Consuming Motherhood: an Introspective Journey on Consuming to Be a Good Mother

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“In brief – within five words to cram
The central core of what is “real” –
Descartes?: “I think, therefore, I am”;
My view?: “I am; therefore, I feel.””
(Holbrook 1995)

ABSTRACT

This paper takes a personal subjective introspective (PSI) approach towards exploring consumption experiences on the road to motherhood. It examines the role the consumption experience plays in helping shape an individual’s perceived identity during the period of transition towards motherhood. The research considers how one’s identity is shaped by consuming products in order for others to identify the individual as being a ‘good mother’, using criteria laid down by the individual herself. The study is based on my own accounts of becoming a mother for the first time and utilizes my own retrospective account of this period and my diaries written on the road to and during the early stages of motherhood. The study concludes that some of my desires to be seen as a good mother can be related to my consumption experiences and how I thought others would judge me, based on these consumption experiences. Future directions for the research are also proposed.

INTRODUCTION: CONSUMPTION AND THE GOOD MOTHER

One of the primary concerns for me during my pregnancy, and after the birth of my son, was that others would consider me to be a good mother. My own idealized vision as to what being a good mother actually means is still a fuzzy concept to me and indeed is a concept that has been widely discussed in the literature (Forna 1998, McMahon 1995, Bergum 1997, Thurer 1994, Mercer 1995, Abbey and O’Reilly 1998, Wallbank 2001, Kaplan 1992). Discussions in the literature focus on what has been termed the ‘good’ or ‘perfect’ mother, whilst also recognizing that the perfect or good mother may actually be a myth. Diem (1998) for instance suggests that “unraveling the myths of the perfect mother is an art rather than a prescriptive procedure.” Chandler (1998) reminds us that “who a mother is and what it means to be one is context specific”, and is also culturally derived (Thurer 1994), where “the good mother is reinvented as each age or society defines her anew, in its own terms, according to its own mythology” (Thurer 1994). Abbey and O’Reilly (1998) suggest a perfect mother involves an “idealized, sentimentalized or trivialized images of motherhood and assumptions about how ‘good’ mothers should think and behave.”
With these thoughts in mind there were certain issues that seemed to be particularly important during my pregnancy and immediately following my son’s birth that can be attributed to my fuzzy notion of being a good mother. These tended to range from the banal, please don’t cry and be cranky when my mother-in-law comes to visit, for instance; to the obvious physiological issues of ensuring my son was fed (breast is best, of course), clean and changed on a regular basis. However, outside of the physiological area, my fears about bonding with my new arrival and knowing how to look after him properly, what I was surprised to encounter when reading my diaries from this time period was how much I had actually written about what I had bought for either myself or my son during the transition to motherhood. Some of my key feelings during this time period centred around thoughts with which I had grown up; that I would give my child the best, that it would want for nothing, that it would have the same as everyone else; all of which on the one hand stem from my being one of the economically poorer children amongst my own peers, but which also conflicted with my more recent interests in environmentalism and in not wanting to raise a selfish child who valued none of its possessions. However, without considering in detail the inherent conflicts within my own thoughts, what is interesting, for this paper, is to examine how my consumption experiences helped to reinforce my internal image of being seen to be a good mother in the eyes of others.

METHODOLOGY

This paper is a subjective analysis of my own consumption experiences during my first pregnancy and immediately following the birth of my son, as such the research method can be classed as a personal subjective introspective (PSI) (Shankar 2001, Holbrook 1995) or researcher introspective approach (Wallendorf and Brucks 1993). The PSI approach has been described by Holbrook (1995) as perhaps the “ultimate participant observation.” There has been much discussion within the consumer research literature in recent years on the use of PSI within the discipline (see for example Gould, Shankar 2001, Brown and Reid 1997) and also the pros and cons of this particular method of introspective research (see Wallendorf and Brucks 1993 and Holbrook 1995). Without reinventing the wheel, by again reciting these differences, it is nonetheless important to further explore why this methodology was adopted for this research study.

