

## **Becoming a Mother Through Culture**

**Cathy Urwin**<sup>1</sup>

**Mona-Iren Hauge**<sup>2</sup>

**Wendy Hollway**<sup>3</sup>

**Hanne Haavind**<sup>4</sup>

1 Department of Children and Families, Tavistock Centre, UK

2 The Norwegian Centre for Violence and Traumatic Stress Studies, Oslo, Norway

3 Department of Psychology, Faculty of Social Sciences, Open University, UK

4 Department of Psychology, University of Oslo, Norway

### **Corresponding Author:**

Mona-Iren Hauge, The Norwegian Centre for Violence and Traumatic Stress Studies,  
Kirkeveien 166, House no. 48, N-0450 OSLO, Norway

Email: [m.i.hauge@nkvts.unirand.no](mailto:m.i.hauge@nkvts.unirand.no)

## **Abstract**

‘Culture’ is often considered in terms of identifiable artefacts, rules and practices, with less attention given to how investment in these features comes about. Using data extracts from a case study of a young woman who is becoming a mother for the first time, we pay attention to how people react to cultural processes in terms of how they ‘feel’. We use our own affective and reflective responses to interviews and observational material about Azra’s experiences with feeding her baby within the context of her extended family of Bangladeshi descent in a contemporary East London setting. Drawing on Bakhtin’s concept of ‘voice’ and Bion’s theory of thinking as an emergent phenomenon necessitated by the pressure of emotional experience, we trace how her own wishes became more articulated and were given precedence among the diverse voices of others about how to feed her baby son. We suggest an account of personal agency in which a dynamic, processual subjectivity will draw on as well as transform the web of relationships that a culture has to offer.

**Key words:** cultural transition, becoming, personal change, mothering identity, breastfeeding, bottle feeding, psychosocial, voices, interpretative methods.

## **Becoming a mother through culture**

### **Introducing “feeding the baby”**

What is Azra up against when she is finding ways to feed her baby, and what does she make of it? Should she use the breast, the bottle or both? We analyse this new mother’s relation to her baby’s feeding in the service of a larger theme: accounting for the processes through which Azra comes to experience herself as a mother within a complex extended family of Bangladeshi origin, living in East London. The affects that characterise her relations are a central conceptual tool in our analysis. Drawing on interviews and observations with this young mother and her baby son throughout the first year of his life, we aim to conceptualise Azra’s transition not only as a self conscious change from one state to another, but also a gradual, largely unselfconscious becoming not separate from the ‘going on being’ of responding to life’s changing demands.

This paper emerged from a cross-disciplinary and cross-national project focused on personal development and socio-cultural change. The collaborative project, organized by Hanne Haavind and Harriet Bjerrum Nielsen from the University of Oslo and funded by the Norwegian Centre for Advanced Study, aimed to generate dialogue among participants from varied social science background. 21 scholars from five countries were in residence at CAS at different points during the 2010-11 academic year, some bringing data for the group’s work; in this case, data from the ‘becoming a mother’ project<sup>1</sup>, led by Wendy Hollway.

---

<sup>1</sup> UK Economic and Social Research Council funded study RES 148-25 0058. ‘Identities in Process: Becoming a Mother’. Research team: Wendy Hollway, Ann Phoenix, Heather

Our small group was struck by the many ways issues of feeding were present in Azra's case and this prompted our choice of theme for our analysis of the intersection of culture and changing identity. Feeding emerged as a measure of the baby's growth that created a need for sorting out *how*, *what* and *when* to feed, which made feeding a practice loaded with uncertainty, tension and confusion. When Azra tells the interviewer how many bottles a day she gives her son, when she asks if the observer thinks her son has grown and when she tells the observer that her father thinks her baby is small for his age - these are remarks we read as reflecting the way feeding is loaded with affects, and how affects fuel the processes of becoming a mother. Feeding was also linked to wider social and cultural practices and meanings through repetitions that over time become routines, shared among the many 'hands' of the surrounding family. Feeding the baby thus constitutes a thread for linking together relations in time and place according to their affective qualities. A multiplicity of cultural values evoked through her relationships created a moving situation where she is in relationship with an active baby who increasingly 'wants what he wants' and with relatives who offer stories, advice, opinions and examples of baby-feeding practice and support. Azra also negotiates what she thinks are the health professionals' opinions and, via them, policies and advice about what is best for her baby's survival, health and growth; all of which depend on feeding him successfully. Through this single theme, with its functional, emotional and interpersonal components - a thread in the bigger tapestry of Azra's becoming a mother gradually unfolds.

