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Men's passage to fatherhood: an analysis of the contemporary relevance of transition theory

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Abstract

Drawing upon ethnographic interviews with men undergoing the transition to fatherhood, this paper presents a theoretical analysis of men's experiences of pregnancy, birth and early fatherhood. It does so using a framework of ritual transition theory and argues that despite its earlier structural-functionalist roots, transition theory remains a valuable framework illuminating contemporary transitions across the life course. The paper discusses the historical development of transition or ritual theory and, drawing upon data generated during longitudinal ethnographic interviews with men undergoing the transition to fatherhood, analyses its relevance in understanding contemporary experiences of fatherhood.

Key words: transition, fatherhood, rites of passage, ritual
Introduction

This paper draws on ethnographic interviews conducted during a longitudinal ethnographic study of men's experiences of pregnancy, birth and early fatherhood in the United Kingdom (UK) (Draper 2000). Academic interest in fatherhood across a range of disciplines has increased rapidly over the last two decades. This interest has been prompted by a number of changing cultural and social practices. Family practices within Western societies have become more diverse (Smart et al 1999) with increasing cohabitation and divorce and gay and lesbian couples. New reproductive technologies have made possible conception not only between heterosexual couples but also between gay couples, transexuals (More 1998) and also created the potential for posthumous reproduction (Simpson 1999). The division of domestic labour has been a theme of research over the last twenty years and findings indicate a general increase in paternal involvement in the practice aspects of childcare (White 1994, Smith 1995), although this remains a limited involvement (Morgan 1990, Aldous et al 1998) and one which is highly selective (Segal 1990). Changing employment patterns have resulted in higher male unemployment and more women working outside the home (White 1994, Elliott 1996, Aldous et al 1998, Glass 1998), creating the potential for changes in the organisation of childcare within the home. Furthermore, social policy initiatives such as parental leave and family friendly employment practices have been developed to support involved active fathering.

In addition to changes in employment, the family, division of domestic labour and policy, there have also been significant changes in the management of pregnancy and birth with men being encouraged to be actively involved in this process. Men's increasing participation in pregnancy and labour has led to an increase in health related
research in this area, for example Chapman (1991), Henderson and Brouse (1991), Jordan (1990a and 1990b), Lupton and Barclay (1997), May (1982a, 1982b) and Vehivlainen-Julkunen and Luikkonen (1998). In the context of all these cultural, social, political and medical changes, the concept of the new involved father has evolved. Framed by this contemporary image of fatherhood, the purpose of the study reported here was to explore men's experiences of their transition to fatherhood.

Method

Guided by the principles of ethnography, a sample of both novice and experienced expectant men (n=18) was interviewed three times over the course of their partner's pregnancy (see Draper 2000 and 2002a for a detailed description of method). Ethnography was chosen because of its ability not only to illuminate how the men made and marked their own individual transitions to fatherhood but also to examine how this transition was influenced by the changing fathering practices in contemporary Western culture.

The men were recruited through the local branch of the National Childbirth Trust (NCT) (an organisation in the UK committed to preparation and support for parenthood) or by snowball techniques. The men were therefore predominantly middle class and tertiary educated and all were in stable relationships with their partners. The men are therefore unrepresentative of expectant men in general. The men were interviewed, using a semi-structured approach, on three occasions, twice during their partner's pregnancy and once after the birth, in order to explore their experience of the transition to fatherhood. Prior to the individual interviews, three pilot focus groups were conducted and which generated useful data, some of which I use in this paper. All the
interviews were tape recorded and subsequently transcribed verbatim. Data were analysed by hand initially into three broad descriptive categories of 'pregnancy', 'birth' and 'early days' and then into theoretical themes, informed by a number of theoretical frameworks. The sociology of the body literature for example, informed men's experiences of pregnancy confirmation (Draper 2002a) and birth attendance and concepts of visuality elaborated men's experience of the ultrasound scan (Draper 2002b). Here, I show my use of ritual transition theory as the overarching framework, illuminating their movement toward fatherhood.

Inherent in the men's accounts was the acknowledgement that they were changing statuses. For novice fathers this change was from non-father to father and for experienced fathers from already-father to father-again. This changing status was accompanied for many by a sense of uncertainty about their new role and how different life might be. Many also regarded pregnancy as a highly ambiguous time, when they were in-between statuses, which for many was framed by the unfamiliar territory of medical management. These accounts led me to explore the utility of ritual transition theory in understanding men's contemporary transition to fatherhood.

Whilst this everyday taken-for-granted affair may seem unremarkable, the theoretical framework of rites of passage has provided a useful lens through which to understand men's transition to fatherhood. In a literature which has little concerned itself with the experience of rites of passage from the inside (Visedom 1976), use of the theory has facilitated discussion of both the components of passage and the way insiders experience it. The paper outlines my use of ritual transition theory and argues that despite its structural-functionalist roots, the theory remains a valuable and relevant framework illuminating contemporary transitions across the life course. It begins by
laying down the theoretical foundations with a discussion of the historical development of transition or ritual theory. The later sections of the paper draw upon the interviews with men undergoing the transition to fatherhood and analyse the theory's relevance in understanding contemporary experiences of fatherhood.