The PSI method is obviously a subjective one, indeed it is the very subjectivity of this paper which the author feels is its core strength. As Brown and Reid (1997) emphasis such an approach to research is meant to be “self-indulgent” and “inculcate a feeling of “being there’” and be able to “generate a momentary flash of recognition (Yes, that’s just like me!)”. Thus, whilst the critique by Wallendorf and Brucks (1993) of PSI is an important one it is felt that one of the main criticisms offered by the authors require further examination. The authors suggest that PSI is not popular in social science disciplines other than consumer behaviour. However, given that we are all consumers it would seem obvious that a PSI method is more likely to lend itself to consumer research than to the other social sciences. After all it is easy for us to talk about consumption experiences, it is something we all do every day!
The data for this study was collected unknowingly during 1997, and consists of a detailed description of my consumption choices during the transition to motherhood. This study is based on an examination of my diaries during that time, a retrospective memory searching experience to jog my memory and discussions with my husband as to what we purchased during this time period. As this transition to motherhood is such a unique experience it was relatively easy to draw up a list of the goods purchased and to then further consider my feelings and emotions towards the consumption choices made and as Denzin (1989) comments, “Before we can ever hope to understand others we must first understand ourselves.” (in Shankar 2001).

Wallendorf and Brucks (1993) have criticized this method for fear of one’s memory being distorted and perhaps difficulties with the reconstructive nature of our long-term memory. However, I would argue that given the special circumstances surrounding the events being discussed (i.e. first time motherhood) it is easier to recall events from this time period, especially with the aid of a diary. Brewer (1988) also suggests that “long term recall of past events would be disproportionately composed of highly salient, poignant or extreme events” (in Wallendorf and Brucks 1993). I would agree that this is certainly true for this study, but it is the very poignancy of the event itself, i.e. the transition to motherhood, that is what is being explored within this paper, and thus an introspective piece that examines consumption experiences, which are very memorable, appears to be an appropriate methodology for this study. Smith (1994) has commented on a study of new mothers and suggests that retrospective accounts on the transition to motherhood are more self-enhancing than the contemporaneous accounts of the same mothers. However, the accounts of my own consumption experiences discussed here are not, in my opinion, self-enhancing.

Thus, by immersing myself in recounting my own lived experiences, with the aid of my diary from the time period involved, it is argued this paper provides a good starting point for beginning to understand the role consumption plays in the creation of the good mother.

**FINDINGS**

In wanting to be viewed as a good mother by my husband, my friends and family, my new friends who were also first time mothers, and members of the health care profession one of the things that became important to me was that these people would think that I had bought the right products, primarily for my child, but also for myself. Within my own belief system it became particularly important for me to feel that I would ‘fit in’ with my newfound friends and one way in which I attempted to do this was via my consumption purchases. Table 1 indicates the different types of products that I purchased, or had purchased for me, during this time period and also details those who influenced the purchase.

My consumption choices were influenced by a variety of sources; firstly, there were those purchases that I made myself, which were not immediately influenced by any of the other influencing forces, sometimes for example I would just see something that I thought was cute and buy it with very little thought. Secondly, my peer
group of new friends with whom I attended a pregnancy yoga class were an enormous influence, there were 8 of us in the class and all were first time mothers. I had intended to attend some type of relaxation class during my pregnancy and attended the yoga class in Edinburgh after noticing a flyer in a local restaurant. In relation to Bauman’s work (1990) the yoga class could be considered a neo-tribe, where, whilst the group itself was an informal one, it nonetheless became important to take on board the identity symbols of the group. One way in which to do this was via consumption. My existing friends and family also influenced various purchases, but to a lesser degree than my new peers. My husband also played a role in many of the purchases for our son, but less so in purchases that I made for myself. Two types of experts had a big impact, firstly the recommendations of experts who I was in personal contact with, such as the yoga teacher, midwives and health visitor; and secondly the recommendations of experts whose work I had read. This ranged from experts who had written one of the numerous pregnancy books I had purchased, to various leaflets distributed by the Scottish National Health Service, and also baby and parenting magazines. I paid particular attention to the various awards in these journals and many of my purchases had been endorsed as “Mother and Baby, Best Buy” or “Practical Parenting Best Buy” or other such labels, such as the best toy labels for example. Finally, advertising and the mass media also played a role in my consumption choices. Indeed, we cannot forget the work of Hirschman (1988) who highlights the key role media vehicles play on our consumption purchases on a daily basis. During pregnancy I was always amazed at how interested I had suddenly become in nappy (diaper)

adverts, how many types of revolutionary new nappies is it possible to produce is a question I often wonder about; or to how much of an interest I paid to babies, their parents and the products they were utilizing in various television programmes and films.

