of late motherhood came to me as one question:

***Research Question:** Is delayed motherhood connected to a personal area of conflict and if so what does it reveal about cultural complexes and those of the collective unconscious toward womanhood?*

Background:

Jung heavily weighted the analyst's "own hurt that gives him the measure of his power to heal" (Jung, 1951, para. 239) rather than a "clean hands" perfection. Invoking the myth of Asklepios, or "wounded physician" as a healer with an incurable wound, required a deepening of the CT as the mediating healing power. This would mean CT became both a symptom of the patient's transference as well as the unconscious *transferring* of the patient's symptoms to the analyst (Jung, 1929, para. 163-164). Jung suggests it is the destiny or fate of the analyst to be psychologically infected by the patient (Jung, 1946, para. 365) and this should be expected. The archetype of the wounded healer, in Jungian terms, is the activation of a parallel wound in the analyst she is able to work through, which gives her the method by which to interpret (speak/heal) the patient (analysand). This is how Jung came to emphasize the analyst's vulnerability rather than clean hands perfection, in order to deepen the countertransference. "It is his <her> own hurt that gives him <her> the measure of his <her> power to heal" (Jung 1951, para. 239. By invoking the myth of Asklepios, Jung weights the analysts' connection to her own wound to mediate the healing power of bringing unconscious contents to consciousness. Not only is it an empathic response, it is an acute awareness of the way in and through the abyss of painful unconscious contents. I take into this research all my attempts to remedy delayed motherhood through bio-technology only to find an abyss of life and death experiences later redeemed through my own training analysis that was able to transcend the literality of life and death. That is why I have chosen a research model that most closely 'mimics' the metabolizing processes of the consulting room.

My interest in the unconscious originates in the journey of my own analysis in preparing to become a Jungian Analyst and later working with patients, who have taught me how difficult it is to know the unconscious in isolation. A relation to *other* is necessary as a catalyst to awareness of one's inner being, which over time can lead to relationship with the self. While this certainly suggests a constructionist view of psyche, a developmental perspective is only part of the material I will be working with. To work with another human being's unconscious has required a conscious relationship to my own feeling-toned affects within the inter-subjective space of receiving in order to perceive the affects of another. These affects are referred to as *transference* and *countertransference*, and they demand asking "How is what I am feeling related to how the participant is feeling?" as a way of reflectively using myself to see into the subject. The Jungian approaches to countertransference (Sedgwick, 1994) originated from Freud's (1917) theory of identification in which "how the apparently isolated subject constantly assimilates what is outside itself...[not seeing how it] casts a shadow in two directions" (Benjamin 1998, p. 79). It is mainly concerned with the ego's duality to at once identify with the other while denying the uncontrollable nature of otherness with a concomitant need for recognition, which arouses simultaneously the feeling of being negated (ibid). "In his descriptions of analysis as a 'dialectical' or 'reciprocal' process between equal parties, Jung...[likens] the combining of two chemical substances... [to]...the alteration of each element and the creation of a new third compound" (Sedgwick, 1994, p. 12). A Jungian analyst expects to be infected by the patient, and to apply this same principle to a research method means there needs to be a similar chemistry of attraction/repulsion between researcher and subject in order to identify with the felt lived experience of the participant.

THE METHOD

Based on the Research Question listed above, I developed a three-layered funnel approach designed to access the objective psyche. Phase 1 methodology began with a semi-discursive instrument, *clinically informed* Interpretive Phenomenological Analysis (IPA; Smith 2003), by deviating in the interpretation of the data by including a clinically informed inter-subjective dynamic of transference and countertransference phenomena. Similarly, the work of Wendy Hollway (2000/2013), well known for doing psychosocial research differently, interested me a great deal with her (2010) research, 'Conflict in the transitions to becoming a mother: A psycho-social approach' not just because she concentrates on the move from singular identity to maternal identity in becoming a mother for the first time. Though Hollway similarly borrows from a reflexive method originating in the analytical / psychodynamic consulting room to reflect on what the other is 'doing to me' as a way of revealing what is happening for that other, the method of interpretation is dissimilar. Hollway's aim in using the affective field of inter-subjectivity is to demonstrate its corresponding relationship to individuality with the data primarily drawn from what is said. Whereas in this research clinically informed IPA has been designed to allow the participant a space to transfer and induce in me an experience of what Freud (1914, 1920) referred to as a *repetition compulsion*, to an *experience* of what she experienced in her life. In other words, insight into a repetition compulsion is primarily based on the hermeneutics of suspicion that how the participant uses me is a route to how they may have been used, and so does not rely solely on discourse alone. Behavior matters as well. In this study I interpret this experience through a process of amplification to discover how inter-subjective dynamics were aroused and perpetuated over

time to become complexes in one or more of the three spheres of personal, cultural and collective existence.

Complex-episodes are stories of difficult dysfunctional relationship episodes that repeatedly occur in similar ways, consisting of comparable information, in particular about the self-image of the child and of the attacking persons, connected with the specific emotions experienced in these difficult relationship situations. They concern relationship experiences that have occurred repeatedly and they are internalized with episodic memory.

-Verena Kast, 2014, p. 684

Once the participants were grounded in the research experience in Phase 1, I invited them to participate in Phase 2, where I employed Carl Jung's Word Association Test (WAT; Jung, 1904-1909; Meier, 1984) developed in 1904, bringing Jung to the attention of Sigmund Freud who declared the method as proof of the unconscious. Though a seemingly "retro" methodology, the WAT has shown itself to be sensitive to the feeling of mental states when a participant is stimulated by a simple word or phrase. This simple word or two has the capacity to draw the participant's attention from the task of 're-membering' to the task of accessing a file of all relevant associated and affect laden information necessary to engage with the stimulus word as if it were an activity in the present time, yet without regard for how long it takes.

In Phase 3 participants were asked to keep a dream journal in the week before and after taking the WAT. The profound difference between Jungian approaches to dreams and a Freudian approach has to do not only with a different perception of the unconscious but how the dream is read. This difference may be summed up in "the wish for transcendence" (Beebe, 2003, p. 3), a life-long goal of Jung's to cross fertilize opposites, to find a *transcendent function*, such as might come from a union of spiritual reality with the

“empirical reality of life...[that] together forms a whole...” (Jaffe, 1970, p. 21). The “wish for transcendence” (op. cit) is the way through, not out of, the tension of opposites, to create the third, which has led to the design of a three layered method congruent with the three tiers of a complex (Jacobi (1959/1974).

RESEARCH COMPONENTS

What makes some women want babies when they are more fertile while others prefer to wait until their fertility is on the eve of disappearance appears on the cultural horizon as a tension of opposites between adherence to traditional female roles and modern emancipating influences, made possible through biotechnology. The more agency and autonomy that is consciously available to a woman, the more non-uterine activity takes precedent in conscious thought, where time is of less concern. How each woman negotiates individual needs in the present against anticipated but unknown future events creates space for new expression within gender norms. From this consideration the methodology I have utilized has the capacity to explore what the horizontal plane of socio-biological culture can tell us about the vertical plane of the collective unconscious.

Participants

PROFILE: Women who identified with the idea that they came to desire motherhood late in life, some after many attempts to conceive, with or without some form of Assisted Reproductive Technology (ART).

The eight women who participated in this research were in the age range of 36-52, with one woman who became a mother at 31 believing she was *delayed* in comparison to her peers. The recommended participant size for a study using Interpretive Phenomenological Analysis (IPA) is 6 participants to prevent the data from becoming unwieldy (Smith, 2003). I extended the participant group to 8 to allow for a 20% rate of drop out, given the highly affective field that can remain around the topic of delayed motherhood for some time. It must be noted that not all the women could afford ART privately, and their inclusion in this study represents a cross section of participants with means and those without. This economic feature points to future policy implications that will be discussed in Chapter 8 in Concluding Thoughts.

Therefore, the women varied in class, education and professional background, the majority was white, except one who was of mixed race. Only one was non-British, an ex-pat from a former British colony. During the almost 3 years it took to conduct the research the financial status of many of the women changed from better to worse, and vice versa. Not all of them had been powerful, workingwomen with great ambition. Some had higher education, some had none and only one had achieved a doctorate. Their occupations were chef/estate agent, corporate librarian, and bookkeeper, catering manager, interior decorator, journalist, corporate scientist and university level academic. They were all able to reflect and feel something about their delayed motherhood. I have chosen to assign the formal title of "Mrs" (e.g., Madame, not Mademoiselle), whether they were legally married or not, out of respect for their dedication to establish a family and function in a role where they could care for someone else. The formality of such a designation is within the tenor

of analytic literature. But also there is the matter of how birthing a child has, since antiquity, assigned a woman with a new status in passing from maidenhood to womanhood. Some were married and some were not. By assigning the same title they occupy a level identity field of maturity, if not marital status. Their real names have been concealed for privacy purposes.

Three of the original eight participants were cohorts from my research for the ward of MSc, where I investigated repeated use of ART in relation to primordial affects and meaning making (Barone-Chapman, 2007). One of these women, Mrs K, had dropped out of my MSc study quite early in the process, because after 12 IVF attempts to conceive over ten years she could not tolerate further discussion of her drive to conceive at all cost. Though she was able to participate in Phase 1 of this research, feeling ready to talk about becoming a mother after having twins six years prior through egg donation and surrogacy, she was unable to continue to Phase 2 on the WAT. This was due in part to her lingering doubt she had done the right thing in waiting so long for her much younger husband to mature sufficiently for them to have a family. The other two women from my published research on repeated use of ART (*ibid*), Mrs L and Mrs C, had children who were approximately 7 years of age at the time of our re-acquainting ourselves and offered invaluable longitudinal information on the journey from the sudden onset of wanting/needing to have a child, to the reality of becoming a mother.

Other participants in the study were found through the help of the Cardiff University School of Social Science student, faculty and staff network. The bulletin described the research as a “study of delayed desired for motherhood in

mid-life'. Four women responded but only two were appropriate, Mrs An and Mrs N. Interestingly, as both these women came through associations to Cardiff University they shared a history of difficult relationship to partnering, and despite these chose to stay in relationship in order to have a family. Mrs An, a bi-sexual, put a lesbian identity on hold in order to function as a bisexual partner and mother. Mrs N, who struggled with having enough household income due to her work reluctant partner, chose to have a second baby between Phase 1 and Phase 2 research segments. Her first child, a boy with some disability had challenged Mrs N in her ability to remain buoyant with the physical requirements of this child. Her second child, a girl, I discovered, repaired the wound there was something wrong with her if she could not produce a normal baby.

Three other participants came through various avenues. I met Mrs Lu when she was a patient at The Bridge Fertility Centre in London where I conducted mind-body workshops in 2005. Mrs Lu went on to have three natural pregnancies, without ART, after the workshop. A seventh woman, Mrs. S, later attended the same Masters of Science program where I had received my MSc., contacted me regarding my published research on repeated use of IVF to tell me about her four attempts at IVF and that she now had a son. Her expressed interest in this research subject, combined with an interest in Jungian psychology having had a lengthy analysis, prompted me to ask if she was interested in participating. Mrs. S was by far the most devoted to her participation in the research as a process of her own self-discovery. In contrast, Mrs A, though she never seemed able to become pregnant was not too concerned about having children until she married in her mid-40's to a long-

time beau, with whom she had an on/off relationship for several years. She discovered she was pregnant at almost 45 years of age, six months into her pregnancy. The child was conceived naturally, with a partner that believed if it was meant to happen, it would.

There was some drop out and/or non-performance when it came to Phase 2 of the research, which I believed had to do with the large affective field around The Word Association Test (WAT). Mrs K who was able to participate in Phase 1 was too frightened to continue with Phase 2, consistent with her longstanding self-doubt throughout her long reproductive journey, no longer overwhelmed by hope and despair but by the decision to delay. She had been present at the birth of twin boys through surrogacy to cut the umbilical cord. Married at 37 to a man several years younger, Mrs K had been self-contained for a long time. She didn't have anyone really close to her that she could speak to "like this." In thinking about all she has been through, only to find that she and her husband have grown apart since the children came along greatly saddened her. "The one thing we really wanted is now having this effect on the relationship. It has that effect on everybody's relationship to a certain extent." Her feeling sense of motherhood is that a woman has to be prepared to do it on her own because her experience has been that her husband has to work harder to keep it all going, the schools, the help, the house, the holidays. Mrs K in retrospect realized she didn't get the relational aspect of motherhood by being part of a group of other mothers who are/were her age. The mothers she knows are much younger or much older. She spends more time with the boys than her husband does and she can see he feels left out. By the end of the Phase 1 semi-structured interview Mrs K felt isolated in her role as the 'hands on mother' while her

husband lead a separate life around work. Family holidays are scheduled around trips to far-flung places far in advance.

The idea of the WAT also proved to have too large of an affective field for Mrs Lu. Mrs Lu was a very busy self-possessed woman who put her three daughters first, with a partner who adored her. When I contacted her to see if she wished to participate in this research she readily agreed as she felt she had been a successful patient at the fertility centre. In due course she was able to conceive naturally three times using the techniques she had learned in the mind body workshop. In reviewing the transcript of her Phase 1 semi-structured interview I realized Mrs Lu had suffered greatly when her father died as a young man and mother went on to marry again. There was the feeling mother wasn't really available to her as a young child attempting to become an adolescent. Mrs Lu began the interview speaking about her journey to becoming a mother through her mother's advice at a young age never to have children. Only to add, but if she did have them to make sure she had done everything she wanted to do first. I felt mother had raised Mrs Lu's generative anxiety to the point where Mrs Lu thought she was being a good girl by not having them until it was almost too late to have them. Mrs Lu believed motherhood has defined a 'role' for her. She described her annual weekend get away with her husband to bring on a loss of identity and felt out of sync with herself. "I am a mother and that's what I do." When I asked Mrs Lu how motherhood had affected her relationship she said it had taken over, because "I definitely don't give enough time to my husband because there are other people who are more needy just because of their age and still quite young." Mrs Lu couldn't quite describe, outside of motherhood providing her with a role, what it's done for her, except providing a sense of

purpose and love in her life she doesn't think she would have ever had without becoming a mother. Though she and her husband are described as having a strong bond she notices they are not as close as they once were.

When it came time to schedule her for the WAT, Mrs Lu kept missing the appointment thinking it was to happen at another time. She made three attempts to come in to do the WAT. On the third try she came on the right day but two hours too early. This proved to be too frustrating for her and she declined to participate further.

I keenly felt the loss of participation in Phase 2 with the absence of Mrs K and Mrs Lu. In reflecting on their premature foreclosure as an unconscious process to take reparative redemption from a well of shame coming from early generative anxiety to please their critical mothers was impossible for them to consider during the interview. For both participants there had not been an experience with the maternal where it had been possible for them to recover and find some acceptance for their big feelings. Unconsciously I think these women knew the WAT had the capacity to activate/re-activate whatever complexes they had kept under ground, about their inability to maintain close relationships. Thus the relationship with a partner emerged as a catalyst to putting them back into the early, often difficult relationship with mother.

Other phenomenon around the Phase 2 WAT included Mrs C cancelling three times on short notice before attempting to re-invent how the research was conducted soon after arrival on the fourth scheduled visit. Mrs L was also absent minded about when the WAT had been scheduled and could not keep

up with the thread of emails to confirm, though she did arrive on the right day, albeit thirty minutes late.

The participants Mrs N (37) and Mrs A (44) had both suffered loss of parental presence while quite young. Though they both participated in Phase 1 and 2, the data was incomplete in Phase 2 as they could not keep dream journals, and abandoned a portion of their participation. In consultation in supervision, a review of all eight participants' material, I elected to focus the reporting of this study to the four whose full participation had been completed after discovering this would avoid duplication of similar material. This meant I would be reporting on four cases instead of six though I had gained crucial information about how the women who had dropped out or had not fully participated had not, on reflection, been held by their partners while they were learning to contain their new born children.

While each of these women had a different trajectory toward delayed longing for motherhood, the delay aspect of their story is as relevant as their experience of becoming a mother in relation to the affective fields and association networks that will be presented in this research (Chapters 5, 6, and 7). I have purposely chosen women who have become mothers despite the delay, to learn if a baby had healed the inner drama at the core of the delay, as part of a collective healing on infertility where the percentage of success in women over 40 is 22% and lower. To study the unconscious processes of delayed motherhood, we need to find the residue of affects from the delay and what, if anything, has changed with achieving motherhood.

Ethical Issues

An application for ethics approval for Phase 1 of clinically informed IPA (Interpretive Phenomenological Analysis), with attending support material, including the Semi-Structured Interview Schedule and sample invitation letter (Appendix 1) was submitted to the Ethics Committee in the School of Social Sciences at Cardiff University. It was approved with only one caveat, which was to provide some back up support for participants should they become overwhelmed at any time, since the subject matter was felt to be potentially highly arousing.

It was not the intention to purposely arouse affects within this research, but to see where and how they naturally emerged. However for many of the women who become successful in achieving a full term pregnancy in mid-life there is a trail of losses, terminations, and miscarriages filled with hope and disappointments. The unborn child poses a different mourning challenge than the lived and prematurely deceased child as the former never was never fully born except in the mind's eye of the woman carrying the baby. I anticipated the discussion, for some women whose journey into motherhood was delayed, could trigger painful memories. These affects are both relevant to the mourning process and the research. As a fully qualified UKCP and IAAP registered Jungian Analyst and Psychotherapist I work with affects such as these in my professional capacity. As a researcher, I bring a sensitive and empathic ear to this material and could wait patiently for a participant to either carry on speaking or suggest that we pause for a break or stop completely. Every participant was informed of their right to opt out at any time, as stated in the confirmation letters (Appendix 1.3, 2.3). For any woman whose painful

memories become aroused at any time and who wished to talk about these in a therapeutic environment, I had two fully qualified Jungian Analysts on standby, willing to see the participants without taking a fee.

In the second application for Phase 2 research for Ethical Committee approval (Appendix 4) eighteen months later, I submitted similar documentation to support my use of the Word Association Test with Dream Journals to be kept in the week before and after the WAT. The methodology was also approved but again with one caveat. The Ethical Committee asked me not to cite the WAT as “Carl Jung’s Word Association Test”. While it felt strange to discover the founder of something called ‘complexes’ could not be associated to his proprietary method, the Word Association Test, designed to identify the object of my investigation, I respectfully removed his name through gritted teeth, as there had been no explanation or reason given for the request. Participants did not notice its absence in the same way I did. What I resolved in myself was to ensure the writing up of the thesis included Jung’s name so there would be no question which associative method I had was using.

Data Collection

Following initial telephone or email contact with their agreement to participate, all cohorts received the letter I had prepared for Ethical Committee approval (Appendix 1.3) setting out the nature of the research, that the research had been approved by the Cardiff University SOCSCI Ethics Committee, and what the research was about. What had been done for Phase 1 was repeated but modified for the specific methods of employing both the WAT and the dream journals, for Phase 2 (Appendix 2.1 Expanded Ethics Application).

The Interview Schedule (Appendix 1.2) endeavored to draw out what was behind the delay in becoming a mother and to see how this might relate to impressions of acculturated expectations that were either attempting to be met or refuted, consciously or unconsciously. From the literature and notes I was gathering to build the theoretical case for this research I organized a semi-structured interview of how the subject matter might evolve around topical areas that had begun to arouse my curiosity, as I have demonstrated through hunches and questions that were developing for me in the build up to an emerging methodological position. To prepare the semi-structured interview, I drew inspiration from the organization of attending literature I was gathering for the first three chapters, as well as notes to myself, to create an outline of topic areas that would endeavor to draw out the feelings around late desire to achieve motherhood suddenly at midlife and what the experience of motherhood now meant to the cohorts. Five topical areas, with two to three questions opened up areas to do with: Conception – Child & Self; Transition – Personal, Relational, Cultural; Identity; Temporality; Experiential; and Meaning Making in an attempt to elicit responses on the processes that lead to a delay in the experience of making a transition into motherhood. In effect, my position was not to know the answers or offer interpretation, but to stay with them in the not knowing what the delay was about until they turned the corner and began to piece together affect, memory and other reflections that would develop into their own myth making on what had made them feel the delay was necessary. Their stories would prove they had not *felt ready* to transition into motherhood. What did it mean to be ‘ready’?

The interviews, tape recorded with each woman's permission, took a little over two hours with a tea break. Five interviews were conducted in my office for privacy with tea and biscuits, as required. Two were conducted in a classroom in the Glamorgan Building housing the School of Social Sciences (SOCSI) at Cardiff University. One was conducted in the participant's home at her request. One of the participants wanted to return for a follow up conversation, and this was recorded with her permission as part of the discovery process. A graduate school secretary in the School of Social Sciences at Cardiff University transcribed all Phase 1 interviews. I read the transcriptions through whilst listening to the tape recordings for accuracy and made the necessary changes. Transcripts were then printed out on A3 paper as a work sheet with three columns set out to one side of the text with the following headings: Affects, T/CT-Inter-subjective Field, Super Ordinate Themes. From these transcripts I was able to identify affective communication and super ordinate themes that would reveal if a pattern was present across the cohorts.

Phase 1 – Clinically Informed IPA

The methodology began with a semi-discursive instrument, Interpretive Phenomenological Analysis (IPA; Smith 2003), but deviated in the interpretation of the data by including a clinically informed perspective of affect, transference and countertransference phenomena to reach the discovery of super-ordinate themes. I am using the term 'semi-discursive' because affect is not limited to words within discourse, but also includes the way in which participants treated their own material, and me as the 'other'. In this Phase I of the study, I explored the unconscious processes, individual and collective complexes, made up of images and ideas, tending to gather emotional tone

around each participant's journey to motherhood with a Semi-Structured Interview Schedule, with subject areas in an order that would allow answers to unfold (Appendix 1.2). From previous experience with IPA (Barone-Chapman, 2007), I learned the importance of going slowly through the schedule to elicit memories and feelings as well as allowing time for reflection. Any and all surrounding personal history needed space for *re*-discovery and *re*remembering processes necessary for participants to feel into what the delay and longing was about for them, as reflexive participants. What meaning a woman gave to having a child later than her peers and how that meaning was related to and felt once the experience of becoming a mother had been realized, occupied most of the interviews. In my wish to go beyond a reductive view of participant history, easily taken through biographical and autobiographical methods, I began the research with a targeted yet open question; *tell me about the journey of your becoming a mother.* **During the interviews I made notes to myself and after the interview I reviewed these to record some process notes on how I felt during the interview with each participant. In effect these notes also formed a portion of the data collected.**

Professor Jonathan Smith is credited with the development of Interpretive Phenomenological Analysis (IPA). Some of the topic areas Professor Smith has advocated for IPA have been psychosocial aspects of health, life transitions and identity. Interpretive Phenomenological Analysis has earned a place as an analytical tool in health psychology literature (e.g., Chapman and Smith, 2002; Swift and Wilson, 2001; Flowers, Marriott and Hart, 2000; Rhodes and Jakes, 2000; Smith, Mitchie, Quarrell, 2000; Golsworthy and Coyle, 1999; Breakwell, Hammond, Fife-Schaw and Smith, Eds, 2006; Smith, 2003). I have previously re-

deployed IPA with Professor Smith's supervision, using similar deviations (Barone-Chapman, 2007).

IPA was chosen for this study above other semi-structured qualitative methods because it aims to discover the subject's in-depth felt experience as well as the *meaning and perceptions* of that experience recognizing that in the process of the exploration thoughts and feelings might change or be discovered. As such, it is a dynamic process between participant and researcher, akin to the therapeutic alliance where the researcher (analyst) seeks access to the participants' personal world through the researchers' (analysts') own sense making process of interpretative activity. In effect it is what Smith (2003) would call a "double hermeneutic", in that both subject and researcher are trying to make sense of the subject's world, a parallel to the consulting room.

Psychodynamic explanations for the unconscious processes contributing to interactions would be utilized as the stance for interpreting the phenomenon of participant's experience and views on that experience. This position means that the hermeneutics of suspicion are employed to a greater degree than simply taking the subject's side in understanding what the experience is like. It involves asking what the participant may be saying indirectly or unconsciously and for such evidence to appear with enough frequency that a pattern or trend emerges. This process also involves linking while analyzing the transcription in terms of observations, interpretations and themes to establish what if any super-ordinate themes existed and how these compare among the set of cohorts.

The Analysis – Clinically Informed IPA

I proofread each of the transcriptions by listening to the tapes as often as necessary to arrive at the most accurate transcription possible, making any changes necessary until it could be finalized. Identifying names were changed to pseudo-names.

All eight interviews were analyzed using a bespoke form of clinically inspired interpretative phenomenological analysis to include transference and counter-transference phenomena (IPA; Smith, 2003). As part of the Jungian analysis protocol described earlier in this chapter, the emphasis on affect and transference, and counter-transference phenomena was a way of seeing into the felt experience of the participant. Detail was taken up with line-by-line notes to do with these observations in aid of developing super-ordinate themes. This position means that the hermeneutics of “mirrored affects” were employed to a greater degree than simply taking the subjects side in understanding what the experience is like. It involves asking what the participant may be saying indirectly or unconsciously, what the researcher’s affects are in parallel and for such evidence to appear with enough frequency that a pattern or trend emerges. This can give the researcher a sense of something going on that the participant might not be aware of. Patterns within a single transcript of observations, affects and interpretations of what the participant was saying, inter-personally, were identified if there was sufficient frequency to establish whether super-ordinate themes existed. These were then cross referenced across all eight transcripts to learn what this could suggest as a pattern for a collective of women in Great Britain between the ages of 35 to 52 regarding delayed motherhood.

In employing a clinical Jungian Analytical position, within IPA, I am doing IPA differently than Professor Jonathan Smith originally envisioned based on an extended psychoanalytical understanding of the 'felt experience of a double hermeneutic' but which he greatly endorsed both in private supervision as reflected in the award of a distinction on my masters thesis. What remains true to his original vision is the structural process of three levels of analysis in aid of finding superordinate themes that run across the stories of all participants.

Here I began with three columns to the right side of the transcript printed out on A3 paper. In the first column I made note all of all affects I had observed. In the second column I focused on the inter-subjective space of transference and counter-transference. I sought to discover what was being pushed into me and what my subjective feelings told me about their emotional state. In effect I was operating as a mirror of the participant's affects. Transcripts were read 5-10 times and analyzed line by line. The initial read of the proofread transcript involved notating anything with any degree of potential relevance or consequence. In the second column an initial level of interpretation developed after several reads following on from their affects and phenomenon in the inter-subjective field. These emerged into superordinate themes. Each transcript held these themes uniquely until all the IPA analysis could be completed and crosschecked across the cohorts for emerging themes related to the whole of the story of the research. The ultimate goal was to produce a set of super ordinate themes (Chapter 7).

Each transcript was analyzed to discover what super-ordinate themes were present. This began with numbering each line of text and applying these to any

write up of the material where a participant needed to be quoted, and wherever her words served as testimony to her experience. These line numbers developed into a system of cataloguing the 'testimony' according to initial/line/page number and possible interpretation. These 'citations' and interpretations were useful for keeping track of how stories shifted and turned (see Chapter 5). When all the super-ordinate themes were identified from each transcript they were ready to be crosschecked among all the cohorts. Only those themes shared with at least three other cohorts were put forward into the Findings (Chapter 7) of Super-Ordinate Themes. From this analysis a final dynamic thematic picture was developed, awaiting the results of the next phase of research.

Phase 2 – The Word Association Test (WAT)

Freud says that the dream is the via regia to the unconscious¹, but in word-association test we have an easy and simple method of reaching unconscious or partly unconscious constellations, and not infrequently, in actual practice, one clue thus obtained has sufficed to render possible the un-raveling of the whole pathogenic complex.

- C.G. Jung, 1919, pp. 234-235

The Word Association Test (WAT) (1904-1906) brought Carl Jung to the attention of Sigmund Freud who declared the method proof of the unconscious. Through the use of the WAT (Jung, 1904-1909; Meier, 1984) Jung found the basis upon which unconscious complexes could be identified as split-off psychic fragments existing semi-autonomously. As a psychological instrument the WAT bypasses rationale consciousness to more genuinely reflect what happens between two people engaged in dialogue, rather than an interview with questions and answers formed in sentences (Jung, 1934a).

Over one-hundred years later, Carl Jung's Word Association 'method' has continued to be considered into the 21st Century on diverse research topics such as cognitive processes in implicit learning (Shin, Lee, Han and Rhi, 2005); re-examination of complexes forming outside of biographic conditions (Petchkovsky, Petchkovsky, Morris, Dickson, Montgomery, Dwyer, and Burnett, 2013); and measurement of changes in patient's initial complex set up in psycho-therapeutic work (Vezzoli, Gressi, Tricarico, and Boato, 2007); and Jung's work on word association in psychological approaches to schizophrenia (Silverstein, 2014).

All the participants from Phase 1 One readily agreed in principle to participate in the Word Association Test following their initial participation in this research. But the length of time between Phase 1 and Phase 2 turned out to be six months longer than first forecasted due to the analysis of Phase 1 taking longer than I had anticipated. I knew I needed to have a thorough understanding on Phase 1 analysis before engaging with Phase 2 on the WAT, so that I could be prepared for the likelihood of highly affective reactions to the stimuli. Initially I was concerned the participants would lose interest over this time, but I only had a 20% fall out rate. With those able to continue, the gap period between the two phases of research appeared to mimic the nature of a complex to do with time collapsing, such that eighteen months felt like a minute, whereas in their responses on the WAT, sometimes just a few minutes could feel like hours.

The WAT consists of 100 words (Appendix 2.1) many as short one or two word forms to which a participant makes an association while the time taken to make

the association is measured by a stop watch within a tenth of a second. The organization of the 100 words is segmented as the first 50, and the second 50, to determine the median time within each group in order to gauge a measure of response times overall.

The procedure of eliciting associations to the 100 words is conducted in two rounds. The first round established the associated word. The second round measures whether there has been a successful recall of the first associated word and over what length of time, above the median. Other complex indicators such as stereotypes, false reproductions, problems of hearing, comments made, are also noted as well as whether the participant tired over time. Results from the test are merely the *reaction disturbances* spontaneously revealed through the lapse in timed responses to a word, misunderstanding of words, falsification of memory, stumbling over words, changing the answer, playing with meaning, contrariness and responses that are meant to be rhymes or opposites, such as 'white' as the response to 'black'. An example of the full Word Association Experiment, as undertaken by "Mrs Sidney" can be found in Appendix 4.

The 100 words originally chosen by Jung were changed from their original German into English. The translations were taken from Vol. 2 of Jung's Collected Works (1904 – 1906, para. 440) translated by Leopold Stein in collaboration with Diana Riviere, which Jung would have approved prior to publication. **In preparing the list of 100 words for a worksheet to be read aloud during the WAT, I repeated two versions of the emotion 'fear'. On one line I had the word "fear" and further along its corollary, "to fear." This was not totally down to human error, but my own unconscious fear that I might**

not be able to get the co-ordination right between the left hand to mark the time while the right hand was starting and stopping the stopwatch I had bought for this purpose. My own fear about getting this procedure right well in advance of conducting the WAT, interfered with my accuracy in recording the words correctly, and could have been picked up later by the participants as their fear, to create a double helix of fear. This anomaly demonstrates both the significance of unconscious processes in the production of test results and the inter-subjective realm between self and other.

Running the Word Association Test was done twice with a 20-minute break between the first 100 words and the second 100 words. In some uses of the WAT the break can be an hour, a few days or a week. I chose 20-minutes based on participant's time availability for this research. In the first part the researcher asks for the first word that comes to mind, without reflection, noting the response and any non-verbal reactions. **Reaction time is measured by starting the watch the moment after speaking the stimulus word.** If the person starts to answer, and the researcher stops the watch, but the person starts again, the researcher doesn't change the watch time, but notes the additional factors.

The WAT involves registering responses and timing reactions to these 100 words, pausing for a period of time, in this case 20 minutes, and repeating the 100 words to measure accuracy of memory and the presence of complexes again. From these second measurements of time and other reactions, the time is translated into fifths to find the median number of words where there are as many response times above as below the median. The median is calculated separately for words 1-50 and 51-100, and scores for each word were also

calculated into fifths. Reactions are measured in terms of the time it takes to respond to a word and whether the associated word is accessed in the second round of 100 words. More than .03 seconds to respond to a word is indicative of more 'complex' activity one could imagine as a "larger file of information" that must be looked at thoroughly before a participant can clearly access an association.

The WAT is a highly sensitive instrument for revealing unconscious thoughts and feelings, or "complex indicators". These indicators include:

- Prolonged reaction-time
- Failure to respond
- Failure to reproduce / incorrect reproduction
- Perseverations
- Multiple reaction words
- Repetition of stimulus word
- Repetition of earlier responses
- Unusual use of words / foreign words
- Alliterative effects ("klang" associations)
- Slips of tongue
- Not hearing stimulus word correctly
- Movements, gestures, tremors
- Disrupted breathing patterns
- Vocalizations: exclamations, laughter, stammering, etc.

The Analysis – Word Association Test

The method of analyzing and scoring the WAT includes looking for clusters and the preservation of disturbance over several responses, to see how complexes wax and wane throughout the test, and plotting them out, graphically if necessary, to illustrate how the words are activating a complex.

At core, the Word Association Test uses measurements of time to identify complexes. When a complex is activated by a word, associations to that word

will take longer the more affect-laden memories are attached to it. In studies where this methodology has been used the reaction time can range as much as 60 seconds. Compared to the years of repressing (disassociating from) a desire to procreate, time is relative to the degree of unconscious processes working within the personal and collective complex. When an affect-laden complex kicks in time changes. Psychological affective reality replaces biological time. Immediate requirements are overlooked, forgotten or deemed to be part of a dissociated state. Activities take longer. Though the personal and collective unconscious is not easily differentiated (Huskinson, 2010, p. 82), the phenomena of culture, operating at the personal level is the lens through which a changing relationship to motherhood is investigated in this study. Without inclusion of time against the identified median, identification of a complex is without tangible evidence other than with affect. Affects alone are not complexes, unless the affects observed may be said to form a pattern referred to as perseveration, because they persevere over the course of time within the WAT.

As a psychological instrument, the Word Association Test bypasses the rationale consciousness to more genuinely reflect what happens between two engaged in dialogue, rather than an interview with questions and answers formed in sentences (op cit.). Jung suspected it would be possible to view a complex by identifying how speech patterns were altered, *affected*, by unconscious disturbance. Through the Word Association Test (Jung, 1904-1909; Meier, 1984) Jung found the basis upon which unconscious complexes were originally identified as split-off psychic fragments existing semi-autonomously. Included in Chapter 6 Results are "reaction disturbances." These take the form

of large gaps of time, misunderstanding of words, falsification of memory, stumbling over words, changing the answer, playing with meaning, contrariness and responses that are meant to be rhymes or opposites, such as 'white' as the response to 'black' which reveals another kind of *defence of the self* (Kalsched, 1996, p. 41-42), each recorded as a complex indicator.

When a complex is activated it releases highly charged feeling toned affects. The term *constellated* is often used to describe how "an outward situation releases a psychic process in which certain contents gather together and prepare for action" (Jung, 1934/1969, para. 198). When this happens the ego is no longer in control of consciousness or body.

Complexes are products of all types of positive and negative experiences in the personal realm, to do with family, school yards, play groups, as well as emanating from cultural conditioning that comes from the total of all the messages from the collective on these experiences. Stein (1998, p. 49) views the complexes as "what remain in the psyche after it has digested experience and reconstructed it into inner objects." When a complex is strong, the ego experiences little freedom to choose wisely. In the Middle Ages an identification with the complex went by another term – possession (Jung, 1934a, para. 204). Jung pays considerable attention to the "unpleasant" nature of a complex; though they are "ubiquitous", they are not something "to be met in the street and in public places" (ibid, para. 209). It would seem a complex needs human connection to manifest and perhaps humanization to heal. Possession of the ego by an autonomous complex was considered crucial to maintaining mental health (Jung, 1931a, para. 925) if the ego is capable of

experiencing the possession without identifying with the unconscious. That is to say, a “battle of wills, of ego and unconsciousness, each trying to dominate the personality with its own monologue...ends with a reconciliation of the two, and the reinstallation of their creative dialogue” (Huskinson, 2010, p. 88). In a Jungian analysis, resources for this creative dialogue are found through myth, fairy tale, dream work and amplification to assist the possessed ego to endure the emotional affects of a complex. It was Jung’s belief that becoming conscious through self-knowledge would lead to functioning from that awareness so to reduce the layer of personal unconscious that is projected onto the collective unconscious, loosening the ego’s hold of petty self-interests in favor of freely participating in the interests of the wider world (Jung, 1917b, para. 275).

Phase 3 - Dream Journals

In the Talmud it is written that an unexamined dream is like an unopened letter. In a Jungian approach respect for psyche makes it possible to find religious, aesthetic, philosophic and social attitudes revealed within the dream (Henderson, 1984). Dreams were considered by Carl Jung (1916b, para. 505) to be “a spontaneous self-portrayal, in symbolic form, of the actual situation in the unconscious.” The relationship of the dream to consciousness is most often understood as compensatory, with dreams being an important expression of still unconscious facts. Including ‘dream keeping’ allowed willing participants a deeper understanding of the anticipation, experience and digestion processes within the unconscious toward complexes coming into consciousness through the WAT.

Participants were asked to include their associations to elements of their dreams, including the setting, dynamics, and how they 'felt' about the image within the dream. Processes of association are integral to dream analysis and they impart a commentary on personal complexes (Samuels, Shorter & Plaut, 1986, p. 48). In addition I bring my own analysis of the dream(s) taking into consideration what the participant has been consciously telling me about her life through the semi-structured interview and what affects were present during the WAT.

How each participant responded to keeping a Dream Journal, how these were recorded, related to, and discussed, as well as whether she was able to do this portion of the exercise at all, became a deciding factor in determining which participant material would yield rich results, which has been discussed earlier in this chapter.

The instruction for keeping a dream journal included writing up the dream as accurately as possible and to make associations to the contents of the dream, abstractly or from memories. The dreams with their associations were most often recorded and emailed to me in the period between the decanting of the WAT and final meeting where we fully explored the results of the WAT in concert with the dreams to see what sense they were making of their process in delaying motherhood. In the main, this was done for a more thorough understanding of unconscious processes, and what if any affects were brought on by the WAT.

Experiential and Reflexive Researcher

I have extensive training and experience in dream analysis as both an Integrative Psychotherapist and Jungian Analyst. In preparation for this research I trained in the use of the WAT with the Independent Group of Analytical Psychologists in London in a weekend program of study and also by taking the WAT privately with an IGAP analyst to experience it myself. I also had one to one instruction with Dr. Nancy Krieger at the International School of Analytical Psychology in Zurich on scoring the WAT, and subsequently taught the use of the WAT as a partner method in psychosocial research at ISAP in Zurich. It was only by taking the WAT myself could I discover how sensitively accurate an instrument it is.

SUMMARY

While there may be those Jungian Analysts who believe the WAT should be given on its own, without any prior methodology, by including the Phase 1 Clinically Informed IPA method beforehand, I was assessing whether the participants would be able to reasonably sustain a lengthy endeavour such as the WAT, for their own well-being and psychological safety.

This methodology chapter has built on the field of findings and reflections in the first three chapters preceding it to develop a suitable method for researching the unconscious. A long look into the trajectory of late motherhood as a phenomenon of modernity has involved designing the research in such a way as to provide the puzzle pieces involved in building dialogical, empirical and dream evidence of the transformation of trauma into a procreative solution. We began with the inter-subjective field of affective communication to association networks followed by the journey down the royal road of the unconscious through dream journals kept in the week before and after the

WAT, reported over four cases. **By the middle of the post-WAT reviews and through examining the dream journals, I realized that the keeping of the dream journals did not produce overly rich insights into the before and after affects of having taken the WAT. They did add time to the gathering of the research data. The problematic in this kind of research is that I was unable to track their dreams over a sufficient length of time outside of a proper analytic container where they could be analyzed thoroughly. The exception to this finding were in the before and after dream disclosures of Mrs Anyer.**

The synthesis of interpretive-phenomenological analysis (IPA) outcomes in concert with the WAT and dream journal results tested the reliability of the discursive method in Phase 1. The three means of viewing complexes began to speak to speak to each other, as if one was finishing the sentence of the former. What became obvious in Phase 2 research was how the combination of WAT results and Dream associations enhanced understanding of Phase 1 super-ordinate themes. The three phases of methodologies seemed to ‘talk’ to each other, in a dialectical process I will elaborate on over the next three chapters on different aspects of Results, which comprise Chapters 5, 6 and 7. In the immediate next chapter, the first of these concentrates on the findings from Phase 1, as I introduce the four participants through the lens of their development of a maternal self.