**Development of the theory of Rites of Passage**

*Van Gennep*

Working in France in the late nineteenth and early twentieth centuries, Van Gennep made a significant contribution to ethnography and anthropology. He was interested in the patterns or schema underlying everyday behaviour within societies and how this behaviour enabled the society to accommodate change and conflict and yet ‘maintain a social coherence’ (Froggatt 1997:126). He understood life as a continuous cycle of death and rebirth, what he called the law of regeneration, and from his observations of traditional societies he proposed that individuals within a society move between fixed positions or events such as birth, childhood, marriage and death. Central to his analysis was not necessarily the nature of the position or status held by the person but the process(es) involved in acquiring the new status, that is the passage or movement between positions. In observing movement across these positions he suggested that a common pattern was discernible, which recurred irrespective of the event. He described this pattern in terms of three phases of separation, transition or limen, and incorporation. He called this schema 'rites de passage'. Passage is perhaps more accurately translated as transition and *schema* as pattern, so the three phases constitute the pattern of rites of transition.
Separation was characterised by removal of the individual from his or her ‘normal’ social life and this detachment was marked by certain customs and taboos. The transition phase was a stage between social statuses, where the individual no longer belonged to the previous status but had not yet completed the passage to the next. This transitional or liminal phase, in which the individual occupies a non-status, a kind of no-man’s land, was regarded by Van Gennep as potentially threatening and harmful. Ritual within the liminal phase was concerned with preventing or containing danger, pollution and harm. Rituals associated with the individual assuming the new status marked the phase of incorporation. Through the phases of rites of passage therefore, the individual enters as one kind of person and ‘emerges from the ritual to be reincorporated as a new persona’ (Murphy et al 1988:237).

Van Gennep suggested that the individuals making the transition were ‘sacred’ or set apart from the ‘profane’ or everyday position they previously held. For example in some cultures a pregnant woman was regarded as sacred and then once the child was born she remained sacred with respect to some things and not to others. This movement between the sacred and profane, what he called the ‘pivoting of the sacred’, was produced through the enactment of ritual.

So movement between statuses was accomplished and marked by rites of either separation, transition or initiation which either symbolically or practically signified the change in status (Froggatt 1997). Some of these rites were more elaborated depending on the nature of the passage. For example, he argued rites of separation were prominent at funeral ceremonies, incorporation at marriage ceremonies and transition rites in pregnancy. The rites associated with these passages were concerned with reducing their potential harmful effects.
Van Gennep provides examples of rites associated with transitions across the life course such as those associated with pregnancy, birth, adolescence, marriage, old age and death. He describes pregnancy as a transitional period characterised by rites of separation and birth as a period of reintegration or incorporation. Separation rites during pregnancy could include food and pollution taboos and purification rites. Taboos of impurity associated with the mother were thought transmissible to the child, so rites of incorporation after the birth often involved purification, such as washing of the head, and served to establish her new position and reintegrate the woman into groups to which she previously belonged.

Victor Turner

Turner (1966, 1969, 1974) developed Van Gennep's theory of rites de passage. He was particularly interested in the liminal phase and the marginal or even invisible status of the ritual subject within this phase. He argued that the ambiguous nature of this altered status presented a potential threat to social stability as the individual was in a period of 'social timelessness' occupying a vulnerable and 'abnormal' position (Helman 1994).

During this middle liminal phase, Turner described ritual subjects as initiands, who are set apart ‘divested of the outward attributes of structural position, set aside from the main arenas of social life in a seclusion lodge or camp, and reduced to an equality with his fellow initiands regardless of their pre-ritual status’ (1974:232). These initiands form a ‘community of passengers’ where they experience what he calls communitas, the spirit of comradeship and fellowship amongst those undergoing the transition. Initiands who, for whatever reason, did not incorporate into the new status, remained permanently in the liminal phase and he called these liminoids.
A further contribution of Turner is his concept of the ‘polarisation of meaning’. Ritual symbols can hold a number of different meanings at the same time but these meanings tend to cluster around two opposite poles (Helman 1994). At one pole, ritual gives meaning to biological aspects and at the other ritual is concerned with social aspects. Polarisation of meaning can be particularly observed in rituals associated with life course transitions. For example, menarche is a significant event in a woman’s life course (Britton 1996), often associated with ritual which embraces both biological and social poles of meaning. In other words, the rituals associated with menarche not only mark the physiological onset of menstruation but also the social event of a girl's new status as a young woman. In this context, ritual acts as a bridge (Helman 1994) integrating the complex relationship between biological growth and social transition (Billington et al 1998).