The consumption purchases can be divided into three categories: those which provided a pleasurable consumption experience; those purchases which involved considerable anxiety during the purchase and choice stages and which can be classified as ‘good mother’ products; and those products which fell somewhere in the middle of these two categories.

THE PLEASURABLE EMOTIONAL CONSUMPTION EXPERIENCE

It has been well documented in the literature that our consumption experiences can play a significant role in the pleasure and emotions one receives from buying things and the consumption experiences of a pregnant woman and new mother are no exception.

One exciting category of purchases was in the creams and potions category, both for my son and myself. Not being a typical creams and potions person I spent considerable time in local health food stores perusing the natural beauty products and essential oils sections, that could be consumed during pregnancy. In particular, I lost count of the number of different types of stretch mark prevention creams purchased, although I have to confess none worked! This was very much a personal experience and one in which I could indulge in myself; although I was also influenced by the recommendations of experts, the main ones being the yoga teacher and midwives, as well as reading recommendations by experts,
following advice on the use of aromatherapy during pregnancy, for example. The yoga class acted as a catalyst for sharing information about the different creams and potions we had all tried and I also received some gifts, during and after the pregnancy. These purchases did not seem to be highly relevant in the good mother category I had created for myself, but were more important as a means to indulge myself. Indeed I can still remember vividly the smell of all the various creams and potions during this time period and all invoke happy memories of a particularly emotional life experience.

The most enjoyable part of a one-day shopping trip with my husband to buy all the necessary items for our new arrival (see also anxiety section below) was the purchase of some clothes, toys and various memorabilia items for the baby. This was a very emotional experience for both my husband and myself and one in which we happily talked about the arrival of our baby into the world. Whilst the recommendation of both experts, on what essential items we would need, and the advice of my peers were also important, on the whole the purchase of these items was an enjoyable one and one in which, I did not think a great deal about the consequences of. It was also fun buying a small number of baby toys and some photo albums and the like to document the baby’s arrival.

I also made other purchases outside of this one-day of shopping with my husband, and this was usually for baby clothes, where I found myself in baby shops choosing some essential items for the baby and a few items that I found cute. We also diligently followed the instructions in our chosen baby bible of what we needed to take to the hospital with us for the baby – six vests, six baby grows, two jumpers and a coat and hat to take the baby home in. Although I must say, following meconium nappies and lots of sick all six vests and baby grows had been used up before the baby was twenty-four hours old – thank goodness for gifts!

On another occasion we also chose to decorate the baby’s room and purchased wallpaper, paint and pictures etc for the room. This was very much a personal purchase made by my husband and myself and again a pleasurable one where we thought happily about our new lives as parents.

In the category of clothes and toys one of the biggest contributors to this category were the many, many gifts we were given by our friends and colleagues. We certainly had enough clothes for our son to last the first eighteen months of his life and anything that we subsequently purchased for him tended to be based on whims when one or other of us would buy him a present.

ANXIETY PURCHASES: GOOD MOTHER PRODUCTS

The category of purchases, which forms the primary basis of the discussion for this paper, is what I have termed the good mother products. These products were all purchased with a key thought at the back of my mind that they would help in creating an identity for myself, which would then allow others to consider me to be a good mother. As mentioned at the beginning of this paper the concept of what a good mother actually means to me is, and was at the time of my pregnancy, a fuzzy concept. I did not at any time sit down and rationally try and determine how I could be and be seen to be, a good mother, or indeed consider what this would entail. However, what I did in abundance was become anxious about wanting to be perceived to be a
good mother by others, even if I was unsure as to what exactly this meant. One of the ways in which I could easily portray an image of good motherhood was via the purchase of products for my new baby and myself and these purchases are further explored below.

