DECLARATION

This thesis has not been submitted as an exercise for a degree at any other university and the work herein represents the sole work of the author.

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Teresa Tuohy

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Title: Mothering in the context of mental health problems: A feminist standpoint approach

SUMMARY

Background: There is a long history in western society of portraying an idealised account of motherhood. The attempt to emulate this portrayal is deeply challenging for many mothers, and in particular for women who experience 'enduring' mental health problems. Although many women who experience 'enduring' mental health problems are mothers, their needs and experiences have received little attention in research. What is available tends to emphasise the costs of the mother's 'illness' in respect of the impact on their children's well-being and development and focuses on mothers as 'psychiatric patients' as distinct from their roles as mothers. A small number of studies which explored the experiences of mothers with 'enduring' mental health problems suggest that mothering is a rewarding and positive experience, even though the demands of parenting are considerable and support from mental health services inadequate. Understanding the experience of these mothers, the unique support needs of this group of women as mothers and the challenges they may experience when involved with mental health services is essential.

Aim: The aim of this study is to build on the small body of work that exists, by exploring the subjective mothering experiences of this group of women and their experiences of accessing mental health services in Ireland.

Methodology: Feminist standpoint methodology informed this study. Feminist standpoint methodology prioritises research questions that are pertinent to the lived experiences of women in order to achieve fundamental social change. Research using this methodology is transformed from research on women, to research with and for women. Data were gathered from women living in Ireland who are mothers and who experienced mental health problems. Data were collected using unstructured interviews. The participants comprised of forty two women living in the Republic of Ireland. Interviews were analysed from within a feminist standpoint framework, using inductive logic to identify the meaningful

and consistent patterns of understanding amongst the range of participants. In addition, memos were used to facilitate analysis.

Findings: On the basis of an analysis of participants' interviews, mothering in the context of mental health problems was understood as a complex act of negotiation and balancing of various factors. Women were strongly influenced by two powerful ideologies: the ideal mother ideology and the biomedical ideology of mental distress. The women's main concerns were related to their desire to protect their children and to preserve their role as mothers. In attempting to negotiate the ideal motherhood ideology, women's experiences are presented within five distinct themes. The meaning of mothering: mothering under the patriarchal construction of ideal mothering. In addition women spoke about mothering as 'doing' and ambivalence towards mothering. In the interviews these explanations exposed the attempts of the women to live up to expectations within the context of patriarchal motherhood. The biomedical explanation of their mental distress which centred on signs, symptoms and perceived deficits, pushed women to achieve this impossible idealised motherhood, as they used it as a counterweight to the ideology which saw them as failed or imperfect women, unsuitable to be mothers. The women initially accepted and later began to resist this narrow view of motherhood which was seen as impossible to achieve.

The contexts of women's lives were also uncovered and the following themes extrapolated: mothering in the context of mental pain; mothering in the context of childhood and adult trauma; mothering under the 'relations of ruling' including mothering as influenced by expert opinion, mothering as a source of comparison, mothering in the context of stigma, mothering in the context of fearing that children would be taken into care; mothering in the context of children taken into care. Evident throughout each theme is the women's deep commitment to protecting their children from their distress. The interface between the women and professional services was one of oppression and resistance. The biomedical discourse which viewed their distress as symptoms of an 'illness' cast them in the role of 'patient', marginalising the voice and role of

mother. In addition, the main response from the professional services was hospitalisation and medication which ignored the context of their lives and, in many situations, added to their distress. The biomedical explanation of their distress, being viewed as a person with a 'mental illness' and the use of medication left women with little room to question perceived wisdom, as the women were very aware of the marginalised status and the power of psychiatry. However, gradually over time, from the position of marginality and subjugation, the women began to construct points of resistance to the biomedical interpretations of their status.

The women demonstrated their agency and their resistance to these damaging ideologies through: experiences of professional support that acknowledged both the mother and 'patient' identities; mothering in the context of hiding distress; managing time and planning ahead; questioning the value of medication and the biomedical explanation; seeking support outside the mental health services; seeking alternative approaches and routes to wellbeing.

Conclusions: The findings from this study articulate a description of mothering in the context of mental distress that is dramatically different from the biomedical view. The knowledge uncovered from the subjugated accounts of this group of women provides an understanding of the complex issues that surround the areas of mothering and mental distress. The findings provide insights into the strategies women use to continue to mother their children in the context of increasing distress. The findings indicate the strengths of this group of mothers and their committment to their children. The findings also expose the powerful ideologies of 'motherhood' and 'biomedicine' and highlight the strategies women use to negotiate mothering from a marginalised and oppressed position. The findings offer guidance for education, mental health practice and services, policy makers and provide direction for future research in the area of maternal mental distress.