### **Design and method**

---

Elliott (Azra's interviewer) and Cathy Urwin. Sandy Layton was the observer in Azra's case and we are also grateful to her for the fine notes that made this analysis possible.

The aim of the project was to provide a psychosocial account of the identity transitions involved in becoming a mother, that is one that reduces to neither psychological nor socio-cultural explanation. Azra was one of a sample of twenty first-time mothers living in Tower Hamlets, a borough in the East End of London. This area has a history of accommodating waves of immigrants, and correspondingly on-going cultural transitions. It is also the target of recent policy initiatives concerning children and families. The population of Tower Hamlets has a high percentage of families of Bangladeshi descent and Muslim faith, many like Azra second generation in the UK, and a growing number of young professionals living in the newly developed areas close to London's financial district.

The fieldwork involved two psychoanalytically informed methods, free association narrative interviews (Hollway and Jefferson 2012) and infant observation (Urwin 2007, Hollway 2012). Identities have been largely studied in social science through word-based methods. This project aimed also to learn about the relational, embodied and practical aspects of identity formation and change that an interview-based method might not unearth, aspects ranging from the unsaid to the unthinkable. Azra was interviewed three times: in the second week after her son's birth, three months later and finally when her son, Zamir, had just passed his first birthday. The audio recording was supplemented by 'reflective' field notes which, as well as documenting aspects of the research interaction taking place beyond the recorded event, noted interviewers' subjective responses to the setting and the interview relationship. The data analytic approach used here was also based on the principle of using researchers' affective responses as instruments of understanding.

In addition, an observer trained in the 'infant observation' method visited Azra weekly, from just before Zamir's birth for one year (see Layton 2007; Urwin 2007). The observer visited either in the house of Azra's father where she and other members of the

extended family often met, or in the smaller council flat she shared with her husband, recently immigrated as part of the arranged marriage to Azra. Observers use no mechanical recording device but after the event write detailed descriptive notes in the tradition of baby observation (Miller et al 1989). Altogether, then, material for Azra's case consisted of three interviews, each supplemented by reflective field notes, and 22 observation notes (reflecting the number of weekly visits actually achieved). Supplementing the observation notes were records taken at eight observation seminars, attended by the research team.

Our Oslo group consisted of two of the original team (Wendy and Cathy) who selected the case material, previously anonymised. Hanne and Mona-Iren were new to the project material and could bring analytical strategies from cultural psychology. We had access to the audio record, with its richer fund of affective information, as well as transcript and notes. In parallel, another small group used this case study, with particular emphasis on the complexities involved with secondary analysis of qualitative data, through a focus on 'travelling affect' (Thomson, Moe, Thorne & Nielsen 2012). The two groups shared their insights in plenary sessions at various stages during the six-week period.

### **Studying personal and cultural change in conjunction**

Considering culture in terms of identifiable 'contents', artefacts, rules and practices would likely lead to conclusions about Azra's 'position' on breast or bottle feeding, and/or how this reflects Bangladeshi or British culture. Rather we pay attention to how investment in such practices comes about and plays a role in processes of becoming. Practices of feeding and talk of feeding mediate affects in a way that appears central to Azra's 'becoming', a process which at the same time changes persons and cultures. Our starting point is Azra's experience: what seems to matter to her, how she is finding her way in building a

relationship with her baby and the way becoming a mother also involves changes in her relationships with others in the family.

For Bakhtin, the concept of ‘voices’ includes the voices of those that are present, as well as those temporarily, spatially and socially distant (1986: 95), in Azra’s case, relations with her father, her husband and sister and also with her mother who died when she was 15 years of age. The concept is much used in theory of the dialogical self. For instance, Josephs (2002) suggests that voices are located neither ‘in’ the person nor ‘in’ culture, but come into being as a relation between person and culture’. Ian Burkitt links voices in inner dialogues to sense of self: ‘From the earliest years our sense of self is intertwined with the voices of others, and these voices can have their own autonomy, intruding into our self-consciousness and our responses to others, often in unwanted, unplanned, unwilled, and surprising ways’ (2010:306).

To reinstate what is often left out in theorizing dialogical voices in socio-cultural approaches, namely the affective quality of these voices, we use Bion’s theory of thinking based on the processing of emotional experience (Bion 1962; Ogden 2009). Bion posits raw experience (replete with affect, or emotion) as the basis on which thinking is produced, but not automatically or inevitably; the thinking varies in quality according to the extent that anxieties can be contained and symbolised, which are originally relational processes. It is in the variable successes when processing raw emotional experience that we locate the imagination required to find one’s own voice, a kind of everyday agency. Based on this epistemology, which for Bion is fundamentally intersubjective, we used our own affective responses as a guide to the affects between the original researchers and Azra and between Azra and members of her family.