When it came to books, being a typical academic, I purchased and consumed many books, magazines and the like in relation to pregnancy. The main recommendation came from the yoga teacher in Edinburgh, who had a wide collection of books, which members of the class used to share on a weekly basis. I also spent many hours browsing the local bookshop and purchasing many different books on pregnancy, including books meant for trainee midwives, which did nothing but fill my head with lots of scary statistics and a list of further questions for my midwives! Some of my good friends also sent me books they had used, so in total the number of books bought and/or read during and immediately following the pregnancy was over 20. I thought that by reading these books and magazines I was both empowering myself to know more about my pregnancy, whilst at the same time taking such a keen interest and reading around the subject others would be able to view me as a good future mother.

A key category in this area was the purchase of items needed for the new baby. These purchases were mainly bought during a very emotional experience for my husband and I when we finally made it to the shops to buy the baby essential items three weeks before the baby’s arrival; given Ethan was also two and a half weeks late we were obviously pushing it! We spent one beautiful Summer’s day in Edinburgh traveling between Mothercare and John Lewis to buy the essential items. We were very conscientious and had a list drawn up of all the essential purchases we needed to buy. This was established after discussions with the yoga class, various experts and my friends and family. Armed with credit cards we headed with trepidation and excitement to the shops. We didn’t need to purchase a buggy, carry cot or baby changing bag as we had a loan of these from some close friends of ours. That aside, we did need to purchase some vital equipment – a car seat and cot being the most essential. Whilst in John Lewis we managed to buy a car seat, baby sling and a baby changing station after looking around the nursery section for about 2 hours. Our only difficulty after this was carrying everything back to the car, in the end we opted for the store to deliver everything to the house, at an extra cost of course. What struck me about the purchases however was that whilst this was a highly emotional and exciting experience for both my husband and myself, at the back of my mind, during each purchase, was a reminder to myself to make sure I was buying the ‘best’ items. So whilst choosing the car seat, we bought the Britax Rock A Tot that was recommended by the experts, number one best buy in every baby or parenting magazine I had purchased and was also the car seat that all my yoga friends and other new mothers had purchased; in fact even the design of the material was the same. Similarly the baby sling, Baby Bjorn, had been the number one recommendation and was also used by all my friends and again had the same design. The baby changing station was something that the new mothers I had contact with had all recommended as being an excellent purchase; you could change the baby at a reasonable height and save your back at the same time, it also had a removable bath, and some
storage space underneath to keep nappies, wipes etc. The only difference in our purchase than that of my friends was that this time, the design was different. We didn’t get any joy with a cot that day, as we didn’t see any that we liked. In the end this was purchased via mail order and was very much a personal preference of my husband and myself. However lots of research went into the purchase of the cot mattress and an additional mattress for the carrycot, based on research linking mattresses to cot deaths in infants. In fact, this was the purchase that caused me most concern. In the end, we purchased a “revolutionary new mattress” from Mothercare that was again a recommended buy and also one that midwives and our health visitor recommended. We also purchased a very weird looking contraption for putting dirty nappies into, based on the numerous adverts we had seen in various magazines, about its usefulness. At the back of my mind whilst choosing this bin was also the fact that I remembered a good friend of ours also had one. I might also mention that whilst we diligently used this bin for about a month we did not even think about using it after the birth of our second son.

One other big purchase was that of a baby bouncer and this was given to us as a gift from some good friends of ours who had recently visited us in Scotland. They had two children of their own so we trusted their judgment. I had also seen other mothers use a similar brand of bouncer and felt it would be safe for our baby.

Back to John Lewis and Mothercare, the remainder of the shopping trip was spent buying essential items such as nappies, wipes, cotton wool and bottles, which were all based on the recommendation of both types of experts and my yoga classmates and other friends and family who had recently had babies. So we purchased Pampers nappies, apparently a better shape for boys than girls, but Huggies hypo-allergenic wipes, the Pampers ones had too much perfume; Avent bottles, the most suitable for breast fed babies and these would also match the Avent breast pump purchased earlier; Johnson & Johnson cotton wool and cotton wool buds, the softest brand available; and a homeopathic nappy rash cream that doesn’t have the harsh chemicals of other creams. These purchases were also filled with anxious moments and careful consideration on my part that I was buying what would be considered best for the baby and would therefore make me look like a good mother to my peers; although this was very much a semi-conscious thought that I was having and certainly not one shared with my husband. Another purchase which also fitted into this category was that of baby bibs and white cotton muslin cloths for when the baby was sick; again personal recommendation by my yoga friends sent me searching around Mothercare for their brand of muslin cloths which were soft, durable and also washed well. Of course I was also delighted when the shop assistant emphasized that these were the most traditional and best bibs for the job. My first official recognition of good mothering!