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Chapter 5 – The Development of A Maternal Self

Research Findings

"...for the maternal activity that is necessary to form the somatic sense of self and to perceive and think about the me and not-me environment; in other words, to become one's own container, able to own affects rather than be overwhelmed by them..."

~ Jessica Benjamin, 1998, p. 27.

INTRODUCTION

This is the first of three consecutive chapters outlining aspects of research findings, results and themes within this study, and the first chapter where I introduce the four participants in greater detail.

The making of a maternal self appears within the population of participants of this study as a journey through obliquity (Kay, 2011, p. 15). By this I mean there was not a conscious, focused path toward procreation as a goal. The female body as recalled in participant narratives that follow appear to have been

neutered into performance of patriarchal values, creating both a fear of becoming a mother as well as the longing for it. In the conflicted journey toward development of a maternal self, there were many and various constructions/self representations of identity in relation to the 'other' until there was an *awakening* in the fourth or fifth decade that something had to be done to create a baby. Serial monogamy and co-habitation, was no longer enough. Such unions could easily fail. Unconscious processes observed by Pines (1993) in a clinical capacity with fertility challenged women, found the repeated pattern of mother's role as controlling and withholding, as if the adult daughters did not yet have mother's permission to bear their own babies. Therefore adjacent forays into developing a personal self, often taking a woman into arenas where the act of mothering was transferred onto peers, work projects, and colleagues, projected into causes or movements, had been displaced. Developmentally inspired obstructions included uncertainty regarding sexual and gender identity, most often seen through a disassociated relationship to the female body, as if the body was responding in collusion or rebellion, to messages learned earlier in childhood within the family (Pines, 1993, p. 79). "What differs in development for a female, compared to development for a male, is that her environment is more centrally described by interpersonal relatedness and affect" (Eurich-Rascoe and Vande Kemp, 1997, p.13).

Erickson's (1950, 1968) stages of identity may not apply to female definitions of identity and achievement (Belenky et al., 1986; Chodorow, 1978; Friday, 1977; Gilligan, 1982; Giligan et al., 1990; Miller, 1976). Strict definitions along the lines of finding basic virtues such as "love (aged 18-40), "care " (aged 40-65) or

“maturity” (aged 65 plus) within predictable time frames becomes fluid since delayed motherhood has become a powerful modern mainstay of reproduction and the manufacture of generative identity. In its wake a *neotany* (Bly, 1996) has formed wherein time has expanded and extended the period of adolescence, not as a regression or retardation but as a social construction sustained through an unconscious reliance upon magical forces, such as the “technological unconscious” (Rutsky, 1999). A shift in the collective to the look to the skies, as a social phenomenon marked a new period between humans and technology, suggestive of “communion with supernatural forces, hypnotic or trance states, or other forms of openness to the ineffable complexities of a technological world” (ibid, p. 147). I am proposing, post the atomic bomb, the acceptance and rise of delayed motherhood as a part of a historical continuum in the rise of a technological unconscious (op. cit). As a symbol of the self, born in the caverns of the mind-body, they have been associated with physical disorders of a psychic origin (Jung, 1933, paras. 291-293). Throughout this research I have held the question, has scientific medicine cut us off from experiencing the body through feelings and emotions? (Redfearn, 1985).

The four stories of delayed motherhood within this chapter reveal very different trajectories regarding unanticipated social pressures. Compounding this union of personal and collective influences was the emergence of a potential transcendent space between a woman’s personal mother and the mother she thought she must be in order to qualify as *mother material*. While the personal mothering style each woman received was influential, mother’s style of partnering, including how she included father (or not) in the parental partnership was also significant in how the participant felt about being *procreative and female*.

We are all tellers of tales...We each seek to provide our scattered and often confusing experiences with a sense of coherence by arranging the episodes of our lives into stories...In order to live well, with unity and purpose, we compose a heroic narrative of the self that illustrates essential truths about ourselves. Enduring human truths..."

- D.P. McAdams 1993, p.11

THE SEARCH FOR A MATERNAL SELF – Two Participants Speak

Mrs Anyer (aka Mrs An)

Mrs An was of mixed race, sensually in her exotic presentation of her English-Oriental heritage. However she could not wear her difference well, and continued to blame either race or bisexuality for her life, as well as her love and work challenges. I had the feeling throughout Mrs An had sought partnership for motherhood at 40 as a demand to her only peer male partner as a way to compensate for what she had never had in life: a family. By becoming a mother Mrs An easily created meaningful work ("You know it's just like there's meaning in your life" (Anp7, L217-218). In the club of mothering child minders she was at last included (Anp11, L341), despite subsequent attempts at pregnancy ending in miscarriage. She described her relationship with her daughter as if they were also 'friends' rather than mother and child, an echo of her own relationship with her mother. This contrasted to her own mother who was mentioned sparingly, in three contexts: as troubled (later I learned this was her code for developmental arrest to remain as child); advising Mrs An that father's Oxbridge university had begun to accept women (Anp7, L188-89); and fantasizing with her about a wedding she might have one day (Anp5, L125-137). Maternal preoccupation was minimal or absent for Mrs An and her sister (Anp2, L46-47; p3, L81-82). When her mother gave birth to a boy, she gave him a name in Japanese meaning "first born" (Anp10, L303) robbing Mrs An of her

birthplace within the family. Recent family relationships had fallen apart due to her parents not being able to look after their financial and habitat arrangements. Her brother and sister took charge and left her out of the new plans. In effect these cut her out of her inheritance. Boundary disturbances regularly manifested within her narrative experience.

“I don’t care about getting married all I care about is legal rights...I was trying to say was that you think getting married you think of the big Cinderella day...but the time when you really are Cinderella and the queen of everything and the center of attention is when you are having a baby...people do treat you differently...they treat you as if you’re wonderful” (Anp5, L144-152).

Despite Mrs An and her partner not being able to agree on wedding plans she took issue with my question, “How has becoming a mother changed your relationship with your partner, family, friends and community?” Her first response was to provide the context in which they conceived as a contingency of relationship (Anp8, L223-226). She wanted to go into it further in context to his career, but it seemed the subject was a sticking point between them because he had the career she was unable to have. So it was necessary to bring her back to the subject at hand with, “How did it (a baby) change your relationship?”

“I wouldn’t say that. You know if anything it cemented our relationship because we worked together on it, you know we’re very committed to our daughter and doing things around her...The only thing I worry about is when she gets older and she leaves home...my god...this great big hole was left in the middle of our lives (Anp8, L233-239).

I felt Mrs An’s life was being lived through her child. Her drive to conceive was meant to repair familial diaspora and restore a self, but an empty place remained. She was quite able to discuss how she handles the family ironing, doing things with her husband and basically “do everything” (Anp9, L251-267).

The subject area of relationships changing with her family after having a baby brought on complexed memories to do with the family myth of who was the 'first child'. Mrs An explained she believed she held herself back in life so her sister could "do things first", including acquiring a PhD. Bringing her back to the question a second time revealed an association to her sister's special needs child (ibid, L278-282). Once more I had to bring her back to her own experience after having her baby. Instead of recalling change, Mrs An recalled dysfunction.

"She (mum) was kind of nice but when I had the baby she broke her leg and didn't realise...she never pitched in. I don't know, my family are weird, they are not a good family...they're just terrible, I mean really selfish...and self-centered and they remained that way, they don't do anything for us at all" (Anp10, L294-299).

I wondered if her brother had the same problem with the parents.

"Oh no he's a boy...So I was very bright and a really pretty child, you know I was really funny and lovely and then they had this other girl...(who) got completely left out of it always" (ibid, L303-305).

Immediately I sensed something sub-rosa had been going on since the mention of her brother as important because of his gender in contrast to her beauty, intelligence and charm as a child. I had the sense there had been cross-generational bonding between brother and mother, and between her and father. I wondered also if father had interfered with her, but had a visceral reaction that 'I couldn't think about it,' perhaps a counter-transference response mirroring her feeling it was something she couldn't think about. Mother came across as more of a dreamer, a bit melancholy in her fascination with her son, leaving Mrs An to look after the second daughter. Father, who was away most of the time, in all likelihood would have found his first daughter, Mrs An,

functioning as the woman of the house, an early parentification. Now, no longer in charge of the family network, the family had in effect dissolved. Father rarely comes back to visit (Anp11, L314-315). Mrs An believes if she hadn't been cut out of her inheritance, and mother were living near her, he would visit more often (ibid, L318-323), a reflection of her hoped for importance to him over the rest of the family. It would appear she couldn't be claimed by anyone until she stood up and claimed motherhood as a necessary role of relationship for herself. A maternal preoccupation compensated for her lack of inclusion and acceptance in every other quarter of her life, including the Lesbian circles she once travelled in, now that she lives with a man. So in effect, she has given up part of her sexual expression in order to have the family she never had and to claim position as the official matriarch at last.

The Maternal Self

Mrs An was competitive for power with me and could have easily taken over the interview to talk about her research with Lesbian and black communities, but also how she no longer can do it well because she no longer has legitimate access to that world (Anp15-16, L511-521). When I asked her what kind of mother she was her first response was, "Is there a tick list or multiple choice? No I'm joking. I don't know what sort of mother I am" (ibid, L519-520). When I reframed the question, "You described what sort of mother you had but what sort of mother are you?" (ibid, L521), she can easily tell me and include the quality of relationship she has with her daughter, which I can see is the same quality of relationship she is trying to have with me.

"I'm a lot more involved and my girl and I, you know, we have quite a combative relationship but we are very close. The midwife said to me that she'll be a daddy's girl because they always are but I'm still

waiting (laughs)" (ibid, L 522-523).

Mrs An's descriptions of what she could do for her daughter and the daughter's effect on her were spoken of as if it was superior to what happens with her partner, the child's father (ibid, L532-536). I began to see Mrs An's difficulties as being outside of mixed race and sexual preferences, but as fundamental to the family system that shaped her: she is always the better mother in every setting. Here mother = woman and man, underpinned perhaps by her willingness to make ardent sacrifices for others her own parents didn't make for her (Anp17, L566-569).

Mrs Sydney (aka Mrs S)

While she believed she started out intending to be a mother, becoming engaged to marry when she was 20 while still at university, somewhere between two to three years into the relationship Mrs S remembered something happened.

"...[we] were actually beginning to plan the wedding and I think I had the first of the control battles with my mother about the wedding and something inside me just went funny and I had this dream that I was getting into this wedding dress and I was in a state of total dread and fear. So I broke off the relationship" (Sp1, L4-7).

What struck Mrs S the most about her twenties was her habit of having relationships for a certain amount of time and then for one reason or another she ended them. When her relationships were "good" she thought about children but if they went "wrong" children went out of her mind. She had three or four relationships that turned into being wrong. On the last of these, she had an epiphany at 28.

“I realized that there was actually nothing wrong, the only thing that was wrong in the relationship was me...it was only a vague feeling but I definitely knew there was something wrong with me, and it probably took me about 18 months or maybe two years to get into therapy but that was eventually what happened” (Sp1, L12-17).

After 15 years of discovering what went wrong for her in relationship with male partners after an analysis, Mrs Sydney met the man who, after ten years of trying naturally and through IVF, fathered her first child through ovum donation when she was 47. When I met her for the first time the first child was 3 ½ years old and she was still besotted by him, relieved he was a boy. She breast-fed him up until a year prior to the research, until aged 2 ½, and thought this was down to what she described were “separation issues”. The topic of gender would come up again throughout our two or more years of contact between phase 1 and 2 of this study. In that time Mrs Sydney had a second child, at 52, another boy, through another ovum donation, whom she described as “hot” when she sent me a note with his photograph.

The Maternal Self

What struck me most about her trajectory to finding a maternal self was her struggle to find and hold onto a relationship to all things that might be considered feminine. “Destructive” was the word she used to describe how relationships kept getting in the way of her becoming a mother.

“When I went to therapy I think my therapist thought that I had had quite a bad childhood but that actually I had lots of destructive stuff inside, you know and that I’d kind of created my own bad object, and I’m sure that that was almost true. It is true but it was when I said to her a few of the actual things that my mother said that I think the whole therapy changed a bit because then I started thinking about actually the reality of some of it” (Sp3, L81-85)

Her description of anguish with mother and father was that she "...tried so hard to make them care" (ibid, L103), but they seemed not to take the physicality of her body seriously. Retrospective complaints included long-term anemia not being investigated and being allowed to ride a bike on a road where other children had been killed. I felt she was attributing ambivalence to her living or not to something bad about her.

Mrs S had wanted to be a doctor; she was good at sciences, won prizes in chemistry and biology. At the point where she was about to give these subjects up her teacher pleaded with her to re-consider. Why did she feel she had to give them up?

"I gave them up because my parents ignored it, they ignored everything (I did) except music. It was a ridiculous choice...a total waste of my years at university in terms of my academics, they also couldn't recognize my talent for French...I had French prizes also on the shelves. They also never came to one single athletics match and at 13 I was the best high jumper in the school and I loved it..." (Sp6, L185-198).

Mrs S met her long term partner at 37 and she spoke of it in terms of "not perfect, but we both feel we're lucky." They went through 4 miscarriages. She valued the relationship for his availability to wanting children in their lives as much as she did. It was obvious from her narrative that Mrs S had not felt like a human being for a long time (Sp8), as though she was "something broken" (ibid, L265) that could not be healed by the feeling of being loved by someone with whom it "felt right," until she was able to have their first child through ovum donation.

"...I've killed so many children" (ibid, 279) explaining she had something

in her body called a 'natural killer cell count' that was well above the threshold that got "tangled up with my mother...because she had a thing called rhesus negative blood and so when I turned up as her first child with rhesus positive blood I immunized her against my sister and two other babies she lost" (Sp9, L293-295).

A biological mis-match had left Mrs S with the idea there was something about her that was dangerous and awful, believing mother blamed her for the loss of two children, and had to adopt a baby boy to complete the family. "I left something that endangered the other babies." (ibid, L310). What Mrs S has had to face over and over again in relationship was the feeling her intimate other didn't care about her, a parallel to the feeling her parents' didn't care about her because her birth caused the death of their other children in utero (Sp10, L331). But with the father of the child she birthed she admitted, "...neither one of us is perfect, our relationship isn't perfect, but it feels so right" (Sp8, L267-268). Mrs S has kept the fact of her child's birth through ovum donation from her parents, explaining she never knew if she was going to be attacked.

At first it seemed the relationship Mrs S had with her partner appeared as if it were the antidote to a difficult relationship with her parents, especially her mother. She talked about how they both waited a really long time to "find someone" (ibid, L268-69), they were about the same age and neither had been married before. Her partner really wanted to have children and said, "I knew by the way he said it he really meant it and that has mattered...it would be a lot harder if you knew it wasn't reasonably equal" (Sp8, L269-273).

The delight she feels for her beautiful baby boy has become the stronger 'anti-body' against a toxic childhood, giving her protection against a critical mother.

Mrs S is not alone in regaling this child as a 'divine child' whose lack of familial genetics would break her father's heart if he were to find out. In this child Mrs S's father sees the twin he lost when he was 6 years old. Unconsciously, Mrs S gave her first-born child the name of her father's lost twin. The child appeared to have given her something she did not have before; something good inside her that can produce good things for others. The loss of an erotic relationship with her partner was not something she counted on with a young child, and her ego was ill prepared for it. She talked about "proudly breast feeding my baby in public and that was the right thing to do anytime I could (laugh)" (Sp13, L418-419). This is a sharp contrast to the picture she painted of herself sitting at a train platform for some time thinking of jumping into the tracks because of many earlier miscarriages.

"I felt so persecuted...like I was being punished for something I hadn't done. I felt as if it was my mother getting at me you know, that's how mad I was...I did get a letter at one stage telling me that my desire to have a child was putting pressure on my partner...as if my financial contribution wasn't relevant...She didn't want me to have children" (Sp15, 477-483).

Mrs S had enjoyed a high powered job for many years, but as it became clear she could no longer rely on her own eggs to become pregnant she began to work four days a week and then three while having fertility treatment.

THE NIGHT SEA JOURNEY – Longitudinal Change for Two Participants

Ten years before undertaking work with participants in this thesis, I was analyzing data in another study regarding the phenomena of women who had *a hunger to fill an empty space* (Barone-Chapman, 2007) that only a child could fill, thereby subjecting themselves to repeated use of Assisted Reproductive Technology (ART) and cycles of hope and despair lasting anywhere from three

to twelve years. The study concerned itself with women who had more than four attempts at IVF. Two women who were pregnant with their first child at the time returned to participate in the subject of delayed motherhood. I felt the longitudinal experience would bring something very rich to the making of a maternal self, especially around the research question of *“How has the world changed toward you since becoming a mother?”* In the two longitudinal cases that follow we see into the making of a maternal self from two very different perspectives. In the first we have the experience of the ‘too-good’ mother’s effect on her daughter in sharp contrast to the ‘disappointing death’ mother who stultifies her daughter. The first is anxious to keep up with her peers while the second may be viewed as leaving the maternal until it was too late for reasons that will become clear. The affects between these two very different kinds of delay were seen in my earlier study as a polarization of one-sided ego development, but was not fully differentiated and reported on. Rather that study featured their developmental trajectory, which was the priority at the time. Going back over their earlier ideas of mother, motherhood, interests, hopes, menarche, first sexual experiences, partnering history, adult choices and importantly – their hopes and expectations while pregnant with their first child – has now been useful in developing a plural understanding of what a longitudinal perspective of ‘then’ and ‘now’ means.

My first experience of being with these participants was in the role of a witness at a point in time in which their past, present and future was coming together in mind and body. Their success at getting past their first trimester of pregnancy after many delays and failed attempts allowed a perspective of achievement to take over as if they had climbed a mountain and risen to a point of view where

reflection was quite new. What had prevented them from getting on the journey to motherhood was relayed as if it had been a matter of life or death, raising my awareness of how difficult subject formation had been without having had a child. Their memories of the past were fresh and as yet untainted by their own transformation into having a maternal self. Fear and desire changed the complexion of their narratives between longing for an experience and the actual experience, which ultimately caused both women to do an about face on how they understood what motherhood meant to them, as will be shown in Chapter 6.

Mrs Carter (aka Mrs C)

Here it must be noted that over the research contact period of about 2-3 years, Mrs Carter was ten to fifteen years younger than the other participants. I have included Mrs Carter in this research because of the way her identity has developed and because she felt she had been late to motherhood at 31.

In the previous study mentioned earlier, where I first met Mrs Carter as Mrs C, two main themes ran across the interviews. My aim was to identify the drive to conceive at all costs, through the use of the participants' memories of childhood, the choices they made during early adulthood and their fantasies of how a child would change their lives. The first theme was the importance of the relationship to mother and the quality of the mothering received in a woman's availability to become a mother at a time in her life when she is most fertile. The second theme of the interviews was the crisis of identity aroused when the assumptive position of a right to be fecund is dispelled. Analyzing the data revealed the fertility crisis as a mask for a crisis of identity with links to the personal mother and the intra-psychic parental couple (archetypes) installed as

mother and father. I saw repeated infertility treatment as a transformative process necessitating repetition until something new had the potential to be birthed. The position Mrs C (or Charlene, her earlier fictionalized name) occupies in this study is very different from other participants who were older. Selections of transcripts from my earlier research are included here for their longitudinal value, beginning with Mrs C's memories of mother.

“I mean going back to how she was as a mother, she was very good. We knew - you know – we knew where we were the whole time, we had a very structured childhood, but I never ever – can think of an unhappy time...”
(CH 20,10).

Charlene's maternal idealization had a solid foundation but began to suggest that though married, she still had difficulty in separating from mother.

“I mean she has been the most fantastic mother as far as I'm concerned.” CH 8, 8)

Charlene's inability to separate from mother is part of her wish to forestall the maturation process and stay as a child. There is indication that her strongest alliance is with mother rather than husband.

“After having my general anesthetic, you know, feeling pretty grim, where do I want to go? I want to go and be with mummy. Because she has the intuition to know exactly, you know, how I'm feeling, and she can look after me, she can- I mean my husband can't cope” (CH11,17).

It was Charlene's relationship and feelings for her mother that allowed her to hear her mother's wake up call regarding becoming pregnant. Though seemingly ambivalent to becoming pregnant at that time in some way she sought mother not husband, to help her become pregnant.

“Um, actually it was when I told my mother that, you know, I hadn’t been on the Pill for a year, and she was absolutely – and that we hadn’t used anything as a contraceptive, and she was really... I mean, it hadn’t really occurred to me, but she was really gob-smacked that I hadn’t got pregnant “ (CH 15, 4)...So it was actually Mum pushing me, saying go on, go and see the Gynae, da-da-da-da” (CH 29, 7).

For Charlene, mother is a bountiful resource for identification. Her primordial affects left her little choice in the world other than to be just like mother.

M: “So the job of mothering, the way you saw your mother do it ...”

CH: “Is how I would like to be” (CH 20, 21).

Being able to have a baby completed the picture of having her life constructed in the same way as her mother’s. In the following she recounts how she imagined her future when she was a child:

“Yes it was definitely – definitely definitely that I would have children...I’ve always thought when I was married that I wouldn’t be working. And that’s why – but I think as a child you see it in simplistic terms. And you know my parents – well my mother didn’t work so, you know” (gestures toward herself to imply equal expectation) (CH 19, 17).

Charlene’s mother did not work and therefore Charlene expected not to work as a mother. She reports being an abysmal disappointment to both her parents regarding her performance at school to the point where they were quite worried about her future and she refers to herself as “bone idle” (CH 23, 2).

“I don’t want to be a career girl, I didn’t want that...you know, you eat, live and breathe your job. I mean I love, love what I do, but I’m not built like that” (CH 37, 6).

For Charlene, not wanting to be a “career girl” occupied her as a symbolic equation to not being able to reproduce, becoming more terrifying in terms of whether she would be able to be successful at something.

“People who do have careers that are trying IVF, or have problems with conception, at least they’ve got, at least they always have their careers to fall back on, I mean where was I going to fit into society?” (CH 37, 11).

The Opposing Maternal Self

Here then was the core of the fertility crisis continuing to unravel, neatly summed up as the need to “fit into society.” But to which society does she belong? Once she had the children other needs were aroused, such as needing not to be thought of as ‘a stay at home mum’ who would be boring at dinner parties. In the first study, I thought Charlene’s attachment to and dependence upon mother for continued nurturance would be challenged when she had her first baby. I also thought the fertility crisis was attempting to help Charlene form an identity that *gave her permission* to separate from mother and establish her own family. I predicted there was every possibility that the fear and anxiety of work and non-uterine activity which was not fully dealt with as part of the fertility crisis would somehow appear once again, perhaps in mid-life, or around forty. I was off in my calculations by three years.

What emerged during this research was something Mrs C had not known about the world of others and herself before she had children: motherhood is not a qualifying status outside of the world of women. Mrs C had proven she could develop in the world of women and be part of something larger than herself through a community and friendships. But if she had more than two children she would compromise her pursuit of other pleasures and would become dull and boring as she felt she was with her first born. Her first child, a daughter, came into the world more needy of Mrs C’s new but emerging mothering skills than she ever imagined. The experience gave her time to think about having

just one more child to see if it would bring her back to a place of being able to enjoy motherhood. With the second child, a son, she was not shocked and dismayed as she was with the first, she easily conceived with one of the already harvested eggs and had an easy birth. To cement her decision to curtail more children, she donated the rest of her frozen eggs to research. During the course of the interview she held dramatic pause as to whether she had made the right decision, and perhaps something hadn't yet settled for her about this. A fragment within her maternal ambivalence was unraveling within the research. I wondered to myself if somewhere in her development she learnt to become oppositional to herself, and perhaps others, as a way to appear 'interesting' rather than boring. The affect pushed me to into apathetic agape. I began to care less and less about Mrs C's pondering, pontificating and opining, while at the same time feeling a sense of wonder and amazement. These conflicting emotions stayed with me when I later came to write up the affects around her Phase I interview. I wondered if my own subjectivity was in the way of my giving Mrs C what she wanted – unconditional empathic mirroring and positive regard. This was where inter-subjective space can differ between psychotherapy and research. I was there not to interpret and make a bridge for her to understand herself, but to allow her to express and observe. Though Mrs C talked as if she was an 'older mother' there was an illusion of pride around her suffering four attempts of IVF in her late twenties due to blocked tubes that I was never able to find in equal measure to the early life traumas of other women who had delayed motherhood an additional ten to eighteen years. I kept reminding myself that all experience felt as trauma is of equal importance to those who have lived through it. However, the tempest of defence brewing in her wasn't able to come out in the research until after the WAT, eighteen

months later. It was helpful to understand her many last minute cancellations. More on Mrs Carter's *complexio oppositorum* may be found as Results in Chapters 6 and 7.

Mrs Luke (aka Mrs L)

Affect needs other people in some form of relationship in order to be seen. The response from these 'others' whether conscious or unconscious, spoken of openly from one generation to the next or kept in the closet (unconscious) only to spill out with other shames, is the best means we have of identifying longitudinal complexes.

I first met Mrs L during the same prior study on repeated use of ART when she was about four months pregnant and quite anxious about having her first baby at 47. Mrs L's subsequent experience of motherhood has shown her something about time she did not know as a daughter to her mother. She hadn't known if she could ever get her timing right for herself on any activity, until she began to follow the guidance of an author (Ford, 2001) who specializes in writing about maternal care for infants using time management as a guide for creating contented babies through consistent regular feeding and sleeping times. When she began telling the stories about how easy her son was to teach and train at each developmental marker (Lp5, L138-144), I became mesmerized by her confidence, capability and determination to have a positive influence on the child, and by extension to me. By the time she cited how easy potty training was by the way she did it, contrary to the way her mother wanted her to do it (Lp5, L144-146), I lost contact with the subject of potty training her son and found myself back on the subject of 'getting pregnant' (op. cit, L147-148). I was lost in her story/ his story, mother/child preoccupation just as she was. My

thinking function went into the toilet on potty training. I became 'lost in the detail' of Mrs L's narrative of raising a child, thus becoming part of the loss of "leaving it too long" and not being able to have another child. Maternal preoccupations sat comfortably for Mrs L now in a way she never thought possible when I first met her, while pregnant. After an initial fright of not knowing what to do, she undertook some therapy and embraced the task. Prior expectations (over eight years ago) of returning to work she had when she was in her BC (before child) days are barely recalled. Her experience of doing motherhood well enough has drowned out her mother's hammering that she was useless at everything and mothering would be no different.

"I didn't have a natural affinity with babies. I didn't kind of look at a baby and coo...I thought babies were ugly...but what I have now realized is that your baby is different" (L7, 179-181).

The Maternal Self As A Quiet Rebellion

After years of trying and never getting it quite right with her mother or herself, Lucy was transformed into Mrs L, a first time mother at 47 years old. Now in her fifties, her former insecurity of having no identity if she did not work has been replaced by knowing herself more fully as a related and compassionate woman whose sympathies for children appear to have also repaired her own difficult memories with her mother.

M: "So what do you think becoming a mother has done for you?"

L: "Oh I think you become much more aware, or I have you know. You look at children in a completely different way...a much more sympathetic way..."

M: "Does that extend to people or is it...?"

L: "Yes I think it does extend to people, but I also wonder...I'm no

longer working in a stressful job and I have a much less stressful life.”

M: “Yes. I remember you saying you weren’t going to be a stay at home mother, you were going back to work...you were going to show your mother. Do you remember that?”

L: “I mean I haven’t...I do a bit of charity work...which is quite fun... I would quite like to go back to some kind of work but on the other hand I don’t want to go back to work and not see Leo, because you know having got this far I just want to enjoy him...it’s such a short time and soon he’ll be up and gone” (Lp7, 195-209).

There were times during the interview when I could not believe this was the same woman I met eight years earlier. Had I not witnessed her highly affective BC state while pregnant, I would not be able to see she no longer had contact with her earlier pain to do with her contest with mother regarding her fundamental goodness as mother’s first born. Since having some cognitive behavior therapy she has come to the following views about her fearful places in context of being an older mother.

In forgetting her former identity as a high-powered business woman it sounded as if motherhood had taken over as her main occupation, as if she had always been a mother, and she corroborated this as true (Lp9, 271-276). This kind of amnesia and narrative is a way of making sense out of something that doesn’t make sense. In some ways this is the fabric of continuity between past and present woven so she appears in control and steering her life as if by magic. But the allusion comes undone when I asked, “What would you be doing now

if you had not become a mother do you think, and what would that role look like?”

“I have no idea but I expect I might have been in the Priory (a mental health hospital for rehabilitation from addictions) (laughs) (Lp10, 301-303).

I was led to understand this child had saved Mrs L and, were it not for having a child, her life would have gone from bad to worse. Mrs L went on to explain how she learned to do things for her child through remembering what wasn't done for her. She realized what she longed for (Lp11, 323-330) and was able to teach her child how to love her in return. This is precisely what she had hoped for when we first met eight years ago for my previous study; someone would think she was wonderful.

A COMPLEX VIEW OF MOTHER & EROS

All along the lengthy period of data collection and analysis I have had a hunch that I must include an expanded view of Jung's complex understanding regarding the position of mother in the psyche of a daughter who is in no rush to relinquish the daughter position for motherhood. These suspicions were initially raised in Chapter 2 of the Critical Literature Review where I began with Jung's basic premises on this aging dyad, but the time has come to open this aspect of his opus further.

For the purposes of this study Jung's (1954a) observations on how the maternal instinct is or is not acculturated needs to be included here briefly and expanded upon throughout in considering the development of a maternal self. It was Jung's view that if Eros became *canalized* (narrowly focused) exclusively along

the lines of a maternal relationship not only would father be kept out of developing a relationship with the daughter, her own developing maternal instinct would be wiped out completely and this would lead to an overdevelopment of Eros through an unconscious incestuous relationship toward the father (Electra Complex) because he would remain a foreign unattainable love object. Along with this schema, Jung also observed what a complete idealized projection onto mother would have on a daughter's own maternal capacities, keeping her maternal instincts unconscious and Eros remaining as a shadow element, while her mother holds sway over these domains. Thus, the demands of motherhood, responsibility, personal relationship and erotic invitations could well arouse feelings of inferiority, compelling a retreat to a mother who represents everything that is unattainable for the daughter (Jung, 1954a).

Jung (1934a, para. 210) considered complexes to be "living units of the unconscious psyche" through which we find dreams and symptoms. The desire for procreation at midlife has an inter-subjective field between the individual woman and the collective culture in which she lives. Jung linked the formation of complexes to the psychological aspects within the mother-daughter relationship. He saw this psychological closeness as giving rise to a "peculiar uncertainty as regards *time*...a conviction of being outside time, which brings with it a feeling of immortality" (Jung, 1941, para. 316). Fascinated by the mother and the mother-daughter relationship Jung's "The Psychological Aspects of the Kore" (ibid) drew significant implications from the Demeter-Kore myth. 'Kore' refers to Persephone's transformation after her abduction into the underworld while her mother, Demeter searched the world

to bring her back to a life as a daughter. But Persephone, while in the underworld ate a pomegranate seed offered by her captor, Hades. Once she takes the “seed” from Hades she can no longer return to mother as a maiden and her name is changed from Persephone, beloved daughter of Demeter to Kore, Queen of the Underworld. Jung believed his analysis of the Demeter-Kore myth showed the influence of the feminine on psyche outweighed that of the masculine, whose role was only as a seducer or conqueror (op. cit., para. 309). “For a woman, the mother typifies her own conscious life as conditioned by her sex” (Jung, 1938a, para. 192). Jung’s definition of “Mother” (see below) occupies two positions; 1. She is an inherited structure within the unconscious, and 2. “She” is the prototypical definition of an archetype. If a daughter is kept in an adolescent phase of development permission to procreate is implicitly withheld, as the mother archetype has not been ‘humanized’ or installed (Mathers, 2001), into her own being. Unable to mother herself, this eternal daughter, a *puella*, unconsciously waits for the father to return in the form of a male other. Unable to find the man within, the animus who would serve her in a heroine’s quest to ‘fight the dragons’ of childhood, puberty and mid-life (Neuman, 1954) she struggles to bring her body back to mind.

“Mother” is an archetype and refers to the place of origin, to nature, to that which passively creates, hence to substance and matter, to materiality, the womb, the vegetative functions. It also means the unconscious, our natural and instinctive life, the physiological realm, the body in which we dwell or are contained: for the “mother” is also the matrix, the hollow form, the vessel that carries and nourishes, and it thus stands psychologically for the foundations of consciousness.”

-Jung, 1934b, para. 344

Jung’s view that every mother contains her daughter giving rise to a peculiar uncertainty regarding *time* brings an important dimension to understanding the activation of a complex which has an archetype at its’ core and a shift in

perception of time. These ingredients are central to exploring delayed motherhood and its' connection to individual and collective complexes. Jung's time riddle: *a woman lives earlier as a mother, later as a daughter*, is seemingly illogical against the assumption of motherhood. But the psychoanalytical implication is the mother later lives on through and in the daughter in a process of projective identification. The unconscious experience of these ties produces the feeling that her life is spread out over generations – the first step towards the immediate experience and conviction of being outside time, which brings with it a feeling of immortality. An individual life is reduced to a type of pattern, indeed it becomes the archetype of a woman's fate in general. This view suggests that a woman's relationship to mother is crucial to the development of a maternal self.

In 'The Psychological Aspects of the Mother Archetype' (Jung, 1954a) Jung exposes the bipolar aspects of the *mother complex* in a daughter as leading to either a "hypertrophy of the feminine side or its atrophy". The former leading to the maternal instinct while the "negative aspect" manifests in a woman is described by Jung as having one goal only – childbirth (ibid, para.167). This begins to suggest an unconscious use of the body to compensate for maternal failure that Jung (1982, p. 115) found in conjunction with an infantilized role for the husband, who held "secondary importance; he is first and foremost the instrument of procreation, and she regards him as an object to be looked after." Jung finds the daughter of such a mother and father to substitute a dominant maternal instinct with an over-development of Eros. The problem with this type of daughter is that she "knows what she does *not* want, but is completely at sea as to what she would choose as her fate" (ibid, p. 119). Demeter stands in

for the possessive mother who stands in the way of daughter's separation through union and procreation. Dinora Pines (1993) in her clinical practice with women who are fertility challenged observed, "they sustain a deep narcissistic wound and regress to a basic body image and state of mind in which they feel unsatisfied by their sexual partners and unsatisfactory to them, as they had once felt to their mothers" (ibid, p. 183). Mother's role as a controlling and withholding *force majeure* produces adult daughters who did not yet have permission from their mothers to bear their own babies. Pines links the repeated desperate attempts at fertilization, despite earlier failures, to an envy of their own mother, pushing them to continue to attain their ego ideal of a maternal self. Samuels (1989, p. 77-78) observed the double bind many women find themselves in regarding a "sense of failure at fulfilling neither the ancient nor the modern womanly ideal...heavily [colours] the woman's images of femininity and gender identity...[since] Motherhood is absolutely equated with womanhood." In modern culture 'mother' is often a signifier of the repressed, in part because many archetypal aspects of the feminine Self "come to life" at midlife as part of individuation. At that stage of life a baby becomes a living symbol of an emerging new identity with the promise of futurity.

In the 1930's when Jung was holding the Vision Seminars and working through ideas of the contra-sexual partner in terms of anima and animus, he drew from his clinical and social observation what a lack of procreativity meant for a woman. In the following citation he suggests pregnancy as a developmental 'escape' to avoid connection with the animus, or masculine, also known as the archetype of agency.

...then you get a special kind of hell...For a woman there is no

longer any way out; if she cannot have children, escape into pregnancy, she falls into hellfire...she discovers that she is not only a woman, she is a man too.

- Jung, 1932, para. 794

Jung's (1930-1931, para. 782) writing suggested women had, prior to the approach to the fourth decade, an 'unused supply of masculinity' that needed to become 'active.' In my observation, many of the women entering a pregnant pause at midlife have been engaging with the masculine at the expense of the feminine, and so the recapitulation required may be different than it is with women who do not delay motherhood. Jung's work shifted perception of the unconscious from a warehouse of repression to a fountain of potential healing. This expansion included identifying what he called the collective unconscious, and in effect, unconsciously perhaps, defied Freud's claims to the contrary. In addition to the personal mother, we all have an image of the archetype of mother, and while these images will overlap among all people, they are imbued with specific characteristics of the experience of the personal mother.

Jungian theory in its' overarching appeal for wholeness, further differentiates itself from the Freudian view of psyche with an enlarged view of libido as a generalized energy capable of psychic manifestations in the form of symbolic images, or archetypes when they act as symbols of transformation; the harbingers of new solutions for old problems. "For Freud, symbols were translations, or more exactly sublimations, of libidinal (sexual) pressures into another area of imaging, a compromise between id and superego, according to the reality principle operated by the ego" (Solomon, 1991, p. 312). The difference between Freud and Jung on the use of the word *libido* is relevant to the discussion of a *canalization of libido*, when all energy may be focused, for

example, to an unconscious preoccupation to delay motherhood, or to 'make a baby', may be becoming a modern symbol of transformation, is rather different from Freud's use of libido as the place of expression or suppression of sexual instincts, yet both polarities are connected to a *pregnant pause*.

In the "Psychology of the Child Archetype" Jung (1940, para. 267) suggests that no matter how 'modern' we become we can never really escape our "archetypal foundations" without suffering neurosis. Rather the task involves finding new "*interpretation*" at every new stage of consciousness civilization achieves. It is only through the differentiation of consciousness, within the concept of individuation, that we connect "the life of the past that still exists in us with the life of the present." With the archetype of the child Jung finds links to the notion of a saviour in Christianity, a dwarf or elf in folklore, a child god in mythology, and as an imaginary figure in women with a mental disorder. Jung came across the child archetype most often when maturation processes appeared to be more difficult to achieve during the course of the analysis, arousing his teleological question, "What is the biological purpose of the archetype?" (ibid, para. 272). The question comes alive around explorations of the pregnant pause, in considering "the pre-conscious, childhood aspect of the collective psyche" (op. cit, para. 273) with strong implications about futurity, one's own generativity and that of the human race. Erikson's (1997) theory of the life stages, in particular the stage of generativity, along with work on personal myths and life story connect with Jung's (1930-1931) mytho-poetic interpretation in identifying life stages. The phenomena we are on the verge of exploring is whether these stages have shifted since the advent of bio-technology.

Myth and archetype work together like hand in glove. As Kradin (2009, p. 217) observed, “some myths foster the child’s optimal separation from parental influence, and others tend to hinder development.” The difference between optimal versus hindrance is what creates intra-family myths with far reaching consequences. The child’s ability to mature through unconscious archetypal transference of feeling (projection) onto the parents, allowed or denied, sets the course for future relationships. The process of individuation must include the ability to form and maintain relationships, secure stable work and create a family of her own in adulthood, or remain puerile in support of parental immortality (ibid). Jung (1940, para. 278) claimed the child “paves the way for a future change of personality” and puts it firmly in the individuation process as a synthesizing of conscious and unconscious elements, making it a symbol which unites opposites, repairs division, conflict and the either-or (e.g. either motherhood or career) thinking that keeps a deadlock on all development. Without such a redemptive, unifying symbol, also referred to as an irrational third or *transcendent function*, the opposites remain in battle, locked in a complex of oppositions (*complexio oppositorum*). This “‘child’ as the third thing” (ibid, para. 288) can become the product that is neither expected nor understood.