In addition to his elaboration of the liminal phase and his notion of the polarisation of meaning, Turner made further contributions to understandings of the role of ritual. He argued that ritual was both expressive and creative. The expressive function of ritual conveys and communicates in symbolic form the values of the culture which is dependent upon shared understandings of the meaning of the symbols. In its creative function ritual actually produces cultural values, so creating or recreating cultural reality. So rather than Van Gennep’s functionalist interpretation of ritual as maintaining the equilibrium within society, Turner introduced a more flexible approach, the idea that ritual not only conveyed but created meaning and served both individual and cultural purposes.
The contemporary relevance of ritual transition

Other key anthropologists have drawn upon the theory of rites of passage, in order to understand the rituals observed in traditional societies during transitions across the life course (see for example Hertz [1907] 1960, Douglas 1973, Geertz 1973, de Coppet 1992, Rosaldo 1993). In contrast to the abundance of ritual practices in traditional societies, it has been suggested that within complex largely secular Western societies ritual has disappeared, resulting in what Grimes (1995) calls a ritual impoverishment. For example, Kimball (1960) in his introduction to the English translation of Van Gennep, suggests that our post-modern Western culture with its emphasis on individualism has forgotten the corporate or collective contribution of ritual. He argues that rather than being a public manifestation, ritual has become too individualistic, with many individuals accomplishing transitions alone with private symbols and that consequently ritual is often ‘found in the privacy of the psychoanalysts couch’ (Kimball 1960:xvii).

I want to suggest however, like Cheal (1988), that rather than a loss of ritual, contemporary society has exchanged one set of rituals for another. Rather than regarding Western society as ritually impoverished I suggest that the nature of ritual is altering and becoming more diverse. I suggest therefore a more flexible interpretation of ritual transition theory which reflects the complexities and flux of cultural practices, where the boundaries between ritual and non-ritual are perhaps less distinct (Tambiah 1979). Such an approach allows the use of concepts of ritual transition to understand how individuals negotiate life and encourages the rediscovery and cultivation of ritual meaning in everyday life, what Grimes (1995) calls incubating and cultivating ritual.
This incubation of ritual or ritualisation (Seremetakis 1991), is visible in the work of a number of contemporary researchers. Drawing upon the ritual of transition, for example: Froggatt (1997) explored how hospices for the terminally ill manage transitions between life and death; Murphy et al (1988) examined the liminal experiences of physically disabled people; Littlewood (1993) discussed contemporary death related rituals; Hockey (1990) explored the experience of death in both hospice and residential care; Helman (1994) discussed the ritual nature of the medical encounter; and Bydlowski (1991) and Davis Floyd (1987, 1990a, 1990b) examined the changing nature of pregnancy and childbirth rituals.

Drawing on the theory in this way not only allows the anthropologist to make sense of the complexity of observed ritual practices but also leads to refinements of the theory (Glaser and Strauss 1971). Through these applications, ritual transition theory has been adapted and refined so that despite its early twentieth century origins, it remains a useful framework within which to explore life course transitions within twenty first century Western society and the 'institutions which manage them' (Froggatt 1997:126). These include the transition to fatherhood, which is the focus of this paper. In the sections which follow I elaborate the concepts of transition and liminality, drawing on data from interviews with both novice and experienced expectant fathers, in order to suggest that ritual transition theory is a useful theoretical framework with which to understand men's transition to fatherhood.

**Transition**

In contrast to anthropological accounts which have traditionally described the *components* of rituals associated with rites of passage, the study reported here describes
the experience of those individuals taking part in the passage, as told by them. So rather than just an account of ritual as observed from the outside, men’s experiences of pregnancy, labour and early fatherhood are described ‘from the native’s point of view’ (Geertz 1977:480). These insider accounts spoke vividly of feelings of marginalisation and vulnerability, experiences which reflect the second of Van Gennep’s three phases – transition.

As well as drawing upon transition theory to analyse how individual men crossed the boundary into fatherhood, I wish also to emphasise the continuous nature of transition, to explore how men made their transitions into fathering (Roopnarine and Miller 1985). In this respect, as well as being ‘a “space” in its own right’ (Froggatt 1997:125), it is also a process, a becoming, a mode of being. This continuing process of transition not only emphasises its processual nature but also introduces the notion that transition is accomplished in relation to other ritual subjects who are themselves in transition (Billington et al 1998). It is therefore possible to observe a whole matrix or network of transitions taking place simultaneously. For example, a man’s transition toward fatherhood is accomplished in relation to his partner’s transition to motherhood, his parents’ transition to grandparenthood, the couple’s transition into a family and existing children’s transition to brother or sister. Transition theory therefore gives shape not only to individual but collective passages, a theme to which I shall return.

The baby, of course, is also part of this matrix of transition and it is interesting to note that gynaecological texts make metaphorical use of rites of passage terminology, for example, the term ‘passenger’ is used to describe the movement of the child through the ‘boundary’ of the cervix, into the ‘passage’ of the vagina. One interviewee, Ken, already had a child from a previous relationship, but was now expecting his first child
within his present relationship. He saw himself and his partner not only as a couple waiting for the baby, but also the baby itself was waiting its ‘time’:

And we read all the books and there’s one that takes you week by week and says the baby’s losing….the baby’s developing and things like that. And now all it really says is, all that’s happening is that the baby’s waiting until the time, and we’re in the same boat.