Another category was the purchasing of food during pregnancy. Being a vegetarian for ethical and health reasons, I found it important to ensure I was balancing my diet correctly and eating healthily. Surprisingly, for me, my whole diet changed dramatically during pregnancy. Through personal choice and also the recommendation of experts there were the obvious things I didn’t do, like drink alcohol for example (with the odd exception of a
glass of wine), but I also found myself determined to eat healthily for the entire duration of my pregnancy. This involved cutting out products such as sweets and chocolates and replacing them with health alternatives such as nuts and seeds, and wondering why the alternatives were always so boring in comparison to a Cadbury’s Flake, which I’m sure was calling out to be eaten by me on more than one occasion.

During the early stages of pregnancy there was also the dreaded morning sickness, which meant, keeping anything down for longer than five minutes was a chore in itself. Following various recommendations I found myself trying strategies such as eating little and often, sucking on a licorice root, drinking ginger beer and ginger biscuits to all aid the morning sickness problem, none worked of course. Although for my second pregnancy I tried acupuncture and would definitely recommend this to anyone suffering this dreadful phenomena. I also found myself cooking healthy meals on a regular basis, and trying to increase my protein and iron intake following concerns from the health care professionals about my diet. They hadn’t come across many vegetarians before, which was a little surprising to me. Concerns over my baby, being small for its size, obviously worried me, so I went about looking for various ways to increase my intake of protein, iron and the like, only to later give birth to an eight pound, six and a half ounce baby! This category therefore did cause some concern and it became important to me for others to consider the eating habits I had adopted were to aid the health of my baby and therefore others could consider me to be a good mother.

The biggest shock following my pregnancy was yet another new body shape, combined with the added difficulty of breast feeding in public, and thus the need to purchase more clothes to get through this period. These purchases were mainly influenced by the sharing of information at the yoga class, following the advice of my peers and my own shopping trips. These trips were always fraught with difficulty, finding anything to wear that would be suitable during breastfeeding was difficult and annoying; but, by far, the most interesting of experiences was the purchase of breastfeeding bras. Besides being completely daunted by the number of different types of bras and the various ways in which they could be attached/detached (a zip combined effort being the most appalling design spotted) there was also the added difficulty of knowing exactly what size to buy. The buying process was also furthered exacerbated by the fact that it was completely impossible to buy any type of feeding bra that wasn’t white. Discussions on breastfeeding bras did however provide much ammunition for jokes amongst myself and other new mothers. If this wasn’t enough this was then followed by the purchase of a breast pump; just looking at the various ones available in the shop, was enough to make me want to throw up and immediately switch to bottle feeding. In the end following the advice of my yoga friends and the written expertise of some of the books I had purchased I managed to buy all the necessary equipment and then move on to choosing some breast pads, to prevent leakage. This purchase was also important as one had to make the choice between plastic lined or non-plastic lined pads and remember that these pads were going to prevent embarrassing situations when one returned to work. In the end the advice of experts played a key role, plastic backed pads could promote problems by making the breast area wet and
sweaty, so best to stick to the other kind, which are less likely to cause mastitis, but which need to be changed more often.

After making a conscious decision to use a birthing pool during the labour stages of pregnancy we hired a water pool and all the relevant paraphernalia that came along with it, to be installed in the hospital prior to labour. Not only did this rental provide me with considerable assurances for the labour itself it also afforded me use of the largest delivery room in the hospital, as this was the only one large enough to take the pool! The pool itself was rented following research into the area by myself and on the advice of both written and personal experts, by my peers experiences at the yoga class and also from advertisements.