The symbolic for Jung could include Freud’s view but more pervasively he approached symbols as creative ‘psychological inventions’ containing meaning and purpose, such as healing (Ekstrom, 2004, p. 312) to express what has not yet become understood consciously. Incest, for instance, in Freud’s view was literal whereas for Jung it was a symbol, evident in his writing about clinical work on the erotic transference, or *hieros gamos* (incest desire) within the *kinship libido*

(Jung, 1946, para. 431) – for instance, attraction toward the opposite sex members within the family was viewed as helping to keep the family together. Jung likened this metaphorical process to the psychological equivalent of “absolute identity between conscious and unconscious” (ibid, para. 433) through ‘marriage’ with one’s inner opposite sex figure, referred to as *anima* (feminine) and *animus* (masculine). The concept of these ‘contra-sexual’ archetypes as exemplifying the unconscious opposite sexual partner within, is relevant to a pregnant pause as the concept is linked with the notion of a “union of opposites”, emblematic of an argument with the “other” or foreign element of the conscious understanding we hold of ourselves, others and the world, in the shadow or unconscious realm. We may consider a pregnant pause as an awakening of feminine and masculine as energies that have been kept in the shadow without a relationship to each other until midlife. This becomes a question of how a one-sided ego development in either women or men becomes the shadow of sexual identity in projection, no matter which gender identity arouses sexual personal preference. What this research goes on to reveal is how the repressed feminine manifested before and after mid-life.

Locating The Paternal

Until World War I, it was father’s role was to raise the children with the nurturing hand of mother. After the first great-war there occurred an industrial and economic shift necessitating a re-prioritization of time in the work place, rather than at hearth and home. Mother’s role at home became dominant. This lead to a ‘deficit model’ focused on father’s absence until the 1980’s as Hetherington & Stanley-Hagan (1999) and others review the field. Psychoanalytical literature, commencing with Freud, has long held the father to

be of primary importance in the psyche of the home. Jung shifted that to include the feminine both in the psyche of the male (anima) and the influence of mother upon a son and a daughter. Father may or may not be consumed with working long days on a job. From a psychoanalytic perspective, it is how present he is in the lives of his family that is measured. Even if present he could be absent, as well as mainly absent but able to be present for decisions, school events and if travelling, available through technology. It is the space he makes to keep the family in mind that in turn keeps him in mind.

Jung (1909) was the first to identify the father as key to understanding mother's way of mothering a daughter. Since Jung's identification of father's importance in female identity and psycho-sexual health as a reflection of father's union with mother – satisfied or disappointed - there are many psychoanalytical writers who have furthered Jung's premise of father's importance in a daughter. Target and Fonagy (2002, p.48) acknowledge Loewald (1951) and later Mahler and Goslinger, (1955) and Greenacre (1957) as having brought attention to the father's role in supporting the child toward a sense of identity. However Target and Fonagy (2002) note that neither Mahler nor Loewald made a contribution to the father's impact in the development of girls. Greenacre (1957) viewed father's role as both supporting mother, and irreplaceable in forging self-determination. Target and Fonagy (op. cit, p. 52) cite many references to attest that the nurturing instinct is not limited to females and note that in those families where the father was the primary caretaker, the child appears to be more active, curious and less likely toward separation anxiety than those children whose main caregiver was their mother.

Stephens and Day (1979, pp. 93-202) report in their studies that there is more

personality maladjustment in children from father-absent homes than in those children from unbroken homes. Kay (1981, pp. 203-219) draws from Winnicott, Fordham, Jung and Neumann to highlight the opportunities and dangers at key stages of development starting with the role of the father in supporting mother to care for her child (Winnicott, 1965) in order for the child to gain ego strength (Fordham, 1969). Jung's (1931b, paras. 83 - 84) contribution to Kay's (1981) paper brings attention to the strong psychic effect of the unconscious, un-lived life of the parents which can cause the child great difficulties if s/he identifies with them. What Kay brings theoretically to this study is how a child can feel "compelled to exist to fulfil the needs of the father [who] failed to acknowledge the need for the child to develop an identity of his [her] own, and an eventual separate existence" (ibid, p. 216). Kay refers to the father who fails in this capacity as providing a kind of "*mad mothering*" (op. cit, p. 217).

Mary Williamson (2004) in exploring the changing role of the father in relation to daughters identifies the need for metaphoric erotic element in the relationship in order for the daughter to come to a satisfactory psychosexual gender identity. Samuels (1989) first introduced the notion of "metaphorical incest" and from both authors we hear mother's attitude of acceptance is important to this ritual. Target & Fonagy (2002) are credited with the notion that it is only "by permission of the mother" that a relationship between father and daughter can exist. Winnicott (1986) would have put this another way, recognizing the importance of the father in weaning the child from the mother. In this vein Williamson takes a quote from Alicia Etchegoyen (2002):

The child perceives the father directly but also through the eyes of the mother. The mother's conscious and unconscious

expectations and fantasies about the role of the father will shape the father's representation. These in turn will have been created on part by the mother's present relationship with her partner.

- Etchegoyen, 2002, p. 34

Williamson concludes that a "father's delight in the person of his daughter and her various parts" – which includes the ability to love unconditionally, allow for and encourage safe erotic play rather than repressing it, is vital to a girl child growing up to live subjectively. She borrows a thought from Maguire (1995, p. 133) on the importance of parents to instil a girl's own desire to succeed "in both conventionally masculine and feminine activities." Such an installation would come as result of protecting their young from their own feelings of rivalry and envy.

Sheila Powell (1993) developed the theme of the Electra complex, first identified by Jung (1931b, para. 348) as the female counterpart to the Oedipus complex. The version of the story she takes is that of the *Orestia* of Aeschylus, which takes place after the Trojan Wars and concerns the tale of King Agamemnon's daughter Electra. Powell identifies the metaphor of the tale as a need for change with hints on how to move from chaos, turmoil and splitting to a more thoughtful, softer and just society. Relevant to this inquiry it is a metaphor within a metaphor "the psychological struggles of a girl to grow up and separate from her parents." Father represents the idealized, and mother the denigrated parts of the paternal complex. Her process of external events became confused with those of her interior world, as Powell puts it "she cannot move on without a man to guide her". Andrew Samuels (1989, pp. 77-89) observed in clinical practice how gender certainty and gender confusion are at

the core of tyrannical neurosis in the form of narrow definitions of being male or female. In a daughter this may be a result of her father's rigid view of gender identity perversely encouraging the daughter to cutting off or hiding parts of herself the father might find unacceptable. Competition from mother for father in terms of an Oedipal/Electra complex is something Williamson (2004) imagines as instilling in the little girl the narcissistic aim of being loved rather than loving, and so she becomes the object.

Linda Leonard (1982) sees the father daughter wound as a cultural condition and the fate of all women and men today. This disturbance often means a sacrifice of the daughter. Leonard uses *Iphigenia in Aulis* by Euripides (1972), a story with parallels to the one of Electra as the daughter of King Agamemnon, to identify a collective theme of the feminine as inferior, relegating woman to being man's possession. The realm of the feminine in Leonard's writing appears limited and split between beauty and that of obedient/ dutiful wife/ mother.

Marion Woodman (1992) provided a very personal study in releasing the feminine from the tyrannical power of the masculine. Woodman (1992, p. 94) credits the image of the archetypal father as freeing a woman from the power of her personal father, "from dangerous, hostile male to helper and soul mate, the transformed father pointed toward the integration of the various aspects of my inner masculinity out of whose unity emanated a great healing energy." The term "psychic infection" is used to describe an incestuous bond with the negative mother archetype that gets past from generation to generation through woman's scorn of their own bodies under the influence of patriarchal thinking.

SUMMARY

The developmental trajectories of four participants reveal a picture of delayed motherhood that defies stereotypical allusions of satisfying careers, big money and parties as the reason to postpone children. There may be public reasons, “I didn’t find the right person for so long” or “I was involved in same-sex relationships so it was never going to just happen” – there were other private more painful reasons preventing all the women from feeling ready and safe to have a family. There is a wound that works its way through the course of a woman’s life, though differently emphasized with each one, that appears to arise as she loses the bloom of young adulthood to enter the more sobering mid-life challenge some time after 40. Common themes have to do with early gender disturbance, limiting assignment of *female* gender performance, too much mother yet maternal deprivation, not enough of father in the right way, all conspire to create difficulty with the primary ability to develop two-person partnering.

Learning to find an *individuated* maternal self may include doing the opposite of everything mother did/didn’t do to for the woman when she was a child. It is possible and remains to be shown whether procreative identity and the desire to feel fecund is postponed until a gravitational pull toward an ‘other’ allows/inspires a process of un-doing, un-learning to re-invent partnering and parenting roles. Maternal deprivation, disappointment, even cumulative trauma, appears to fuel each woman’s experience of delayed motherhood. When the past re-emerges in the present as a shadow desire to be a better mother it appears as a struggle through positions of ambivalence, subjectivity

and preoccupation. The birth of a new way by not being like mother begins to appear on the horizon of this research as a super-ordinate theme.

Except for Mrs C, I found in each participant a profound inability to feel mothered had prevented the majority of participants to feel ready to mother with any hope they would be loved in return. Amplifying this observation, their children became part of a system of repair and redemption for their own lost childhood, which interrupted the natural process of having a self, until they could make a child, and be a better mother than their own mother. However this reparative motif carries a double bind. In cases with the benefit of longer observation (Mrs C and Mrs L) the present/absent participation of the woman's father along with the 'too much or too little' mothering in her life echoed into the present as a source of support or persecution, which ultimately manifested in her perception of whether her generative identity was ever going to be allowed if an oedipal context had not been in place appropriately.

It follows that a mother who is not satisfied with herself as a woman and cannot accept the father as a man, has difficulty in separating from the child in whom she hopes to find all that she herself has missed, and through whom she wants to live again.

- Pines, 1993, p. 102

In summation, I am putting forward the hypothesis delayed motherhood is not solely a product of biotechnology or 'career narcissism' but a larger longitudinal force passed on from mother to daughter to do with *cumulative trauma* (Khan, 1981, pp. 42-58), through breaches in the "protective shield" between primary caregiver (mother) toward daughter (child) (ibid, p. 47) preparing the ground for "ego distortion and disturbance of psychosexual

development...[depending on] what type of failure of environmental provisions" (op. cit, ibid) were present or absent. In wider cultural and collective considerations this primordial relationship prepares or detracts from the ability to function in the struggle with 'indigenous' cultural assumptions about the female body being ordained for motherhood aroused by an aspect of the feminine, identified by Jung (1972, p. 24) as resistance; the woman who wants to be "anything but like mother." This possibility is explored throughout the remainder of this study.

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Chapter 6 -

Trickster, Trauma and Transformation

Research Results

“Trickster and trauma archetypes have large affective fields, as they can enact in the form of obstinate psychosomatic illnesses...until desire for the doting mother and latent desire for father unite in transference fantasies, including regression and incest, can come into awareness and be worked through.”

~ Hubback, 1988, p.56.

INTRODUCTION

In this chapter I build evidence for my earlier hypothesis that delayed motherhood is a larger longitudinal force passed on from mother to daughter. Furthermore I frame the term *trauma* in this chapter in a particular psychoanalytic fashion, crediting Donald Kalsched (1996, p. 1) for drawing on many authors in order to understand “any experience that causes the child unbearable psychic pain or anxiety. For an experience to be ‘unbearable’ means that it overwhelms the usual defensive measures which Freud (1920b, p. 27) described as a ‘protective shield against stimuli.’ Trauma of this magnitude varies from the acute experiences of child abuse prominent in current literature to the more ‘cumulative traumas’ (Khan, 1963) of unmet dependency-needs that mount up to devastating effect on some children’s development (ibid), including the more acute deprivations of infancy described by Winnicott as ‘primitive agonies,’ the experience of which is ‘unthinkable’ (1963, p. 90). The distinguishing feature of such trauma is what Heinz Kohut (1977, p. 104) called ‘disintegration anxiety’, an unnamable dread associated with the threatened dissolution of a coherent self” (Kalsched, 1996, p.1). To this anxiety we may add the fear of being abandoned, un-loved, or not kept in mind if the child doesn’t perform to parental requirements to make the parent ‘look good’ to

others. Psychoanalysis uses the term cathexis for this hijacking of good things from the child (or any other) for narcissistic aim and ambition.

These results include, clinically informed Interpretive Phenomenological Analysis (IPA), Jung's (1904 -1909; 1918) Word Association Test (WAT), and dream journals kept before and after participants undertook the WAT. Affect includes enactments, such as participants showing up late or forgetting their appointment to participate, a demonstration perhaps that Jung's (ibid) WAT has a large affective field of its' own.

UNCONSCIOUS PROCESSES of LATE MOTHERHOOD

Jung saw the collective unconscious as a part of psyche, formed through inherited "collective representations", a term he borrowed from Levy-Bruhl originally defined by Hubert and Mauss on the subject of comparative religion (Jung, 1938, paras. 88-90). Jung claimed these representations to be a "second psychic system" (ibid, para. 90) pre-existing within everyone to synthesize conscious and unconscious elements. But it is the archetype of the child that "paves the way for a future change of personality" (1940, para. 278), placing it within the individuation process as a synthesizing of conscious and unconscious elements. In the Middle Ages an identification with the complex went by another term – possession (Jung, 1934a, para. 204). Jung pays considerable attention to the "unpleasant" nature of a complex, though they are "ubiquitous", they are not something "to be met in the street and in public places" (ibid, para. 209). Possession (Huskinson, 2015) of the ego by an autonomous complex was considered crucial to maintaining mental health

(Jung, 1931c, para. 925; *op. cit.*, p. 88) if the ego is capable of experiencing the possession without identifying with the unconscious.

A complex is identified through the structure of thought, language, affects, body responses, dreams, and in very serious cases, decompensating hysterical symptoms. Complexes do not exist in the mind, body or unconscious, but in the totality of psyche where observed phenomena functions like Trickster. A feature of delayed motherhood, when considered through the lens of early trauma, is how the psyche splinters to safeguard against developmental events and inter-penetrative exchanges that could signal further disappointment. With the help of the Trickster archetype, the traumatized child within the adult will go to great lengths to obscure attention to inter-subjectivity, repetitive patterns, highly charged affects – including time collapsing and lengthening. The meaning and purpose of enactments, as we will see in some of the cases, comprises not hearing/not remembering, transference and counter-transference phenomena that has been dissociated, but also unconsciously asking to be met with humanizing relationship; “see me, feel me, touch me” with understanding words. When a complex is strong the ego experiences little freedom to choose wisely. The necessary ambivalent creative processes of Trickster include normative thieving ways, pointing the way toward the irrational third or transcendent function to create the new. Although he may be the master of double-binding manipulation and paradox (Beebe, 1981), Trickster is also the midwife and bearer of redemptive unifying symbols, foreshadowing the new king of consciousness.

The experience of a complex can be negative, positive or both, but is only pathological if is connected to an area of personal conflict" (Jacobi, 1959/1974). What follows are the research results of participants, and their ambivalent relationship to becoming a mother, the lengths they went to, including one participant who 'evolved' her sexual identity, to create what she had missed in early life: a family.

CASE STUDY 1

The First Meeting – Mrs Anyer

Phase 1 Phenomena of Affective Communication

Before we met

Participant Over One & A Half Hours Late for Interview

Within the first 25 minutes:

- Explanation - Distracted by trying to find work – made more difficult since having baby at 41
- Difficulty due to move to area where people of mixed race poorly received in academia
- Graduate of top college @ Oxford University
- Passion for social research in black and same sex communities
- Wanted to talk about her research / no notice of why she was there

From this highly affective field I wanted to discover what I could understand of her earliest experience that paralleled the earliest minutes of our meeting; what would it mean through my own feeling states. She was late, quickly communicating a working mother is limited, she used race as an issue, revealed non-hetero normative identity, and summarized by saying she didn't know why she was there. From this I was able to analyze three layers of communication:

<u>Affective Symptoms</u>	<u>Transf./CT</u>	<u>Super-ordinate Theme</u>
Chaotic organization	Inferior woman-child	Narcissistic Wound
Entitled	Not enough value	Compensation
Better/Smarter Oxford	Poor PhD student	Hard life for working mother
Never chosen	Induced Empathy	Wants to be in control
Wants to be seen	"Listen to me"	Hunger for authority

The interview took on a pattern of repetition/disruption as a transformative process through a series of tone changing repetitions, and appeared to be Trickster's work, to keep me from learning something important about her. At first she wanted me to believe it was a simple matter, her desire for a baby - *"I was coming up to 40, I just wanted to have a baby."* The pattern broke down into three phases, moving from repetition to disruption repeating itself six times.

- *"I guess initially I always expected not to become an early mother because you know I come from that kind of middle class family where they expect you to do other things with your life first, but it did go on a little bit partly because I was in relationships with women..."*
- *"When I look back on it now I can see that there were ways but I was kind of set up to take on partners that were not really very good at forming family relationships and that actually needed a lot of support, work, help and effort put into them"*
- *"I wasn't really set up to establish good family relationships but also I was mainly in gay/lesbian relationships so I was never going to become a parent by accident ..."*
- *"If you're going to fall pregnant in a lesbian relationship you're going to have to make a very conscious choice."*
- *"...I wasn't in any sort of relationship but there was this little edge to it because I was part of the gay community so it was like I could have a family in a really*

different way and that would not only be personally exciting but socially revolutionary..."

- *"I don't know, my family are weird, they are not a good family...they're just terrible, I mean really selfish...and self centered and they remained that way..."*

She began with the personal collective, moved into culturally specific, sideways to the universal before descending to universal longing. I was left with highly ambivalent and anxious feelings. A transformative pattern emerged through the following three statements foreshadowing what Mrs Anyer was trying to tell me.

1. *"The whole world is very hetero normative"*

2. *"Difficult to live as a lesbian family"*

3. *"I think people hunger for that sort of closeness, support and warmth you get in a good relationship and basically good family"*

I could feel she was sincerely asking me to enter her world so she could discover if trust was possible. The interview process was successful in allowing me to ethically feel into her experience before commencing the Word Association Experiment. Mrs Anyer's unconscious communication began to suggest some dark historical information lurking in the shadows yet her child has helped to distract, perhaps even repair her lingering thoughts of the past:

"My dad worked away from home a lot and my mum and I were not close...I had to really try to be a substitute support for my younger sister who was completely neglected by my parents."

"You know I am his favorite, I always was his favorite and we used to get on really, really well."

"Now that I've got my daughter I see that a lot of the things I tried to pour into family and other relationships were actually maternal but not really appropriate for those sorts of relationships."

"...Life is very full, you know you just don't have that emptiness in your life, there's always somebody."

An emergent transitional narrative pattern was being worked through between research contact gaps that had nothing to do with age, sexual orientation or ten years of analysis. The question in the air between us was what has maternal identity/pre-occupation been trying to repair? By the end of Phase 1, Mrs Anyer was still ensnared by the archetype of the Trickster through creative use of ambivalence between her work in academia, fantasies of retaliation and motherhood. The belief she did not fit into white middle-England academia kept her outside of achieving academic status. I began to wonder if her unconscious struggle represented an argument between thinking and feeling that left her feeling de-valued if she could only achieve procreative identity; it seemed only half of her was alive (Seligman, 1985).

“Mainly I fret about work at the moment and the way in which I behave inappropriately so I don't get jobs and people treat me inappropriately and don't offer them to me. Oh! The number of interviews where afterwards they had to make up some convincing reason not to appoint me! Good job I have a good sense of humor. Also I keep thinking one day I will write devastating journal articles out of all my hilarious experiences of racism and sexism and other - isms - or even better web blogs which lead to heads rolling, ha ha ha,” (rubs hands with glee.

Jung's Word Association Test & Mrs Anyer

Time 1	Time 2	Stereotypes	False Repro	Disconnect	Rept'd	No.CI
34	36	3	13	7	5	104

Mrs Anyer's case material findings from the Phase 1 interview was in concert with the WAT results and her dreams. As will be evident in these findings it is important to note that of the six women who undertook the WAT, Mrs Anyer had one of the lowest complex indicators. What this means is though she was 'in her own world' as were Mrs Sidney and Mrs Luke, whose case material follows, Mrs Anyer demonstrated a very high degree of resilience despite her own particular early trauma. In the numbers listed above, the way of recording

time in the WAT, rounded up to fifths are then tallied against the median for number of times responses could be identified as Stereotypes, False Reproduction (errors of recall), Disconnected Responses and Repeated Words to tally up the total Number of Complex Indicators (CI).

In the chart (Fig. 1), within the first fifty words, we can see Mrs Anyer displayed very high response times to four words I have highlighted in bold text: **TO PAY**, **TO ASK**, **LAKE** AND **SICK**. Median times are found by rounding up recorded times in fifths. A pattern of perseveration appears to commence with the 10th stimulus word "TO PAY" at 14. The response was "Bald" and later as "Salary". Mrs Anyer said she heard "toupee" in the first instance, an example of a misunderstood word becoming what Jung (1918/1969, p. 135) called "the affective idea which fills up consciousness." Older men wear a toupee, or hairpiece, in the main. Further evidence of a perseveration appears with "TO ASK" producing "To Give" both times. "COLD" at 19 follows to produce "Warm". Further down with 17th word, "LAKE" produced "Ripples" at 14, followed "SICK" slightly elevated at 11. "Lovely" is a word repeated several times during the WAT.

Word	Response	2nd Word	Time	Fifths
to pay	bald	salary	2.88	14
window	sky	sky	1.54	8
friendly	lovely	lovely	1.56	8
table	chair	chair	1.07	5
to ask	to give	to give	3.04	15
cold	warm	warm	3.1	19
stem	flower	flower	0.88	4
to dance	to sing	to sing	1.5	7
village	shops	shops	1.87	9
lake	ripples	ripple	2.78	14
sick	unwell	unwell	2.25	11
pride	lions	lions	1.53	8
to cook	stew	stew/casserole	2.05	10

Figure 1: Beginning of a Perseveration

Notably in the chart below, Mrs Anyer's response to "ANGRY" does not produce a response time above the median. "To Swim" registered higher as it resonates emotionally to her daughter's swimming lessons. "Blue" at 15 produces "Yellow" (opposites on a color wheel), followed by "LAMP" producing "Bulb" at 14, and was also repeated correctly. It is not until we reach "TO SIN" that we find the stimulus word with the highest charge to "Prayer" at 35. "BREAD" a seemingly simple association to "Butter" produces a response time value of 19. Response times suddenly drop under the median to produce "Poor" for "RICH" and "Leaf" for "TREE", telling us the perseveration of affect beginning with "TO PAY" in the first chart (Figure 1.) is completed.

Word	Response	2nd Word	Time	Fifths
ink	green	green	1.65	8
angry	sad	sad	1.54	8
needle	thread	thread	0.81	4
to swim	lessons	lesson	2.2	11
journey	car	car	1.42	7
blue	yellow	yellow	2.97	15
lamp	bulb	bulb	2.87	14
to sin	prayer	prayer	6.99	35
bread	butter	butter	3.83	19
rich	poor	poor	1.05	7
tree	leaf	leaf	1.43	7

Figure 2. Perseveration Continued

Taken together, the pattern has its own narrative as stimulus words and associations relate to each other as if one is a problem and the other an empty space needing a remedial solution, such as a circumambulation of affect [see Figure 3 below]. An interpretation of this perseveration appears as rings around a core in the diagram below. The corresponding *narrative poetic interpretation* of what Mrs Anyer would only reveal at the last meeting to review her WAT responses and dreams, might be understood as this:

Do as you're told and you'll be **paid**. If you're asked you had to **give**.

If the atmosphere in the family was **cold**, you provide **warmth**.

The **ripple** effect upon a still **lake** from something penetrating
is a strong image that stays and stays.

If you're **blue** bright **yellow** can help.

It's difficult to know what is happening in the dark

if the **lamp** has no **bulb** in it.

But when you know which side your **bread** is **buttered**

you do what you have to do.

Through her associations and timed response to stimulus words, Mrs Anyer was getting ready to tell me something important about what had happened to her, but it wasn't yet the time, there were still dreams to talk about. Later she told me she hadn't heard me say "TO SIN" but "To Sing", another way of saying performance was corrupted.

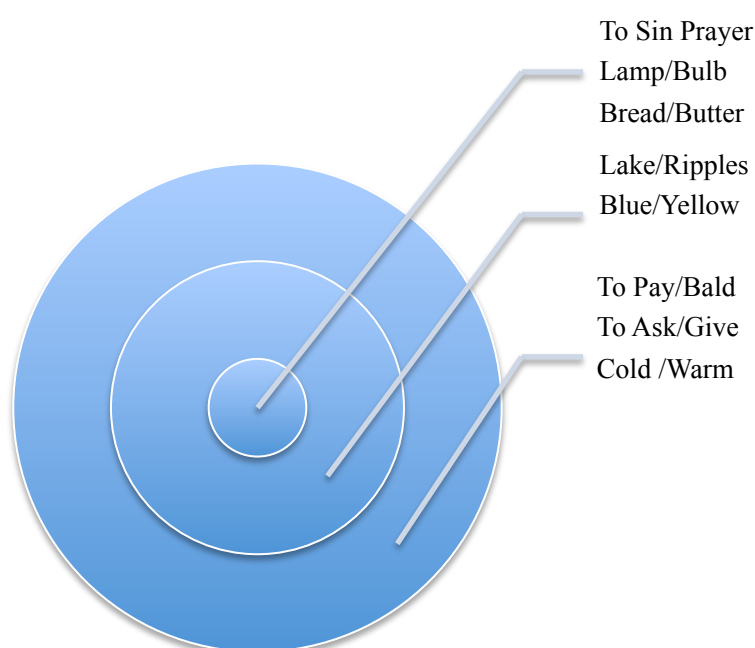


Figure 3: Circumambulation of a Complex

Fast and Slow Numbers Parallel High Feeling-Toned Dreams

Three words stood out in the second half of the WAT with very fast responses. Three words were "SAD" associated to "Happy", "HAPPINESS" associated to "Flowers", and "TO CHOOSE" associated to "Life". Mrs Anyer couldn't reproduce "Happy" in response to "SAD". Flowers as a sign of "HAPPINESS" had a short stay in her mind. And though she chose "Life" through giving birth, there are too many other areas of life where she seemed to have no choice.

High numbers, as seen below, began to appear, meaning it took longer for Mrs Anyer to bring an associated word to mind as her internal processes had a larger amount of 'data' to wade through.

Studying the chart below (Fig. 4), we may wonder if parting with former lovers, a way of life and her loss of family connection, carry a feeling of "falling to pieces." "Family" was associated to "Home," consistent with the first phase of research.

Word	Response	2nd Word	Time	Fifths
part	pieces	pieces	7.19	36
family	home	home	6.23	31
anxiety	blood running	rushing blood	14.56	72
to abuse	privileges	privileges	4.62	23

Figure 4. More High Numbers

Family has been important to Mrs Anyer's well being. Within it she could adhere to and later recreate subject formation as the mother. "ANXIETY", her highest response time, held the greatest amount of high-feeling tone as she recalled the memory of later multiple miscarriages. Mrs Anyer didn't just want a baby; she wanted a home with several babies. Ending the WAT on the word "TO ABUSE" was a genius choice on Jung's part for research endeavoring to reach the repressed feminine. Her association to "Privileges", above, may indicate an arrangement that had gone too far. In reviewing other high low numbers I found "FAMILY", "FRIEND" and "FEAR", an alliteration of "F" words to hold family, lovely and loss. Mrs Anyer no longer sees her family of origin but described them as once being very close.

Dreaming Into An Emerging Pattern

Mrs Anyer brought to my attention a powerful schema of Repetition /Disruption/ Emerging Transformation Pattern in women who have come 'late' to motherhood and are seeking to make sense of it all. Her narrative progressed in pieces:

"The whole world is very hetero normative"

"Difficult to live as a lesbian family"

"I think people hunger for that sort of closeness, support and warmth you get in a good relationship and basically good family"

"I don't know, my family are weird, they are not a good family...they're just terrible, I mean really selfish...and self centred and they remained that way, they don't do anything for us at all"

"My dad worked away from home a lot and my mum and I were not close...I had to really try to be a substitute support for my younger sister who was completely neglected by my parents."

"You know I am his favourite, I always was his favourite and we used to get on really, really well."

"Now that I've got my daughter I see that a lot of the things I tried to pour into family and other relationships were actually maternal but not really appropriate for those sorts of relationships."

"...life is very full, you know, you just don't have that emptiness in you life, there's always somebody."

The pattern followed through into her dreams before the WAT.

- Archetypes of the self – Anima & Animus

- Identification with impoverished children –
- Trying to protect a little boy
- Confusion between her daughter and sister –
two little girls she has looked after (she and her sister)

Dreams after the WAT developed into something more robust, and there is a shift in relation to the masculine.

- Images in her dreams appear outside of her conscious attitude
- What she desires is different from what she thinks is possible
- The image and association to the bicycle in her dream represents the agency that neither her mother nor father could install.

Her description of “being very close” fits with displaced maternal pre-occupation in dreams before the WAT to do with *a little boy* and *two little girls* she has looked after. The children are a way of describing what has been on her mind most of her life, having to be the mother for the family; one of the little girls is she. After the WAT, Mrs Anyer’s dream images appear as a *Complexio Oppositorum*; not what she thinks is possible in her conscious attitude. The message from her unconscious is about accessing and relating to the unconscious. She showed me a dream that could be described as numinous for her, and followed with her own interpretation.

“I started going along a path up a hillside then I realized it was the wrong path to take, I needed to go down through an under path. As I came back down it became hard to cycle and I realized the small wheels of the bike had disintegrated.”

“I think it’s significant that in my dream I was going the wrong way on this silly bike my father bought me then when I turned round to take the right route the bike broke. In real life I bought myself a bike with money I earned, this time I didn’t depend on birthday money from family and friends...I think I might turn things around for myself in my career –”

The feeling between us at that moment was quite heavy. A puzzle piece had found its place. As we were nearing the end of our time together, Mrs Anyer couldn’t believe all that had come up about her family and siblings. She was able, not only to face what had happened to her, but also to put her past trauma into the following context:

“As a survivor of childhood abuse it took a long time to get into an ‘appropriate’ relationship. My daughter’s father is the only partner I have ever had who has been decent to me.”

After all research communication had been completed Mrs Anyer wanted to know if she could befriend me on Facebook. Though she understood why I had to decline, the movement from disrespect of my time to wanting personal contact was significant to her process of working through the material that had been brought up by the study; could she be simply liked by another woman, or anyone, for herself? The pattern of feeling excluded from social integration through to repeating reasons for the exclusion, was a circumambulation around shame. I was pleased she understood the rejection was not personal, but was about honoring boundaries until the research was completed. Since that last meeting I have received email bulletins from her about how happy she is that her career has been able to progress once more.

CASE STUDY 2

In Between Meetings - Mrs Sidney

Phenomena of Affective Communication

After Phase 1 and Before Phase 2

Participant Requests Special Meeting To Make Special Request

Within the first 25 minutes:

- Explanation: Wants to return because she had some revelations.
- “The penny has dropped.”
- “I didn’t find myself able to say quite a few things.”
- “I still have this worry that I’m deadly and that I’m going to chase people away.”
- “I think there’s more than one reason why I couldn’t say some of the things, but one of the reasons was that I was trying to say the right thing” (S2p1, 5-10).

Suspecting a complex has been suddenly accessed from this highly persecutory field of self doubt, I wanted to discover what happened to her between childhood and adulthood, the ‘in between place’ between our phases of research that could be a match to her time of adolescence when her desire to be and do was expanding at a faster rate than her parents anticipated, from her account of things. She was anxious to return to me, she used ‘new information’ as justifiable cause, appealing to the curious researcher in me. And she wanted to make herself acceptable and valuable to me by offering to pay me for the feelings that were activated after the Phase 1 interview. In that moment I came closer to understanding what happened in her potent teen years when mother adopted a male child.

<u>Affective Symptoms</u>	<u>Transf./CT</u>	<u>Super-ordinate Theme</u>
Anxious	Do something for her	Not good enough
Will be rejected	Burdened, obligated	Need to be perfect
Wants to repair	I must forgive her?	Seeks redemption

Needs to buy me	Outrage/can't buy me	Make me whole again
See me I'm good	Good girl gets better	Need for reparation

In the liminal space between the first and second phase of the research Mrs S discovered she was encapsulated in an *affective* field that made her ignore the masculine through denigration, that is a match to her family system of dynamics (ibid, 43-46). Realizing she forgot to tell me she had an adopted brother in the first interview she links it to how her husband has become a feminized man in the aftermath of their having a baby, prompting him to say "sorry" to her a lot. She feels responsible for being "trapped in a system that denigrates male power and [I don't know] how much I've done to encourage it" (ibid, 45-46).

Mrs Sidney's persona mask is in the process of falling off and she was terribly embarrassed. She had worked hard in the first interview to present herself as the Hero and Heroine and perhaps win me as an acolyte on the benefits of motherhood at an advanced age. Mrs S had been adamant that she'd still be trying for a baby well into her fifties if it hadn't worked (Sp15, 507). I felt nervous and weary at her instance she would encourage anyone and everyone to keep trying, "My hope for your research is that it gives hope to people like me" (Sp19, 62). Having a baby was a life or death deal for Mrs S, a contrast to my experience that trying to make a baby past a certain point in life was like pushing a rock up hill. You might get the rock to the top of the mountain, but the cost to body and mind might kill you. Her narcissistic imperative was both wearying and nerve racking. At any point she might annihilate herself from the research or worse, from the self she had built, if I wasn't somehow appearing to

join her, along with a community, a collective with whom she could celebrate her success as a mother (Sp13, 432-443).

Mrs S spoke about working hard to develop an acceptable work persona as a feminine/masculinized woman. But with the onset of motherhood, she discovered her sexual life with her husband was no longer what it had been (S2p2, 38-39). Her fear of repelling people leaks out as a displaced consequence of delayed motherhood. The story of delayed motherhood for Mrs S began to take on the character position of rebellion through long standing gender issues, such as times when mother tried to get her to do subjects like music and English Literature rather than her more favored activities of sport and science. Her fear of emasculating her husband is a way of saying she fears she has emasculated herself in relationship to her buried rage that could only be intellectually considered and rationalized as a screen memory of what happened between her and mother. Men and male activities were put down in her family, robbing her of her good intellectual and scientific talents which manifested in a successful scientific career before moving into a more serious relationship just before turning forty.

It was no surprise to find the scientist in her could easily explain to me the “natural killer cells” that went into her mother after she was born, preventing mother from becoming pregnant again. Her concretization, and reliance, upon the ‘natural killer cells’ as symbolic of the mother-daughter/partnering-procreating relationships is cracking under a life-long masculine persona for a disavowed feeling function. One of the most useful aspects of the ‘natural killer cells’ is its ability to help her separate out her problems from her mothers’: “No

rhesus is my mother's problem and the killer cells are mine. They are different, they are entirely different but we both ended up with immune systems which killed our babies (which sounds horrible) and in my case I switched that response on...I left something that endangered her other babies" (Sp9, 305-307, 310). Her body holds affects that both confirm and redeem her.

In the domain of T/CT, I considered how her body acted as a mirror neuron of her psychological issue with her mother. It was as if mother wanted to prevent a union of masculine and feminine aspects that she has been trying to reunite. Her body has been under the spell that she was more of a Lilith rather than an Eve. I was uncertain whether I was being asked to be mother or father, and realized I was standing in for both in her mind. "I can see you know that there was a pattern in the family..." (ibid, L36-37) attributes knowledge to me I did not have at that moment in time. There were often times in the first interview where I felt she was penetrative and wondered if she could let anyone in. While there were many evidences of attempting to face herself in the first interview, "...it's not just the question of finding the right man anymore it was the question of something else whatever that is" (Sp2, 71) suggests there is an issue still evading her conscious mind. I often felt she was trying to get me on her side, though seemingly an independent woman she wanted to be reassured. In effect she was trying to make me the better parent she had spent her early life doing with her parents. I saw and felt this in the way she was telling me her story, in that story telling was more important than her reflection. I found my responses mirrored her desire to penetrate me with the courage and wisdom of her experience so that through the inter-subjective space of two, I also penetrated and contained her through nominative interpretation of what she

was saying (Sp8, 266-280). Such analytical interpretation is a way of consolidating metaphorical considerations between analyst and analysand to make a symbolic baby - something new, which can change the course of fate. I had a feeling Mrs Sidney hadn't allowed many people to penetrate her in the way she penetrated others with the feeling of her experiences, for fear of not being known and understood, yet again. In this way Mrs Sidney pushed the desire to know her (self) into me such that mirroring what I saw back to her lead to the affect of gratitude and some shame she had taken something she hadn't "paid for."

Perhaps the essence of the T/CT dynamics was an extension of the power dynamics she had long endured/suffered and maintained with mother. There came a point in the requested second interview, after she cried about her fear of having emasculated her husband with her newly found maternal identity, that she revealed the purpose of her visit:

"I feel you've given me so much already that what I came to say I have a suspicion that it can't be this way, but what I thought...was, why don't I just ask Maryann if I can pay her properly for the therapy that I've received and not feel upset because I just feel terribly vulnerable about this, you know I need to make some meaning out of myself...and I came to say that I'm not sure about being in your study and I'm terribly sorry because that wasn't my intention to eat up your time and be disruptive, that's where I got to. And if I could make it into that I had some therapy by accident then I'd like to pay properly for it because it would restore you research budget and that's the way I'd want it to be" (S2p 2-3, 47-53).

The research had activated a hunger to see her self and be seen as someone who was good, not bad. I could not accept her offer of payment. She wanted me to be the therapist so her feelings could be understood in ways that would take the problem to its' depths. I could not do that in the context of being the researcher. I felt my job was to contain and hold her affects and make space for

her to speak her truth. "I'm not happy with myself because of what I've discovered and I know..." (S2p3, 63). But she could not finish her sentence. She was referring to realizations she had that made her feel ashamed, but they did not make me feel less of her. How to convince her it was ok to have feelings? I found the clues to how I was feeling mirrored back through her high feeling toned responses. I felt she was pushing feelings about mother being a disappointment to her, into me, as if I would also be harsh and disappointing. The disappointment emerging between us was that delivering her first baby hadn't taken away the feeling she had to kill off the feminine in order to get through the pain of a lonely life for so long. She also hated feeling she had to kill off the masculine in her partner, just as her mother had done to her father. Once she achieved motherhood she didn't want to copy what her mother had done, she wanted to find a way to bring previously opposing elements within her, back together.

In effect, Mrs Sidney felt exposed (S2p6, 123) and in the CT I felt untrustworthy to protect her from herself. I contained her by completely surrendering to my appreciation of how powerful the complex could be. Soon I realized she felt untrustworthy, incapable of maintaining a false identity in the research. This led me to the feeling of shame that was flooding her in that second impromptu interview. The very emotion that fuelled an extended trajectory to becoming a partner and mother was cracking under doubt of her own integrity. From her 'love story' it seemed two people came together who both wanted children, neither had ever been married before. The crushing blow was realizing she thought she had escaped having a passive partner, having had a passive father, but her narcissistic rage prevented her from knowing whether she was

responsible for his regression to infantile needs after the baby (S2p7, 138-159). After all it was her determination that kept them trying, as if she 'knew' there would be a baby in the end. Her partner began to defer all decisions back to her, (ibid). Mrs Sidney wanted to negotiate with me as a way of helping her face a shadow aspect of herself she did not yet know made her untrustworthy. My position remained steadfast, I could only promise to keep her identifying cues hidden so that she could find me trustworthy. In her mind, these identifying cues entailed four miscarriages and IVF attempts and then a child at 46. She had been so locked within herself she hadn't realized there are countless woman who continue to conceive into their late forties.

The decision to go ahead with the research was turned over to me and I think it was so she could feel safely held so she could return to a dependent state (S2p9, 158-159). In effect she wanted me to use the masculine to hold her, making her feel there was nothing to be ashamed of. Something she had been working on for most of her life. Wanting to withhold her material from this research was a parallel to her experience of the withholding Terrible Witch Mother; retaliation for the research arousing her negative mother complex, piercing her identity as the Heroine of delayed motherhood.