(Ken 1:8)

In Ken’s view, all three ‘passagees’ were positioned as liminal beings. Not only were they as individuals and as a couple in a kind of limbo, betwixt and between statuses, but the baby was also. His metaphor of the ‘same boat’ captures the essence of Turner’s (1974) concept of communitas, that they are all in this together.

**Liminality**

Ken’s description of ‘waiting until the time’ describes his sense of being in a kind of no-man’s land, which is characteristic of the limen or transition phase. As we have seen, during this liminal phase the individual is between social statuses, neither one thing or the other, betwixt and between. Douglas ([1966] 1984) suggests that during this liminal or marginal period the novice has no place or status in society and is temporarily an outcast. She argues that the individual between statuses is ambiguous and it is this ambiguity during transition that has the potential for danger:

Danger lies in transitional states, simply because transition is neither one state nor the next, it is undefinable. The person who must pass from one to another is himself in danger and emanates danger to others. The danger is controlled by ritual, which precisely separates him from his old status, segregates him for a time and then publicly declares his entry to his new status. Not only is transition itself dangerous, but also the rituals of segregation are the most dangerous phase of the rites.

(Douglas [1966] 1984:97)
Drawing upon the accounts of the men in the study, in the following section I suggest that men’s experiences during pregnancy and birth bear the classical characteristics of the liminal phase of rites of passage. From the point of the announcement of the pregnancy, men in the study began a transition toward fatherhood in which they were betwixt and between social statuses. Many of the men felt vulnerable and excluded during this period, feelings which were experienced in a heightened sense during labour.

**Pregnancy**

Of their experiences of the pregnancy, many men spoke of their lack of knowledge about the process, their feelings of isolation, their inability to engage in the reality of the pregnancy and their sense of redundancy. Women’s passage to motherhood, framed predominantly by medical science, is a more clearly structured transition and the visual outward signs of the pregnancy mark her changing status. The men had no such status. Matthew was a novice father and, using the language of rites of passage, he expressed how he felt in a state of limbo:

> And you really think ‘Well nothing’s happening now’ and you’re in a bit of a limbo I suppose.  
> (Matthew 1:2)

This limbo was emphasised by their inability to directly experience the physiological aspects of the pregnancy and men frequently told me of their frustrations at not being able to directly feel what their partners were feeling. Although there are exceptions arising from, for example, adoption and the new reproductive technologies, for a woman, her transition to motherhood is usually accompanied by biological changes in and on her own body. This embodied knowledge forms an important component of her transition to motherhood. However, such changes do not accompany a man’s transition to fatherhood and as Lupton and Barclay (1997:32) argue the embodied experience of
pregnancy and childbirth 'are ways of being for women that simply are not accessible to men'.

Men’s inaccessibility to direct embodied experience of pregnancy means that their biological encounters are therefore by proxy, as they rely upon the ‘second hand’ accounts of their partners. The men in the study engaged in a range of activities during this period, for example pregnancy confirmation (Draper 2002a), the ultrasound scan (Draper 2002b), antenatal education and culminating in their presence during labour and delivery (Draper 2000). These body-mediated-moments brought them closer to the pregnant body and therefore their child and helped shape their rite of passage into fatherhood.

Labour and birth
Labour was a particularly ambiguous time for men. Although invited into the labour room, most felt out of place, powerless, unsure of what to do and therefore very vulnerable. Labour was a micro or mini transition, the period during which the man literally became a father, his closeness to a biological transition being intensified within a broader macro social transition. In analysing this micro transition around birth, Seel (1987) also draws upon the rites of passage framework to describe the institutional management of labour within the West. He argues that the journey to the hospital, marks the couple’s movement from their ordinary (profane) world to the new (sacred) world of the hospital. Once within the hospital he suggests that clothing marks the woman’s status as a patient. Labour is the liminal phase of the rite of passage and he argues it is particularly marginal for men. This analysis introduces discussion of the manner in which institutions manage transitions. Just as the hospice creates a place and
time in which transitions from life to death occur (Froggatt 1997), so in this context it is possible to see how the hospital creates space for the management of birth transitions.

Tim, a care worker, was an experienced father, anticipating the birth of his third child. He likened his experience of the pregnancy and the culmination of birth to hitch-hiking. Within the framework of rites of passage, the hitch-hiker occupies a similar ambiguous status; s/he is a passenger on route, his/her previous location is left behind but s/he has not yet arrived at his/her destination. The arrival of the lift upon which s/he depends is, like the arrival of the baby, unpredictable and out of his/her control:

When Rosie was born I just felt shock. I went into a shock. It’s a bit like hitch hiking, you know. If you’re hitch hiking and you’re kind of beside a road and you don’t get a lift for hours, then a car stops and you’re amazed. And it’s a bit like that with a baby. It’s like you’re pregnant and you forget (laughing) and you’re pregnant and you’re waiting and waiting and waiting and then the minute has actually dawned and you think ‘Oh that’s a surprise!’ You know it’s actually happened. With Rosie she had the cord around her neck and she just pinged out (making pinging sound), she just pinged out so fast and she was so long and blue and...that’s it I just went into a minor state of shock, with it. Totally spaced out.