Creams and potions and health supplements became an important part of the post pregnancy ritual and the purchases were very similar to those during pregnancy. Personal experts, especially midwives and health visitors provided advice on how to maintain the right sort of diet whilst “feeding for two”, whilst my yoga teacher and homeopath provided guidance on various lotions and potions to deal with the aftermath of a long labour. My yoga friends who had had their babies also provided advice on what worked for them after labour. Of course all of these purchases were tapered with checking that whatever I ate, or put on my body, was not going to do any damage to my new, breast-fed baby.

THE ‘SOMEWHERE IN THE MIDDLE’ PURCHASES

The somewhere in the middle category involved those purchases which had a mainly pleasurable emotion attached to them, but where there was also some anxiety as to the consequences of purchasing the product.

The joys of being pregnant for the first time were sometimes overshadowed by thoughts of looking like a beached whale and wondering what on earth one can wear that doesn’t make one look hugely pregnant. Comments from others as to how wonderful and blooming I looked only seemed to add to my visions of a beached whale and the wonderful scene from Shirley Valentine where someone comments on how he likes stretch marks! As someone who had been the same weight (give or take a couple of pounds) since the age of 16 putting on weight during pregnancy was something I found quite difficult, and wasn’t prepared for. I never expected to be looking enviously at women wearing short cropped tee shirts with perfectly flat bellies, and wishing that were me, although I never wore such outfits before my pregnancy! Thus, buying clothes became particularly important to me during my pregnancy, and was something I was surprised at in myself, as clothes shopping is not something I normally do on a regular basis. The main influencer on clothes purchases was myself and my biggest aim which was not to buy maternity clothes; for some reason I became obsessed with wanting to find clothes that weren’t actually made for pregnant women; partly because these clothes always tended to look as if designers stopped designing them somewhere between 1970 and 1980 and partly out of sheer stubbornness, although on reflection, I’m not really sure where this stubbornness came from. As Wolf (2001) aptly points out in relation to maternity clothes,

“Everything I saw in Washington in the mid 1990s seemed to be designed as if all pregnant
women wanted to look like 1960s flight attendants wearing pillows.”

In the end I did succumb and buy a couple of pairs of awful maternity leggings from a mail order catalogue recommended by a friend, but other than that relied on a couple of pairs of elasticated black trousers from The Gap (before questions were raised about its ethical standards), which I ceremoniously burned about three months after Ethan was born. I also paid particular attention to what my friends at yoga were wearing and we had interesting discussions about where to buy the best clothes and also swapped mail order catalogues a couple of times. Some of my friends who had also had children also gave suggestions, Monsoon tops for example, were great during the summer, and also came in handy during the breastfeeding days. The one thing that gave me particular pleasure was buying some new shoes, shoe shopping is one of the only types of shopping I enjoy, and it was great having an excuse to buy, yet more pairs, during pregnancy. Given my increased weight and a tendency to waddle (despite the greatest of efforts not to) during the latter stages of pregnancy I figured a few pairs of mules were essential. Despite my frustration with the availability of decent clothes for pregnant women, I found these purchases to be enjoyable ones and was not concerned as to how others would perceive what I wore, at least as far as being a good mother was concerned.

Another category of purchases I made was in the health supplement category. Being a vegetarian my health care providers were particularly concerned about anemia so I purchased various types of natural products to increase my iron count – the most notable being a product named Floradix. Experts, both through personal contact and via reading, again recommended these products. I also enjoyed browsing the local health store in looking for any natural products, which may be useful for pregnancy, labour and post delivery. The sharing of information at the yoga class again proved important, one product purchased being raspberry leaf tea, meant to help prepare your womb for contractions, during labour. Following a 22 and half hour labour I dread to think what the labour would have been like without the tea! Whilst there was some anxiety attached to these purchases, on the whole it was a pleasurable experience to buy non-medicinal healthy products that would benefit both my baby and myself.