Mrs Sidney's narcissistic damage repeated itself throughout both interviews in several different ways: 1. Denigration of her good things to do with the suppressed and dissociated masculine principle makes the masculine in her stronger as her only supply of healthy narcissism through the winning of prizes by performance. From this she learned doing was more valuable than being. 2. Becoming a tomboy made her competitive with men from an early age, and

competitive with women as I discovered in the transference. 3. Relationships were structured to support and validate, including her relationship with her husband, which failed her when she became physically challenged after becoming a mother. 4. Identifying with her 'natural killer cells' made her as powerful as Lilith and from this perspective she becomes the author of a new creation myth; a *Phoenix Rising* up from the chaos of a half-alive childhood. No sign the Great Mother was present. Publicly breast-feeding whenever possible, waiting until the child was almost 3 years of age to wean him, supported her newly acquired maternal identity. 5. Delayed motherhood became a redemptive motif with a Hero and Heroine with whom the collective are invited and encouraged to celebrate. 6. The creation of a Divine Child redeemed her from the family of origin system, but cost her good feelings about her ability to be desirable as a female. This appeared as a small price to pay as she imagined mother didn't want her to have children therefore her triumph was having them. 7. Projection of the masculine as superior onto having a male child with whom she gets to do boy things mother frowned upon when she was a child, is another reparative motif that fails to unite a divided self.

Mrs Sidney's experience of Phase 1 of the research was the discovery that having a child had not erased all of her earlier experiences of not feeling good enough. Her adhesive attachment to being the good mother in order to feel success as a woman had not taken away all the pain of a negative gender identity. All her attempts and hard work were designed to make her feel and be lovable. I was therefore not surprised to learn fifteen months later when I invited Mrs S to return for Phase 2 that she was pregnant again with her second egg donation child, having come into some inheritance. She was 51 at the time,

but waited some months till she was well past the first trimester, still far enough from delivery, before coming in to do the Word Association Test.

Jung's Word Association Test & Mrs Sidney

Time 1	Time 2	Stereotypes	False Repro	Disconnect	Rept'd	No.CI
20	25	19	31	5	16	138

Fifteen months after meeting Mrs S for the first time she came back a third time, not to say what she couldn't say in the first interview meeting, but to take the Word Association Test and demonstrate she was fully pregnant at almost 52 years old. Overall, Mrs S delivered very fast responses, appearing to tire a lot in the second half of the test, explainable due to her pregnancy, which may account for so many false reproductions (errors). Mrs Sidney had a total of 138 complex indicators, the second highest of all six WAT participants, indicating someone who was in her own world at that point in time, slightly dissociated from reality.

The totality of the WAT appeared as a feeling struggle for Mrs S to pay attention to her reactions and associations. In Part 1 of the test she had 20 Complex Indicators (CI) and 11 False Reproductions (FR), which together with Part 2 came to 31, suggesting some tiring over time. Even though the majority of her time reactions stayed close the median of 7, just above or below, it may be fair to say she was fighting to keep her feeling states from taking over. Looking over the numbers I had the feeling she was attempting to break a wild horse with concentrated, willful speed and effort. Getting it 'right' rather than failing seemed to be the point. This made her association networks appear to be reverberating inside and outside of her. Again this could be a function of

pregnancy in full bloom at advanced age but I sense this phenomena was part of her tenacity to prove she could hold on to want she wanted. I sensed he wanted to prove she had stamina, consistent with other quarrels to prove her worthiness for any endeavor she would choose. I wondered if presenting the persona of the bountiful mother at an advanced age was wearing her down. Mrs S had some early childhood guilt around a biological malfunction that made further pregnancies impossible for her mother. Magical thinking allowed her to connect mother's losses to her own miscarriages, which she felt responsible for with the phrase, "killing off my own pregnancies".

word	Response	2 nd word	Time	Fifths
head	sore	ache	1.23	6
long	sore	stalk	0.97	5
to ask	for more	for more	2.32	12
to cook	badly	well	1.69	8
ink	well	well	1.12	6
angry	Yeah!	yes	1.93	10
to swim	Tommy	Tommy	2.34	12
journey	knapsack	rucksack	3.49	17
tree	climb	climb	1.29	6
pity	me	me	1.62	8
mountain	climb	climb	1.12	6

Fig 5. Early Perseveration through Repetition

A pattern of repeated response words in the chart above, whether as responses to stimulus words or a recalled words commenced with "Sore", "Well", and "Climb" in Part 1 of the WAT. Taken in turn, "Sore" was her response to the first stimulus word "Head" and was later associated to her longstanding issues

with mother which made her feel "sore in the head". The same word, "Sore" was also the associated word a mere seven words later to the stimulus word "Long" and was again associated to long standing issues with mother, followed by an incorrectly recalled word, "Stalk." The response word "Well" came as the incorrect recall to the stimulus word "To Cook", notably after her first association as "Badly" indicating a desire to transform her doubt and poor view of herself. Quickly following were two more uses of "Well" first as an association and then as correct recall to the stimulus word "Ink". Ink in itself creates a stain no matter where it lands, but for Mrs S it seems the stain landed in her, which I can only describe as 'the psyche' as a totality of mind, body, spirit, and soul. Immediately after the next stimulus word was "Angry" to which she could only reply "Yeah" and "Yes" with great emphasis. "Journey" comes shortly after the stimulus word "Angry" to which she replied in the affirmative both times. Looking just above the word "Angry" there is a cluster of responses all using the work "well" and this word also appears as a response in the second half to the WAT. Given Mrs Sidney's biological relationship to "killer cells" it appears the word "well" may have become a way of soothing herself that she does many things well to take care of herself, including cooking and sleeping. But there is another kind of use of well, appearing as a stereotype in response to "Ink", acting as a completion of the word, and in affect a glib response to defend against feelings of never doing anything well, nor being well enough to procreate when she was ready to do it.

Her desire to be well enough so she can have a family is evidenced in the repeated response and associated word "Climb" which occurs twice as a correctly recalled word to her first associations. In the first instance she was

responding to the stimulus word “Tree” and in the second “Mountain”, both offering an indication of how large a task she feels she has undertaken. In between these two stimulus words there is a small cry to the stimulus word “Pity” simply stated and correctly recalled with “Me”. In part 2 Mrs Sidney had 25 Complex Indicators (CI) and 20 False Reproductions (FR), again her response times were riding just above and below the median of 9. The higher median indicating she may have become a bit tired as the test wore on, born out by twice as many significantly higher response times.

	Response	2 nd word	Time	Fifths
Frog	star	Money	1.59	8
To part	hair	Hair	1.52	8
Glass	window	Fork	1.62	8
To quarrel	fiercely	Fiercely	1.63	8
To fear	waves	Lots	5.71	28
Door	clip	Step	6.52	33
To sleep	well	Well	2.16	11
To abuse	fork	Fork	1.95	10

Fig. 6 Waves of Fears and Tears

In the chart above, the first elevated response at 28 is to the stimulus word “To Fear” which Mrs S associated to “Waves” but was later incorrectly recalled with the second response of “Lots.” These connections to being overwhelmed by the uphill “climb” to reach her goal of making a family that would repair the problems she had with mother do not do justice to her potency, drive and

determination. The second elevated response at 33 to the stimulus word "Door" is a reference to threshold experiences later associated to several IVF disappointments, which are masked by mundane associations of "Clip" and the incorrectly recalled word "Step" which stand in for multiple shocks. These two very large blips are cushioned amongst response times that straddle the median slightly above and below, as we saw in Part 1 of the WAT. The narrative here begins with stimulus words "Frog" and "To Part", responded to with "Start" and "Hair", respectively. These act as catalysts, which take some time to implode. The first is an association to an inner fable, a wish to transform herself from a frog to a princess growing as a wish unfulfilled into the second association which brings up the bad memories of mother cutting her hair to make her look like a boy, one of many seemingly small traumas.

There is a second story however in the second half of the WAT (when pregnant with the second baby) that has everything to with a second chance coming out of these seemingly small hopes, dreams, shocks and unbridled venom. I sense we are looking at what is driving her to push herself to the limit. With the stimulus words and associations cited in the chart above the complex really comes into bloom with "Glass" and "To Quarrel" two words that are connected to her fight with mother and her wish to abuse her for all the years of maternal

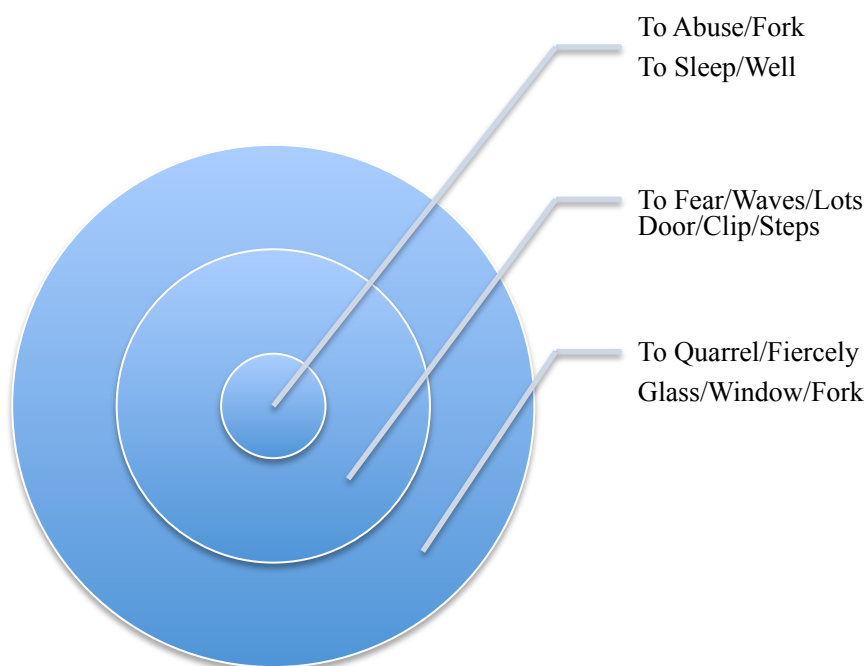


Fig. 7 Circumambulation of A Complex

deprivation and insinuation that Mrs S was “a killer” of babies because she left “killer cells” in mother’s womb. The incorrectly recalled “Fork” is repeated again, this time correctly recalled to the stimulus word “To Abuse” as a final response word.

“Fork” also had associations to ‘needle’. She said she had hundreds of forks in her house because she likes feeding people. The fork image in her mind is related to a memory of watching a popular television show called *Mid Sommer Murders* where someone got killed with a pitchfork. She remembered linking this dramatic scene to what she would like to do to her mother. But to understand what kicked off the first response of fork, we need to go back to the stimulus word “Glass” which she associated to a window breaking when the pitchfork was utilized in her associated television drama, to understand her unconscious symbolic equation. Thinking about murderous rage toward mother reminds her she was not allowed to be angry and often had to think

about stabbing food which later developed into a liking to cook. Aggression toward mother was also linked to mother having a second child, as she is now as a mother expecting a second child. She remembered being three and mother breast feeding her younger sister and giving her a sewing kit with real needles to play with. She recalls mother only started to hit her after her younger sister arrived. She said, "Mother was unrepentant of how mean and uncaring she was to me."

Though the word 'hair' had been repeated in one other place, I had the benefit of Phase I of clinically informed phenomenological analysis to remind me of mother's need to cut Mrs Sidney's hair willfully as if she was Delilah cutting down a potent Sampson-daughter because she was good at sport and drama. Haircuts became, throughout her life, mother spoiling something good in Mrs Sidney as if to retaliate for having spoiled mother's womb.

Taken together the complex pattern from the WAT puts on display its own narrative between stimulus word and association, the former is the spark that lights up the latter. The corresponding *prosaic narrative interpretation* of what Mrs Sidney's perseverations were trying to convey in her WAT responses might be understood as this:

My mother sat on my head and so my head is **sore**

Whether I **climb** a tree or I climb mountain, always I want **more**.

I ruined my mother's womb

Here I am stuck I'm in her tomb.

If I ask you for more will you **pity me well**

If you ask me for more you'll send me to hell.

Hear me well I part the **waves** with my **hair**

I **quarrel fiercely**, should you dare.

Don't **clip** my wings or shut the door

I know what a **fork** is for.

Be careful with your log,

I wasn't meant to be a frog.

Watch me **step** through fears and tears.

After the WAT Mrs Sidney felt very tired. Her thoughts and feelings seemed to have her torn in two between the past and present. She kept associating back to a time when she had a lot of 'tower dreams' – dreams where tall buildings were significant. She wondered if she was more down to earth in her life now that she had a child with another one on the way. She said she used to feel separate and removed from life. There was melancholy.

Dream Pattern:

Before the WAT, dreams centered on her excelling but also her performance anxiety that she may not be good enough. She recalled feeling she had to end perfectly good relationships because of this. In her dreams she has to return to old familiar places and times where she struggled with guilt.

Dream: This was a very powerful dream. Three or four people were sitting down together discussing research and one of them won a prize for speed. I watch a man on a river canoe only to realize he is me. The river gets fast around the bends, a "terry glide" which is a reference to being ten years old and using this as code to help her know what to do. There are obstacles in the river, concrete bollards as you see in Greece, with two spikes instead of three. I feel it's my job to clear them out of the river.

Associations: River canoeing takes strength and endurance. Unconsciously she is preparing herself for the WAT. "At ten I was in an after school club where boys boarded and had proprietary control. There was some predatory homosexual interest from a headmaster in the dorm and the boys had to look after themselves. Years later when I met up with a boy from that time who had been shy and mousy but became someone who could be quite upfront about what had happened to him." The shift from the man canoeing to her being the man canoeing appeared as a piece of the sexual identity confusion she went through growing up. The image has been split into gender performance, the ways of being with men outside of bed and in a group. Winning the prize for speed foreshadowed her speedy responses in the WAT. Here is another indication of outside and inside forces working to keep her in control to perform. Other dreams find her in Italy where she is making lunch but doesn't have enough to go around which she associated to not having enough milk to feed the second baby.

Later in the pre-WAT week she dreamt of ending a relationship with a former boyfriend out of fear it wouldn't work out, like it hadn't with her mother. The mother "was always making things my fault and would never stop it...I haven't worked out what is a good relationship and what I can trust." The pre-WAT dream week finished with a dream demonstrating how in her unconscious a task was set out for her to re-structure her psyche to make room for the second baby while she is in an office environment with colleagues she doesn't know. All she wanted to do was get home for the baby amidst feelings of guilt she has not put mothering as a priority in her life, in the past.

After the WAT, dreams returned to echo childhood and teen fears of abandonment on scary roads when parents appeared to show no interest in her well-being. Lucid memories of that wound returned once more. However there also emerged a synchronistic quality to these dreams between sleeping and wakeful states; when she dreamt of seeking the help of another person to find lost objects, lost experiences returned to her consciousness.

Dream: I'm in a big building built in square around a courtyard. Not a new building, quite an old one, with fairly dark décor. I'm going through one side of the building looking for something. Someone is with me. Then it is dusk, and people are travelling. First I'm watching a man sailing a yacht over the sea in this twilight – it's very light and fast and quite small. There seems to be some urgency. Then I can see a few small planes, I look at them and think they have a long way to go over land and sea. In one plane there is a Scandinavian man with fair hair. The dream has a slightly dangerous quality.

Associations: "The square is not very familiar. The whole dream feels as if it's about therapy – looking for something with the help of another person, and then finding myself on a long journey rather late in the day."

In both dreams, there is sailing/water, a canoe and a yacht. In the WAT she had "lots of fear about waves" which she associated to climbing to reach her goal. Taken together it would seem Mrs Sidney was not over driven to prove she could achieve, she was afraid she wouldn't, and if she didn't she might not measure up as mother or as a participant of the WAT. It is significant the journey ends "late in the day" as being late to motherhood preyed upon her.

In addition to the dream journal Mrs S sent, she wanted to do further work on her rage at her mother, as seen in her WAT associations to 'fork' by having a spiteful retaliatory response. Consistent with her request for a second visit to pay me, the Trickster archetype continued to seek a therapeutic response from me as a way of getting me to help process her spiteful retaliatory response to mother. Though I agreed to give her more time I opened up some emotional space only to allow her to do the reflection herself. After the second baby came, Mrs S sent me a birth announcement and let me know her mother was now more present in her life and she felt relaxed, even glad about it.

CASE STUDY 3 – Longitudinal Insight: *Complexio Oppositorum*

The First Meeting 8 Years Later – Mrs Carter

Phase 1 Phenomena of Affective Communication

We meet again on a new study now that she is a mother

Participant wanted to speak out and opine

Within the first 25 minutes:

- Launched into speaking about herself significantly from the moment she walked into the room
- I needed to formally re-start the interview and précis the acute anxiety she had expressed before the recording started
- First expressed anxiety – possible hyper stimulation of ovaries could have a carcinogenic effect in the future – why take risk
- Second expressed anxiety – she doesn't want any more children (Cp1, 4-7)
- Affect laden persona due to loss of inherited maternal ideal from her mother
- Celebrates luck to have a second IVF child who is a boy

- Context for her new maternal subjectivity husband becomes the third child
- *“It just works great as our unit...I’m sure if my husband was married to someone else he’d probably have more but it really works well, the dynamics work well!” (Cp1, 9-14).*

From this trajectory of affect it was clear something, possibly called motherhood, had a profound effect on Charlene, now Mrs Carter for this new second study. Things had not gone as perfectly as she envisioned when I was interviewing her for a previous study on repeated use of IVF (Barone-Chapman, 2007), a time when she had idealized motherhood and denigrated being a career oriented working mother. She used fear of cancer as a justifiable root cause, quickly communicating her new position, she was grandiose about producing a son, her husband was positioned as an extra child making him another justification and her daughter wasn’t mentioned at all. From this I began to see the past into the present in three layers of communication.

<u>Affective Symptoms</u>	<u>Transf./CT</u>	<u>Super-ordinate Theme</u>
Defensive	Wants things to be special	Vulnerability
In Charge of Unit	Awoke to non uterine ambition	Power seeking
Gender trouble	Boys have more value	Adaptive patriarchy
Gender trouble	Girls are more trouble	Problem with the feminine
Tense dogmatism	Domination	Hunger for social authority
Guilt	Self-centred	Rebellion
Lucky	Obsessive	Identity confusion

Over the course of two hours of the Phase 1 interview, where information from the inter-subjective field was a primary task, Mrs Carter offered several different reasons for not wanting any more children, slowly building toward an

affect laden communication. What follows is the building up of tension, possibly for her rejection of the maternal ideal she inherited from her mother.

It isn't long before Mrs Carter began to show cracks in the relationship between the life she idealised for herself when she was pregnant and the reality of motherhood and what it has shown her about herself, in the process of *maternal individuation* (Parker, 2005, p.24) spurred on by ambivalence.

...It's been a really weird learning curve for me...I've discovered quite a lot about myself since I've had children which I really, I'm not saying I particularly like these, actually because I mean I do think that I'm a maternal person but I thought I was really maternal you know, desperate to have children (Cp1, 15-17).

Mrs Carter found something in herself she didn't like and isn't sure where to place it in the realm of understanding her self, marriage, partner, upbringing and social relationships. Her only way to keep face with me was to attempt to take on the narrative of a social scientist and advise me of her playing at doing 'field research' with friends, displaying at once envy and competition.

...But I think because you know we all have our children a little bit later now you're slightly stuck in your ways, you're quite used to doing what you want to do when you want to do it and you know when the kids come along you can't do that...but I've realised there are things that are important to me I'm not prepared to sacrifice. By having two I can be a good mum but also satisfy those bits as well, which sounds terribly selfish (C1, 17-22).

The 'bits' Mrs Carter refers to are her desire to have "complete sort of control of things" – is a sensation orientation taking priority on a neurotic level, including her house having to be in order, run efficiently, realizing after the first baby she needed a full time live in nanny in order to keep herself comfortable (Cp1, 24-37, *ibid*). As I write this verbatim I worry I am not presenting Mrs Carter as

terribly nice, but perhaps I am transmitting her own feelings that she is selfish, against her equally self-congratulatory narrative of feeling “lucky” to produce a boy though her daughter remains hidden from view. Later in the interview I noticed how her turn from the idealized maternal preoccupation she anticipated as a new identity to reach for, had induced in me a perverse confusion about her. The affects between us aroused her need to let me know how difficult it was for her to be in the middle of a *complexio oppositorum*, which inspired a change to her opposite identity, feeling and experience. I felt she was trying to convince me she was really wonderful because she found an aspect of her shadow she had not fully addressed before coming to realize how children can take over a woman’s life.

My feelings were a mirror of what she may be doing and I wondered to myself if she was splitting between self-criticism and narcissistic anxiety as to whether she could be as good a mother as her mother, a ‘see-saw’ of envious attack and envious idealization. As I am about the age of her mother it may have helped to install some resentment toward me in a transference sort of way. She became appalled that I was even asking her questions about motherhood. I was beginning to feel Mrs Carter wanted control of my views, perceptions and was attempting to sell me her view of motherhood once more, as she did in our first research encounter, serving up how things are and should be. Her re-idealized version as the one who keeps it all together, the organized carer, while the man is the provider (Cp2, 39-46) of all including a full time housekeeper to allow Mrs Carter freedoms from motherhood to be read as a success story. This loop created an elevated value of her family as a “unit” implying it works on the basis that Mrs Carter can have a family if she can be in charge of it. Were it to

contain more children, Mrs Carter wouldn't be in charge and therefore would fail her maternal ideal had disappointed her.

In effect, Mrs Carter's maternal Eros was still in thrall to her mother, as if to assign her mother the position of keeper of True North on a compass. Though Mrs Carter continued to *try* to emulate mother, an over arching narrative of "self value speaking" appears as an ever reaching claim for some ideal of human conduct. If there was buried trauma it was her linking her severely blocked fallopian tubes to early precocious sexual activity, combined with discovering she still needed mother to be a "sounding board" (Cp8, 224-227) regarding her relationship and management of her husband and children. An example of this was her description of feeling "really strongly about that (breast feeding) I suppose because mother felt very strongly about that too" (Cp5, 152). Mother only had two children and so has Mrs Carter, whose many claims of being "lucky" and "happy with our unit" (= two children are enough) felt more like a defensive protest rather than a comfortable experience. Her memory of the way things were for her and her husband some years prior to the interview was felt as shame; reflection was difficult, dissociation easier. Framing her delayed motherhood at 31 as a result of her stress over father's illness and impending death, as well as having not realizing she had clogged tubes, until mother queried Mrs Carter's sexual activity without any measure of protection, had left her little room to be an adult before becoming a mother. In her mind these 'problems' have helped to cement her identification with 'older mothers' qualifying her for research on 'delayed motherhood'.

"We were or we are slightly at the tail end of our friends having babies...they are not older because you know they didn't have the problems that we

had so they were cracking on and number 2 and 3 were popping out and we didn't even have Cath yet. So a lot of them are a little bit further forward" (Cp14, 418-422).

I was struck by the notion her peers were "further forward" as if life was a race. The insight Mrs Carter brings to this research is the tremendous amount of peer competition among women for pride of place in the life cycle, from early adulthood striving to late adult accomplishment in and out of uterine activity. What is "lucky" in one moment can mean being surrounded by families like hers, having the situation of not having to work, and in the next moment the discovery of maternal limitation of motherhood if she wanted to be an equal outside of the unit socially. My curious endeavors to discover what was around her *enantiodromia* of taking the opposite position in regard to work and motherhood was met with resistance to the planned question, "How did the world change toward you as a mother?" (Dialogue follows as Cp15, 500-530).

C: "Well I think that's a very pliant question and I don't think that I am unique in this that most mothers because again we are that bit older and we've had jobs, careers and all the rest of it."

M: "*You mean older mothers?*"

C: "Okay! older mothers, which generally I would say women are older having children. Okay, okay, okay it's the loss of identity and uses, you know you might meet somebody new and you all sit at the table and you don't feel that it's enough you just saying that you are a mummy and I think 9 times out of 10 all women that I know have that same problem. That being a mum is not your identity, being who I am is the fact that I am an interior designer not a mummy."

M: "*That's very different to how you sounded 8 years ago.*"

C: "Is it really?"

M: "*Yes quite the opposite. You didn't seem to care about interior decorating, it wasn't because you didn't... but what you said, and it must be said in a context of what you just said, and that was if you didn't have a child you would have no identity because work identity wasn't going to be enough.*"

C: "So I sound terribly spoilt now? But if I sat next to somebody at dinner

and they said, "Oh what do you do?" I would say that I do interior design, not that I'm a mother."

M: "You pretty much said that for you, becoming a mother was all you ever wanted to become. You said you weren't a career girl and you weren't academic so where did that leave you?"

C: "I'm still not particularly a career person but I need to have... it's the fact that I'm being stimulated in a way that I want to be stimulated. And unfortunately again I didn't think that I would be like this but just sitting down doing a jigsaw puzzle I thoroughly enjoy it and I love the interaction with the children but I do not find that stimulating."

M: "What are you saying? What are you saying about how the world changed toward you, and what it has to do with the mummy identity?"

C: "I didn't really like the fact that the world was seeing me as a mummy."

M: "How did they treat you that you didn't like?"

C: "I'm not sure that they did treat me any differently but I just think that I was perceived in a different way."

M: "So it's your perception, you didn't experience a difference with relating?"

C: "No probably not, I don't know I can't answer that, I don't know...But there is a huge perception that people at home are dull and boring."

I asked Mrs Carter if I had said anything to disturb her, and she said, "No that was just my take on it, and what I thought you were thinking was that I wasn't a very nice person." Mrs C could not think/remember how much her desire for an identity that matched her mother had changed. What had we actually been discussing by her memory? "The way I was as a mother..." I asked if that was the way she felt about herself, that she wasn't a very nice person as a mother.

Mrs C went on to say that her good feelings come from being married and confident in that relationship. She made it sound like marriage appeared as a panacea for whatever ailed her anytime in life; it began to appear as is its own religion centered upon making her feel special. I differentiated where she was

now in her contentment with where she was eighteen months prior during the Phase 1 interview. There had been several issues that had distracted her, including financial problems with her husband's work, whether they would have to downsize, and could maintain their standard of living, whether she should go back to work; many changes were in the wind. It brought to my mind Shakespeare's now famous line, "me think the lady doth protest too much."

Jung's Word Association Test & Mrs Carter

Time 1	Time 2	Stereotypes	False Repro	Disconnect	Rept'd	No.CI
33	25	22	41	0	8	155

The affective field around the WAT activated the need of three rescheduled appointments before Mrs C could work up the courage to come back to do this phase of the research. Her 'reasons' for cancelling were always masked behind a 'scatty' persona to do with scheduling that made her sound like a hyperventilating new mother rather than the highly managerial mother she had become. One cancellation came about one-hour-and-a-half hours before we were due to meet. Each excuse felt like an important message of her ongoing affective communications, felt as: *"I am afraid to face something, afraid of how you might make me feel about myself."* Each time I checked with her to see if she really wanted to do the WAT and each time her response was grateful that I would agree to re-schedule for another time.

Among participants Mrs C had the highest number of Complex Indicators, 155, as seen in the above table. The number is made up of a total of Stereotypes, False Reproduction of associated response words (errors), and Disconnection

within associations and recalled responses to a stimulus word. The high/low numbers indicate an up and down pattern of how the perseveration of a complex continues over several words. The number of times a Repeated Word was used in the context of associations and responses is also recorded as part of a persevering pattern.

In the first half of the WAT (Fig. 8) high response times, recorded in fifths, provide an at-a-glance picture of what is on her mind: money, stupidity (pride), cross (angry) parents, wallet (money) and money again (expensive), in parenthesis are the stimulus words. The highest numbers, or longest response times are to the words: "Money", "Stupid" and "Pride", recorded at 36, 35 and 34 in descending order respectively.

Under these highest numbers there is another layer of high response values, recorded in fifths, between 15 and 20. Starting high at 20 with the stimulus word "To Die" Mrs C responds in opposition with "To Live" but moves to the feeling of "Sadness" incorrectly recalled, most likely as a felt response to the loss of her father just before her fourth successful IVF attempt. At lower response times my eye had to become more discerning for the feeling of what has happened since I last saw her eight years prior while she was pregnant. "Water", with a response of 18 to associate "Drink" and "Cup" was a blanked association. The problem with "money" commences with the stimulus word "To Pay" at a mere 8 but the complex kicked off with the previous word, "Ship" begins to reveal the perseveration of a complex with the incorrectly recalled word "Wreck". Along this "under feeling" there are associations to the word "Angry" of "Parents" and then incorrectly recalled as "Cross". This response

comes soon after the second response of “Stupid.” Near the end of Part 1 two words after “Expensive” and matching responses of “Money” Mrs C associates “To Fall” with “Land” and later incorrectly recalls her earlier association as “Hurt.”

The chart below seeks to organize three affective layers to demonstrate the depth of a shocking event felt as a trauma with the feeling that underpins it. I suspect this event has links to an earlier trauma, such as her difficulty to conceive, and both are connected to social standing.

Word	Response	2 nd word	Time	Fifths
Ship	water-sea	Wreck	2.33	12
To pay	money	Money	1.64	8
Pride	lion	Stupid	6.73	34
Angry	parents	Cross	3.04	15
Rich	poor	Poor	1.29	16
To die	to live	Sadness	4	20
Money	coins	Wallet	7.3	36
Stupid	spaniel	Dog	6.93	35
Expensive	money	Money	3.08	15
To fall	land	Hurt	2.42	12

Fig. 8 Trilateral Affects

She hadn't realized she had to remember her first responses until later in the second round, but rather than lowering her number of false reproductions it increased them by three. Afterward Mrs Carter said she "quite enjoyed" taking the WAT. As a nervous type with a high-strung disposition, her complexes were more difficult to discern. The only associations she was able to discuss were "To Part" as in saying "good-bye." There was also "Money" as it's been a big thing in her marriage, and "Stupid" as to how she evaluated the marriage on their handling of money issues. "Pride" brought her back to feeling stupid, another self-deprecation, rather than an association. Mrs Carter tended to blunt her thinking. Were we able to imagine Mrs Carter as capable of making a relationship with her complexes at this point in her life, a confessional narrative would emerge, such as we've seen with Mrs Anyer and Mrs Sidney, that would have her forging an empathic relationship with herself rather than polarizing dogmatism. Her *imaginal, confessional narrative* of the problem might read like this:

My mother did everything for me, including thinking.

She kept me so much in mind it never occurred to me I could have my own
mind.

I wanted to be a woman of substance but it conflicted with being the life of the
party.

My husband's work almost went into the pan, and my life with it.

I never felt so humbled in my life.

Except when I couldn't conceive.

I need to feel loved...by the whole world.

I don't like my daughter; she's very demanding, just like me.

But I am delighted by my son, maybe too much.

OK, I really do want to stay mother's pet and my husband's lover.

I'll think about the Oedipal thing later.

The word "Pride" held one of her highest recorded response values. There was an outburst regarding discussion to her association with having "pride", something she thinks she's been guilty of. This appeared to be her way of saying she could be stupid. I wondered if Mrs C didn't like to think, as she seemed to blunt the need for the function, preferring to denigrate our process of exploration. Mrs C took issue with any suggestion she avoided thinking, telling me she found it quite disturbing the last time she came to see me. It seems what Mrs C is blocking is not thinking but allowing herself to feel for herself.

"I really don't like spending too much time thinking about things. This is the way I've chosen to live my life...it just worried me about how dangerous it could become to over analyze things. If you have a busy enough and full enough life it could be dangerous. As I said last time I was very upset last time that you were gleaning a person that I don't know was accurate because I'm not very articulate."

Mrs C thought having children changed a woman, especially to turn away from work toward family, but maintained the need to find the right balance. She hasn't had to work for financial need and further felt lucky she can do decorating work around the children. She elaborated on her job as a wife and mother after her husband's financial setback during a recent banking crisis.

"I was into my role as a wife to keep him confident and give him the sex, and I was scared and I didn't want to show him. It showed us how stupid we had been about money."

Pride as a core complex pervaded the establishment of a 'couple' identity as a team she and her husband forged through great difficulties. Pride in how she

has made a family unit work and that they are lucky, against very big feelings that she is not good enough, smart enough, or anything like her mother, who she presents as the perfect nurturing “Great Mother”. This is where pride hides. She wants to be as smart and good as her mother. The manufacture of good things in her life via marriage to a husband who had been able to create wealth enabled her to overcome the inferiority of not being among the educated and cultural elite by putting emphasis on humanistic qualities. The affect these defenses had on my interest in her ‘delayed motherhood’ since my first encounter with her in 2003 mirrored her own disappointment. Mrs Carter correctly saw agape in my face in the Phase 1 interview but read my surprise regarding her *complexio oppositorum* paradigm shift, incorrectly as criticism.

In time however I saw how her petulant sensitivity was the only way she knew how to get mother or husband onto paying her attention; wearing them down to a point of empathy where she would be in control. I felt shame was around for Mrs Carter. She was used to mother letting her down easy and soothing her heated brow. She did not have to feel more than defense. The veracity of her feelings however was shrouded in defiance and rebellion. She could not find the words for feelings she could only display in a high-strung sort of way in order to dominate rather than join. I wondered how this difficulty with pairing/joining paralleled how she managed her mother, and vice versa, and how her daughter learned to mimic her demand for dominance. Hence in the WAT chart, Fig. 8 Trilateral Affects, the dimension of “Angry” activated a parental role that often made her feel cross; her daughter was controlling her and it was mirrored in the way she tried to control me. Quite possibly her daughter’s need of her was an attack on her narcissism. This may be one of the

crucial developmental variants between women having children around 30 years of age and women having children after 40. Few women feel they've achieved much in the world before 30. Mrs C was the youngest of the cohorts who believed she had delayed motherhood when she compared herself to contemporaries. However the delay lurking in the shadows is Mrs Carter's rage at finding she could not garner respect by mimicking mother's maternal ways. She had to find her own.

In general her responses felt robotic and very fast, as if she were competing with someone somewhere. The connection between her competitive nature and peer groups was also evident in both phases of the research. Any attempt to draw her out about her association to words aroused big feelings in defense. She delivered the following speech.

"You see Maryann, again, I don't tend to think about things too much...I'm quite a pleasant person, but you see for me, and I suppose this has a lot to with what we've been through in the past few years (economic downturn), friends and family make my world tick, and what seems to make us as a couple the happiest. And those are the two things that haven't changed as we've gone through all this shit."

Mrs Carter needs her role as wife, mother and interior decorator in order to feel value herself. Though she has "gone to the opposite" of how she wished to identify herself eight years later, the problem of identity remains, and I suspect it has something to do with compensating for the view that she considers herself intellectually inferior to most of the world. As her parents continued to hold the idealized position in her mind (C9L56-60) much of her narrative was borrowing from their 'model' to narrate her story, which had the effect of her being defensively attached to their identity unable to allow reflection. There

was nothing in the second part of the WAT that did not echo what has been reported in the first half.

Dream Pattern:

Mrs Carter's dreams were all about her relationships to people, a match to her speech to me that people and family were at the center of her world. All the dreams in the pre-WAT week appeared to arouse her curiosity and passion. Her need to be heard came with a demand for more time on her dreams than I had originally allocated. This phenomenon in her waking life paralleled the unconscious messages in her dreams due to a repeated pattern of being rejected by someone because each time she couldn't form a union with another through love. What emerged were not so much coherent dreams, but episodic unconscious images that aroused in her associations and further opinions which proved to be quite revealing to her on a feeling level.

Pre-WAT Images:

1/ *On a tractor in the city, mud in my mouth, have I fallen? In the wallow and thick of it, can't get out of it, a sense of falling "tripping up" – My husband is behaving like a mother (he's not like that) – I don't know what matriarchal means – isn't it 'the top dog calling the shots' and controlling things? It's not fair – I hope I'm not matriarchal, but probably I am like that and it doesn't get me anywhere"*

2/ *On a skiing trip with brother and husband in the Isle of Wight (in the wrong place), frustrated and anxious about being late, not getting enough done, children taking more time and I'm feeling un-prepared. Wedding in Scotland, a family thing, I have to be with family but was feeling very pale.*

3/*In the second home of her husband's aunt and uncle. Conflict arises between people, a cool and warm atmosphere. My husband has no identity and becomes a nobody, once I sat next to an ex-boyfriend from my teens. The boyfriend was bright, clever, academic but not able to relate on a personal level.*

4/*Saw former boyfriend a second time after break up. Felt I was too outspoken, "too much to handle" and he never gave me a sound reason for our break up. (She keeps referring to men as matriarchal but gets confused with patriarchal in discussing the dream). Father and my husband are very similar, more effective and quieter than I am. I felt vulnerable just by wanting the army guy, he was a real man and I felt safe with him. I don't feel safe with my husband all the time.*

5/*Big helicopters and a single small helicopter. I identify with the small one that's more agile and nimble. I would like to be more feminine, petite and subtle.*

Post-WAT Images:

6/*At packed cathedral in Arundel with my mother and going up for communion. Soon we are waiting to be served a delicious lunch which we then take through to eat in stands like a cricket match. We are spectating something I can't remember and having interesting chats to people sitting around us.*

7/*At a prep school, same as where my children go. My brother's former headmaster is there. I remember how he had somehow made a discreet plan with me to meet, which was almost impossible logistically for me to carry out. A large boot sale was going on at the school. I arrived at the place and he never showed. I saw him later and he said he had changed his mind.*

8/My husband and brother found a place to move to in London. We exchanged on the property by the time I went to see it with my mother and my husband. The mother was a friend of mummy's. From the moment we walked in I knew I didn't want to live there. It was a fantastic place with a grass tennis court on the roof to form an amazing entertaining space, underground parking but a kitchen that was almost a cupboard and one of the bedrooms hadn't any cupboards. It had a massive area to the back with rails and rails of ski clothes and boots and hundreds of bikes. It had very dark beams I though I could bleach. It was right opposite Waterloo Station SE1 with a very noisy tube running very close by. I realized I didn't really want to move back to London but that I must work if I did. It would be difficult getting to my old job in Fulham. We were in an area completely away from all of our friends.

The dream started off with one character that then changed during the dream to be another person. A rather hopeless bachelor, who had lived with a very controlling father was then on his own after the death of his father and was left this enormous pile. My friend Beth had agreed to help him sort through and de-clutter the house for him. We arrived down, a team of Beth's' girlfriend's to help, the night before. The bachelor was really proud, as he had managed to make us supper. Many of his friends arrived – mostly old boyfriends of mine who seemed very dismissive of me, which I found distressing. The next day everyone was very slow to get cracking and I worried that Beth was never going to get the house done before the end of the day. I took Giles, now my friend, into his study and we sorted though this room in a much more organized and structured way. Many friends and family arrived for tea in the garden.

The children had been with me too, which had proved rather difficult but they had been pretty good at finding things to do. By the time everyone arrived for tea they were happy playing with other children.

Upon leaving I went into the drawing room to find that Beth had spent more time putting up samples of fabrics for curtains etc. than actually de-cluttering the room – which was her brief. Also I was unimpressed that all the samples were from one company. The sofa cover had been removed.

Significantly in post-WAT dreams Mrs C is able to have clearer images and a more coherent narrative, even if the narrative still paints her as obsessed with details about being in charge of others in particular “organization” details that make her feel important, a compensation for Mrs C feeling hopeless and dependent upon her mother’s council. Beth is a friend for whom she has huge admiration for being a mother, who works full time, has great style and is a good cook. But her idealized friend is most valued for not fussing or flapping, something Mrs C does regularly.

The dreams paralleled her conscious disappointment of unrequited love. By the end of the protracted dream work two new thought-feeling forms came to her awareness: 1. She got the life she wanted; 2. She doesn’t want to be in control all the time anymore. The WAT had stirred things up but it was the creativity she found in her dreams after the WAT that brought her the possibility of more coherence.

CASE STUDY 4 – Longitudinal Insight: *Complexio Oppositorum*

The First Meeting 8 Years Later – Mrs Luke

Phase 1 Phenomena of Affective Communication

We meet again on a new study now that she is a mother

Frozen out of time

Within the first 25 minutes:

- Sedate and calm, unable to be penetrated with questions from the semi-structured interview schedule
- She didn't arouse my interest in her rambunctious little boy
- Lack of inter-penetrative effect became an affect unto itself
- Movement, expression and amplification was flat, narrow and limited as if she was in the dock giving court testimony
- Only one over-riding affect, to maintain composure and control, appeared to link into her new found identity as the mother of a precocious child

<u>Affective Symptoms</u>	<u>Transf./CT</u>	<u>Super-ordinate Themes</u>
Clipped whispered voice	Expects critical mother	Secretive shame
Needs to appear all right	Fragile and tentative	Alone in parenting role
Amnesia about past	Frozen out	Dissociation
Fear of becoming mother	Feeling like her mother	Maternal wound
Bouts of depression	Feeling old	Wants to be younger Mum
Self-persecution	Shame - regret	Tortured false self

There is every indication the longitudinal quality of this case is two-fold. Not only have I engaged with Mrs Luke as a pregnant 'Lucy' in a previous empirical study, I am also now seeing how longitudinal affects of her mother have been passed on regarding the continual shame of not doing something important at the right time. It wasn't the right time for her mother to have had her— it was too early – and now (age 51) is not the right time for Mrs Luke to have another child because she's too late to join the party of school mothers who have been young enough to go on to having the second and third baby.