(Tim 1:12)

Post delivery

Immediately after delivery when their partners and new babies were still in hospital, many of the men experienced a kind of dislocation between two worlds; the new or sacred world which now included the new baby and the old or profane world which did not. The incorporation into his new role as a father had begun but was not complete. For some men this dislocation between worlds began immediately after the birth when they had to make the choice between accompanying their partners onto the post-natal ward or going with their new baby to the special care baby unit. For some men this was a big choice. Julian was a novice father expecting twins:
Yeh, yeh. You’re kind of like, you know, stuck between. Stay with the babies or stay with your wife.
(Julian FG3:26)

A further concern for Julian was that his babies would get mixed up with other babies. He was a biologist and his twins were in the special care baby unit. Using the scientific language with which he was familiar, he humorously described his worries about the babies:

Eventually when you go up to see the babies, it’s like this laboratory and there’s like thirty babies in glass tanks and it’s like…. ‘Are you sure?’ Have we been given someone else’s? They don’t look the same, they’re supposed to be twins (laughter), I want two the same! (more laughter).
(Julian FG3:27)

Leaving the hospital and coming home to an empty house, also underscored the sense of dislocation between the two worlds. Both the men and the women were out of place: the women in an institutional setting and the men in an altered profane space. Barry was a novice father in a preliminary focus group. He vividly described how he experienced this strange disorientating spatially-grounded liminality, and the behaviour in which he engaged to shape it:

When I first came home the first night, I remember being really emotional. I wanted to start crying. It was a funny feeling, you know. For some reason, I couldn’t find the light switches in the house. I was moving around like this (gesturing finding his way around in the dark). I couldn’t sleep and laid awake all night. I slept less when they weren’t there than when they were. The second night I had a load of whiskey. That was the best thing.
(Barry: FG2:8)

Seel (1987) describes his personal accounts of leaving the hospital after the birth of his children and his sense of being in between two worlds:
Filled with the knowledge of your fertile life-creating power, you discover in fact that you are impotent. Despite this power you cannot touch the world in any way. And so you wander aimlessly through those night streets until you arrive at home, or at some other destination which ought to have meaning. But the real meaning is locked away in a bed in a ward in a building where you are not welcome. It isn’t that reality is hard to come back to, rather that reality refuses to allow you in.
(Seel 1987:82)

There is a sense then within these above accounts of men occupying a space in between two worlds, a kind of dislocation in normal space and time. Rather than return home to an empty house, Tim straddled this period by staying the night in the hospital with his partner and new baby:

I mean when Rosie was born I was quite lucky because it was a small cottage hospital and the ward was almost like deserted. And although she was born like at 2 ‘o’ clock in the morning, they let me stay. So I actually stayed all night.
(Tim 2:9)

Bill was an experienced father expecting the birth of his third child. For him this sense of fractured time was both reduced and yet simultaneously heightened by having a domino delivery (where the midwife accompanies the couple into hospital, delivers the baby and then discharges them home). When his wife went into labour, they went to a cottage hospital with the midwife, where they had the baby and then returned home later that night, almost in time for ‘last orders’. His account illustrates the fracturing of sacred (special) and profane (ordinary) time and space:

I mean it was erm, it was, I remember the midwife was really disarming, really good when she said, she came downstairs and we were sort of ready to go off (to the cottage hospital) and Janet’s parents had arrived (to look after the other children) and she said to er my father-in-law, she said ‘Probably back for last orders’ and we, we nearly were.
(Bill 3:6)
The birth was four hours from door to door:

Having photographs at half past twelve, it was bizarre, just giving birth and back and back into our normal lives.
(Bill 3:6)

Malcolm was an experienced father, with an older family from his first marriage, now becoming a father again in later life. He vividly described the disorienting sense of being out of time and place when he left both his wife and his baby. Photographs immediately after the birth (rather like their ultrasonographic antenatal counterparts) marked his transition, providing a lasting visual reminder of the elusive moment. Malcolm’s feelings were compounded by not being able to see the photographs he thought he had taken. The liminal phase of his transition was a space where thoughts about the future mingled with thoughts about the present and his experience from the past:

I left the baby somewhere and Lucy somewhere else and came home. I cried then. I cried and one of the reasons I cried because she wanted some photographs and I found I had no film in the camera!....But it was very emotional, a very emotional time. There was this child that we had seen and gone somewhere and your wife was somewhere else asleep and you were in this house on your own, that was never going to be the same anymore, and sort of all these thoughts, responsibilities, and changes in your life.
(Malcolm FG3:26)

For some men their repositioning back into the real (ordinary) world began only when their partners and their babies came home. The ‘home-coming’ then was the beginning of their incorporation into fatherhood. Rick, a novice father, described how this home coming marked his new status and signalled the start of the ‘job’:

No, coming home felt right. It’s us now, it’s our job, you know, ours, let’s get on with it. It was, no, it was really good. I’m a dad now (laughter).
(Rick 3:10)
The home coming ended the mini-transition of labour and birth and marked men’s transition to the status of *fatherhood*. It also heralded men’s entry into a broader transition, the practice of *fathering* (Roopnarine and Miller 1985). Antenatally most men approached the labour as a major milestone, the culmination of the work of pregnancy. Novice fathers had no perception of life beyond this threshold and it was only when they had entered this new phase that the work of fathering began and they learned on the job.