NON CONSUMPTION EXPERIENCES

Bearing in mind the recent words of Schroeder (2000) that we also identify ourselves by what we do not consume it is worth mentioning some of the purchases I deliberately did not make. Firstly, whilst buying some baby clothes for purely emotional reasons I was very conscious of not spending vast amounts of money on clothes that a baby would only wear for a small time period. Similarly I did not see the need to have a matching buggy and car seat and all the various add-ons that come along with this (matching hood, rain cover, umbrella etc) and did not feel that by not having these items people would view me as a bad mother. I was also happy to take second hand clothes from some work colleagues of ours who had also recently had a baby. Consequently it is important to recognize that there was lots of conflicting thought processes involved in my own sense of what was important for others to consider me to be a good mother. These issues are further
explored in the discussion section that follows.

DISCUSSION

What becomes apparent from the above description of my own consumption experiences is how I wanted significant others in my life to perceive me as a good mother; my consumption purchases helped me to establish an identity for myself where I perceived these significant others would indeed view me as a good mother. It has already been noted, not surprisingly, in the literature that a woman’s identity changes when she becomes a mother (Bailey 1999), but that during this time period the self remains a complex web of relations (Han and Lipton 2001). In understanding my identity in relation to others then one can consider the work of the psychologist Mead (1934) as discussed in Smith’s (1999) discussion of motherhood. Mead suggests,

“The individual experiences himself [sic] as such, not directly, but only indirectly, from the particular standpoint of other individual members of the same social groups or from the generalized standpoint of the social group as a whole to which he belongs. ……he becomes an object to himself only by taking the attitudes of other individuals towards himself within a social environment or context of experience and behaviour in which both he and they are involved.”

(In Smith 1999)

This is then followed by Smith himself who suggests that when considering identity individuals consider their “sense of self concerned in terms of, and in relation to, sense of others; sense of others thought of in terms of self.”

As the author highlights when preparing for motherhood women do indeed use their relationships with significant others to guide and help them in this preparation. Thus, utilizing Smith’s (1999) work it seems that an individual’s relational self is particularly pertinent for this study. In other words,

“One’s sense of self is inevitably bound up with one’s sense of other, that identity is, therefore, intrinsically social and relational.”

(Smith 1999)

Indeed other authors have also commented on identity being both social and relational and reinforced through social interaction (Shankar 2001) and through how we perceive others to view us (Schroeder 2000). Similarly, within particular groups cultural and social onedness will play a significant role in what individuals should and should not consume, especially when acting in a caring role by consuming for others (Thompson 1996, Fischer 2000). It has also been stressed in the literature that one way of identifying oneself within social and relational settings is through consumption (Elliott 1997, Baudrillard 1981, Hunt and Livingstone 1992, Bauman 1988, Schouten and McAlexander 1995, Thompson and Hirschman 1995, Willis 1991, Nava 1992) as it is possible for individuals to construct their self-identity through the use of symbolic materials (Beck 1992, Shankar 2001, Schroeder 2000, Firat and Venkatesh 1998, Thompson 1995, Douglas 1996). Consequently, in utilizing consumption to construct an identity for oneself we therefore use signs and symbols from our consumption choices to help develop our identity (Schroeder 2000). As it is now widely recognized that
consumption plays a significant role in the construction of our social world (Elliott 1997, McCracken 1990); indeed it has even been suggested that consumption has replaced our jobs as our primary life interest (Moorhouse 1983), then it is possible to suggest that we use consumption to create meanings about ourselves (Elliott 1997) and that meaning, for this paper, was that significant others would perceive me as a good mother if I bought the right things for both myself and my baby. Consequently, my consumption choices act as symbols and meaning makers to help create a self-identity of being a good mother in the eyes of significant others. In helping create an identity of the good mother then purchasing products for myself, but mostly, for my baby played a significant role in my creation of this identity and as such also led to personal anxiety (Bauman 1988) when making these consumption choices.

What is interesting to further explore is why consumption plays a role in creating an identity, in this particular area, in conjunction with furthering the debate on what it means to be a good mother. Why do women feel this need? Where does it come from? Most importantly, from a consumption perspective, what role does marketing, in particular advertising and the mass media play in this creation of a perceived good mother?