This is a vast difference from Mrs Sidney who had her second child through ovum donation at the same age with the result of healing her family wound with each baby. Mrs Anyer was able to relish what she has made with her daughter and partner though her family of origin continues to disappoint. The late to the gate theme continues between Mrs Luke and mother.

“Again when we got to potty training it was pretty easy, I mean I left it quite late and my mother was flabbergasted and said you should be doing it from you know moment one. I worked on the basis that the later it was the better and actually it’s incredibly quick, it took about three weeks” (Lp5, 144-146).

Mrs Luke’s salvation appears to be in her having a son who did everything in his development on time (Lp5, 138-144) and is not like her. It is highly significant this point of difference makes her very pleased. She can no longer remember the lynchpin between worrying she would be a mother like her mother contained the fear the child would be like her.

L: “I mean he is completely different from me in character, you know he’s very sparky, very bright and very confident, hugely confident, and he’s quite naughty. So I think that he doesn’t have any of those fears I had.”

M: “It appears as though it’s been good for you?”

L: “Oh I mean fantastic, you know I wish I hadn’t left it so long, I wished I wasn’t so late and I wish that I could have had more” ... (Lp3, 65-78).

At the time of the interview I felt there was more to her not having another child to do with mortification within a personal framework of logic and so pursued questions surrounding having the same egg donor (Lp3, 79-84) and how not having the same egg donor would have affected them (L85, *ibid*). Secretive toxic shame underpinned her processes, because since her first child was conceived the law has changed regarding anonymity.

“One child would have known and one child would not have” (Lp3, 86).

Though fully knowing at some point they will discuss his conception with their son, under the new law any child conceived since her son’s birth in 2004 is able to discover ancestry at the age of 18. I had the feeling Mrs Luke found that too soon in the flow of his development, and perhaps hers, and it was best left as is. She was presenting this as a protection for the ‘family’ from a harsh reality being imposed upon them all too soon. I had a feeling she wanted to keep it a secret forever. A second child could spoil the innocence of the first. Her whispered responses in the interview were congruent with her wish to keep secret her age, the time it took her to even want a child, that she is not younger and the manner of conception. The theme of this mortification runs throughout the Phase I interview.

“And also we don’t tell very many people simply because again we don’t feel that it is a point for discussion for them” (Lp4, 97-98).

There are other shames to do with being ‘delayed’ lurking in the shadow to do with a point in time when Mrs Luke began to become pregnant and have miscarriages that left her behind her peers who were achieving generative identity, and yet she could not as yet bring herself to get help from biotechnology.

“...it was kind of unfair to get kind of...I got pregnant I think for the first time...about 37-38 and that ended up in miscarriage and then it went on, and that was cruel, it was like fate was kind of saying, ‘I’m not giving you a chance’...I was ready for it and it would have been good because it wouldn’t have been as late as I am now...I would still be within the age of my peer group...that would have made all of the difference” (Lp18, 540-546).

Mrs Luke's very controlled seemingly disassociated manner keeps her distant from the topic of delayed motherhood. She could connect to a lack of confidence born of being terrified and thinking she didn't like babies (Lp4, L102-108). At times her explanations were more of a defence than an exploration, unable to reach the core of her feelings about where she had been stalled. She can say things like, "You know perhaps I grew up late, you know we all think we are immortal when we are in our 20's and 30's don't we?" (Lp14, 415-425).

It was striking how she attributed cause to her reoccurring bouts of depression, negatively comparing herself to other younger mothers who do the job of mothering so well because they are younger (Lp2, 50-52), concluding "...being older is a disadvantage" (Lp2, 52-53).

"I think it's just you just adapt less well; I mean you know it's like anything there are pluses and minuses. On the minus side you get tired more easily you adapt less well. On the plus side you've got more time. You're not dashing off to do other things...the biggest minus is the fact that I'm one of the oldest parents in the class, if not the oldest parent. And I've become a bit secretive about my age because I don't want to be seen as a freak or I don't want Leo to feel that I'm a freak" (Lp2, 55-59).

It would seem that her advanced age compared to "younger mothers" was a shame first for the endeavoring to become a mother "late", continuing in the daily life of being a mother. The shame comes over as toxic, self-persecutory in the creation of a false self to the world, in order to be acceptable to the other mothers at her son's school and to her son as well. This is a parallel to the kind of 'torture' she had been putting herself through as she advanced through her 40's with miscarriages and IVF attempts over eight years, anxious about how she appeared against other women. Mother's critical internal voice is an object

that has not been reached through anti-depressants or CBT, I suspect because it is a complex, with all the attending symptoms to do with affects such as time expanding/contracting, shame, and dissociation.

Jung's Word Association Test & Mrs Luke

Time 1	Time 2	Stereotypes	False Repro	Disconnect	Rept'd	No.CI
56	50	0	16	1	0	124

Mrs L was absent minded about when we were doing the WAT and couldn't keep up with the thread of emails. Confirmation by me on the day before it was scheduled resulted in her finding her mobile mailbox full and unable to receive further messages.

When we spoke at 9:20 am on the morning of the WAT she asked, "What did you want me to do with the dreams? I don't dream." As it turned out she had written some things down from her dreams and was asking if she could bring them. Dreams became confused in her mind, as did the day and time of meeting for the WAT. Does she or doesn't she dream, will she or won't she turn up? When I wrote this in my notebook Mrs Luke was already a half hour late. I telephoned to see if she was expecting to arrive and she apologized, "I'm running late everywhere this morning." My feeling was her anticipation of the WAT had already produced a large affective field.

In the table above, numbers recorded in fifths, under Time 1 and Time 2, represent the length time over the median for Mrs L to find an association to the stimulus word. The higher the number over the median the longer the time it

takes a participant to work through an internal file of associated data to find the word that feels right. Mrs Luke had the highest length of time among all participants to associate to stimulus words. In part 1 of the test, Time 1 measured all responses over the median of 20. In part 2 of the test, Time 2d measured all responses over the median of 13.

The lower number in part 2 of the WAT suggests that after some initial anxiety over attending and experiencing the WAT, Mrs Luke was able to relax a bit more in the second half of the test. While it may have taken her longer to find the right, and later the correct word, she had one of the lowest numbers of falsely reproduced words at 16. The dissociated way she could not keep arrangements to do the test in mind aroused empathy in me as I saw her work extremely hard to show me she could get things right, and this affect showed me that was the point of the what the WAT aroused in her: *I want to put things right in my life.*

Thinking about my experience of Mrs Luke eight years ago and then over the clinically informed Phase 1 interview, I can see how she would want to keep her mind ticking over to keep herself mentally fit for her son. Her life before attempting to conceive after the age of 38 was not successful until she was 47. The delay in part was due to her not wanting to quit her job and settle down. She was enjoying her freedom and her life. Another way of describing this turning point in her life could be stated as: *The pride before the fall.* This becomes most meaningful in the chart below when we consider her highest response time to a stimulus word took 22.85 seconds, which when translated into fifths takes on a value of 114 against a median of 20. The stimulus word attached to

this recorded time was “Pride” which she correctly reproduced as “Feeling Good”. My sense is Mrs Luke struggles with feeling good about being in her fifties when her son is so young, while her new school gate mates are working on the second and third baby. I sense Mrs Luke remembers with some melancholy, feeling good before she realized she was running out of time to make a child.

Word	Response	2 nd word	Time	Fifths
Death	Dying	Dying	10.74	54
Table	Desk	Desk	13.25	66
Pride	feeling good	feeling good	22.85	114
To swim	floating	floating	13.91	70
To sin	wrong-doing	Faults	18.86	94
Rich	wealthy	Poor	16.85	84
To pray	church	Church	14.33	72
To fall	Drop	to drop	16.63	83

Fig. 9 Pattern of Despair

Once more there is a pattern that emerges with its own narrative between stimulus words and associations relating to each other, but in the case of Mrs Luke it is as if one is a problem and the other an empty space where the only solution is to submit to fate. There is no fight or hope left. The corresponding *thanatos narrative interpretation* of what Mrs Luke revealed consistently

throughout the research, including clinically informed IPA, WAT and dream journals, might be understood in this way:

Death would be easier than to feel myself slowly **dying**
 a fate worse than death, forever crying.
 We sit at the **table** as if colleagues at our **desks**.
 Before him was **pride** I only **felt good** doing burlesques.
 Never did I suspect I was avoiding feeling sad
 I didn't feel I wanted to make my man a dad.
 Busy **swimming** upstream when all were swimming down
 I **floated** my own boat fearing mother's frown.
 Some days my **sin**, my **wrongdoing faults** haunt me still.
 To become so **rich** I made myself so **poor** it gives me a chill.
 I **pray** sometimes in **church** the pain of having only one will **fall**
 But mostly I **drop** into wanting to forget about it all.

The feeling in the first part of the WAT is consistent with her regret she did not have children earlier which I sensed had something to do with the chemistry between her and her partner offset by a more potent relationship lingering in the wings of a job where she was very motivated to perform and excel, possibly because this other relationship made her feel very worthy in work. Much of her melancholy for what could have been is also underpinned by a relationship with mother based on criticism and lack. Mrs Luke was angry about this eight years ago when I first met her but now has revealed the relationship with mother has mellowed as she knows her grandson was made from egg donation. Mrs Luke's relationship with mother has survived not only this revelation but

the years where her mother kept telling her she left everything too late, including how she potty trained her son.

In the second half of the WAT, working with a median of 13, we find a considerable amount of words well over this benchmark, indicating a perseveration to get things absolutely correct to repeat an initial association. For this reason I will be focusing my analysis of part 2 in the WAT on those times recorded in fifths above the value 32, approximately three times the median, indicating Mrs Luke may have begun to tire and stress over accessing the correct response. Of the twelve responses fitting this description more than half of them contain correctly repeated associations. My process of analysing her most acute high numbers is to split them into two groups, one group of seven words correctly recalled and five that were not, to discover the meaning within the quarrel. Splitting, as a verb is to divide, which I feel captures the problematic complex Mrs Luke has been struggling with most of her life.

Word	Response	2 nd word	Time	Fifths
Child	baby	baby	6.37	32
Glass	window	window	8.39	42
Part	separate	separate	6.6	33
Family	group	group	9.7	48
Narrow	Thin	Thin	4.54	32
Door	Shut	Shut	14.62	73
To sleep	snooze	snooze	10.2	51

Fig. 10 Correctly Recalled Words above 32

In the table above the stimulus word “Child” commences a narrative sequence of feelings that bring to her consciousness a connection to the pressure she felt around her last attempt to become pregnant. The connection between stimulus words and associations provide a **window** in which she can **separate** from family and **group**, through a **thin**, narrow door before it is **shut** on her last chance to procreate. Her drive to be correct motivates her to work hard to get accuracy of recall, not realising it took an increasing period of time to achieve the result both in the WAT and in life.

There was a thin chance of her making a baby at forty-seven and when she did she had to shut the door on a past identity she hadn’t wanted to give up. As enthusiastic about her son as she was, she has been pressing the ‘snooze button’ since his birth, on and off, with the help of anti-depressant tablets and cognitive behavioural therapy (CBT).

Word	response	2 nd word	Time	Fifths
To pay attention	notice	Listen	6.69	33
To paint	artist	to draw	10.5	52
Box	chest	Case	7.63	38
Happiness	good	Sad	16.39	82
To abuse	to hurt	to hit	1.89	9

Fig. 11 Incorrectly Recalled Words above 32

Examining Mrs Luke’s responses where the associated word (response) is not correctly repeated (2nd word) the argument begins to reveal itself. The perspective of the omnipotent speaker shifts between articles of speech. The stimulus word “To Pay Attention” was associated to the noun “Notice” as in

something to observe and later shifts to "Listen," a verb with more personal connotation, as there is a "doer." The same pattern continues with the stimulus word "To Paint" associated to the noun "Artist" that later becomes "To Draw" something she might wish to do.

The stimulus word "Box" is a container that becomes a piece of furniture with "Chest" and later transforms into "Case" which may be read as eyeglass case, jewellery case; a "case" for a study, research, or medical record. The move from "Chest" to "Case" is therefore another attempt to imprint the impersonal with the personal. This perseveration of elevated responses peaks at 82 when Mrs Luke responds to "Happiness" as "Good" but later brings her own personal feeling to the fore with the incorrect reply of "Sad." I wish to complete this part of the analysis on the stimulus word "To Abuse" because though it was incorrectly repeated as were the other four words in the incorrectly recalled set. The reporting number dropped well under the median suggesting Mrs Luke had easy access to the memory of being "Hurt" and "Hit" by mother when she was quite little, especially after a second baby came along. However, Mrs Luke's acute sadness at not being able to make a second baby herself, like mother, her siblings and school gate friends, denied Mrs Luke access to the feeling she has a family, and not just one child. A second baby would be a second chance to repair, perhaps to find "Happiness." After we had explored her experience of the WAT she said, "It was all good, once I got over the right – wrong answer bit."

Dream Pattern:

Mrs Luke sent her dreams to me through email after the WAT was completed

and these had to be discussed on the phone due to her busying herself as a non-working mother. The dreams were one or two lines. When we talked about them she discovered there were more associations to consider than she had realized were relevant. The following is her diary exactly as she recorded and sent to me, but very much lacking in content.

The italicized content is what came from our discussion.

"Dream Diary"

Friday

Good friend had another child (she only has one like me) envious, happy, and sad

"I would have loved to have another child but it would be too much to have gone through that again. I have an incomplete feeling. Never felt that anywhere. Felt all those happy sad feeling as other people had children over the years."

Saturday

No memory of dreaming

Sunday

Something to do with music – had just been to the opera

Very emotionally involved happy feeling, can't say what or how she was emotional but was loving it

Monday

Dogs, walking dogs responsibility of having a dog

Scaring life change – "now or never" to get a dog. "A lifestyle thing" Found a breeder with friend. Feels like a second child – recognizes change is life and she must move on

Tuesday

Something comforting and nice but can't remember what

Wednesday

No memory of dreaming

Thursday

Fun good dream good story and then I woke up – wanted it to go on

It was a repeated dream but didn't want to speak of it

Friday (WAT test day)

Something about meeting up with some of the mother's from my son's school, all nice and friendly

"A whole new dimension in my life from what it was before...new and exciting."

Saturday

Wearing a shirt out to a party which then ripped and tore –concerned about it. Could not go home and change as too far away

She reports a "horrible feeling...shameful...embarrassed...insecure" The test didn't worry her. She didn't realize till she had her son that she wasn't part of the club of mothers

Sunday No memory of dreaming

Monday

Something to do with flowers and rain in a lovely garden – lots of people there most of whom I knew but I can't remember who they were

The garden could have been a reference to where she took the WAT. Likes flowers and gardens. When feeling down she buys herself flowers

Tuesday

Woken early by son, so no memory of dream, but think I did dream

"Hope this was helpful. Will speak to you in a little while." Mrs Luke

The message across these dreams is the desire to be part of something that is different from being valued as a co-worker or emotionally abused as a daughter who interrupted mother's good time. In the company of other mothers Mrs Luke finds comfort, companionship and mutuality, which has led her to the sort of rebirth where the archetypal energies can be felt through humanized relating.

CASE STUDIES SUMMARY

Cohort	Time1	Time2	Stereo- types	False Repro	Discon- Nect	Reptd Word	No. CI 1	No. CI 2	Tot. CI
Mrs A	34	48	4	27	0	6	78	56	134
Mrs C	33	25	22	41	0	8	80	75	155
Mrs L	56	50	0	16	1	0	66	58	124
Mrs S	20	19	19	31	5	16	55	83	138
MrsAn	34	36	3	13	7	5	45	59	104
Mrs N	35	21	9	22	0	16	59	43	102

Fig. 12 All Phase 2 Research Participants

The chart above is the summary of all six participant results in Phase 2 research with Jung's Word Association Test. The higher the number of Complex

Indicators (CI) the greater the likelihood of a complex in some relationship to the frequency and strength of overwhelming affect. We can see Mrs Carter had the highest number of total complex indicators from the first and second half of the 100 words set out by Jung. While Mrs An had one of the lowest. Mrs Carter also had the highest number of False Reproductions of the correct word while Mrs An had one of the lowest, again. Both these indicators may be a phenomenon to do with how able each woman felt about speaking about her journey to becoming a mother. Mrs An was very comfortable and identified with it, while Mrs Carter, was uncomfortable with her identity as a mother. Mrs Sidney also had a number of False Reproductions and this may be due to her participating in the test sometime between her fourth and sixth month of pregnancy, accounting for her tiredness over time. Though her numbers are about 20 points above those of Mrs An, Mrs Luke's overall performance did not betray her ongoing bouts of depression, and overall her capacity to recall was excellent with little disconnection and no repeated words.

Other Similarities and Differences

At the time of the study all four participants were experiencing some sort of lack. For most it was a lack of money. But even if it wasn't about a lack of money it was a shortage of time with the father of their child who was working very hard to keep a family of two or more children going while the female partner singlehandedly took care of the primary needs of the child/children. So in effect it was still about a poverty of some kind linked to monetary value, which few of the women were able to claim while their children were less than five years of age. In many of the cases a lack of intimacy was also present with the partner, and some of this had to do with the way the new mother became

the authority about the child's well-being while the duties of the father gravitated toward too much work. In some cases the new mother appeared to be trying to compete for equal value through maternal pre-occupation. For those whose early trauma was most severe, such as Mrs Anyer, Mrs Sidney and Mrs Luke, birthing a child represented a rebirth in achieving the opposite of what they had known, through a traditional role. Only one participant, Mrs Carter, wanted a reversal of maternal preoccupation through maternal subjectivity. My sense with all the women who participated was the present absence of the male partner in relation to how internalized pressure around being late to motherhood affected their relationships. The women felt alone and isolated with their feelings of having to remedy their isolation, first by trying to make something of themselves in the world of work or make something close to meaning in the way they wanted to claim achievement as a mother. Many of them, Mrs Luke, Mrs Sidney, Mrs Anyer and others, communicated as if they hadn't quite recovered from all the time they had lost, even when they achieved what they wanted it wasn't expressed as if it was enough, there was always something more. I sensed the something more was that many of them had critical mothers and never felt fully received by them except for one participant who felt she was late to motherhood at 31 (Mrs Carter). Therefore the loneliness they felt in relationship to their mother was often a transference phenomenon in their partnership with the father of their children.

The common complex linking these women is the negative mother complex, which played Trickster games in their lives as a trauma most often through the death of a father through mortality, symbolically, or the rise of the male sibling

for pride of place. What kept coming up as both privation and deprivation across affective behavior and narrative within the life stories of eight participants was the difference in the way girls and boys were raised as siblings, through parental expectations and in education as reflecting something in culture about gender. The inability to feel valued by the masculine became encapsulated trauma seemingly against the feminine when they re-experienced fertility loss. While the archetype of the Trickster played with their emotions, reality and ability to believe in themselves, the galvanizing transformative dimension of their lives varied according to the way in which they sought recovery.

The more reification there was about the reparative aspect of having a child (or not wanting anymore children) the more difficult it was for them to open to acceptance of the grist of life. There was more of a lingering sense of persecution than a view of life as an ongoing challenging adventure, akin to the experience of climbing a mountain, in psychological and physical terms.

The difference between research participants and clinical patient work was brought home to me in working with dreams within the mixed methodology of this research. However, in the research, though there has been a continuum of holding participants over two years since identifying participants and making first engagements, I have come to see there cannot be the same level of psychic development and accruing experiential knowledge as happens within the regularity of the analytic frame. I found few dream images that seemed more than the neurotic denouement of wounds that came to consciousness through the course of daily residue until after the Word Association Test. Though

relationships did build up in all of these cases, the on-going trust and reliance upon inter-subjective experience could not be practically maintained as a reliable frame in which the psyche could explore itself freely and creatively. In the main, it was both Mrs Sidney and Mrs Anyer who were both able to offer context through associations to dream images, a necessary feature of dream work in analysis. Their associations went some way to demonstrate continuity within the psyche across the three phases of research. All the women came away feeling they had undergone a deep sea change in their self-awareness, some went as far as being able to recognize their complexes. I attribute their transformation to the experience of a combination of inter-subjective attention and mirroring, and the Word Association Test.

Mrs An, Mrs S, Mrs L, and other women in this study hadn't been able to become mothers until ten to eighteen years after Mrs C. They didn't have a full time nanny, weren't able to afford the childcare for them to go back to work, yet they all loved the daily work of being just a mother. After working hard in a career and feeling lonely most of their lives, the women who were at least two generations older at the time of conception and delivery than Mrs C were grateful for motherhood and someone with whom they could raise a child or two. In the next chapter, this will become more evident as we examine the super-ordinate themes across the representative four cases for further similarities and differences.

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Chapter 7 – The Many Faces of Trauma and Transformation

SUPER-ORDINATE THEMES

“Every psychological extreme secretly contains its own opposite...There is no hallowed custom that cannot on occasion turn into its opposite, and the more extreme a position is, the more easily may we expect an enantiodromia, a conversion of something into its opposite.”

- C. G. Jung, 1911-12/1952c, para. 581

INTRODUCTION

In this chapter I will present a survey of key findings including super-ordinate themes coming from Chapter 6 across all four fully participating cohorts as a representational 'collective' of a woman's desire for procreative identity in midlife. I will be describing phenomena of personal, cultural and collective unconscious functioning as conscious imperatives expressed through technology's ability to stand in for 'other' (Barone-Chapman, 2011). This other is a substitute for an unmet known unknown human form. Technology is an unfamiliar other, arriving by expedient means, associated with increased age and declining fertility and sudden mid-life imperatives. Having un-ravelled the 'complex indicators' in the previous chapter (Chapter 6), and set out a frame for understanding the depth of trauma around delayed motherhood (see Chapter 2), I will be keeping in mind the following questions: Has scientific medicine cut us off from experiencing the body through feelings and emotions (Redfearn, 1985)? What is culture saying that cannot be expressed any other way? At what point in each participant's development did generative anxiety become activated/reactivated, (Raphael-Leff, 2007) resulting in a creativity

disturbance? Has the 'technological unconscious' (Rutksy, 1999) interfered with the 'nature' of all living things resulted in disenchantment with ordinary reproduction and mating?

The phenomenon of a complex has at its core an emotional field in terms of time-space contracting/expanding in parallel with high feeling toned association/dissociation expressed as either anger or avoidance. Participant's high-toned feelings have been clustered into affective fields, those unconscious processes that have spontaneously brought each participant's reproductive journey toward generative identity. "The cultural unconscious, in the way I use it, is an area of historical memory that lies between the collective unconscious and the manifest pattern of the culture" (Henderson, 1990, p. 103). Sam Kimbles (2014, p. 83-85) articulates this pattern as occupying three areas of experience at group level of family and in society: 1-intergenerational processes; 2-collective shadow processes; 3-the role cultural complexes play in producing social suffering. Identification of a cultural complex is useful because the messages of anxiety and fear contained within this type of complex is implicit, not explicit (ibid, p. 11) and therefore potentially more anxiety making.

SUPER-ORDINATE THEMES

The chart of Super-Ordinate Themes below illustrate general background and key foreground details surrounding the individual woman's conscious reasons for delaying motherhood, in addition to the presenting orientation of her personality, sibling relationship, gender message in the family, and other cumulative ingredients which contributed to delayed motherhood, activating personal, cultural and collective complexes. The reader's attention may be

drawn to a “presenting past” (Jacobs, 1986) by some of these details as super-ordinate themes, identified in bold lettering. The reader will also find identification of the three levels of complexes, along with other features that give tone and shade to these complexes, including archetypes. The key to seeing into the chart is observation of the common and differentiating details that have become themes in participant’s use of delayed motherhood as a form of individuation to work through Trickster and trauma affects as a transformative process.

THEME	MRS ANYER	MRS SYDNEY	MRS CARTER	MRS LUKE
Cause of Delay	Bi-sexual	Rel. Avoidant	Hysteria	Rel. Avoidant
<u>Mother Rel.</u>	Parentified	Deprivation	Maternal Preoccupation	Deprivation
<u>Father Rel.</u>	Sexual Abuse	Emotionally Absent	Supportive +early death	Absent
<u>Male Sibling Rel.</u>	Parental	Competitive	Dominant	Avoidant
Rel. w/Partners	G Confusion	Parenting	Childlike	Avoidant
Gender Message	Care taker	Too smart @ Science	Be like mum	Not good enough
Gender Perform.	Achiever+ Soc. Difficulty	High achiever	Traditional Wife mum	Defensive. Achiever
Non-Gender Activity.	Intellectual	Good @ science	Work as Compensation	Late traditional role
Cross Generational Bonding	Both+sex abuse	None	Mother	None
Parenting Style	Narcissistic + Devoted	Narcissistic +Devoted	Narcissistic +Ambivalent	Devoted +Strict
Rel. to Feminine	Physical love	Weak	Jocular	Passive
Rel. to Masculine	Servant	Competitive	Child	Avoidant
Post-baby Partnership	Supportive	Dominatrix	Ambivalent + Depressed	Post natal Depression

Sexuality shifts	Hetero Norm.	Sexual Hunger	Dutiful wife	Ambivalent
Transformation	Self Repair	Redemption	Self Repair	Reparation
Personal Complex	Neg. Mother	Neg. Mother	Neg. + Pos. Mother	Neg. Mother
Cult. Complex	Us vs. Them	Us vs. Them	Us vs. Them	Us vs. Them
Complex of Collective Unc.	Misogyny	Misogyny	Patriarchal Mum	Patriarchal Mum
Shifts in identity	Yes + No	Yes	Yes	Yes
Rel. to M-hood.	Devoted	Devoted	Ambivalent	Devoted
Procreative ID	Narc. Wound	Narc. Wound	Hypertrophic	Narc. Wound
Relationship Style	Maternal. Preoccupation.	Anxious Attachment	Domination Ambivalence	Passive Aggressive
Archetypal Pattern	1 st Adam> Eve*	1 st Adam> Eve*	1 st Eve> Adam	1 st Adam> Eve*

Fig. 13 Super-Ordinate Themes

THE WOUNDING

Carrying forward from Chapter 6 with the term 'trauma' is to situate the past of the child into adult experience of the pregnant pause, where 'disintegration anxiety' (Kohut, 1977, p. 104), 'primitive agonies' (Winnicott, 1963, p. 90) and 'cumulative traumas' (Khan, 1974, pp. 42-3, 44-7, 51-2, 55, 56, 57-60) of unmet dependency needs find various justifications to delay motherhood as there has not been enough self established to provide a 'protective shield against stimuli' (Freud, 1920b, p. 27). To these disturbances we may add the fear of being abandoned, un-loved, or not kept in mind if the child doesn't perform to parental requirements to make the parent 'look good' to others. Psychoanalysis uses the term cathexion for this high-jacking of good things from another, for

narcissistic aims and ambition. The super-ordinate themes revealed themselves as inter-woven schema across personal, cultural and collective complexes.

Super-ordinate Theme 1: the better mother (personal, cultural and collective)

In Mrs Sydney's case much of what aroused her dream images was to do with anxiety over the past or the future to do with whether she was ever going to be a good enough mother as she never seemed good enough to her mother. Mrs Anyer's drive to have her research interests develop into published papers from a university post, lead her to discover what was holding her back, including some recognition of the foundation of her one-sided ego development to being the better mother. Mrs Luke was doing her level best to embody a better mother for her son and through this activity, as with Mrs Sydney, she had begun to repair the damage from her childhood experience of the maternal by making a return to her mother and modelling what care for a child could look like. Becoming the better mother was one of themes that became apparent in Phase 1 research. It was only Mrs Carter who in the time between our first meeting when she was pregnant with her first child some years earlier (see Chapter 2) and this research, who had a mother who was so good it was necessary for her to find maternal subjectivity rather than maternal pre-occupation, as the definition of a 'better mother'. She manifested both the loving and terrible mother (Jung 1982, p. 110), a dichotomy she was still wrestling with when I met her for Phase 1 (see Mrs Carter, Chapter 4). Indigenous cultural assumptions about the female body being ordained for motherhood aroused by an aspect of the feminine, identified (ibid, p. 115) as the woman who want to be "anything but like mother' is at base, resistant. This can be felt as a lack of being met by mother in the way that allowed the

daughter half of the dyad to develop autonomy and independence, leading to prolonged adolescence, until mother or daughter do something to end the spell by making a baby. As Jung (op. cit, p. 119) observed there are stages when mother is associated to family, community, society, uterus – to oppose her can bring on disturbances in the menstrual cycle, failure to conceive, aversion to pregnancy, profuse vomiting, miscarriage, all the rejecting *material* to the female who is mater, head of the family. This rejecting impulse was also observed (Jung, 1982, p. 115) to make a woman clumsy with tools, have bad dress sense, and develop a world of influence where mother has no place. Most often the participants in this research have been grateful for a good partner who provided object constancy, something they did not grow up expecting to find.

Feelings and emotions appear to have become un-digestible in the early life experience of Mrs Anyer, Sidney, and Luke, to have altered their psycho-sexual relationships in their teen years, certainly before the age of 21, through either relationship avoidance (Sidney, Luke) or gender confusion (Anyer), while Mrs Carter was sexually precocious. Based on the ways in which Mrs Carter required a lot of extra thought and care from mother throughout her teen years and well into marriage and motherhood, combined with highly affective communication, it appears she has always been quite prone to high feeling tones that easily clustered toward hysteria that has needed containment from mother or later the understanding of her husband. I don't believe Mrs Carter ever considered *procreative anxiety* her problem until her stress levels around her father's impending death pierced her assumption she could fall pregnant easily. Mrs Sidney already had pangs of procreative anxiety by the time she was ten, knowing there was something about mother not being able to have

babies easily she felt responsible for. It seemed this colored her view of procreative identity and the feminine, which had an effect on her later choice of career path setting the scene for a mid-life return to mother by becoming a highly devoted mother herself.

Mrs Luke, already physically and psychologically tortured by mother by the time she had first onset of menses, had been an un-planned, possibly unwanted child, as mother fell pregnant soon after the honeymoon. Mother had expected the party to carry on indefinitely leaving a small Mrs Sidney uncertain if anything would ever be possible for her. This feeling stayed with her through her first successful pregnancy at 47, where to her surprise she fell in love with the child and became a devoted mother after years in the world of work. Her recall of mother explaining period pain as necessary for making babies was an unhelpful introduction to sexual maturation.

Mrs Anyer, interfered with sexually by her absent, wayward father, sometime around puberty or just before, was determined to demonstrate she was a better mother to her siblings, and later when she had her daughter. The relationship with father went on for some time, she became his "favorite" and ultimately caused her to lose her place in the family as the 'first born' when her Japanese mother named her young brother as the first born, possibly out of retaliation. The relationship she has developed with her daughter is primary, as if the one she has with the father is only of secondary importance.

Delayed motherhood becomes a symptom of obstructions in early development, including uncertainty with sexual identity and gender confusion,

most often seen through disassociated relationship to the female body, as if the body was responding in collusion or rebellion, to messages learned earlier within the family and culture. My earlier hunch of the female body being neutered in performance of patriarchal values appears now through these cases studies as an abreaction, in conflict with the imperative to reproduce. Compounding this union of personal and collective influences was the emergence of a transcendent space between a woman's personal mother and the mother she thought she must be in order to qualify as *mother material*. Most often this meant earlier maternal failures required her to be "the better mother". In this research it appears the relationship with the mother set the stage for how Eros, the masculine god and carrier of the feminine, manifested. Yet an emotional cocktail of shame, regret, and stigma presented a dark side for some of the women who, though the children had come through luck, IVF or ovum donation, there remained a residue of failure for having become the mother they never wanted to be (Mrs Carter) and even the mother they wished they had had (Mrs Anyer, Sydney and Luke), but all too late in life.

Super-ordinate Theme 2: un-mothered child (personal and cultural complex)

What is emerging about biotechnology and its relationship to delayed motherhood is not how I thought it might be. I came into the research expecting to discover women who had become cavalier about when to become mothers, if at all, because technology was being relied upon to help out later. Here I am demonstrating media's cultural influence (Chapter 2). Instead I found women with a profound inability to feel they had been mothered and were anxious about whether they would feel lovable toward the children they produced, no matter how they were made. The awareness they had been un-

mothered had made them less available for a relationship where they were also loved in return, until mid-life, as an act of rebellion against the primordial abandonment (Mrs Anyer, Sidney, Carter) they continued to experience since childhood. This goes some way of explaining how they learned a relationship with an "other" could be easily severed before they reached young adulthood. Strangely, Mrs Carter demonstrated this most acutely and perversely. All her life, having had too much of a doting mother, she believed her goals to were to do the same when I first met her (see Barone-Chapman, 2007). However her engagement with her first born, which happened to be a girl, went from a hypertrophy of feminine interests to apathy. Overnight it was as if the daughter was asking too much of her. As a female child her first born had unwittingly activated an attack on her narcissism, which kept Mrs Carter in a position of wanting to run away from the infant, a pattern that continued. This *enantiodromia* (defined as the opposite from the previously held psychological position), presents as a *complexio oppositorum*, which lead Mrs Carter to want something different in motherhood by the time she had a second baby, than her mother and her peer group. Operating at the cultural level of a complex, that difference was maternal subjectivity with autonomy and independence. I read Mrs Carter's desire to be found to be more interesting without procreative identity, socially, to be indicative of a negative mother complex that she was not ready to face.

With the other cohorts, there appeared to be another kind of *complexio oppositorum* in place as both a rebellion and competition with the mother throughout their lives. Mrs Anyer's mother behaved like a child giving her daughter little room to function as a child, inducing her to be the parent, and

later the partner to father. Mrs Sidney's mother wanted her to choose feminine interests which she refused to do, preferring more science oriented interests which gave her pleasure in a long career. Similarly, Mrs Luke, initially experienced mother's maternal wisdom, opinions and invasions to be so intolerable that she labeled her a 'witch' and wanted little to do with her. All three participants chose 'non-uterine identity (Samuels, 1989) in the world of work, where the absent personal father could be found through the culture of the working world.

Super-ordinate Theme 3: maternal gender bias (personal and cultural)

What kept coming up as both privation and deprivation across affective behavior and narrative shifts within the life stories of eight participants was the existence of a male sibling who had more privilege, encouragement and engagement with mother (and father if he was around) than the daughter. Whether the patriarchal took the form of absent or wayward fathers, privileged brothers or betraying patriarchal mothers, this theme emerged unsuspected in every case where there was a male child. I came to realize these participants were demonstrating the very bones of this research, distinguishing the making of a complex between personal experience, cultural and collective contexts. The affects before me at micro level were emerging into a macro view of how feminism emerged when the feminine could no longer quietly accept being thwarted to favor the masculine. Like the goddess Inanna (Brinton Perera, 1981, 1985), the participants had gone underground, hiding from engagement with men for fear they could not live up to the potency of their mothers, even if the potency had a negative impact in their lives. The story of their mothers

appeared as an attempt to canalize them along softer values rather than any hint of the masculine (Paris, 2007).

Dichotomies between masculine and feminine, when reduced to 'soft' and 'hard' throw off the collective psychic balance, if one or the other is devalued (Paris, 2007). Finding, incorporating and embodying yin and yang, anima and animus balance allows archetypal qualities to come out of the shadow of the contra-sexual other and find their time and space. Within a pregnant pause, the needs of the body – warmth, nourishment and protection are concretized as a defence. What Ginette Paris (ibid) regards as Psyche's needs – 'an atmosphere where the heart finds its niche, its nest, its rest' is out of reach until new meaning can be found to the birth of a divine child, outside of the cultural separations of 'winners' and 'losers' (op cit, p. 121). The 'having it all' narrative has been about having the entitlements of what is perceived to be masculine and feminine, the polar validations of career and family previously only enjoyed by men, now a source of rising acute anxiety in women. From the perspective of post-Jungian psychology (Barone-Chapman, 2014b) 'having it all' is having access to both masculine and feminine energies, Logos and Eros, without biasing one because of biological gender and relegating the other as a lesser inferior voice:

Feminist anger against patriarchy has been wrongly interpreted as anger at the paternal principle...The feminine revolution was not a rejection of the paternal archetype, nor was it an empowerment of the maternal principle. [It was] a revolt against a decadent monarchy: the ruling of one gender by another.

- Paris, 2007, p.144

Dominion over another may be part of an idealization of motherhood (Benjamin, 1988) occurring among anti-feminist and non-feminist woman to redeem a sphere of influence through female de-sexualisation and lack of agency, unwittingly preserving an older gender attitude toward sexuality leaving women righteously clinging to a de-erotized caring (ibid, p. 92).

Super-ordinate Theme 4: partnering with a younger man (cultural)

The finding of maternal gender bias toward the masculine, in addition to a life pattern of “*first Adam then Eve*”, is crucial to all other findings, such as 80% of the initial group of cohorts had partnered with younger men, not older men who could potentially dominate them. It is the converse of the cultural pattern of an older man needing a younger woman he can impress. By partnering with a younger man when the desire to procreate became a form of ‘mid-life awakening’ is an attempt to turn back time and tide, to re-capture something lost over time, such as a the magical feeling of a more youthful appearance, (Friese et al, 2008; Goffman, 1963).

Super-ordinate Theme 5: the too much mother (personal and cultural)

Yet the dominating theme of too much mother, not enough father (Seligman, 1985; Barone-Chapman, 2007) whether he was absent physically, emotionally or in present absence, was an anomaly from the norm in itself, noteworthy for creating an empty mother whose present absence placed the child (Mrs Anyer) as a marital substitute for mother in relationship to her own father. Or left the child (Mrs Sydney) overwhelmed, stunned, guilted into submission and bereft of support, needing to achieve something outside of gender norms. Or spent a life-time criticizing the first born daughter (Mrs Luke), who unwittingly

curtailed a very young mother's married life as a party girl, only to suffer mother's life-long criticisms. Even the observation of the "too good" mother (Mrs Carter) comes with associations of 'too much...advice, interference, mothering, attention' leaving the daughter puerile and thwarted to know her own mind and feelings.

Seligman (1985, p. 71) forecasted that the rise of divorce in Britain would amount to over one million children losing their fathers in the six years that followed "as if he had died, and perhaps, psychologically, in a more dangerous way". Such a number drew her to raise the question of the symbolically missing father, defined as unavailable by both mother and child. She asked the same kind of questions I find myself asking now of my cases, "Why is he allowing himself to be, effectively, obliterated? Is he being excluded or is he excluding himself?" (ibid, p. 79). Evidence from her case material suggested unconscious collusion between mother and child to satisfy each other's needs to forestall a phase of sharing and conflict.

Seligman's terms to describe the children of such a dyad as "the half-alive ones", is powerfully constricting. She connotes a kind of vampirism, describing "a large number of ego-damaging mothers" as "withdrawn, self-absorbed, efficient but affectionless...rigidly controlling, domineering and intrusive, or else seductive and castrating, puritanical and guilt-breeding or as tyrannizing their children by illness, more often feigned than real...others that cannot release a child, exploit or scapegoat him. There are also jealous mothers who vacillate between hostility and remorse" (op cit, p. 73). The totality of this kind of mother, the "All-Too-Present Mother" was identified by Seligman from work

by Newton & Redfearn (1977) drawn from Mahler, Pine and Bergman's research (1975) which in effect echoes Jung's (1921, para. 307) earlier warning of the psychic effects of the parent's unlived life upon the child. Becoming an obsession to fix the parents' failings rather than find her own destiny, an example might be the children of a mother who never had meaningful work finding great enthusiasm for their work, forsaking perhaps other callings of their own desire or design. Jung's attention on the psychic effect of the parent's unlived life, such that s/he identifies with them (Kay, 1981, p. 203-219) may include a daughter trying to become the husband mother couldn't keep, the wife to the father mother couldn't be, and the better mother than she had, should children happen. At root these affects are learnt through what Estella Welldon (1992) argued was the perverse proportion motherhood can take as a result of a breakdown of interior mental structures, "whereby the mother feels not only emotionally crippled in dealing with the huge psychological and physical demands from her baby, but also impotent and unable to obtain gratifications from other sources" (ibid, p. 83). There is super-ordinate pattern of the female participant's felt experience of "the child's sense of unacceptability of desire" (Raphael-Leff, 2010, p. 543) that is consistent in all the participants.