**Contemporary man’s pregnancy ritual**

Women’s transition to motherhood in contemporary Western societies is now framed largely by medical science (Davis-Floyd 1987, Martin 1987, Helman 1994, Lupton 1994). Medical management begins on confirmation of the pregnancy, although with the developments of new reproductive technologies it is on occasion evident pre-conceptually. Marked by the milestones of serum screening tests, ultrasound scanning, antenatal examinations, antenatal education and hospital birth, the medical management of pregnancy and labour has become the framework of women’s transition to motherhood. Paradoxically however, although the woman's body remains the site of her transition to motherhood, the rise of scientific-medical-technological knowledge has displaced the woman's felt experience (Franklin 1991) and the traditional markers of pregnancy. Rather than relying on the woman’s felt experience of the pregnancy such as the baby’s first movements, technological experience, for example the ultrasound scan (Sandelowski 1994), has displaced embodied experience.

In parallel, social processes also structure women's transition. Women embrace pre-conceptual health promotion (Lupton 1995), avoid alcohol and risky foods, wear clothes
which either reveal or conceal their pregnant state and rehearse their imminent change of status with other women also making the transition to motherhood. Policy initiatives also structure women’s transition, as maternity allowance and leave from paid employment legitimate their absence from paid employment.

These cultural practices – medical, social and policy – provide a clearer structure through which women’s new identities as mothers are produced. In contrast I suggest that men’s transition to fatherhood is not so clearly structured. The feelings of marginality and vulnerability, referred to earlier, are symptoms of the relatively new phenomenon in the West of men’s involvement in pregnancy and birth, and are themselves direct consequences of the ambiguous nature of this not-yet-clearly-understood role. Luke, a novice father in one of the focus groups, clearly acknowledged how he had little concept of what fatherhood was going to be like. Using the language of rites of passage, he described his agency within this transition, how once past the threshold of birth he wanted to give some shape to this rather elusive process:

I was quite looking forward to it. It was part of an adventure and you are constantly, you cross the threshold, you get past the ‘big event’, the birth and all the business that goes with it and….like I said, I had no concept of what it was going to be like but you know, although I didn’t have any concept of what it was going to be like, perhaps I could help it into something I quite fancy. Help it into shape, sort of thing.
(Luke FG2:13)

So despite the changing nature of men's involvement in pregnancy, birth and fatherhood, Summersgill (1993) argues that men remain on the periphery of this process. In contrast to the woman whose biological transition is fore-grounded within her social transition, the man is not able to directly experience the biological aspects
and consequently his transition to fatherhood is rather more elusive. Faced with exclusions of this kind, the men in my study, like others over the last twenty years, engaged in a range of behaviours which could be regarded as the ‘contemporary man’s pregnancy ritual’ (Heinowitz 1977:29). The purpose of this ritual, just like its ‘traditional’ counterpart, is to enable or give shape to their transition to fatherhood, the status brought about by the act of biological birth and to fathering, the continual practice of being a father.

To underline these different biological and social dimensions, I briefly draw upon Hertz’s ([1907] 1960) description of funeral ritual amongst the Dayak in Borneo. For the Dayak the dead person underwent two burials. The first burial, during which the body was placed high up in a tree, was associated with the departure of the soul from the body. When the flesh had decayed the second burial was possible and the dead person was transformed from wandering soul to ancestor (Billington et al 1998).

These two deaths, one biological and one social, have parallels with a biological and a social transition to fatherhood. For some men in the study both transitions were simultaneous, as they immediately incorporated biological and social elements of their new father status. For others, the social transition, that is their own acknowledgement of their incorporation into their new status, was separated from the timing of the biological transition and in some cases did not happen within the time frame of the study. In this context it is possible to see then a layering of a number of possible transitions. Not only is there a transition phase between the announcement of the pregnancy and the birth but also a transition phase, in some instances, between biological and social fatherhood. The ritual of seeing the biological birth may in some way facilitate the onset of the social transition, in much the same way as seeing the dead body can facilitate acceptance
of the status of ‘bereaved’ or ‘widowed’. Further more seeing the baby before biological birth (Draper 2002b), may also enhance men’s transition to social fatherhood, and the woman's transition to motherhood. Ultrasound scans may therefore serve to enhance the social identity of the baby long before biological birth just as social death can on occasion precede biological death (Mulkay 1993).