CONCLUSIONS AND FURTHER RESEARCH SUGGESTIONS

My account of being a good mother is of course only one person’s account and it may well be that I am the only mother who ever used her insecurities about becoming a mother by consuming what I envisioned would make me look like a good mother to others, although my intuition tells me this is probably not the case. Interestingly, at other times in my life, with the notable exception of the teenage years, I have not striven to be the same as my peers. During my pregnancy and immediately following my son’s birth there are also areas in which I was radically different to my peers. For instance, I opted against immunization for my son, refused to be induced when my son was deemed to be ‘too overdue’ by the medical profession, and, as discussed earlier, choose a water birth for my labour, whilst also opting for homeopathic remedies during labour rather than rely on pain relief offered by the hospital. Consequently, from a future research perspective it would be interesting to explore how other new mothers view the consumption experience and to examine what role consumption plays in other women’s desires (if indeed they have them) to be perceived as a good mother by their peers. It would also be interesting to consider this research in conjunction with other disciplines, such as sociology, psychology and physiology to establish why there is even a need to be seen as a good mother, where this comes from, and why, or indeed if, the consumption experience plays a role in how society judges, or is perceived to judge new mothers. Indeed my own consumption experiences led me to draw parallels with the work of Naomi Wolf (1990) and her Beauty Myth thesis. Wolf suggests that women were persuaded to buy items to aid domestic cleanliness in the 1950s and 1960s and that in the 1980s this had switched to beauty products where “somehow, somewhere, someone must have figured out that they [women] will buy more things if they are kept in the self-hating, ever-failing, hungry, and sexually insecure state of being aspiring ‘beauties’.” Can Wolf’s thesis also be linked to myths surrounding the good mother? Do mothers indeed buy more
things if they are anxious about being seen to be a good mother, especially if this anxiety, can, at least in part, be attributed to the role of the mass media and advertising? If society lays down the ground rules for being a good mother, as suggested earlier by Thurer (1994), then in today’s society does the myth of a good mother therefore involve buying things in order to belong to a good mother group, an individual, in this case myself, feels the need to be associated with?

REFERENCES


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Table 1: Consumption Purchases on the Road to Motherhood

<table>
<thead>
<tr>
<th>For Me During Pregnancy</th>
<th>For Me Post Pregnancy</th>
<th>For Baby</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clothes (S, P, F)</td>
<td>Clothes (S, P, F)</td>
<td>Car Seat (Ew, P, Pt, A)</td>
</tr>
<tr>
<td>Shoes (S)</td>
<td>Breast pump and paraphernalia (P, Ew, A)</td>
<td>Cot (S, Pt), Mattress (Ew, Ep, A)</td>
</tr>
<tr>
<td>Food (S, Ep, Ew)</td>
<td>Creams and Potions (P, Ep, G, S)</td>
<td>Buggy, baby changing bag, carry cot (G)</td>
</tr>
<tr>
<td>Books (Ep, P, S, F)</td>
<td>Health Supplements (Ep, P, S)</td>
<td>Baby Bouncer (G)</td>
</tr>
<tr>
<td>Creams and Potions (S, Ep, Ew, P, G)</td>
<td>Yoga classes (S, A, P)</td>
<td>Bottles (Ep, Ew, P, A)</td>
</tr>
<tr>
<td>Health Supplements (Ep, Ew, S, P)</td>
<td></td>
<td>Nappies (P,A)</td>
</tr>
<tr>
<td>Water birth equipment (S, Ep, Ew, A, P)</td>
<td></td>
<td>Creams and Potions (P, Ep, S)</td>
</tr>
<tr>
<td>Yoga Classes (S, A)</td>
<td></td>
<td>Baby wipes (P, A)</td>
</tr>
<tr>
<td></td>
<td>Cotton wool, cotton buds (P,A)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Baby changing station (P, F)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bibs/muslin clothes (P)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clothes (G, S, P, Ep, Pt)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Toys (G, Pt, S, P,A)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Decorations for room (S, Pt)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Baby memorabilia (S, Pt)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nappy Bin (Ew, F)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Baby Sling (Ew, P, F,A)</td>
<td></td>
</tr>
</tbody>
</table>

Consumption Influencers (S=Self, P=Peers, F=Friends & Family, Pt=Partner, G=Gift, Ep=Personal Experts, Ew=Written Experts, A=Advertising and Mass Media)