Super-ordinate Theme 6: absent father (personal and cultural)

The absent father often is a consequence of the too much mother. Of the original 8 cohorts, there were only three who conceived in their thirties, and three who suffered traumatic affect of sudden parental death. A child remains puerile when it must retain an inflated view of a parent due to parental loss, limited physical contact with a parent, or limitations on authentic shared experience with a parent (Kohut, 1971). Puerile (puella / puer) schemata begin

to seek out new ways of being with the other when they no longer carry the *mother tongue* of the constricting, critical possessive mother archetype. The second piece of this work of individuation through late motherhood, is with the absent father losing his protected and idealized position, when the daughter considers she no longer has to carry the 'empty space' for him to return. When she becomes aware life may be passing her by, she can seek reparative measure through relationship, a creative act to repair previous destructive acts.

The presence of the absent father in childhood was found (Barone-Chapman, 2007) to be decisive in its' influence on setting a course for work and other non-uterine activity (Samuels, 1989) in women who had too much mother and not enough father through their developmental years, coming to "*the hunger to fill an empty space*" through IVF at mid-life with the full force of a negative mother complex and an absence of a satisfying relationship with a male other. Examining the father-daughter relationship in her book *Daughters of Saturn* (2006), Patricia Reis (ibid) draws upon the example of Zeus, god-the father forcing marriage upon Hera, the goddess of renewal and regeneration so that he could abscond with her powers. Reis suggests such a paradigmatic difficult union of oppressed marriage, has stayed in the collective memories of women. Hera was infertile while Zeus unfaithfully produced progeny everywhere and in every form. Taking Hillman's (2005, p. 99) description of the mid-life (fourth decade of life) as a meeting between the archetypes of Puer (young boy) and Senex (old man), as "an opportunity" to "constellate Zeusian fantasy of cosmic generativity" together with Kerenyi 's (1975, p. 31) telling of the mythological Zeus religion when the Minoan king would visit Zeus in a cave, "...a place where one could be outside time, above human life and death" is both my

association and amplification of the individual and collective unconscious processes at work in a *pregnant pause*. In effect biotechnology allows women to fly close to the sun, outside of time, as if we could become equal to the gods.

Super-ordinate Theme 7: primordial shame (personal, cultural and collective)

Also running through participant's stories was an element of some kind of emotional (or sexual) abuse and abandonment that left a stain on their character. For Mrs Anyer it was father's sexual abuse, Mrs Sydney the feeling she had spoiled mother's womb, Mrs Carter thought she was being punished with miscarriages for having sex too young, and Mrs Luke felt shame for lingering longer in work longer than she felt she should have, and against mother's advice. All specific wounds were connected to something about mother, which sat on each of the women as a guilty shame unto itself, caught somewhere between the personal wounds experienced with their mother and but extending into culture (public shame) as well. To my eye it seemed the archetype of mother had not been properly installed in them well enough, if ever, leaving the women to go through a long initiating experience which sought a return to the maternal as if they had been abandoned in the abyss of *empty space*. From a depth psychology view, it can *appear* that the longer a woman waits to allow herself to feel fecund the more likely the archetype of the mother has not been properly installed. The void is empty on the outside to the unsuspecting viewer but the combination of emotion and feeling together "begins to alert the organism to the problem...emotion has begun to solve...[giving] the organism an *incentive* to heed the results of emoting" (Damasio, 2000, p. 284). Running away is part of the "fight or flight" response to not wanting to face a shameful belief about oneself in a public context such

as culture, if there would be an 'other' to witness the shame of not having socially acceptable familial relationship, such as partner, husband, girlfriend, daughter, or son. "Shame inverts libido. Jung emphasizes libido's role in differentiating ego from Self. Introversion of energy is seen in self-destructive illness behavior and sterile relationships" (Mathers, 2001, p. 88). These and other *generative anxieties* form a profile of shadow affects regarding gender and femininity in the age of medical biotechnology (Raphael-Leff 2007) which in turn form the backbone of my observations: trauma to the feminine is ancient and on going, and is best addressed as phenomena that wounds both sexes, across all realms of personal, cultural and collective problem experience. The women who delayed motherhood, even if it was by their personal definition of delay, felt they had betrayed themselves in some way. The question, "tell me about your journey to becoming a mother" in Phase 1, brought on huge amounts of shame among the cohorts (Chapter 6).

Super-ordinate Theme 8: money troubles (personal, cultural, and collective)

During the time of the research when many of the children of the full complement of all eight participants were between 2 and 7 years old, six out of eight mothers reported on how much they needed/wanted to be back in work that afforded them some independence and autonomy. The presence of this commonly repeated issue suggests late motherhood, alongside of motherhood at any time, can interrupt and thwart a woman's earning power. Despite the majority of cohorts having been in the world of work for some time, they were not immune from the "maternal wall" (Crosby, Williams & Biernat, 2004) of work and motherhood.

Internalized gender myths, such as working women will be penalized if they are perceived to be derelict in their maternal obligations (Glick and Fisk, 1999), work in opposition to a unified perspective nurturing and achievement is possible for women, resulting in women being penalized in the workplace and men being penalized at home (Barnett, 2004a, 2004b). The ideation of woman as mother, worker and homemaker, underpinned by the belief that the sexes are different because of needs and values, has been detrimental to all (Barnett and Rivers, 2004).

Super-ordinate Theme 9: life pattern shaped as ‘first Adam then Eve’

(personal, cultural and collective)

A re-creation of the original creation myth ‘first-Adam-then-Eve’ (Hillman, 1972) appeared as a life pattern within the earliest memories of participants in their triangulation with parents and male siblings. As young women purposely choosing to use their minds and make non-uterine choices, tending to put them more in the world of men, the structure of their lives began to suggest an extended Apollonic phase. The favoring of the masculine over the feminine in their family cultures, and in the collective unconscious, associated with economic performance, ergo more value, was partly responsible for women’s lives acquiring the appearance of a structure in two parts: first Adam then Eve. The reverse, First Eve then Adam, became another kind of anomaly necessitating an *enantiodromia* (“an about face”) before the participant reached the age of 40 (see Super-ordinate theme 1 – the better mother, Mrs Carter, above).

Historically, from just a small glimpse into Freud’s thinking of the feminine through one of his last writings in Vienna, it may be possible to see the

necessity of feminist thought to salvage Psychoanalysis from Freud's complaint "psychology cannot solve the riddle of femininity" (Freud, 1933, p. 149).

The difference in a mother's reaction to the birth of a son or daughter shows that the old factor of lack of a penis has even now not lost its strength. A mother is only brought unlimited satisfaction by her relation to a son; this is altogether the most perfect, the most free from ambivalence of all human relationships. A mother can transfer to her son the ambition which she has been obliged to suppress in herself, and she can expect from him the satisfaction of all that has been left over in her of her masculinity complex.

- Freud, 1933, S.E., 22, pp. 112-134

There is something very important to register about the finding of a favored male sibling in this research. Across all participants' stories deep wounds to do with early gender learning of the superior value placed on the masculine in a brother, whether or not he was younger or older, while the good things of the feminine in the daughter were difficult to see by parental caretakers, were present. In effect these women had been groomed to feel inferior to the masculine, by being less considered, desired and entitled, resulting in a view they might be less capable in life than a male. That most of the eight participants enjoyed engagement in the world long past many of their peers due to onset of pregnancy around the fourth decade, goes some way to suggesting how their choice of delaying motherhood resonates, at minimum, with having to prove something to themselves and others regarding the very definition of what embodying the feminine is about; normative, predictive generative identity via motherhood was not going to be enough.

Super-ordinate Theme 10: Enantiodromia as a Complexio Oppositorum

All the women demonstrated an emotional and psychological “turnaround” regarding the importance of a child in their lives at mid-life. Mrs Anyer, Sydney, and Luke embraced motherhood in a way that appeared to suggest their partners fell into secondary importance. The youngest of the cohorts, Mrs Carter developed an anti-motherhood social identity after the birth of her children. Each participant had a very large “about face” in achieving late-motherhood, which appeared as a *Complexio Oppositorum*, as a personal, cultural and collective complex against mother, family, and culture. The idea of conforming to the biological imperative to reproduce at a certain time in life was resisted, except by one participant. The compelling reason that coloured the tenor of the turnaround was lead by her age at the birth of the first child.

Super-ordinate Theme 11: the Negative Mother – Transforming or Terrible?

The four participants I have chosen to concentrate on (Chapters 4 and 6) are representational of the full complement of eight participants that began Phase 1 of the research. On a cultural and collective level in terms of identifying complexes, all eight participants expressed an experience of early trauma with a critical negative mother, competition with a male sibling who had pride of place in the home, and the subsequent struggle to make a self that they could not otherwise find (Zinkin, 2008) through non-uterine activity (Samuels, 1989). This unconscious ‘choice’ played into a modern revision of Hillman’s (1972, pp. 217-225) archetypal pattern within the collective unconscious identified through the creation myth, “First Adam then Eve “. Re-creation of the myth ‘first-Adam-then-Eve’ appeared as an aspect of resistance to patriarchal mothers in the earliest memories of participants in the triangulation with parents and male siblings. As young women purposely choosing to use their minds and make non-uterine choices tending to put them more in the world of men, the

structure of their lives begins to suggest an extended Apollonic phase. Investigations on the personal nature of a complex have revealed traumatic influences that have been split off in order to attempt re-integration at midlife. On a cultural level, we learned how the desire for delayed motherhood meets the needs of inclusivity after resistance and rebellion, depending on the awareness of a threat to procreative identity around the time of puberty.

Much of the negative mother complex encountered in research with women in a phase of a *pregnant pause*, adheres to a family myth where as children and into adulthood they were required to be in service to archetypal features of the parental role (Kradin, 2009). If a daughter is kept in an adolescent phase of development permission to procreate is implicitly withheld, as the mother archetype will not have been 'humanized' or installed (Mathers, 2001), into her own being. Unable to mother even her own being, this eternal daughter, a *puella*, unconsciously waits for the father to return in the form of a male other. Unable to find the man within, the animus who would serve her in a heroine's quest to 'fight the dragons' of childhood, puberty and mid-life (Neumann, 1954) she struggles to bring her body back to mind. Partnering with a male other is difficult without attending anxiety of having her body accessed. Such an intrapsychic disunion between masculine and feminine takes time to unfold, and time waits for no woman without the help of biotechnology. Redfearn (1985, p. 58) finds "Scientific medicine may have helped to cut us off from actually experiencing our bodies, certainly in so far as bodily experiences are related to feelings and emotions."

Participants who identified as having delayed motherhood expressed the

feeling they had betrayed themselves, suggests their only remedy was “staying attentively with the bodily experience to its proper moment of articulation [to] yield a ‘felt sense’ which is always situated within a world-disclosure context” (Brooke, 1991/2015, p. 171). It appeared they had learned something about naming and claiming what had been elusive in the early part of their lives, necessitating a whole body and soul experience. It was Jung who brought the step-change from a focus on the body (Freud) to the self as the central concern of psychologists (op. cit, 1991/2015), later amplified by Zinkin (1985) who differentiated between “the felt sense of a cohesive bodily interior and the existential place of experience and unfolding selfhood” (Brooke, 1991/2015, p. 172). With acknowledgment of archetypal realms Jung bridged millennia of images to feeling tones, also referred to as affect which “precisely speaking, [is] neither ‘in’ the body nor ‘in’ the image but in the ‘between’ [of] both body and image ” (ibid, p. 219). Thus without attunement with early caregivers the installation of good and evil becomes embattled between “openness” and “closedness”, brightening and darkening effects (op cit; Boss, 1977, pp. 109-14) at the root of all affect.

This research developed through use of the personal language of mytho-poetics in an attempt to best describe the wisdom of the unconscious (Grotstein, 2000, p. 5; Kalsched, 2014, p. 204-5) to bridge developmental affect through the language of archetypes, because “psyche spontaneously *personifies* its affects (both good and bad) around form giving ‘structures’ that are universal... inner ‘persons’ of the psyche [which] may be constellated by personal experience in the real world, but are not reducible to outer persons alone” (ibid, p. 190). To

this I have added the affect-laden sphere of psychodynamics and cultural complexes co-mingling with complexes of the collective unconscious.

In the process I have discovered the pervasive super-ordinate theme of a Negative Mother Complex in operation at root level until the approach to midlife inspires a second a return to mother, often spiritually, but more recently concretely through late motherhood. The cultural unconscious, a second layer of influence, extending the boundary of the personal into a larger familial group from peers to social and other media, displays a nature and mode of expression. Here I found the favoring of a male sibling to be a dominant factor to arouse envy in a daughter, largely due to a patriarchal mother. While a complex can be negative, positive or both, in the case of most of these participants it could be said to be bordering on pathological effect in a panoply of complexes across personal, cultural and collective touch points. By 'touch point' I am referring to the point at which a complex is activated. What I found in dreams and narratives was the pattern of: *repetition – disruption – repetition - emerging transformation*. The pattern most often related to a conflicted position of for *and against collaborating with an 'other'*, revealing deep seeded feelings about patriarchy and misogyny as a non-gendered problem with gender, and an a priori condition of developing womanhood with the aim of *making* an individuated self.

The difference between research participants and clinical patient work was evident throughout the research. No matter what the participant brought I stayed with their material to draw them into further appreciation of their own narrative to learn their felt experience. I did not analyze their material or

narrative with them, nor did I do more than reflect back to them what I heard them say, for accuracy. Though some of the participants felt very grateful, such as Mrs Anyer and Mrs Sydney, both participants wanted to stay in touch through a Facebook friend request or subsequent birth announcement. Their gratitude reflected a longstanding hunger for someone to appreciate and contain the story they needed to tell. Early in the research Mrs Sydney had become confused about what she wanted from me but by Phase 2 she was more robust and looking forward to the birth of her second child.

In working with participant's dreams within the mixed methodology of this research, I could feel how limited we were in doing a depth analysis of this kind of material. In part, I feel lucky to have done mixed methodology where there were several points of contact over a two to three year period. However, this was not sufficient enough time for drawing out their associations to their dream images. In the main, it was Mrs Sydney and Mrs Anyer who were most engaged with their dreams as holding meaning. For them offering context to their associations to dream images was not only necessary for this research but for their own benefit, and they felt that acutely. Several of their dreams were highly illustrative of wounds and injuries sustained over time, coalescing into a transformative pattern. Not all participants were fully engaged with their dreams as holding meaning. For Mrs Carter, they aroused a mild form of hysteria as she was just waking up to a connection with her unconscious life. For Mrs Luke, there was a consistent ambivalence and avoidance of exploration through dreams whereas in the Phase 1 interview and WAT she 'performed' perfectly well enough. When a relationship to the dreams appeared difficult for them to form symbols, I had to resort to archetypal patterning, with some detail

wherever possible. The valence of how involved each woman was to her own self-discovery of the 'journey toward motherhood' depended on how 'turned on' she was with producing a child and becoming a mother. Mrs Luke was pleased she had a child even though it was through ovum donation, but was melancholy that it was too late for her to have more children. Mrs Carter's own self-interested curiosity could have deepened into reflection but she became carried away by the hyperrealism of her gratitude for a 'having it all' story. The more intrigued each woman was in fully engaging with her unconscious use of her body as symptomatic of the time necessary to process whatever cumulative trauma had been splintered off from consciousness, the more meaning the research held for her. Otherwise dream images appearing more as neurotic denouement of old wounds that came to consciousness in the course of daily residue remained buried until after the Word Association Test.

Over time, I saw their self-awareness had catalyzed their complexes such that all the women came away feeling they had undergone a deep change. I put much of this transformation down to the experience of undergoing the Word Association Test. Most of the WAT findings were consistent with those of Phase I, which may have aroused unconscious affective communication. Participant's relational difficulties appeared through symptoms, (e.g. transference/counter-transference phenomena) leading to identification of superordinate themes were consistently later verified through the WAT.

Mrs Anyer and Mrs Sidney, both felt the experience had given them something very rich. Mrs Anyer went on to find the academic success she had been seeking most of her adult life, and Mrs Sydney was enjoying the new

relationship developing between her first and second son. Mrs Luke, along with Mrs Sidney, connected to the transformative aspect of the Negative Mother (see Chapter 8; Neumann, 1955, Schema III, pp. 82-83) where the positive spiritual aspects of transformation are seen as the fruit of their earlier suffering through “Vegetation Mysteries”: birth, rebirth, immortality. These are held by the opposite, “Inspiration Mysteries”: wisdom, vision, inspiration and ecstasy. With the vegetative process there is the theme of ‘bearing and releasing’ while the inspiratory side asks for ‘giving’. Mrs Carter was giving herself room to work out her social identity and Mrs Anyer was working through her work identity. While these reparative processes were part of an imbedded ambivalent core, they are also important steps on the road to an identity assurance to heal, before another level of transformation with the Negative Mother can unfold.

Super-ordinate Theme 12: The Negative Mother experience inside and outside of class (personal, cultural and collective)

Baraitser’s (2012, p. 4) assertion, “Rupture between women is made most visible through the marker of first-time motherhood, which has come to code for social class and employment trajectories” has not been an identifiable theme in this research primarily centered upon the older mother. We have seen only one participant’s struggle (Mrs Carter) with social identity de-stabilizing her secure base. Baraitser (ibid), goes on to assert late motherhood “emerges out of an increased participation by women in further and higher education and employment” (op. cit) in itself is not a psychological basis for late motherhood. It is, however, an associated cause for the interruption-disruption seeking repair, returning us to the rise of bio-technological solutions for older women

who wish to return to a feeling of fecundity. However, despite age, the solution is not seriously undertaken until the life pattern of “first Adam then Eve” has been secured. With the rise of world-wide statistics for bio-technology solutions (see Chapter 1) we may deduce a rise in the Negative Mother archetype is supported through the negative aspects of the maternal through cartoons, dramas, comedies, sit-coms, newspapers, magazines, and all manner of social media. This denigrating view of one’s mother, mother-in-law, and other maternal-like figures, sits alongside an increasing amount of “maternal confessional” writing [which] deals with the subject matter of the procreative body, the experience of its mutating boundaries and peculiar sensations, as well as with its unspeakable feelings, particularly its treacherous dissatisfactions; thus it might be classified as writing of the maternal abject” (Quiney, 2007, p. 26), born out of fear of becoming like “mother.” The term “traumaculture” (Luckhurst, 2003) may have its genesis in cultural expression but it’s roots form a backward glance to early childhood experience as a female abject and a dissociated view to it, as reflected in both Neumann’s (1955) *Fear of the Feminine* and the Myth of Lillith, which I will expand on in the next chapter.

Raya Jones (2003, p. 653) found archetype theory to be a powerful narrative interfacing between “two traditionally dichotomous ‘culture spheres’ of psychology, science versus art.” The mother archetype includes maternal solace, sympathy, female authority, wisdom transcending reason, and helpful instincts (Jung, 1972, p. 15), but these seemingly positive attributes exist in transitory ambivalent spaces as well the negative pole, sometimes in parallel through archetypal expression such as the goddess of fate, Kali the loving but terrible mother, and Lilith the devouring mother. Taken at face value the

mother archetype arouses great hope for love and fear of rejection, ripe for disappointments and failures at the personal level accounting for the 'veil' of perception through which a *participation mystique*, also known in psychoanalytical terms as processes of identification and projective identification, take place. This is the relevant junction to seeing into the role trauma holds in the case studies as a 'veil' in the perception bridge between the archetype as symbol and the meaning of human behavior in the physical world.

In trauma feeling is dead, a 'match' to the *dead mother*, a pattern described by Psychoanalyst Andre Green (1993) as a way of seeing into patients who cut themselves off in various ways, under-achieve and repeatedly demolish intimate relationships at the point of reaching great intimacy. Green's extensive experience led him to understand the patient's internal world as dominated by a cruel, life altering imago (archetype) from early childhood when the mother went through a depressed episode. The child experiences what I understand to be a fall from grace when mother was no longer a source of vitality but becomes self-absorbed, distant and cold. In tracking the death of the emotional bond between mother and child Green (ibid) defined the result as leaving a "*psychose blanche*" (op cit).

...a blank psychosis - a discouraged, desolate core to the self that, if not utterly paralyzed, yearns desperately for some alternative revivifying contact. Whether we regard this resulting drive as a profound creativity born of deep suffering, or as a manic and often ruthless pursuit of compensatory grandiosity, is one of the watershed issues in our profession; certainly, historically, the dividing line between analytical psychologists and psychoanalysts. But if we can regard this tension, so divisive amongst our professional ancestors, as a potential *coniunctio oppositorum* <union of opposites>, then an open-minded exploration of this territory might yet yield insight into the roots of narcissistic disorder, and in particular dissociation.

The link between trauma and dissociation has been well established (Carrion and Steiner, 2000; Van Der Hart, et al., 2004; Dorahy and Van Der Hart, 2007), but not their link to delayed motherhood. Jung's description of the mother-daughter connection through the potential and achievement of motherhood, has to do with forward and backward movement through "...the lives of her ancestors, who now, through the bridge of the momentary individual, pass down into the generations of the future. An experience of this kind gives the individual a place and a meaning the life of the generations..." (Jung, 1941, para. 316). With these perspectives, including their tensions in mind, it is highly relevant to this research on complexes to do with late motherhood to consider Jung's (1972, p. 21-25) view of how the negative mother complex manifests in the daughter as either hypertrophy or atrophy of the "feminine side" and how these can become exalted or perverted in relation to marriage, motherhood and the demands these relationships can make. All four of Jung's (ibid) definitions of how the negative mother complex was installed, were present in the case studies in various priority among the participants at various points in their lives leading up to the *pregnant pause*.

1. A hypertrophy of the Maternal Instinct – exaggerated feminine instincts including the maternal where the only goal is childbirth and the husband occupies second place. "Driven to ruthless will to power and a fanatical insistence on their own maternal rights, they often succeed in annihilating not only their own personality but also the personal lives of their children" (ibid, p.22).
2. Overdevelopment of Eros – The daughter of the mother described above develops not like her mother, but as the opposite with no maternal instinct. Instead there is an unconscious incest relationship to father to outdo mother, later becoming a marriage-wrecker interested in romance for its own sake, "blind to what they are doing" (op cit, p. 23).

3. Identity with the Mother – If not overdeveloped Eros, identification with mother paralyzes daughter’s feminine initiative. No maternal instinct or Eros. “Everything that reminds her of motherhood, responsibility, personal relationships, and erotic demands arouses feelings of inferiority” and she runs back to superwoman mother. Empty “bloodless maiden” in marriage, passive, playing the injured innocent who must “suck up all masculine projections” (Jung, 1972, p. 24).

4. Resistance to the Mother – Motto: “Anything, so long as it is not like Mother!” countered with intensification of Eros, only knowing what she doesn’t want. Marriage used to escape mother. Fertility, sexuality all difficult as are demands of married life and maternal duties met with irritation and impatience. Development of intellectual or creative pursuits to break mother’s power (ibid, p. 25).

The transformative potential of libido as “creative, procreative, but possess[ing] an intuitive faculty... a force of nature, good and bad at once, or morally neutral” (Jung, 1911-12/1952d, para. 182) is born from the tension of opposites from which all energy proceeds (Jung, 1928c, paras. 34, 78) and is both a creative and destructive act, one that brought about the professional split between Jung and Freud on the use and function of a symbol. In this moment, for teleological reasons, I will continue with Jung’s basis to view a symbol, such as a negative mother complex, as capable of transcendence by mediating between opposites and effecting transitions leading to transformations of psychic states (Bovensiepen, 2002). Jung’s work on archetypes, complexes and symbols is relevant to the female psyche in midlife and the essence of a *pregnant pause*, which carries with it the tension of the opposites, also known as ambivalence, with high toned feeling, riding on the back of the mother archetype and the goal of transformation through a “night sea journey” (Jung, 1911-12/1952e, para. 308; Jung, 1911-12/1952c, paras. 484, 541, 555, 577). This journey, in every case, whether it is based on Egyptian, American Indian, or

Greek myths (ibid) transpires over the 'waters of the unconscious', (water and night symbolizing the unconscious journey from the "terrible" mother to a rebirth). This transformation has been the crucial evidence in the finding of the WAT (see Chapter 6). Even when mother is too good, the daughter (Mrs Carter) continues to induce mother to serve her self-interests, perhaps due to envy.

Expanding on this process we can now consider the Negative Mother complex in broader terms of culture, but more specifically class. Biotechnology is not a guarantee of solace, sympathy and helpful instincts. The cost of IVF cycles is about class in monetary terms, not education or social standing, making reproductive biotechnology often closed to those who are not in the middle class and over the age of 42. The participants in this research ranged from minimally educated to professional women who had gone from middle class to lower class status on the basis of leaving a career to focus on making a baby and were only able to achieve a live birth due to grandparent inheritance, spousal career advancement, or luck. There was a middle group however who despite starting late, and enduring many miscarriages, achieved a live birth through attitudinal shifts, mind-body techniques, and dint of a personal relationship that made intimate pleasure the first priority. No technology was involved. The oldest of these was 46 and the youngest was 37 who went on to have two more children up until 42 years of age. I mention these ages purposively, because the very import of this research is to demonstrate the plight and limited access to reproductive biotechnology to women over the age of 42 on the NHS. As can be seen from Mrs Luke and Sidney, the hunger for family continued into their late forties. Mrs Anyer, after conceiving at 40 desperately tried several more times until she had to give up due to her age.

The NHS is the largest cultural mother archetype in Great Britain, with the power to offer the “night sea journey” to women over the age of 42. This would require a policy change. But policy can’t be changed on the argument late motherhood is due to more women in work and education until later years, as this is only outcome, and no indication of the longitudinal crisis we face in the way we support motherhood and our nation’s children. To this we can also add the way we support women and their children who need to return to work after their statutory maternity leave. Here I will rephrase the work of Cooke, Mills and Lavender (2011, p.37) to outline the ways and reasons for health professionals to change policy to lift the NHS IVF ceiling of age 42:

- Women do not have ultimate choice or control over the timing of childbearing
- This is a new concept not found in existing literature
- While UK media analysis suggests women *choose* to delay having children due to education and career, this was opposed by cohorts
- Instead the cohort of women taking part in the study claimed a “complex interplay” of factors determined *when* they had a baby, which included relationship, stability, health and fertility
- Women perceived an element of chance was involved to have all the factors in place in order to have a baby at a selected time
- Delayed childbearing is rarely a conscious choice
- Some form of control is in place but it is believed to be ‘subconscious’
- Trend for increasing maternal age at time of first birth set to continue

- Health professionals have pre-conceived ideas why women delay and these need to be reassessed
- Clinicians need to understand the complexity of factors affecting women's decisions rather than working on assumptions
- Health professionals need to provide appropriate information with sensitive support in light of varying perceptions of risk

We have to decide as a point of policy making that women have value and that this value carries a necessary power for the health and well-being of both genders in equal measure, to future generations, through all manner of work, whether it in the home, outside of it or in some combination.

Super-ordinate Theme 13: Redemption and Reparation

There was no narrative or WAT evidence that the majority of fathers had helped their daughters achieve the "capacity to go beyond the role of 'mother', to which our society may have assigned her, depends in part on her release by her father from imaginary confinement to one possibility only: maternity" (Samuels, 1985, p. 32).

Two of the eight participants found reparation and redemption (Mrs Luke and Mrs Sidney) through new discoveries of self and other and these included a new relationship with the woman who had been for them the persecuting witch. A third participant, (Mrs Anyer), found redemption but no reparation with family of origin, nor did she desire it, since a central part of what redeemed her was the ability to walk away. Relevant to the latter is Samuel's

(1985, pp. 32-33) formulation and extension of incest as both impulse and taboo, a tension which if held *metaphorically* (Samuels, 1989) can transcend concretization, intellectual forgery and ideas about choice of mate in a “movement from instinctuality to spirituality” (op cit, p. 33). Mrs An did not want to get involved in a heterosexual relationship unless a baby would be welcomed by the father, echoing her own fear of devaluation. “Therapeutically, speaking out is essential in restoring the trauma victim’s voice, self-worth, and dignity” (Wirtz, 2014, p. 128), and this was how Mrs Anyer made full use of the Word Association Test and in so doing made sense of her early sacrifice. Mrs Carter’s claim for what was important to her (see Chapter 5)– family and friends – suggests her argument is with the regressive pull in resisting other definitions for a woman, I suspect, because her father was not holding other options on her behalf; mother had taken over the daughter. The ravished feminine who shows her “rage, betrayal, and shame, an archetype of the madwoman” (ibid, p. 127) transforms herself, as I witnessed with Mrs L, Mrs S and Mrs Anyer, if she is taken seriously and respectfully, “to generate destruction in the service of creation (op cit, p. 239. Women who find themselves in the *pregnant pause* are asking for the re-balancing of Logos and Eros, to regain “Medusa’s head” before Athena’s projections turned against her. Wirtz (2014, p. 236) finds the archetype of sacrifice to cast a “light on the dialectic between victim and sacrifice...why we suffer loss...[a] psychic necessity, to which we are compelled by fate.”

Complexes exist in the psyche where observed phenomena functions like the character of Trickster, going to great lengths to obscure observation of phenomena, attention to inter-subjectivity, repetitive patterns, highly charged

affects, including time collapsing and lengthening. Affect may also include not hearing and not remembering. Trauma as we have seen in the case studies has many faces and forms. One archetypal form is the shape shifter known as Trickster, who carries a dual nature, part animal, part divinity, capable of complex torture and rescuing, bears noteworthy resemblance to the transformative axis of Sophia and Lilith (Neumann, 1955, pp. 82-83), wise women who are not just good or bad, but transformative in the service of the transmutations of pain and suffering. Trickster has been described as a “soul in hell” (Jung, 1972, p. 457), known for “transformation of the meaningless into the meaningful that reflects Trickster’s compensatory relation to the ‘saint’” (ibid). Trickster is therefore the necessary but often destructive ingredient for metabolizing “death of time, death of language and death of narrative” (Connolly, 2011, p.611) transforming trauma originating in maternal deprivation. As a messenger of the underworld, Trickster’s methods include sacrificing naiveté, ego, even victimhood itself, if required, and is uniquely placed to hold the negative and positive until the meaning and purpose of each woman’s creation myth becomes installed as a psychic reality. The new myths of creation are plural, such that installation of their reality is outside of time, in perpetual motion.

Thanks to biotechnology midlife is now a very long moment. Medical reproductive biotechnology is apt to be perceived, during a *pregnant pause* (Barone-Chapman, 2011) in a prior life narrative, as a benign form of patriarchal authority, a returning, mothering-oriented prodigal father coming home to give his middle aged daughter permission to alter time. In the course of a woman’s life such a sudden transformation raises the possibility an early relational

disturbance, with an inhibiting or prohibiting affect, has been preventing “the trauma [to] be ‘forgotten’, and ‘remembered’ instead of being always present” (Cavalli, 2012, p. 598).

Power in the Jungian sense is the psychic energy available to the ego to enable it to carry out its intentions...Conversely, if a great deal of psychic energy is caught in a complex in the unconscious, that complex will gain power and will exert control over the conscious sphere. The ego will be inferior in strength to complex and come under its domination.”

- Vogelsang, 1985, p. 150

SUMMARY

Identification of the *pregnant pause* is to consider a constructionist view (things created in culture manifest representational forms of culture) through the union of psyche *and* social interaction to form the creation of the self (Zinkin, 2008). It is an observation that a poverty of ideas and feelings, lack of integration of masculine and feminine energies (archetypes) incarnate and in principle, prevent the creation of *the third*, “...that to which we surrender...letting go of the self...implies the ability to take in the other’s point of view or reality” (2004, p.8), out of which a baby is only one of many outcomes. What the *pregnant pause* also brings into view are the unconscious processes necessitating the narrative shift in mid-life to seek procreative identity, union with other as a reparative motif for a one-sided, ‘half-alive’ (Seligman 1985) ego-development, in non-essentialist terms.

The *pregnant pause* awaits the third, “to imagine different kinds of relationships and to reflect on one’s own psychic life” (Colman 2007, p. 572). “For Jung, the space of the third begins as a gap of opposition and misunderstanding and

grows into a space of conversation where new things happen” (Bedford Ulanov, 2007, p. 589). It is beyond what is female or male, conscious or unconscious, it is neither nor/both and, it is the new perspective. When something new is conceived as a preoccupation with baby making in the service of having a relationship and generative identity, it is a disservice to the potential benefits of a post-modern revision and quite possibly the development of healthy narcissism in the longed-for child. “When in the mid-life search women seek procreativity, the opportunity presented by postponement, to integrate yin and yang energies, discover a self and begin to individuate, the project succeeds and fails in part if object and subject are in the wrong place” (Barone-Chapman, 2011, p. 189). This schema of ‘a fear of love and relationship’ (Knox, 2007, p. 543) follows when “the struggle to become an independent human, essentially to develop a sense of self-agency, risks provoking catastrophic retaliation from parents who are unable to relate to their own children as separate, independent beings...” (ibid, p. 544). Bion’s (1962) consideration of containment is the function of transforming infinite affect into the finite, which can be understood as a feeling. The capacity to feel and contain one’s own affect, to transform beta into alpha (ibid) requires a lived experience where emotion and thought can be linked through mind and body. “Put in these terms the intercourse between mind and body could be seen as the realization of an archetypal potential that can only be constellated when, through interaction with another, enough capacity to bear affect has been established” (Cavalli, 2014, p. 33). When affect cannot find mind with a capacity to link, feelings go into the body and the body is attacked through somatization, in effect rendering the body as neglected and forgotten. This paradigm within the body parallels early interaction with carers, requiring an

opening into understanding the dissociation between time (thinking) and the body (feeling) in a *pregnant pause*. What this research has discovered is that having a child has some reparative value regarding past traumatic events, though the actual child cannot on its own satisfy mother's narcissistic injury or her need of adult partnership. The process of affect transformation in Bion's (op. cit) terms, combined with Cavalli's (op. cit) contextualization, in addition to participant's finding an *other*, are all important ingredients in the redemption motif of a pregnant pause.

An interplay between technology and a long disowned splintered off psyche conspire to form a new narrative identity held together through the repetitive process of multiple IVF/ART treatment attempts. Though repetition functions as a reparative motif and a way of separating out of the primordial mother complex, as a step toward individuation (Barone-Chapman, 2007), the mid-life IVF baby begins its life serving the needs of the mother. When seen symbolically, the feeling of a regressive pull toward fusion with the mother is an indication that a new kind of relationship with the animus is in need of re-negotiation (Stein, 1983). In 1931, Jung's writing suggested women had, prior to the approach to the fourth decade, an "unused supply of masculinity" that needed to become "active" (1930-1931, para. 782).

The idea of a 'having it all' discourse (Chapter 4), one that Walkerdine et al., (2001) argue against, finds women's life courses to be different from men, because of having children and qualifications (see also 'queer time' Chapter 3), with the former affecting downward occupational mobility. The "cultural attitude" (Henderson, 1984, p. 13) behind a *pregnant pause* includes a "money

complex" (Stein, 2004, p. 267) where the valuing of monetary success over the raising of children colludes with the technological unconscious (Rutsky, 1999) to produce an increase in childlessness.

A confluence of traditional and emergent feminine and masculine polarities emerge in a pregnant pause. It is at once an individual and, as demographics indicate, a collective phenomenon. Unlike an individual complex that weakens once brought to consciousness, a cultural complex is more difficult to get hold of because it is embedded within the ideas, language, beliefs, mores and "social clock" (Neugarten, Moore, and Lowe, 1965/1996) of normative expectations within every structure that supports personal and collective existence. A *pregnant pause* comes on as passionately as first love, with all the expectation of satisfying the need of a deep, meaningful relationship with another that cannot be broken by a change of fortune or heart. A pregnant pause, the onset of procreative desire at midlife, serves as a *sous rature* (Derrida, 1978), an attempt to put under erasure a one-sided development of ego arising out of relational disappointment. What is 'under erasure' may still be seen through the attempt at erasure. It is here that psyche and soma engage in a last dance to address an over compensating persona to repair the infection of absence that resulted in feeling "half-alive" (Seligman, 1985).

The economic and social status of animus or 'doing' masculine activity has aroused the need for a persona adaptation for women who in longing for the absent father turned to traditional male identities hoping to find a related masculine. Left with "too much mother" in her drive not to become like mother as a woman who was left to carry the burdens of parenting alone, she becomes

disconnected to her instincts and remains frozen in adolescence. If we believe ourselves to construct our realities, we can deconstruct them as well, with reflection of the present through the lens of the past or to reinvent the past in light of the present (Bruner, 1990). To step out of the traditional paradigm of what is feminine, what is expected of the female body requires agency, a product of the archetype of masculine energy, animus. Left unchecked it becomes a compensation for missing relatedness. Compensation here asks one question – what is being enacted unconsciously to balance out a woman's general conscious attitude? Is it possible the world of non-uterine activity, long held to be a place of establishing one's authority, creativity, talents, financial stability and independence is not a conscious choice but a living out of the unlived life of the same sex parent? In examining family myths, Richard Kradin (2009) finds the 'larger-than-life' quality of parental imagoes to distort and influence in ways that make them ideally time-limited. He (ibid) cites authentic life experience akin to the concept of 'humanizing' the archetype. From this research we can see the desire for a child at mid-life becomes a seemingly necessary authentic ground for humanization.

In mid-life, the narrative can shift to the non-symbolic equation, baby = primary relationship, when actually it is to do with the individual's relationship to self, society and other, the primordial affects of parental figures as yet unresolved, and how their own bodies were related to. The ability to mate and express sexuality can be seen as having its roots in body memories of mutual satisfaction with early caretakers (Barone-Chapman, 2007). An indication of this kind of satisfaction, i.e. good feelings for one's body, as a woman, can be traced to the way she was introduced to the mystery of menstruation from both a

practical standpoint and its' purpose to creating life (ibid). From these influences we arrive at the degree of acceptance of body functions and sexual relating, including timing of the first sexual experience. How each woman is able to own the experience of her body with another corresponded to the degree of closeness and acceptance each woman felt with her mother. From the depth analysis of participants what we have seen is that it is not necessary to feel mothered in order to become a mother, but it helps in dealing with the ordinary narcissism of a child, if a woman can bring to the present her own wounded empathic response to the narcissistic wound inflicted by her own mother. This would enable mother to be the wounded healer without over-compensating by having to be the 'better mother'. Within the *pregnant pause* is the cultural warning we need to stop and consider the meaning and purpose of the pause itself, as both sign and symbol containing something from the past remaining in the present.

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Chapter 8 – Through A Mother-Monster

Concluding Thoughts

The heroic consciousness of the ego has an upward path...[and so] places a negative sign upon digressions and descents. For example, submersion under the sea in the heroic view is "night sea journey" through a mother-monster, out of which one emerges having gained an insight or integration, or a virtue. The immersion is to be endured for the sake of later advantages on the path..."

- James Hillman, 1972, p. 284

INTRODUCTION

This thesis is one of the first empirical /qualitative studies of its kind to investigate the psychological and social currents in the highly topical phenomenon of late motherhood. **A woman without a child can be asked questions about her procreative identity and life that women who became mothers are not asked, reflecting the pressure within culture to 'complex' the**

childless woman. After a certain age, as her peers procreate the woman who does not /cannot for reasons she may be unaware of, faces the arduous task of separating the basis of her womanhood and possible 'femininity' (or not) from the potential instinctual and socially conditioned expectation of motherhood. It seems for change to occur a seemingly un-reasonable woman at mid-life must ask, "why not" of her national health service (NHS), her friends, and family.

Late motherhood is emerging as a symbol of early un-requited love with parental objects that "remains unconscious [such that] repetition occurs without understanding, [and] a pattern is established for an endless cycle of repetitive, non-generative activity" (Conforti, 2003, p. 94). Delayed motherhood has emerged in a bio-technological age as another form of power, control and resistance (Gilligan, 2013; Swartz, 2013; Benjamin, 1996; Showalter, 1992).