The contemporary man's pregnancy ritual (Heinowitz 1979) involves men being relocated in an unfamiliar 'private' arena, rather than their more familiar 'public' roles. So just as the new technological model of birth (Davis-Floyd 1987) with its ritual symbols of science and technology, relocates women’s traditional private birth experience in the public domain of the hospital, so the new contemporary man’s pregnancy ritual locates men in an unfamiliar private space of bodies and birth. This ritual space of pregnancy and birth, despite its technological management, is one in which the private pregnant body is fore-grounded. I suggest that the nature of this private, predominantly 'body' domain is alien to men, and whilst he is encouraged to be part of the pregnancy and birth experience this alienation serves ironically to marginalise him even more. He is welcomed into the previously secret space of pregnancy and birth and yet simultaneously occupies a sort of non-role. Shapiro (1987) calls this simultaneous welcoming and distancing the cultural double bind:

Men are encouraged to participate fully in the pregnancy and birth of their children but are simultaneously given to understand, in a multitude of ways, that they are outsiders. Most of all, it is made clear that while their presence is requested, their feelings are not, if those feelings might upset their wives. Anxiety, anger, sadness and fear are unwelcome. (Shapiro 1987:38)

For the men in my study this cultural double bind was experienced to varying degrees. Some of the men felt wholly involved in all aspects of the pregnancy, labour and
delivery, whilst others felt outsiders. This outsiderhood (Turner 1966) was underscored by their vicarious knowing (Sandelowski and Black 1994) during the pregnancy and their feelings of uselessness and vulnerability during the labour. Novice fathers were more likely than experienced fathers to feel like outsiders. The degree to which men felt welcomed into the process by the midwives and obstetricians also influenced their overall feelings of involvement. Some of the men felt excluded by the midwives whilst others were welcomed and encouraged to be part of the pregnancy and labour and delivery.

I suggest therefore that analysis of these insider experiences indicates that the nature of men’s rite of passage into fatherhood is underdeveloped, fragmented and incomplete. However the men in the study attempted to resist their marginalisation by forging or developing their own rites of passage which helped shape their transition to fatherhood.

**The Individual/Cultural Dialectic**

I have so far elaborated a number of dimensions within ritual transition theory which demonstrate that, despite its early twentieth century roots, it remains a relevant framework within which to examine contemporary culture. A further aspect to emphasise is the way in which use of this theory contributes to our understandings of ritual at both an individual and collective level. So, in addition to illuminating understanding of the insider's experience of transition to fatherhood, the notion of transition is also important in making sense of broader cultural understandings of fatherhood itself.
I have argued earlier that the meaning embedded within ritual is not only of significance for the individual but for the society as a whole. Traditionally ritual was regarded as the deliberate production of disorder out of which life course transitions were enabled and society restored 'to a predetermined homeostatic condition' (Seremetakis 1991:48). However, Billington et al (1998:83) argue that ‘rituals associated with lifecourse transitions not only serve to produce new individuals, but also through their symbols regenerate the belief system of the social group as a whole’.

In other words, the private experience or performance of ritual contributes to collective meanings of cultural practice. There is therefore a reciprocal making and marking of rituals at both individual and cultural levels in what I have called the individual/cultural dialectic. Men engaging in contemporary pregnancy and childbirth rituals not only make their own individual transitions toward fatherhood but contribute to the legitimisation, maintenance and development of the ritual itself. I suggest therefore that men’s individual journeys to fatherhood shape the structure of men’s collective experience. So in this way the individual shapes the collective and the collective shapes the individual. This dialectic is at the heart of transitions toward fatherhood. It is not only individual men that are busy negotiating their own individual transitions, but in the twenty first century we see a larger scale macro transition in the meaning of fatherhood. These shifting understandings of contemporary fatherhood are influenced by the complex interplay between popular and expert discourses and changing masculinities. Perhaps when both individual and collective understandings are in a state of flux, fatherhood can be understood as a particularly ambiguous and therefore potentially dangerous status.
In suggesting a dialectic between individual and culture my development of ritual theory, in contrast to the traditional functionalist approach, underscores the reciprocity between the meanings of ritual for both the individual and society. Not only does ritual mark individual passage but it also creates, sustains and perpetuates social meaning. In other words ritual both marks and makes individual change which in turn has consequences for social structure (Glaser and Strauss 1971). With respect to fatherhood Jackson (1983) expresses this succinctly 'it is not evolution which makes future fatherhood. It is present fathers … who change the quality of our culture'.

**Conclusion**

Historically traditional stereotypes, framed by hegemonic masculinity, have clearly differentiated women’s and men’s parenting roles and portrayed the father as an authoritarian and bread winner figure. His transition into this fatherhood was produced through the enactment of the rituals associated with this old rite of passage, characterised by images of smoke filled waiting rooms with anxious expectant fathers nervously pacing up and down the corridor and the public ceremony of wetting the baby’s head.