My objective, in addition to identifying thematic complexes and a method to researching the unconscious, has been to critique, raise questions and wonder about the effects of technology on the state of play between the feminine and masculine since the 1950's. In one sense, I have infused into emerging social constructs a form of animism by linking the time period of my study to Jung's (1958, para. 589) interpretation of UFO sightings in 1947. In effect this phenomenon foreshadowed a new age that would see not only a rise in animism, but an unconscious rise in reliance on technology, the logos of science and in its' shadow, the magical thinking that anything can and should be possible through science. How paradoxical it is that Max Weber's (1947) phrase, "disenchantment with the world" depicts modernity's demystification of objects in the world as having life continues to apply to conditions in favor of

scientific ways of making life. Delayed motherhood is in the process of becoming a modern symbol, juxtaposing life and death. This study has considered delayed motherhood as if we were analyzing a dream. Through amplification of the technological un-conscious (Rutsky, 1999), the cultural complex (Henderson 1984, Singer & Kimbles, 2004; Singer and Kaplinsky, 2010; Kimbles, 2014) (Chapter 1), a critical literature review focused on the issues around delayed motherhood (Chapter 2) where a social problem with the feminine re-emerged and found new ground on the back of early gender thoughts of Freud and Jung (Chapter 3). Research designed to establish ways of reaching and analyzing the *feeling in* the unconscious through association networks (Chapter 4) allowed contents of maternal narrative identity (Chapter 5) to be checked against affect coming out of the WAT (Chapter 6), to reveal the super-ordinate themes found in the entire study (Chapter 7).

As young women purposely making non-gendered choices, the structure of their lives began to suggest the need to prove something about the masculine before the feminine could reveal herself. Re-creation of the myth 'first-Adam-then-Eve' (Hillman, 1972) suggested an extended Apollonic phase for participants who had been groomed to work through triangulation with parents and male siblings, continuing along this track into adult relationships. As the research evolved the group of cohorts began to experience traumas of remembering and forgetting (Cavalli, 2012, p. 598). The need to tell the story of their journey toward motherhood took on a confessional quality, where "the body experiences of [childhood], childbirth and becoming a mother [are] fundamental, catalytic crises of selfhood" (Quiney, 2007). While a child remains puerile when it must retain an inflated view of a parent, such schemata appear

to weaken when new ways of being with the other are found, so she no longer has to carry the *mother tongue* of the constricting, critical possessive mother archetype. The second piece of this work is the absent father losing his protected and idealized position, when a daughter considers she does not have to carry the 'empty space' for his return.

Freud and Jung's views became evidence of patriarchy as background while extension of feminist inspired psychoanalytical thinking and Queer theories allowed new meanings of the embodied feminine to emerge through recapitulation of a union of opposites to a union of epistemology and ethos. The essence of Jung's (1933, para. 291) frame of modernity has been to associate physical disorders to a psychic origin, un-altered by modernity or female advancement, outside of essentialist gender performance.

Unlike an individual complex that weakens once brought to consciousness, a cultural complex may be more difficult to get hold of because it is embedded within the ideas, language, beliefs, mores and "social clock" (Neugarten, Moore & Lowe, 1965/1996) of normative expectations within every structure that supports cultural and collective experience of interaction.

The significance of delayed motherhood against lowered fertility rates in geographies with the longest history of industrialization (Nelson, 2004), in terms of gender, culture and archetypal patterns is whether psyche's discontents can undergo an "alchemical transformation" and recover from technology's invasion, to find the necessary opposites to create the inner third, the transcendent function of a new consciousness outside of "either/or"

polarity. On a meta scale, through the lens of delayed motherhood and the language of alchemical transformation (Mathers, 2014) we can see a new consciousness, found in a subtle field of emerging shifts in the spheres of social biology, economics and technology, where achieving and nurturing, penetrating and receiving, within both genders is socially acceptable gender performance (Barone-Chapman, 2014b).

In this final chapter I will summarize the major findings (Chapter 7) alongside my stated objective and research question (Chapter 4), before moving onto research and policy implications. I will then examine a phenomenological view of this researched thesis before extending my reach to adjacent thoughts surrounding creation and destruction (Spielrein, 1994). I will do this by including the ideas of Sabina Spielrein and the re-visioning of the myth of Lilith, considered to pre-date Eve, as the first female to receive and contain patriarchy's shadow projections. The terrors of not being the good mother and dutiful partner / consort, further edify the weight of projections onto women, as we discovered in media presentations of late motherhood (Chapter 2).

SUMMARY OF MAJOR FINDINGS

Research Question: *Is delayed motherhood connected to a personal area of conflict and if so what does it reveal about cultural complexes and those of the collective unconscious toward womanhood?*

Findings:

This research has demonstrated the three qualities of a complex based on the data and superordinate themes identified and discussed in Chapter 7, supported by evidence in chapters 5 and 6. The findings fall into three types of

complexes, personal, cultural and collective complexes of the unconscious as follows:

THREE QUALITIES OF A COMPLEX:

- 1: a ROOT system indicating past personal events - PERSONAL UNCONSCIOUS
- 2: a NATURE of how affect is displayed - CULTURAL UNCONSCIOUS
- 3: an EXPRESSION mode –COLLECTIVE UNCONSCIOUS
 - Negative (where ‘shadow’ is seen in discussion of others)
 - Positive (when ‘hero’ is self referring or projected)
 - Bipolar (containing negative & positive)
 - *Complexes of the Collective Unconscious Are Not Pathological Unless They Are Connected To A Personal Conflict* (Jacobi, 1974)

THE COMPLEX CATEGORIES THE RESEARCH HAS DEMONSTRATED:

1. PERSONAL COMPLEX – A traumatic history with primary caregivers, in particular the personal mother, while father was protected through absence and other distance defences in the triangle with a male sibling, imbues delayed motherhood as a protection against androcentric interruption.
2. CULTURAL COMPLEX – An upsurge in take up of biotechnology methods have imbued delayed mother with affects in the form of a rebellion against cultural hetero-normative expectations; women who are mothers are more easily managed in a patriarchal society, produces a fractured view of “Us” vs. Them” (Singer, 2009): dynamics in a society where women are categorised as those who mother and those who don’t.
3. COMPLEXES OF THE COLLECTIVE UNCONSCIOUS – Repetition of the Creation Myth – First Adam, Then Eve, has acculturated women to devalue feminine activities and to place superior value on male activities until mid-life when a search for re-integration of splintered aspects of psyche join up once more, as a possible means of protection against misogyny. This formulation makes women’s lives appear to be structured in two parts.

All of the case studies researched and presented held a pathological link between the personal, cultural and collective unconscious along gender lines, which in summary have led me to conclude a *trauma complex* is at the core of delayed motherhood as a condition of gender rebellion again matriarchal order. “Under these circumstances, when the traumatic complex is triggered, the core

of the psyche is laid bare and there is a psychological imperative, experienced by both the individual and, in identification, [with intimate other] that this vulnerable core be regulated and protected at all costs" (West, 2013, p. 85). Consequently, a woman is at once distracted and preoccupied, unable to relate to others (a process of mentalization) as a result of a wound to the core self (ibid). This research demonstrates the importance of allowing a daughter to psychologically separate from the mother who has been disappointed in her relationship with the father, which has lead her to take over the daughter's instincts and impulses as an entitled castrating mother. A daughter put under pressure to comply finds intimacy intimidating because her primordial relationships entrained a fear response. Further evidence revealed how the unconscious desire to remain safe from pregnancy fueled by the avoidance of intimate relating created a double bind of longing for something the daughter felt unworthy of having. In parallel this extended some notions she was thwarted in all non-uterine, agentic endeavors, which contributed to arousing an affect of sudden onset of desire for pregnancy when time appeared to be running out. Latent desire for a return to 'normalcy' through the creation of a family was in turn a spontaneous need to undo years of being complicit in destruction of a relational self. But it also emerged as a *massa confusa* originating as projective identification (Schwartz-Salant, 1988) of gender identity with hetero-normative parents where mother was more dominant and influential in the home than father. Most of the mothers represented among these research participants had been critical, disparaging their daughters as not competent enough to manage life, let alone motherhood, though few of the mothers had ever also worked or enjoyed a career.

Therefore, the revolt against domination of the biological imperative to reproduce was not an overt rebellion but a quest for authentic, reparative relating which took time to create with a significant partner, following the uncertain hypo-relationship mother had displayed to patriarchy. There was no question the archetypal critical 'witch' mother participated in creating inequality in her children by biasing the son over the daughter and ignoring the husband. Years later the women struggled in finding an equal relationship with their own partners, especially after childbirth, and in parallel, they feared they were becoming like their mother. Though they tried to be the better mother the attempt made them become "too good for good enough" and I suspect this 'trouble' continued with those women who had daughters, whereas the sons held the position of being the 'other' allowing the woman to feel she too has phallic rights. The achievement of late motherhood in three of the four cases redeemed the woman of lingering difficulty with mother and latterly father. In one case, where the woman (Mrs Carter) conceived earlier than her three cohorts, she had produced a girl and then a boy, and was continuing a phenomenon within this research to privilege the son and spurn the daughter. Of the eight original participants only one had produced another pair of boy and girl, but in this case, the girl was a replacement child for the boy who was born handicapped.

Finally, this research concludes late motherhood is connected to a personal area of difficulty that can also be found in cultural and collective complexes. The biological imperative to reproduce appears at midlife as a way to make familial bonds to repair old wounds. Though it is typically patriarchal to set the tone and agenda to what will most profit at various times in life, rather than let

biology, the wishes and choices of others, set the bar for outcomes, the former abandoned father's daughter follows on from making a career of her own to also make time for maternity with the adroitness of Trickster. She comes to it with logos and determination the "time is now" for rebirth and renewal. There will be time to regress to the Eros of motherhood later. A midlife baby for a growing percentage of women is a means of redemption from her trauma with the patriarchal 'mother monster' which led to a transmutation of feeling and regard for the young woman they knew as a child. Trickster's methods sever ties to earlier defenses of the self such as naivete and victimhood. The many faces of trauma and transformation served as a guidepost to track the multiple shifts in personhood necessary to achieve parity in a patriarchal society, and how motherhood continues to be a conduit to acceptable female parity. Patriarchy is not limited solely to men. Patriarchy can take up form within any number of archetypes and both genders. By delaying motherhood a woman buys time to forge her mettle in a patriarchal society to prepare to form community with other women. What women do to other women (Chesler, 2009) maybe more frightening than a relationship with a man because women are fundamentally relationally biased.

Longitudinal misogyny of women may be a patriarchal mirror projection to keep women competing in fear of other women. One such story is the myth of Lilith (Vogelsand, 1985) which will be discussed in more detail at the end of this chapter.

POLICY AND FURTHER RESEARCH IMPLICATIONS

There are profound implications to come out from this study to do with policy and how women's procreative lives have been capped at the age of 42 for assisted reproductive technology on the NHS. This research demonstrates how earlier trauma interferes with social norms of life stage development and that women are not simply putting jobs ahead of their procreative desire. When I was consulting to a fertility clinic before this research I found the most distress to be in women who could not afford to have help conceiving through private reproductive medicine once they reached the age of 42. Of the eight women who participated in this research only three had needed some form of IVF treatment. What this research also demonstrates is the devotion and care available for a child by an older mother who has already demonstrated she can function in the world of work. A change in policy toward older women with late desire for motherhood would also imply a change in the treatment of women and how they are supported as they age and are no longer fertile. A basis for such an expanded program could entail some demonstration of earlier but failed attempts at conceiving. This research happens at a moment in time when reproductive biotechnology has created extra-familial relationships, putting delayed motherhood at the cutting edge of social psychology. As a result, the research subject of delayed motherhood has become extremely topical, with the capacity to generate considerable interest in the media and wider public. If the pre-emptive biological assumption of woman = mother is considered a norm in a patriarchal society, then patriarchal medicine must extend its reach to women up to the age of 48, with measures of support in the process of their treatment.

Achieving the goal of raising the age limit for medical reproductive intervention on the NHS carries implications for future research to understand the desire for a child by older women more fully. The resources of older women to mother children are considerable from the vantage point of increased life experience, patience and wisdom, and these factors would need further consideration from the perspective of social health and wellbeing. Such a research program would take into consideration the individual's reproductive history through studies designed with larger participant samples and a methodology that could continue to supply depth measurement for demonstration of the psychological valence of need. All of the women who came to motherhood after 40 in this study have demonstrated themselves to be devoted mothers. Whereas the women who fell pregnant in their 30's had a harder time balancing the roles of mother, partner, primary caregiver and some identifications with employment, even if they were un-employed. Additionally, further psychosocial research on late motherhood is needed to discover more about how couples and single mothers set up gender biases in raising daughters differently from sons.

A PHENOMENOLOGICAL VIEW

It was an observation that a deprivation of ideas, feelings, and the nurturing environment, set limits on the integration of masculine and feminine performance, preventing the creation of *the third*, "...that to which we surrender...letting go of the self...implies the ability to take in the other's point of view or reality" (Benjamin, 2004, p. 8), out of which a baby is only one of many outcomes. What the *pregnant pause* has brought to the fore are the cumulative unconscious processes culminating in mid-life to seek procreative

identity and union with other as a reparative motif out of a one-sided, 'half-alive' (Seligman, 1985) ego-development.

As previously noted, Jung's (1931b, paras. 83 -84) attention on the psychic effect of the parent's unlived life, such that s/he identifies with them (Kay, 1981, p. 203-219) may additionally include, at root, affects in the perverse proportion motherhood can take as a result of a breakdown of interior mental structures (Welldon, 1988) "whereby the mother feels not only emotionally crippled in dealing with the huge psychological and physical demands from her baby, but also impotent and unable to obtain gratifications from other sources."(ibid, p. 83).

The idea of the good and terrible mother (woman) did not originate in Neumann's (1955) work. As the Critical Literature Review (Chapter 2) demonstrated, women who unconsciously delayed motherhood became inclined toward self-doubt and social anxiety in regard to younger mothers, while the media amplified these affects in shameful tones. This kind of media reporting on late motherhood may be responsible for the emerging confessional, subversive voice in literature on motherhood (Felksi, 1989; Wolf, 2001; Slater, 2003; Quiney, 2007) which has become a dichotomous voice of resistance against the interruptive nature of motherhood in accord with the submission to a pre-emptive demand of biological destiny. In the Development of Maternal Self (Chapter 5) I introduced the notion of unconscious resistance as a feature of delayed motherhood. In part this archetypally inspired developmental echo of Jung's (1972, p. 25) earlier observation of the daughter who wanted to be "anything but like mother" interfaces with how bio-

technology has “interfered” with nature’s processes and imposed a new form of medical patriarchy on older women to procure generative identity (Klein and Sauer, 2001). The issue of interruption (Chapter 3) was introduced through Bianchi’s (2012, pp. 39-40) observation of the female body resonating with interruption, must be newly re-considered as part of the development of the feminine hero to withstand domination and sublimation rituals (Benjamin, 1988).

In turn these culturally indigenous oppositions led to right-wrong fears in all of the participants, whether or not they were able to carry on through Phase 2 research. Feeling wrong within the self may be its’ own core complex. However, in the longitudinal Findings (Chapter 5) the youngest participant, Mrs C, was able to stand up for her position of not wanting more children, despite what her peers were doing, while the older participants were filled with regret they were no longer at the right age or circumstance to have more children. At every point in their developmental journey all the participants were facing a *complexio oppositorum*, mirroring the inner argument and resistance they learned from their familial relationships, which later became their harsh super-ego. In turn, there were many junctures of an enantiodromia in which the participants met a turning away from earlier points of identity. Leusinger-Bohleber (2001) cites a “Medea Complex” as “the mother’s unconscious hate for her maturing daughter” (ibid, p. 326). In her citation of the many authors who came before her in progressing analogous and metaphorical meaning of the myth and character of Medea to female patients, Leusinger-Bohleber cites a pattern of “trans-generational transmission of female violence and destruction” (ibid) such that “sexual passion carried the risk of

existential dependence on their love partner and of eventual deception and abandonment by him" (op. cit., p. 324). Apfel and Keylor (2002, p. 87) tell us Benedek (1952) went as far to speculate an unconscious choice of infertile men as marriage partners was a means to defend against pregnancy. What's more, awareness of such theories impacted self-reporting on preference tests to include questions suggesting causal relationship between culturally defined feminine performance and infertility, such as "Would you rather work or keep house?" (op. cit). Throughout modern history women have conducted an increasingly ambivalent relationship to childbearing.

DISCUSSION: CREATION and DESTRUCTION

Through the writings of Jung's first consort, Sabina Spielrein, who he treated, analyzed and trained, only later to be analyzed by Freud, we can see from one of the first female psychoanalysts, how early confusion around pain and pleasure from her father's corporeal punishment resulted in uncertainties around creation and destruction (Covington, 2006).

Sabina Spielrein's interest and involvement in sexual problems began early, leading to her becoming Jung's patient at the Burgholzli Psychiatric Hospital at the University of Zurich, a case well documented by her biographer (Carotenuto, 1982) as well as her achievement to become one of the first psychoanalysts to address the basic question of psychoanalysis: the reason for sexual repression (Kerr, 1986; McCormack, 1994). In her way of thinking, along with repression comes the ego's fear response of becoming lost in the other (McCormack, 1994, p. 188) which brought her to amplify and link the sexual act

as “the reproductive instinct” to the idea of destruction (Speilrein, 1994). Her further postulation to do with avoidance of intimacy with men is not based on the potential of social ruin expected in the early 20th Century she occupied, but is equal to learned avoidance of too much closeness with mother else it arouses her prolonged possessiveness. Despite her many contributions, both Jung and Freud diminished the value and significance of her work (McCormick, 1994, p.188), yet both men acknowledged her contributions to their ideas publicly (Covington, 2006).

“In every love, one must distinguish between two conceptual orientations: the first – how one loves; the second – how one is loved. In the first, one is the subject and loves the externally projected object: in the second, one becomes the beloved and loves the self as the object...In the beloved, object-images gain intensity through incorporation, leading the love, directed against the self, to self-destructive acts; self-criticism, martyrdom, and even complete extinction of one’s sexuality (castration~). These are merely different forms and degrees of self-destruction” (Spielrein, 1994, p. 169-170). It could be said that Spielrein’s desire for dissolution made her too open to the narcissistic aims of parental figures in Jung and Freud, which made her unable to re-integrate (close) for self preservation.

The self-destruction process Spielrein identifies with, through feelings of being in love, may be likened to one identified by Michael Fordham (1976, pp. 18-32) in observing infants when opening to external stimulation, referred to as ‘de-integration’ and closing so as to learn and absorb the experience in a process of ‘re-integration’, a process Fordham linked to the installation of ‘ego’ (Mathers,

2001, p. 164) when development is going well. For a woman caught in a *pregnant pause*, opening and closing to 'other' may become stuck in opening too quickly and unable to close, akin to Spielrein, or unable to open without feeling acute anxiety, as the archetype of Self cannot locate the feeling involved to communicate them (ibid). Failures in opening and closing constitute the feeling of a relationship failing and everything going dead (Green, 1999), an early experience because an archetype was not properly installed by mother to show what mothering looked like, or father with fathering (op. cit). "Developmentally, complexes are essential, non-pathological structures – unless an archetype installs prematurely. For example, ego is a complex with a vital reality testing function" (Mathers, 2001, p. 164). Fear of opening and closing sequences can then become too heightened, if there hasn't been enough relationship between Self and ego installed to reality test against anxious preoccupation. Expanding from family to larger systems of culture and national identity, it's easy to see "when gender performance is culturally demanded...any differentiation between *what is* and *what ought to be* (Hume 1740/1888/2003), becomes lost in a blackened body (Barone-Chapman, 2014b). My way through this thesis has been to question Jungian gender theory "in the spirit of another Jung; the Jung of the symbolic, the mythic, and the subtle body" (McKenzie, 2006, p. 401; op cit, pp. 218-219).

The re-discovery of the founding analytical fathers' relationship to the feminine launched the investigation of a social problem to with misogyny (Chapter 3).

The Lilith myth, as told in the Hebrew creation myth in the *Alphabet of Ben Sira* (Vogelsang, 1985) lends itself to this inquiry. The story of this first woman, sometimes called 'the first Eve' to Adam, the first man, is relevant to this thesis

as the crux of the myth was meant to discourage the female who would be the male's equal. The myth of Lilith has survived for several thousand years. Destruction (blackening) plays a crucial part between Adam and Lilith, who were both created out of the same earth, and therefore created equal in value. Trouble occurred between them when she refused to lay with him in the bottom position, as she wanted to be on top. In the archetypal image of Lilith, Vogelsang (*ibid*, p. 149) finds the feminist challenge to society's patriarchal values on the collective level as a new paradigm on the personal level for women to face inner conflict between worth and desire. Adam and Lilith could be having a love relationship "entered into for its own sake, not for an advantage of any kind" (*op. cit.*, p. 150) but instead their psychic energy is in service to the ego's goals. The myth (Vogelsang, 1985) is not about Lilith attempting to dominate Adam, but to claim her birth right of equality. "If we realize that the anger and aggressiveness women feel towards the patriarchy is a reaction to the contempt and scorn society has, over the centuries, heaped on the woman, we will be able to understand the destructive fury this scorn has unleashed in women and perhaps deal with both cause and effect" (*ibid*, p. 153).

Barbara Koltuv (1986) finds in Lilith and her successor Eve, two sides of the feminine, one instinctual and the other destructive, but both necessary for spiritual and psychological integrity. She explains (*ibid*) how the myth presents the lack of a child as the handiwork of Lilith, as if she has won. "It is said that the daughters of Eve suffer Lilith's pain at each diminishment of the moon...like Hecate, her powers are greatest at the instinctual crossroads of a woman's life: at puberty, at each menstruation, at the beginning and end of pregnancy, motherhood and menopause" (*ibid*, p. 81). The legend of Lilith

suggests woe to woman who will not obey the laws of a patriarchal God who commands her to be 'underneath' Adam, for if she disobeys she would follow Lilith into an eternal barren state and become unseen in the world. Some versions of the story say Lilith eats her young and is jealous of Eve who knows she was made from Adam and therefore not his equal. The patriarchal message is clearly embedded within this creation myth: woman who wishes to conceive children must cleave to man and nurture him and his children, (op cit, p. 85, cited from the Zohar I 20a), "for a woman there is no honor save in conjunction with her husband." But this is only half the myth. Lilith and Eve are two halves of a whole woman on an intra-psychic level (Koltuv, 1986, p. 87) working through ambivalence between birthing/nurturing desires and producing/nourishing ideas. Without integrating both, mediating both, a woman is either cast out from herself, or from society. In *The Book of Lilith*, Koltuv (ibid, p. 122) recovers for women a connection to the instinct and sexuality of the body, inner knowledge and experience over logic and law.

Sigmund Hurwitz (2009, p. 31-32), finds the Lilith figure also appearing outside of Jewish mythology in the lore of Babylonians, Assyrians, Arabs, Sumerians and Hittites, though it has been in existence in Jewish mythology the longest at two thousand five hundred years occupying an important place within the realm of demonic images. Hurwitz tells us her first appearance was that of the terrible witch mother, an archetype documented across millennia in many cultures, unchanging until the Talmudic-Rabbinic and Greco-Byzantine traditions when Lilith's demonic persona split into a dual nature. To a woman she will arouse feelings of being faced with "the terrible, devouring mother" trying to "harm pregnant women and to steal their new-born children...always

poised to kill the child...[as] conveyed in early texts as 'the strangler'"(ibid). The evolution of the feminine in consciousness according to Hurwitz, proceeds from the Great Mother as "a bipolar, archetypal figure, in that she contains the aspect both of the nurturing, caring mother and of the terrible devouring mother" (op. cit). In parallel, Lilith as a demonic figure earns her dualistic persona through the seduction of men as a "*divine whore*" who is a seducer of all men for all time until the Day of Judgement (Hurwitz, 2009, p. 31). In this context Lilith is the eternal home-wrecker who will not allow men to be faithful and women to bear and raise their children. Lilith as an archetype is therefore integral to the understanding of the archetypal power operating in a *pregnant pause*, longitudinally from mother to daughter who comes under a spell believing it is not safe for her to feel fecund, yet this fear under Lilith's influence is projected onto men as the reason for their vagaries making them unsuitable as partners and fathers. Thus, we get both a fear and a fascination with the archetype of a powerful feminine force in the unconscious with Lilith, only to yield a great ambivalence.

Lilith's flight to the Red Sea to escape Adam and the intentions of the Father-God, produce a loss on both sides: Adam no longer had contact with the first human feminine and must do with the feminine function in Eve, while Lilith no longer has a place in conscious life, and must live in the feminine unconscious (Vogelsang, 1985). Hurwitz asks if Lilith's exit was akin to modern fairy tale in terms of a "magic flight" acknowledging the contribution of Marie Louise Von Franz (1970, p.132) on the theme of a lengthy period of loneliness as a prerequisite to escaping evil (2009, p. 184). Drawing from various Hebrew texts Hurwitz does not find an actual 'flying' nor a 'fleeing' as Adam was not found

in the texts to be in pursuit. Therefore the 'flight' is a retreat in psychological terms taking place at the same geographic point, The Red Sea, where the children of Israel were delivered from their Egyptian overlords. Hurwitz (2009, p. 182) reminds us that the story of Lilith in the Hebrew text of *ben Sira* was written by a man for men, and therefore finds the problem largely with the male psyche and the fear of the feminine and has little to do with the woman. "The dominating attitude of patriarchal man is...at bottom, nothing more nor less than an expression of his deep-seated fears and his uncertainty of womankind...behind these fears must also lie a certain fascination" (op. cit., p. 184). Hurwitz cites Karen Horney's (1932) work on "the problem of a man's fear of women" (2009, p. 195) finding it less an issue of castration (Freud) and more a threat to self-esteem, but all too narrow when compared to the impact of the totality of what the mother archetype symbolizes for the child in all its positive and negative aspects (Jung, 1940). Following Jung's thought, Hurwitz cites the fear of the transformative nature of the anima to be a root cause due to "a disturbed relationship between the child and his mother, who at the same time represents the embodiment of the mother archetype" from which the anima must be freed (as if from the womb of the unconscious, an ever present danger of swallowing consciousness) if it is to make "the transition from the matriarchal to the patriarchal phase" (op. cit., p. 196). We might ask if fear of the feminine lies entirely at a man's doorstep as we move into the next section of this chapter to consider the disruptions and developmental failures leading to the activation of unconscious fears Lilith will be at the helm.

As already said, many of the women involved in this research had been groomed to feel inferior to the masculine, by being less considered, desired and

entitled than a male sibling, resulting in a view they might be less capable in life than a male. That most of the participants enjoyed engagement in the world of work long past many of their peers until onset of pregnancy around the fourth decade, goes some way to suggesting how late motherhood resonates, at minimum, with having to prove something to themselves and others about their value in a male dominated world. Normative, predictive generative identity via motherhood was not possible for many of the participants until their masculine worth had been established. Uncannily, birth control, biotechnology and a woman's right to choose when to reproduce has overturned Freud's (1933, p.149), basis of femininity as "biologically given and thus 'bedrock' to the psychical field" (Hillman, 1972, p. 292) yet, dichotomously has reproduced the new developmental twist on the creation myth, "first-Adam-then-Eve" (Barone-Chapman, 2014a, p. 47). When the feminine in either gender is denigrated we find a link to the alchemical subtle body becoming physically and psychically blackened, precipitating a sulfuric decay to rise so that the problem as it is felt can dissolve (Barone-Chapman, 2014b).

In all of Neumann's (1955, p. 226) "Great Round" perceptions of how the feminine develops and transforms there is 'the phenomenon of reversal' (ibid, pp. 75-83) within the feminine along the axis of fertility and death occupied by the archetypes of *Good Mother* and *Terrible Mother* respectively, both these polarities are part of the ordinary mother. This includes the mother of maternal preoccupation, subjectivity and ambivalence. Transformation is described as compensation along an axis holding positive and negative poles conceptualized as the opposites, Sophia and Lilith. Both are also necessary to depict the inter-subjective space between mother and daughter in "doer and done to"

relationships (Benjamin, 1998), which lead to the feeling of either/or choices of submission or resistance to the other's demand (Ogden, 1994). Women who delay motherhood have shown up feeling they have betrayed themselves in some way, as if ruined by Lilith, "the character of enchantment leading to doom" (Neumann, 1955, p. 81). In such an archetypal image we find a woman's inner conflict between worth and desire part of a feminist challenge to society's patriarchal values (Vogelsang, 1985, p. 149).

The processes Neumann (1955, pp. 75-83) describes as necessary to unravel the uroboric condition of being 'not yet born' has been mythologized through the image of a snake wrapping around itself into a circle to devour its own tale. Differentiation of ego from life-giving and life-threatening processes, in order for true autonomy to occur requires the Great Mother (Neumann, 1955) to descend from her lofty dominance in the unconscious through archetypally inspired developmental rituals imagined as: 1. Separation from parental figures in order for masculinity and femininity (the opposites) to emerge from uroboric unity. 2. Engagement with the heroic journey whereby the ego aligns itself to heroic masculinity to win its freedom from matriarchal dominance. While much of Neumann's thinking here is an expansion of Jung's regarding the effect of the feminine principle upon the man, (see also Neumann's *The Fear of the Feminine*, 1954) we can see in modernity the application of both rituals in the lives of women; a life lived in two parts.

For far too long such trans-generational transmissions of authoritative patriarchal patterns have had a profound impact on daughters and sons under pressure to collude with the parental need for the child to act as a receptacle for

the parent's unendurable high-toned feeling states such that, eventually, the child knows no other way but to enact the part that has been assigned (Knox, 2003, p. 221). From these 'traumas' come dissociation with the body as being part of the self, in favor of a "false self" (Winnicott, 1965), which operates from a split off ego, to separate mind from the body as a site of traumatic experience (ibid).

Sigmund Hurwitz (2009, p. 31-32) finds the Lilith figure also occupies an important place within the realm of demonic images, as the Terrible Witch Mother, an archetype documented across millennia in many cultures, unchanging until the Talmudic-Rabbinic and Greco-Byzantine traditions when her persona split into a dual nature. For women possessed by a negative mother complex, feelings of being faced with a demon mother trying to injure pregnant women and their babies were aroused. The evolution of the feminine in consciousness according to Hurwitz (ibid, p. 31), proceeds from the Great Mother as "a bipolar, archetypal figure, in that she contains the aspect both of the nurturing, caring mother and of the terrible devouring mother." Lilith as an archetype is therefore integral to understanding the archetypal power operating in delayed motherhood, longitudinally, from mother to a daughter who comes under a spell. When a woman has a father "who values the feminine and in his attitude reflects this regard, his attitude will counteract the influence of the collective...[but if father] does not participate in her life, she will be forced to deal with the collective conscious ...*before* she can realize her shadow qualities" (Vogelsang, 1985, p. 156).

EPILOGUE

I did not enter into the thesis topic of a midlife pregnant pause leading to late motherhood with feminist intentions. Rather I had a Jungian (Jung, 1930-31, paras. 749-795) perspective that complexes might be in the way of achieving motherhood due in part to difficulties between the sexes. While conducting this research, two analytical engagements with the feminine came to my attention as evidence of a patriarchal bias toward the realm of womanhood (Barone-Chapman 2014a, p. 41). Across affective fields and narratives on late procreative desire, buried in Word Association Tests and held in dream journals, was the memory of a male sibling who had enjoyed primacy of place in the parental home over the daughter (ibid). The female body with a voice was missing, as it was in the one-sided perspectives of Freud and Jung on the subject of the feminine, and became evidence of patriarchy as background (op. cit.). The affects before me at micro level were emerging into a macro view of how feminism emerged when the feminine could no longer quietly accept being thwarted to favor the masculine (op cit, p. 42). Delayed motherhood did not emerge as a feminist issue until particular themes in regard to men in the form of absent or wayward fathers, overly privileged brothers and betraying mothers began to surface in the case studies. I came to see women as having to struggle with 'indigenous' cultural assumptions about their bodies as part objects in relationships.

Like the Sumerian goddess Inanna, research participants had taken their procreative desire underground until the clamor of mid-life beckoned them to reclaim what had been relegated to inferiority. The rise of late desire for motherhood began to appear as an Anima Mundi problem requesting revisioning. The goddess Inanna, known as the "Evening Star, Queen of the

land and its fertility, Goddess of war, Goddess of sexual love, the Healer, Life giver, and Composer of songs" (Shaindel Senensky, 2003, p. 163), came into my mind when I was going through what it means for a woman to seek a connection to the dark feminine when she cannot not easily comply with patriarchy. Inanna descends to reclaim the 'dark feminine'. The meaning of Inanna's 'semi-death' in the underworld for women undertaking delayed motherhood makes them appear to want to rise up with equalizing wisdom and ruthlessness, withstanding patriarchal influence, themes grounded in mutuality, respect, and conscious communion.

Therefore, an ethical position to mutable and evolving expression and repression of the feminine necessitated an in-depth understanding of these ingredients as alchemical and *interactive by-products*. The social burden of the technological unconscious is both personal and cultural in the form of policy making that needs to raise the ceiling on assisted reproduction technology (ART) on the National Health Service to reflect the longer period of developmental maturation required in a culture that places value on masculine performance.

The new myths of creation are born of biotechnology, outside of developmental chronology, motivated by preparation and reparation, transforming kinship ties for the transmutation of early trauma. Re-embodiment of the feminine through late motherhood emerges as a new union of epistemology and ethos, requiring self-knowledge and character. What is emerging out of late motherhood is a different kind of mothering, on which rests the future of a different relationship to self, daughter, son, and other.

This research is relevant to inter-generational studies on love, shame, and trauma, generative identity, gender confusion, Assisted Reproductive Technology's availability to older women through the National Health Service (NHS), researching the unconscious and the ways in which *not* to grow a daughter. When the feminine is equal in value to the masculine the children always know; the *soul of the world* is fertile. When this order is out of order the creative and fecund world is turned slightly, even blindly, upside down to search for the sacred. This kind of mid-life change is on the increase, born from unconscious appreciation of Inanna's descent as its' own alchemical imagination, crucial for redemption of the *Anima Mundi*.

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A Complete List of Jung's End References

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1.1 Ethical Committee Application

Cardiff School of Religious & Theological Studies**Cardiff School of Social Sciences****Ethical Approval Form**

Staff, MPhil/PhD, Professional Doctorate & Integrated PhD Research
Projects

Must be submitted at the latest by midday on the Friday preceding the meeting of the School Board at which you wish the application to be considered to: Dr. Will Johnson, School Research Ethics Officer, RELIG, or to the School Office, f.a.o. Dr. Johnson.

PLEASE NOTE BEFORE COMPLETING YOUR APPLICATION:

1. **Illegible handwritten applications will not be processed so please type if necessary**
2. **Do not submit an application to the SREC if your research is with the NHS or NHS -linked – refer instead to NHS Local Research Ethics Committee**
3. **You should not submit an application to the SREC if your research involves adults who do not have capacity to consent. Such projects have to be submitted to the NRES system.**
4. **Staff undertaking minor projects as part of a course of study (e.g. PCUTL) do not need SREC approval unless the project involves sensitive issues. This exemption does not apply to Masters dissertations or Doctoral research.**
5. **APPLICATION ATTACHMENTS: Please attach the following, without which your application decision will be delayed:**
 - **Full project proposal**
 - **Participant information form and Consent form (if available)**
 - **Details concerning external funding (if applicable)**
6. **The School Research Ethics web pages can be accessed via:**
<http://www.cardiff.ac.uk/socsi/research/researchethics/index.html>

And should be read in conjunction with:

<http://www.cf.ac.uk/socsi/research/researchethics/index.html>

7. **Information on data management, collecting personal data: data protection act requirements, can be accessed via:**
<http://www.cf.ac.uk/cocom/index.html>

8. **Information on Research Ethics (including Ethical Issues in Research – informed consent etc.) can be accessed via the University’s Research and Commercial Division web pages via the “Research Ethics” link on:**
<http://www.cf.ac.uk/racdv/index.html>
9. **Information on the University’s Health and Safety Procedures can be accessed at:** <http://www.cf.ac.uk/osheu/index.html>

Title of Project: Delayed desire for motherhood and its connection to individual and collective complexes– Phase 1

Name of researcher(s): Maryann Barone-Chapman

Application Date: March 30, 2010

Signature of lead researcher:

† **Student project** *(delete as appropriate)*

Project Start Date: May 2010

Student No. 0161674150

Project End Date: July 2011 **Email Address:** Barone-ChapmanM@cf.ac.uk

Supervisor(s): Dr. Raya Jones, Prof.

Valerie Walkerdine

Recruitment Procedures

		Yes	No	N/A
1	Does your project include children under 16 years of age?		X	
2	Does your project include people with learning or communication difficulties?		X	
3	Does your project include people in custody?		X	
4	Is your project likely to include people involved in illegal activities?		X	
5	Does your project involve people belonging to a vulnerable group, other than those listed above?		X	

6	Does your project include people who are, or are likely to become your clients or clients of the department in which you work?		X	
7	Does your project include people for whom English / Welsh is not their first language?		X	

Consent Procedures

		Yes	No	N/A
8	Will you tell participants that their participation is voluntary?	X		
9	Will you obtain written consent for participation?	X		
10	If the research is observational, will you ask participants for their consent to being observed?			X
11	Will you tell participants that they may withdraw from the research at any time and for any reasons?	X		
12	Will you give potential participants a significant period of time to consider participation?	X		

Possible Harm to Participants

		Yes	No	N/A
13	Is there any realistic risk of any participants experiencing either physical or psychological distress or discomfort?		X	
14	Is there any realistic risk of any participants experiencing a detriment to their interests as a result of participation?		X	

If there are any risks to the participants you must explain in your proposal how you intend to minimise these risks

Data Protection

		Yes	No	N/A
15	Will any non-anonymised and/or personalised data be generated and/or stored?		X	

16	Will you have access to documents containing sensitive ¹ data about living individuals?	X	
	If "Yes" will you gain the consent of the individuals concerned?		

If there are any other potential ethical issues that you think the Committee should consider please explain them on a separate sheet. It is your obligation to bring to the attention of the Committee any ethical issues not covered on this form.

1.2 Data Collection: Semi-Structured Interview Schedule, Phase 1

Conception – Child & Self

1. Tell me about the journey of your becoming a mother
2. Why do you think it took as long as it did for you to become a mother?
3. Did you always want to become a mother? What else did you want to become?
4. What has becoming a mother done for you?

Transition – Personal, Relational, Cultural

1. How has becoming a mother changed your relationship with: your partner, family, friends, community...(check partner's relationship and feelings toward child)?
2. How did the world change for you when you became a mother?
3. Did the world change toward you?

Identity

1. What would you be doing now if you had not become a mother?
2. What sort of mother do you feel you are?

Temporality

1. Would you have been a different sort of mother if you had children earlier in life?
2. Why do you think you didn't try for children soon?
3. Regarding the future, how does a child/children influence your thoughts about the future?

¹ Sensitive data are *inter alia* data that relates to racial or ethnic origin, political opinions, religious beliefs, trade union membership, physical or mental health, sexual life, actual and alleged offences.

4. How did you feel about the future before having a child?

Experiential

1. Knowing everything you do about motherhood, how does it measure up to how you thought it would be?
2. How did you imagine your world would change?
3. What new thoughts or feelings have come up for you while we've been talking together?

Meaning Making

1. What sense have you made about motherhood so far?
2. And I'm wondering what sense you've made of this interview?

1.3 – Sample Initial Confirmation Letter Sent to Participants

July 23, 2010

“Mrs Anyer”

Email Address

Dear Mrs Anyer,

You have expressed interest in participating in a study about a woman's desire to have a child and become a mother in mid-life. I write now to confirm that your agreement to participate is of your own free will and would like to take this opportunity to explain the study a bit further by enclosing a consent form for you to sign and bring with you when we meet.

I anticipate finding a date in June at a location that suits us both.

This study is being conducted as part of PhD in the School of Social Sciences at Cardiff University, Cardiff, Wales, United Kingdom. As this program involves the study of psycho-social processes this interview will naturally entail discussion about you, your experience of becoming a mother, having a child at mid-life and how this has changed your experience of the world around you. While it is not the intention of the study to cause distress it is possible that a study involving the desire to have a child may inadvertently arouse some uncomfortable feelings. Every attempt will be made to conduct the study in as sensitive a manner as possible. If at any time during the interview you find yourself becoming uncomfortable please let me know so that we can decide if continuing is advisable.

I very much look forward to meeting you and having a cup of tea and a chat together. Should you have any further questions please do not hesitate to phone me on 020 8785 0043 or email me at: mbchapman@btconnect.com

Yours truly,

Maryann Barone-Chapman
PhD Candidate
School of Social Sciences, Cardiff University
Cardiff, Wales, United Kingdom

APPENDIX 2 – PHASE TWO RESEARCH

2.1– Phase 2 Ethics Committee Expanded Application Detail

Must be submitted at the latest by midday on the Friday preceding the meeting of the School Board at which you wish the application to be considered to: Dr. Will Johnson, School Research Ethics Officer, RELIG, or to the School Office, f.a.o. Dr. Johnson.

PLEASE NOTE BEFORE COMPLETING YOUR APPLICATION:

9. **Illegible handwritten applications will not be processed so please type if necessary**
10. **Do not submit an application to the SREC if your research is with the NHS or NHS -linked – refer instead to NHS Local Research Ethics Committee**
11. **You should not submit an application to the SREC if your research involves adults who do not have capacity to consent. Such projects have to be submitted to the NRES system.**
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13. **APPLICATION ATTACHMENTS: Please attach the following, without which your application decision will be delayed:**
 - Full project proposal
 - Participant information form and Consent form (if available)
 - Details concerning external funding (if applicable)
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<http://www.cf.ac.uk/racdv/index.html>

9. Information on the University’s Health and Safety Procedures can be accessed at: <http://www.cf.ac.uk/osheu/index.html>

Title of Project: Delayed desire for motherhood and its connection to individual and collective complexes– Phase 2 **AMENDMENT TO THIS APPROVED APPLICATION. AMENDED CONTENT IS PROVIDED IN BLUE TYPE.**

Name of researcher(s): Maryann Barone-Chapman

Application Date: August 11, 2010 **AMENDED APPLICATION: 25/03/11**

Signature of lead researcher: (on file) I can sign when I’m on campus on Aug.25th.

†Student project **DEVELOPING A METHODOLOGY TO RESEARCH THE UNCONSCIOUS – TO INCLUDE ASKING PARTICIPANTS TO KEEP A DREAM JOURNAL IN THE WEEK BEFORE TAKING THE WORD ASSOCIATION TEST, AND IN THE WEEK AFTER.**

Project Start Date: Phase 2 October 2010 **Student No. 0161674150**

Project End Date: October 2011 **AMENDED END DATE: JANUARY 2012**

Email Address: Barone-ChapmanM@cf.ac.uk

mbchapman@btconnect.com

Supervisor(s): Dr. Raya Jones, Prof. Valerie Walkerdine

Recruitment Procedures

		Yes	No	N/A
1	Does your project include children under 16 years of age?		X	

2	Does your project include people with learning or communication difficulties?		X	
3	Does your project include people in custody?		X	
4	Is your project likely to include people involved in illegal activities?		X	
5	Does your project involve people belonging to a vulnerable group, other than those listed above?		X	
6	Does your project include people who are, or are likely to become your clients or clients of the department in which you work?		X	
7	Does your project include people for whom English / Welsh is not their first language?		X	

Consent Procedures

	X YES	Yes	No	N/A
8	Will you tell participants that their participation is voluntary?	X		
9	Will you obtain written consent for participation?	X		
10	If the research is observational, will you ask participants for their consent to being observed?			X
11	Will you tell participants that they may withdraw from the research at any time and for any reasons?	X		
12	Will you give potential participants a significant period of time to consider participation?	X		

Possible Harm to Participants

		Yes	No	N/A
13	Is there any realistic risk of any participants experiencing either physical or psychological distress or discomfort?		X	
14	Is there any realistic risk of any participants experiencing a		X	

	detriment to their interests as a result of participation?			
--	--	--	--	--

If there are any risks to the participants you must explain in your proposal how you intend to minimise these risks

Data Protection

		Yes	No	N/A
15	Will any non-anonymised and/or personalised data be generated and/or stored?		X	
16	Will you have access to documents containing sensitive ² data about living individuals?		X	
	If "Yes" will you gain the consent of the individuals concerned?			

If there are any other potential ethical issues that you think the Committee should consider please explain them on a separate sheet. It is your obligation to bring to the attention of the Committee any ethical issues not covered on this form.

ETHICS COMMITTEE EXPANDED APPLICATION MARYANN BARONE-CHAPMAN, SOCSI PHS CANDIDATE

TITLE

PREGNANT PAUSE: DELAYED DESIRE FOR MOTHERHOOD
AND ITS CONNECTION TO INDIVIDUAL AND COLLECTIVE COMPLEXES

INTRODUCTION

Over the past fifty years, as biotechnology has stretched the female age of reproduction, the desire for motherhood and its' status has gone through many changes, including idealization, denigration, avoidance, ambivalence until recently reaching new peaks. Newspapers and magazines have heralded the "Death of the single girl" and "Motherhood is the new sex" (Watson, 2009:3) in favor of the glamour and status of the procreative potential within a committed relationship. This represents a sea change in the culture from the neurotic at home mother of the 1950's (Spiegel, 2001) through the advent of birth control

² Sensitive data are *inter alia* data that relates to racial or ethnic origin, political opinions, religious beliefs, trade union membership, physical or mental health, sexual life, actual and alleged offences.

when young women of a class could postpone babies for opportunities of economic advancement (Walkerdine et al, 2001).

In this Phase 2 of the study I will further explore the unconscious processes, made up of images and ideas, tending to gather emotional tone around one or more archetypes surrounding delayed motherhood. Jung considered the complex as the royal road to unconscious. The complex was first introduced by Carl Jung in working with psychogenic diseases and brought his work to the attention of Sigmund Freud who hailed it as proof of the unconscious. The work was the Word Association Test (CW2, Meier, 1984) and was the basis upon which unconscious complexes were originally identified.

Affects, as unconscious contents, appear with a high feeling tone, ranging in reference from 'energy' and 'value', to 'imagery' and 'new consciousness'. Significant to our enquiry, affects demonstrate "...that causal connections exist between the psyche and the body which point to their underlying unitary nature" (CW 14/ 768) and so "...every instinct is linked *a priori* with a corresponding image of the situation" (ibid /602). Some affects have a "numinous – 'divine' or 'sacred' quality (CW12/448) because they raise particular contents to a higher degree of luminous light causing other possible conscious contents to return to the dark recesses of the unconscious. Affects constellate around the nucleus of a complex. We may consider an affect to be in place when a woman allows her relationship to her body and its procreative ability to slip away from consciousness during her most fertile years. At mid-life when she becomes aware that time is causing this option to pass her by, the goal of making a baby becomes numinous and high in feeling tone. All other endeavours and relationships pass into the darkness of lesser importance. If the desire for a child presents as a drive to conceive at all costs, we may become curious about what traumatic influences have been split off and are attempting to re-integrate? We may also wonder if the *drive to conceive at mid-life* is a body of evidence of a female complex of the collective unconscious as well the personal unconscious (CW8/590). To consider, whether women = mother, in its own right, as the idea "becomes associated with the ego, it is felt as strange,

uncanny, and at the same time fascinating...the conscious mind falls under its spell." (ibid)

RESEARCH QUESTIONS AND OBJECTIVES

Research Questions

What are the conditions that give rise to the longing for a child at mid-life than at an earlier stage of development?

Is the desire for a baby later in life culturally constructed or channelized?

How can the post-Jungian theory of a cultural complex help us to understand this?

What are the affective states around delayed motherhood?

How can Jung's complex theory help us understand these in terms of meaning and purpose?

How has the rise of bio-technology shaped perceptions of time and entitlement?

Is delayed motherhood a symbol of a personal and /or cultural complex?

Research Objectives

Inherent within this research on the factors influencing a woman's desire for motherhood at mid-life is a study on women's unconscious use of their bodies and the correlation to personal and cultural complexes. This question raises implications for another methodological question: What particular methods have the scope for exploring the unconscious?

Phase One of this study received Ethical Committee approval in April, and is well underway, employing Interpretive Phenomenological Analysis. Phase One has been crucial to one of the research objectives to explore the factors influencing a woman's desire for motherhood at mid-life and to discover the relationship to the biological pre-emptive role of motherhood and how it may have changed in an age of bio-technology. Implicit within this research is the cultural status of mating and partnership and whether children are the outcome

of a primary relationship or if their status has eclipsed romantic adult relationship.

Phase Two of this study received Ethical Committee approval last Autumn, in concert with Phase One, more directly addresses the other two objectives of this study: 1- developing a suitable methodology for researching the unconscious; 2 - identify thematic complexes around this subject area and the relationship between the individual and the collective unconscious. Several participants from Phase One have agreed in principle to participate in the Word Association Test. Pending the outcome of this AMENDED application for the ADDITION OF KEEPING A DREAM JOURNAL IN THE WEEK BEFORE THROUGH THE WEEK AFTER TAKING THE WORD ASSOCIATION TEST, IS REQUESTED for Ethical Committee approval FOR A MORE THOROUGH UNDERSTANDING OF UNCONSCIOUS PROCESSES, AS PART OF Phase 2.

Appendix 2.2

METHOD

Jung's original Word Association Experiment, also known as the Word Association Test, hereafter referred to as WAT consisted of the following 100 words. Three have been changed from their original translation from German into English to make them more readily understandable in the 21st century, and are noted below the table.

1. HEAD	34. YELLOW	67. CARROT
2. GREEN	35. MOUNTAIN	68. TO PAINT
3. WATER	36. TO DIE	69. PART
4. TO SING	37. SALT	70. OLD
5. DEATH	38. NEW	71. FLOWER
6. LONG	39. CUSTOM	72. TO BEAT
7. SHIP	40. TO PRAY	73. BOX
8. TO PAY	41. MONEY	74. WILD
9. WINDOW	42. STUPID	75. FAMILY
10. FRIENDLY	43. EXERCISE BOOK	76. TO WASH
11. TABLE	44. TO DESPISE	77. COW
12. TI ASK	45. FINGER	78. FRIEND

13. COLD	46. EXPENSIVE *	79. HAPPINESS
14. STEM	47. BIRD	80. LIE
15. TO DANCE	48. TO FALL	81. BEHAVIOUR**
16. VILLAGE	49. BOOK	82. NARROW
17. LAKE	50. UNJUST	83. BROTHER
18. SICK	51. FROG	84. FEAR
19. PRIDE	52. TO PART	85. STORK
20. TO COOK	53. HUNGER	86. FALSE
21. INK	54. WHITE	87. ANXIETY
22. ANGRY	55. CHILD	88. TO KISS
23. NEEDLE	56. TO PAY ATTENTION	89. BRIDE
24. TO SWIM	57. PENCIL	90. PURE
25. JOURNEY	58. SAD	91. DOOR
26. BLUE	59. PLUM	92. TO CHOOSE
27. LAMP	60. TO MARRY	93. HAY
28. TO SIN	61. HOUSE	94. CONTENTED
29. BREAD	62. SWEETHEART***	95. RIDICULE
30. RICH	63. GLASS	96. TO SLEEP
31. TREE	64. TO QUARREL	97. MONTH
32. TO PRICK	65. TFUR	98. NICE
33. PITY	66. BIG	99. WOMAN 100. TO ABUSE

ORIGINAL TRANSLATION FROM GERMAN INTO ENGLISH HAS BEEN ALTERED TO RETAIN JUNG'S MEANING AND FOR ENGLISH COMPREHENSION: * dear, **deportment, ***darling

Running the test involves two parts. In the first part the researcher asks for the first word that comes to mind, without reflection, noting response and any non-verbal reactions. Here, reaction time is measured by starting and stopping the watch, when the subject responds. If the person starts to answer, and the researcher stops the watch, but the person starts again, the researcher doesn't change the stop-watch, but notes the additional factors. In the second part the subject is asked to recall for each word, what she said the first time, noting whether recall is accurate, if not, noting the new word.

The WAT involves registering responses and timing reactions to these 100 words, pausing for 20 minutes and repeating the 100 words and measuring reactions again. Reactions are measured in terms of the time it takes to respond to a word and whether the associated word is accessed in the second round of 100 words. More than .03 seconds to respond to a word are indicative of more 'complex' activity that must be sorted through before a participant can clearly access an association. In studies where this methodology has been used the reaction time can range as much as 60 seconds.

DREAMS

Dreams were considered by Carl Jung (1927/1931:para 505) to be "a spontaneous self-portrayal, in symbolic form, of the actual situation in the unconscious." The relationship of the dream to consciousness is most often understood as compensatory, with dreams being an important expression of still unconscious facts. Including 'dream keeping' allows a deeper understanding of unconscious anticipation, experience and digestion processes within the unconscious toward complexes coming into consciousness through the WAT.

Participants will be asked to include their associations to elements of their dreams, including the setting, dynamics, and how they 'felt' about the image within the dream. Processes of association are integral to dream analysis and they impart a commentary on personal complexes (Samuels, Shorter & Plaut: 1986: 48).

SAMPLE: Women who have become mothers at mid-life after many attempts to conceive, some after multiple attempts of Assisted Reproductive Technology, and have participated in Phase One.

ETHICAL ISSUES

It is not the intention to arouse affects within this research. However for many of the women who become successful in achieving a full term pregnancy in mid-to-late mid-life there is a trail of losses, terminations, and other miscarriages of hopes and dreams.

Following the WAT, each woman would have up to an hour to discuss her feelings and thoughts around the taking of the test and the words that were difficult for her to associate to and/or those that were not a match to her first recorded responses.

With her permission, each participant's WAT and subsequent conversation would be tape-recorded.

Every participant will be informed of her right to opt out the WAT at any time. For any woman whose painful memories become aroused at any time and who wishes to talk about these in a therapeutic environment I have two very well qualified Jungian analysts who have agreed to be of service. These professionals are located in south London and in proximity to Cardiff.

DATA ANALYSIS

As discussed on page 6 of this application for Ethics Approval, Jung's Word Association Test (WAT) is the method of choice for Phase 2, and incorporates a methodological study of *Developing A Suitable Methodology to Research the Unconscious*, which would form a chapter itself within the PhD study.

I have trained with the Independent Group of Analytical Psychologists in London on the WAT and have found it a highly sensitive instrument for revealing unconscious thoughts and feelings, or "complex indicators". These indicators include:

- Prolonged reaction-time
- Failure to respond
- Failure to reproduce/incorrect reproduction
-
- Multiple reaction words
- Repetition of stimulus word
- Repetition of earlier responses
- Unusual use of words/foreign words
- Alliterative effects ("klang" associations)
- Slips of tongue

- Movements, gestures, tremors
- Disrupted breathing patterns

- Vocalizations: exclamations, laughter, stammering, etc.

The method includes looking for clusters and the preservation of disturbance over several responses. Jung utilized probable mean of the reaction-time ratio (CW2 560ff), as certain individual long reaction times are believed to distort. Four or more decimal points above the probable mean are considered prolonged.

I have extensive training in dream analysis as both an Integrative Psychotherapist and Jungian Analyst.

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2.3 – Reply to SOCSI Research Ethics Committee

September 24, 2010

Professor Tom Horlick-Jones
Chair
SOCSI Research Ethics Committee
Cardiff University

Care of: Deb Watkins by email
cc: Professor Valerie Walkerdine, Dr. Raya Jones by email

REF: SREC/604

Dear Professor Horlick-Jones and Ethics Committee,

I write to address two issues concerning my ethics application, each are outlined below, taken from a September 8th letter and email I received from Deb Watkins:

The details of Phase 2 of your project entitled “Delayed desire for motherhood and its connection to individual and collective complexes” was reviewed by the School of Social Sciences Research Ethics Committee at its meeting on 8th September 2010. The Committee approved your application, subject to the following:

Would you please remove the statement “The study has received Ethical Committee approval” from your consent form/information sheet. Members of the Committee observed that SREC approval should not be used as a guarantee of your own research practice.

Yes. Consent Form attached.

* The Committee also strongly suggest that you consider making the following changes to the information you provide to your research participants:

- a. Remove the reference to Carl Jung
- b. In order to manage the individual expectations of your participants, insert the statement “I am not going to be able to reveal what the test says about you.”

I would like to address both these points in one statement.

Of the 8 women I fielded interest in doing “Jung’s Word Association Test” as a round two, everyone who was interviewed in Phase 1 expressed interest in a) Jung and b) “that kind of test.” But with “that kind of test” is the implicit hope that they will discover something about themselves. So I think that point b expressed by the Ethics Committee is well taken, and I would qualify this with the following:

While I will not be able to reveal what the test says about you, I will be able to discuss

your experience of taking the test, what you observed and how you felt about any of your responses.

The protocol on the Word Association requires allowing time for the participant to talk about their experience in any way they would like. It would be impossible to reveal test results without the researcher analysing the results in full.

These modifications have been made on a revised Consent Form copied into this document.

Finally, as I have already used the name “Jung” without any adverse reaction I can find no reason to omit this from the literature I prepare for disclosure to these participants. Should I find it necessary to recruit further I will consider the committee’s response to the word “Jung” once more.

I look forward to learning if my response is acceptable within the next two weeks. A revised Consent Form follows on the next page of this document.

Yours truly,

Maryann Barone-Chapman
Cardiff University SOCSI – PhD P/T Year 2

2.4– Sample Invitation to participate in Phase 2 Research

November 14, 2011

Mrs Anyer
Email Address

Dear Mrs Anyer,

You have participated in Phase 1 of a study about a woman’s delayed desire for motherhood and expressed interest in participating in Phase 2 of the same study which involves taking the Word Association Test (WAT).

I write now to arrange a date to conduct the test in a private office in the Glamorgan Building and to confirm that your agreement to participate is of your own free will. Also attached to this letter is a consent form that will explain the study a bit further. The WAT takes about 2 hours, with a 20 minute break. I suggest you bring either lunch or a snack for this break.

In preparation for the WAT you are requested to keep a dream journal beginning the week before we meet to perform the test. Once you’ve written the dream in a journal, please include any associations you have to the dream image, setting and interactions within the dream. After the test we will meet again, in person or by skype or phone and look at any dreams you had after taking the WAT.

This study is being conducted as part of PhD undertaken in the School of Social Sciences at Cardiff University, Cardiff, Wales, United Kingdom. You have already been aware during your first interview that the study is about psycho-social processes. There is no preparation necessary for the Word Association Test. Also, please know that I am unable to reveal what the test says about you.

While it is not the intention of the study to cause distress it is possible that a study involving the desire to have a child may inadvertently arouse some uncomfortable feelings. Every attempt will be made to conduct the study in as sensitive a manner as possible. If at any time during the Word Association Test you find yourself becoming uncomfortable please let me know so we can decide if discontinuing is advisable.

I very much look forward to seeing you again. For your participation I will be paying £10 for your time. Should you have any further questions please do not hesitate to phone me on 020 8785 0043.

Yours truly,

*Maryann Barone-Chapman
PhD Candidate
School of Social Sciences, Cardiff University*

Appendix 3

Jung's 100 words comprising the Word Association Experiment – see list above under "METHOD", Appendix 2.2 .

Appendix 4

Sample of Mrs Sidney's full responses to Jung's Word Association Test over two pages, Part 1, first 50 words, and Part 2, second 50 words, including the median of 9, see next two pages.

Appendix 4 Mrs Sidney's Responses to Jung's Word Association Test

PhD Thesis: Pregnant Pause

Mrs S. WAT Results

M. Barone-Chapman

Word	Response	Part 1 word	Time	Fifths	Time Cl	Stereotypes	False Repro	Disconnection	FrmRemarks	No. of Cl	Remarks
head	sore	ache	1.23	6		1	1				
green	roof	grass	1	5		1					
water	flow	flow	1.32	7							
to sing	loud	loud	1.26	6.3							
death	wish	wish	1.08	5		2					
long	sore	stalk	0.97	5			1				
ship	sail	water	1.35	7			1				
to pay	money	money	1.69	8		2		££	worry	2	
window	cleaner	cleaner	1.25	6		2					
friendly	shake	shake	1.45	7		2					
table	cloth	cloth	1.15	6		2					
to ask	for more	for more	2.32	12		2					
cold	feet	feet	0.95	5							
stern	flow	long	2.12	11			1				
to dance	laugh	laugh	2.55	13		2					
village	clown	clown	1.42	7		2					
lake	serene	serene	1.75	9		2					
sick	bed	bed	1.13	6		2					
pride	lion	lion	1.23	6							
to cook	badly	well	1.69	8			1				1 desire to be 2 well enough?
link	well	well	1.12	6							
angry	yeah!	yes	1.93	10					uncertainty		
needle	stack	stack	1.38	7							
to swim	Charlie	Charlie	2.34	12							
Journey	knapsack	rucksack	3.49	17							
blue	lagoon	lagoon	2.03	10		2					
lamp	shade	shade	1.2	6							
to sin	lots	lots	1.89	9							
bread	knife	make	0.98	5							
rich	pickings	pickings	1.43	7					££		
tree	climb	climb	1.29	6							
to prick	finger	finger	1.26	6							
pity	me	me	1.62	8		2			me, me	2	
yellow	flower	flower	0.74	4							
mountain	climb	climb	1.12	6		2					
to die	young	young	2.08	10		2					
salt	crust	pepper	2.43	12		1	1				
new	shoes	shoes	1.08	5							
custom	made	made	1.51	8		2					
to pray	church	church	1.56	8		2					
money	talks	me	1.51	8		1			me		2 pity & money
stupid	person	people	1.34	7							
exercise	book	margin	1.85	10							
to despise	hate	hate	1.1	5							
finger	up	up	1	5		2					
expensive	car	car	1.38	7							
bird	nest	nest	1.38	7							
to fall	down	down	1.53	8		2					

Mrs Sidney's Word Association Test, Part 2

PHD Thesis: Pregnant Pause

Mrs S. WAT Results

M. Barone-Chapman

Word	Response	Part 2 word	Time	Fifths	Time CI	Stereotypes	False Repro	Disconnection	Frm Remarks	No. of CI	Remarks
frog	snore	snore	1.59	8							
to part	hair	hair	1.52	8							
heer	strike	strike	1.46	8			2	1			1 frog 2 prince
whites	wool	wall	1.68	8			2				2 felt like a boy
child	play	play	1.54	8							
to pay attn	at once	at once	2	10			2	1			
pencil	vania	vania	1.52	8							
sad	news	news	1.32	7							
plum	tree	tree	1.28	6							
to marry	David	husband	1.82	10				1			
house	full	proud	1.79	9				1			
sweetheart	yes	yes	2.06	10							
glass	window	fork	1.62	8							
to quarrel	fiercely	fiercely	1.63	8							
to fear*	waves	lots	5.71	28							
big	sea	waves	1.95	10							
carrot	stick	smile	1.64	8							
to paint	pictures	stick	1.61	8							
part	baked	picture	2.7	13							
old	tree	hair	1.56	8							
flower	grind	thing	1.92	10							
to beat	eggs	yellow	1.83	9							
box	ful	eggs	1.82	9							
wild	goose	beast	1.89	9							
family	reunion	reunion	1.66	8							
to wash	clothes	clothes	1.07	5							
cow	field	field	1.98	10							
friend	ship	ship	1.02	5							
happiness	joy	smile	2.2	11							
lie	flat	flat	2.7	13							
behaviour	good	good	1.34	7							
narrow	street	street	1.4	7							
brother	sister	street	1.41	7							
fear	again	sister	1.62	8							
stork	cry	long	1.91	10							
FALSE	mine	teeth	1.98	10							
anxiety	fear	teeth	1.76	9							
to kiss	grandmother	fear	2.32	12							
bride	pay	grandmother	1.48	7							
pure	snow	groom	2.06	10							
door	clip	snow	6.52	33							
to choose	myself	step	2.46	12							
hay	wain	myself	1.8	9							
contented	smile	wain	1.94	10							
to sleep	people	smile	2.11	11							
month	year	flock	2.16	11							
woman	man	well	1.62	8							
to abuse	fork	year	2	10							
		people	1.12	6							
		man	1.95	10							
		fork	Median	9							

PHD Thesis: Pregnant Pause

Appendix 5

Abstract of the MSc. (2004), dissertation, as presented in the publication arising from this research: Barone-Chapman, M. (2007). 'The Hunger to Fill an Empty Space'. *Journal of Analytical Psychology*, Vol. 52.4, pp. 479-501.

Abstract: This research aims to investigate the drive to conceive through repeated use of Assisted Reproductive Technology (ART) in relation to the affective and meaning-making processes related to this drive, through the use of the participants' memories of mother and being mothered, the choices they made regarding sex, intimacy and non-uterine activity in early adulthood and their fantasies of how a child would change their lives.

Appendix 6

Glossary of Terms

Unless otherwise notated, all terms are taken from *A Critical Dictionary of Jungian Analysis*, 1986, Samuels, A., Shorter, B., and Plaut, F., New York and London: Routledge. For ease of reading these will be noted as "SSP 1986". All other entries in this glossary will end with their specific reference source. In addition notes from this author are included where appropriate.

Affect: Synonymous with emotions: feeling of sufficient intensity to cause nervous agitation or other obvious psychomotor disturbances. One has command over feeling, whereas affect intrudes against one's will and can only be repressed with difficulty. An explosion of affect is an invasion of the individual and a temporary takeover of the ego. Our emotions happen to us; affect occurs at the point at which our adaptation is weakest, [exposing] the reason for its weakness. This hypothesis was central to Jung's initial experiments with the Word Association Test. A key to a discovery of a complex is an affect-laden response. Affect reveals the locus and force of psychological values. The measure of a psychic wound is the affect aroused when it is touched.

SSP 1986

Anima and Animus: The inner figure of woman held by a man and the figure of a man at work in a woman's psyche. As fundamental forms that underlie the 'feminine' aspects of man and the 'masculine' aspects of woman, they are seen as opposites. They act as *psychopompi* or guides of soul and they can become necessary links with creative possibilities and instruments of individuation. Because of their archetypal connections, anima and animus have been represented in many collective forms and figures: as Aphrodite, Athena, Helen of Troy, Mary...; or as Hermes, Apollo, Hercules, Alexander. In projection they attract the attention and emotional fervor as public figures but also as friends, lovers, commonplace and ordinary wives and husbands. Complete realization and integration of either image requires partnership with the opposite sex.

SSP 1986

Archetype: The inherited part of the psyche; structuring patterns of psychological performance linked to instinct; a hypothetical entity irrepresentable in itself and evident only through manifestations. By 1917, Jung was writing of non-personal dominants or nodal points in the psyche, which attract energy and influence a person's functions. Ellenberger (1970) identified the archetype as one of the three main conceptual differences between Jung and Freud in defining the content and behavior of the unconscious.

SSP 1986

Association: The spontaneous linkage of ideas, perceptions, images, fantasies according to certain personal and psychological themes, motifs, similarities, oppositions or causalities. The word may designate the process of making such linkages (i.e. by association) or specify one item in such a chain (i.e. *an* association). Jung conducted extensive researches on association by way of the Word Association Test. Associations, however are freely arrived at, are seen to be psychologically bonded in meaningful sequence. This experimental work laid the basis for Jung's theory of the Archetypes. The main outcome of this was the verification of a linkage between association, affect and energy charge. Though Jung soon abandoned experimental

researches, he continued to work with and refine his understanding of association, aiming at 'a careful and conscious illumination of the inter-connecting associations objectively grouped round particular images, (CW 16, para. 319). These insights were later applied and became an integral foundation for his method of dream interpretation. He described the web of associations as the psychological context in which a dream is naturally embedded.

SSP 1986

Collective (Unconscious): The many in contrast to the one. From the distinction between consciousness and unconscious made by the forerunners of the psychoanalytic movement, Jung developed his own theories of the collective unconscious as the repository of man's psychic heritage and possibilities (see archetype). He viewed the collective as the opposite of the individual, that from which the individual must differentiate himself as well as a repository of all that may have been at some time individually expressed, adapted or influenced. The more a person becomes him or herself, i.e. the more he submits to individuation, the more distinctly he will vary from collective norms, standards, and precepts, mores and values. Jung believed the real carrier of change to be the individual, since the mass as a whole is incapable of consciousness.

SSP 1986

Complex: The notion of a complex rests on a refutation of monolithic ideas of 'personality'. We have many selves, as we know from experience (self). Though it is a considerable step from this to regarding a complex as an autonomous entity within the psyche, Jung asserted that "complexes behave like independent beings" (CW8, para. 253). He also argued that "there is no difference in principle between a fragmentary personality and a complex...complexes are splinter psyches" (CW8, para. 202). The concept enabled Jung to link the personal and archetypal components of an individual's various experiences...without such a concept, it would be difficult to express just how experience is built up; psychological life would be a series of unconnected incidents. Furthermore, according to Jung, complexes also affect memory. The 'father complex' not only holds within it

an archetypal image of father but also an aggregate of all interactions with father over time...[coloring] recall of early experiences of the actual father. It is important to remember that complexes are quite natural phenomena, which develop along positive as well as negative lines. They are necessary ingredients of psychic life. Provided the ego can establish a viable relationship with a complex, a richer and more variegated personality emerges. For instance, patterns of personal relationship may alter as perceptions of others undergo shifts. Jung developed his ideas via the use of the Word Association Test between 1904 and 1911 (see Association). The use of psycho-galvanometer in the test suggests that complexes are rooted in the body and express themselves somatically.

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Complexio Oppositorum: *Note from author: In the excerpt below, Jung overlays his Christian beliefs onto a universal principle to explain the complexity of opposites through the idea of Christ and the Devil, as personification of opposition, and his observations of enantiodromia. The following is in Reply to a Letter from the Rev. David Cox on the subject of Religious Belief (CW 18, The Symbolic Life 'Jung and Religious Beliefs', p. 730)*

"If my identification of Christ with the archetype of the Self is valid, he is, or ought to be, a *complexio oppositorum*. Historically this is not so. Therefore, I was profoundly surprised by your statement, that Christ contains the opposites. Between my contention and historical Christianity there stretches that deep abyss of Christian dualism – Christ and the Devil, good and evil, God and Creation.

Beyond good and evil" simply means: we pass no moral judgment. But in fact nothing is changed. The same is true when we state that whatever God is or does is *good*. Since God does everything (even man created by him is his instrument) everything is good, and the term "good" has lost its meaning. "Good" is a relative term. There is no good without bad.

I am afraid that even revealed truth has to evolve. Everything living changes.

We should not be satisfied with unchangeable traditions" (Jung, 1976, paras. 1650-1652).

Counter-Transference (CT): Jung was one of the pioneers of the therapeutic use of counter-transference. Until the 1950's, psychoanalysis, following Freud, tended to regard CT as invariably neurotic, an activation of the analyst's infantile conflicts and an obstacle. Jung regarded countertransference as "a highly important organ of information" for an analyst (CW16, para. 163). Jung accepted that some countertransferences were not so benign, referring to 'psychic infection' and the dangers of identifying with the patient (ibid, paras 358, 365). Contemporary analytical psychology has deepened this interest of Jung's. Fordham (1957) proposed that an analyst may be so in tune with his patient's inner world that he finds himself feeling or behaving in a way which he can see, with later understanding, is but an extension of his patient's intra-psychic processes projected into him. Fordham called this 'syntonic' countertransference. He contrasted that with 'illusory' countertransference (meaning neurotic responses to the patient on the part of the analyst). SSP 1986

Note from Author: For other perspectives on countertransference, building on Jung's idea that analysis is a dialectical process, see David Sedgwick's, The Wounded Healer Countertransference from a Jungian Perspective, 2016, Taylor & Francis.

Cultural Complex: The term 'cultural complex' arises from two different aspects of Jung's psychology. Let us start with the term 'complex' because this was the first area of research for Jung. Through the word association test Jung noted that there occurred a delayed reaction time to certain words which as experimentally repeatable. Jung observed that the delay was caused by the arousal of particularly strong emotions in connection with specific trigger words. He coined the term 'complex' to account for this phenomenon...When we speak about a cultural complex, we are moving from an individual psychology to the psychology of the group – which can dwell both within the 'collective' psyche of the group and the group level of the psyche embedded within the individual. In 1962 Joseph Henderson presented a paper at the

Second International Congress for Analytical Psychology entitled "The Archetype of Culture" where he defined this layer of the psyche which he postulated as existing between the personal and the archetypal (Henderson, 1964)...In the last few years Tom Singer (2002) and Sam Kimbles (2000) have coined the term 'cultural complexes' to elaborate on this level of psychological experience. (Thomas B. Kirsch, 2004, on p. 185. "Cultural Complexes in the history of Jung, Freud and their followers." From Thomas Singer and Samuel L. Kimble's (Eds.), *The Cultural Complex Contemporary Jungian Perspectives on Psyche and Society*. New York and London: Routledge.

Enantiodromia. I use the term enantiodromia for the emergence of the unconscious [literally running counter to] referring to the opposite in the course of time. This characteristic phenomenon practically always occurs when an extreme, one-sided tendency to dominates conscious life; in time an equally powerful counter position is built up, which first inhibits the conscious performance and subsequently breaks through the conscious control. (CW 6, 'Definitions', para. 709.

Interpretive Phenomenological Analysis (IPA): For example, phenomenology and interpretative phenomenological analysis are concerned with exploring the lived experience of the participant or with understanding how participants make sense of their personal and social world. On the other hand, discourse analysis and conversation analysis ore concerned with describing the linguistic resources participants draw on during conversations, the patterns those conversations take, and the social interactional work being performed during them. (Jonathan A. Smith, 2008, p. 3, Sage Publications. *Qualitative Psychology A Practical Guide to Research Methods*, 2nd Edition).

At the same time, IPA also emphasizes that the research exercise is a dynamic process with an active role for the researcher in that process. One is trying to get close to the participant's personal world, to take, in Conrad's (1987) words, an 'insider's perspective', but one cannot to this directly or completely. Access depends on, and is complicated by, the researcher's own

conceptions; indeed, these are required in order to make sense of that other personal world through interpretative activity. Thus a two-stage interpretation process, or double hermeneutic, is involved. The participants are trying to make sense of their world; the researcher is trying to make sense of the participants trying to make sense of their world. IPA is therefore intellectually connected to hermeneutics and theories of interpretation (Packer and Addison, 1989; Palmer, 1969; Smith, 2007)...Different interpretative stances are possible, and IPA combines the empathic hermeneutics with a questioning hermeneutics (ibid, p. 53).

Note from the author: Due to the possibility of both empathic and questioning hermeneutics as a dynamic between two people emerged as a parallel research method I have in some places used the term "clinically informed" IPA, referring to transference and countertransference dynamics originating in the consulting room.

Objective Psyche: A term used by Jung in two ways: first, to denote that the Psyche has objective existence as a source of knowledge, insight and imagination (1963). Second, to indicate that certain of the contents of the psyche are of an objective rather than a personal or subjective nature. In this regard, he equated the objective psyche with what he called 'the collective unconscious' (CW7, para. 103n.). See also archetype, image, and unconscious.
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One-Sided Ego/Ego-Self Axis: From a developmental viewpoint, a strong and viable ego-self axis arises in the individual out of a certain quality of relationship between mother and infant, a balance between togetherness and separation, between the evolution and approval of specific skills and acceptance of the baby as a whole, between outward exploration and self-reflection. But the reverse is also true and some the dynamics inherent in the ego-self axis are projected onto the relationship between a baby and his or her mother.

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Personal Complex: See Collective (Unconscious), Complex and Cultural Complex above.

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Pregnant Pause: What the pregnant pause brings into question are the unconscious processes necessitating the narrative shift in midlife to see procreative identity, as a reparative motif for a one-sided, 'half-alive' development, in non-essentialist terms. (M. Barone-Chapman, 2011, p. 188; 'Pregnant Pause Procreative desire, reproductive technology and narrative shifts at midlife'. In Raya Jones, (Ed.) *Body, Mind and Healing After Jung A Space of Questions.*)

Note from author: During the course of this thesis I came to realize the Pregnant Pause is the center stage of what had traumatized a woman earlier in her life, causing her to arrive at late procreative desire. Thus the Pregnant Pause becomes both crucible and bridge between a life lived in two parts, first Adam and then Eve. Thanks to the advancement of biotechnology, it is now, more than at any other time in human history, possible to define where, when, how and with whom a woman will descend at mid-life to conceive, in order to ascend afterward. A 'baby' comes in many forms. Within a life lived in two parts, the teleological view holds the promise of meaning and purpose for every notion of creativity.

Shadow: In 1945 Jung gave a most direct and clear-cut definition of the shadow: 'the thing a person has no wish to be ' (CW16, para. 470). In this simple statement is subsumed the many-sided and repeated references to shadow as the negative side of the personality, the sum of all the unpleasant qualities one wants to hide, the inferior, worthless and primitive side of man's nature, the 'other person' in one, one's own dark side. Over and over again he emphasizes that we all have a shadow, that everything substantial casts a shadow, that the ego stands to shadow as light to shade, that it is the shadow which makes us human.

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Teleological Point of View: An orientation to ends or purposes rather than causes; it characterizes Jung's observation about the unconscious, neurosis and most especially individuation. Jung's words "it is not I who create myself, rather, I happen to myself" (CW11, para. 391) posit the Self as an a priori existent. Whether known or unknown, it is the hidden operator behind our lives. Man cannot escape being destined by the self even in his freedom, but the possibility of an experience of meaning lies in recognizing its imprint (1971).

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Transference: Some analysts regard transference analysis as a diversion from the more important elucidation of the symbolic content of the patient's material. Others see that, in the analysis of content of transference, they may meet those infantile traumas or deprivations, which are still at work in their adult patients. Hence, the latter group, do not seek to dissolve transference in favor of 'reality' but rather to allow it to deepen and to be worked with and within this divide has become less marked than hitherto, as practitioners sense that content analysis (symbols) and process analysis (transference) are two sides of a single coin.

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Word Association Test (WAT): An experimental method for the identification of personal complexes by the investigation of associations or chance psychological linkages (see Association). Jung concentrated upon research with the word association test for several years during the first decade of 20th century...the test had been introduced by Bleuler (at the Burgholzli Clinic in Zurich) and was used for the clinical assessment of patients. The test had been invented by Galton and taken over and changed by Wundt, who wanted to discover and establish the laws governing the association of ideas. Aschaffenburg and Kraepelin introduced distinctions between verbal or 'clang' (sound) associations and those related to meaning and they observed the effect of fatigue upon responses...Next, Ziehen discovered that reaction times were longer if the stimulus word related to something that the patient felt was unpleasant. Delayed responses were found to be related to a 'common underlying representation' or 'emotionally charged complex of

representations'. It was at this point the was taken up at the Burgholzli and Jung was entrusted with the research which, in the first instance, was concerned with the loosening or release of tension surrounding associations at the onset of schizophrenia.

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Appendix 7 Research Time Line

The research and write up of the thesis took 5 years and 39 days to complete. During the course of the research there were 2-3 life events that interrupted this feminist research (see Chapter 3 regarding interruptions), which necessitated time off the PhD clock. The following time line condenses the effort into the allocated overall time, albeit with the extension of 39 days, which was requested and approved through SOCSI.

- Years 1 – 2
- Developing Literature Review, preparation of chapter outline, early drafts of Review, investigation and development of research methodology including rationale and preparation for Ethics Committee applications. Re-taking the Word Association Test a part of the research. Drafting early chapters,, and refining them through the time period.
- Year 3
Ethics Committee application, ways and means of finding research participants (as outlined in Methods Chapter 4), conducting Phase 1 research, developing chapters on Methodology, Case Studies, preparing Ethics Committee Applications for Phase 2 research. Continuing Literature Review. Analyzing data from Phase 1 through Interpretive Phenomenological Analysis (IPA). Literature Review continued.
- Year 4
Conducting Phase 2 research of the Word Association Test (WAT) with six participants, scoring the test by plotting the median, analyzing results and

beginning to develop themes. Assessing the usefulness of the dream material case by case. Literature Review continued.

- Year 5

Re-ordering chapters of thesis and honing the unfolding of the overriding findings into thematic results, commencing with Chapter 5 on Maternal Self, Chapter 6 on Trickster Trauma and Transformation, Chapter 7 on Super-Ordinate Themes and concluding Chapter 8 Through A Mother Monster. Literature Review continued throughout the study.

The End.