Cultural and political changes over the last twenty years such as changes in family practices, employment and the division of domestic labour, have led to changing notions of fatherhood. This construction of involved fatherhood (Lupton and Barclay 1997) and its associated contemporary rite of passage is framed by changing masculinities and the new man discourse (Barclay and Lupton 1999). So a new rite of passage is emerging, the contemporary man’s pregnancy ritual (Heinowitz 1977), characterised not only by men’s invitation and involvement into pregnancy and birth but
also into the previously considered female realm of physical and emotional care of children.

In this paper I have discussed how transition theory remains a valuable framework within which to describe and understand men’s transition to contemporary fatherhood. Its utility is evident at a number of both individual and collective levels and in conclusion, I briefly map these levels.

The notion that transition is produced via the three phases of separation, liminality and incorporation allows a critical discussion of individual men’s transition to fatherhood. For the men in my study, the process of separation from their previous status began when the pregnancy was confirmed and was marked for most men by the public announcement of the pregnancy, signalling their movement toward their new status of expectant father. The liminal phase which most commonly lasted the duration of the pregnancy was a betwixt and between stage when, in particular, the men felt the lack of the body-focussed markers experienced by women. In this respect the pregnant and labouring body was a site of their transition to fatherhood. Their experience during this liminal phase was one of marginalisation, characterised by feeling out of touch, lacking knowledge and fearful of labour. This sense of marginality was intensified during the process of labour itself, when the biological changes associated with the passage were occurring not in their own bodies but in those of their partners. During the phase of incorporation, the men adjusted to their new roles as fathers, which were marked or celebrated in the short term by rites such as ‘wetting the baby’s head’. It can be seen therefore that transition theory may illuminate discussions of contemporary childbirth as a major event in the life course of individuals. For women this model might seem self evidently appropriate. Bodily change, participation in medical encounters, leave from
employment and religious rituals such as ‘churching’, signal and produce transition. For these men becoming fathers, many of these features are absent.

The terminology of transition also captures the sense that rather than a one-off-event, fatherhood is a continuous passage. Roopnarine and Miller (1985) make the distinction between the state of fatherhood, which happens once on the birth of the first born, and the practice of fathering. So whilst birth signals a man’s biological transition to the role of father, the social transition is perhaps more complex. Transition theory captures the notion that this transition to fatherhood does not just end at the birth of the child but is a continuous process as the new or new-again father negotiates the complexities of fathering practice.

In addition to illuminating our understanding of the insider’s experience of transition to fatherhood, transition theory also helps us to make sense of broader cultural understandings of fatherhood itself. Changes in the ideology and practice of fatherhood observed in Western societies over the last three decades influence men's expectations and desires for fatherhood which in turn inform future constructions of fatherhood. So men's individual journeys into fatherhood shape the structure of men's collective experience, as the individual shapes the collective and the collective shapes the individual.

So ritual transition theory has illuminated the bodily, individual and social transitions occurring over the course of men’s movement toward fatherhood. The theory’s structural functionalist roots viewed rites of passage as a means by which individuals could make changes between statuses, for example, whilst simultaneously protecting and maintaining the status quo of social structure. However, this paper has suggested
that despite its rigid roots, transition theory also has the capacity to ‘hold’ or allow for structural change thereby demonstrating its continued utility in understanding contemporary life course transitions.

I argue that this symbolic anthropological meaning of ritual, as opposed to its predominantly negative usage in nursing (Philpin 2002), has much to offer health care practice in general and nursing in particular. In addition to providing insight into men's passage to fatherhood, thereby creating the potential for more effective support for expectant parents, the theory has potential to inform other transitions of relevance to health care. These include, for example, the transition of older people into nursing homes (see for example Davies 2001), the transition into hospice care (Froggatt 1997), transitions experienced during adolescence, coming to terms with chronic illness, infertility, the experiences of death and dying and alterations in body image. In addition to illuminating the experience of patients and clients, transition theory may also have a place in understanding the occupational socialisation of nurses. So like Froggatt (1997) I suggest that there is a place for the continuing development of ritual transition theory within contemporary health care studies.

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References


Davis-Floyd RE. 1987 The Technological Model of Birth, Journal of American Folklore, 100: 479-495.

Davis-Floyd RE. 1990a The Role of Obstetric Rituals in the Resolution of Cultural Anomaly, Social Science and Medicine, 31(2): 175-189.


Draper J. 2002b (forthcoming) ‘It was a real good show’: the ultrasound scan, fathers and the power of visual knowledge, *Sociology of Health and Illness*.


Grimes RL. 1995 *Marrying and Burying Rites of Passage in a Man’s Life*, Boulder: Westview Press.


Jordan P. L. 1990b First-time Expectant Fatherhood: Nursing Care Considerations *Clinical Issues Perinatal Women’s Health Nursing* 1 (3): 311-316.


Seel R. 1987 *The Uncertain Father*, Bath: Gateway Books.

Segal L. 1990 *Slow Motion Changing Masculinities, Changing Men* London Virago Press.


Smith J. 1995 The First Intruder: Fatherhood, a historical perspective in Moss, P. (ed) *Father Figures Fathers in the families of the 1990s* Edinburgh HMSO.