These relations and institutions appeared present in Azra as a ‘chorus of voices’, often divergent, which had an impact on Azra, the researchers and us as secondary

analysts. In the analysis of this material we paid particular attention to our confusion as the affective key when listening to the interviews and during the slow and careful readings of observation notes. We found that our confusion about her feeding practices constituted an affective key to exploring Azra's becoming a mother through culture.

### **Confusion about what?**

As a group attempting to make sense of the data, we start with our confusion on the occasion when the baby is three months and Azra is interviewed for the second time, when the opening theme is change and Azra's response introduces the topic of feeding: after referring to him as more active and playful, she says 'he's just more – bigger'. Her tone implies some relief. Azra goes on:

Well his feeds have changed (.) (Int.: Right) larger quantities and (-) bigger bottles and everything (baby making sounds) (Int.: Uh huh) (.) and he's more hungry than he was before<sup>2</sup>.

Here the interviewer needs some clarification:

Int.: Uh huh (.) and is he (.) is he bottle feeding or is he breastfeeding?

Azra: I'm d- I'm doing both at the moment (Int: Right) (.) I've introduced the bottle feeding for him as well (Int: Uh huh uh huh) (.) erm when he was two months (.) (Int.: Uh huh) I actually introduced it (Int.: Uh huh) (.) and (.) and so he's on the bottle as well as the (.) breast milk

---

<sup>2</sup> Transcript conventions are largely self-evident (bracketed dots represent brief pauses and hyphens lengths of one or more seconds as indicated). Dots in square brackets mean that material has been omitted.

Azra is here able to piece together what comes across as a new narrative, hesitantly configured around some affectively significant elements: ‘doing both at the moment’. This exceeds the logic, more habitual for us, of ‘either breast or bottle’ and ‘if breastfeeding is going fine, it’s enough’. She fixes on two months as the time when she introduced the bottle. This appears to puzzle the interviewer, who asks why:

Int.: Uh huh (.) right ((low voice)) erm (- -) and uh (.) why did you introduce the erm (-) the bottle feeding?

Azra: ‘Cus erm (.) with the breast milk (.) I- I thought like he wasn’t getting really (-) enough (baby’s coughing) (Int.: Uh huh) He’s got a really bad cough as well (coughed) (- -) (Int.: Gosh) (-) He kept on crying after I fed him ( Int.: Right) and then erm (.) thought might as well give him (.) a bottle (.) I started off with three bottles a day (.) Int.: Uh huh) and gradually increased it.

Int.: You mean three bottles a day (Azra: Yeah) and how many does he have now?

Azra: Erm he gets about four or five yeah

Int.: Right right ok (.) and erm (.) what about the breastfeeding (.) how do you find that?

Azra: Erm I- I’m (.) I do that the night time and (-) when he’s asleep and when he always cries for his feeds then then (Int.: Uh huh) (.) it’s best to do it then so (.)

(Int.: Yeah) (.) so that’s when I breast feed him.

What made it so difficult for the interviewer – and later for us – to make coherent sense of Azra’s account? The temporal reference to two months as the age when the bottle was introduced is confusing for an interviewer who heard about the bottle when the baby was 11 days old. To find an answer to what bottle feeding may signify to Azra and to her perceptions of other people around her, we have to move back in time.

### **“I’m a new mum”**

The first interview takes place after in the week after Azra’s return from the hospital to her father’s house . Azra conveys her relief that the birth went well and her family’s support. She says that her stepmother helped her to enable the baby to latch on, and that breast feeding was now successful. Azra then explains that her husband has been helping with the baby, sometimes giving him a bottle. After a long pause, the interviewer goes on to explore more fully the issue of breast and bottle feeding, and is told about the stepmother’s role in bottle-feeding:

Int.: And you’ve and you say you say you’re, is it you’re breast feeding him and

Azra: yeah

Int.: you’re giving him a bottle

Azra: bottles as well ’cos from now on he’s not taking the bottle I think it’s because um yesterday my step mother gave him a bottle I was in the bath yesterday and he was crying so she gave him a bottle (Int.: uhuh) and after that he was vomiting

Int.: do you think he might of

Azra: I don’t think he’s used to the bottle (Int.: yeah) I’m trying to get him used to the bottle as well as the breast

Int.: ’cos that’s formula milk obviously yeah

The ‘breast-and-bottle’ at this point create confusion for the interviewer, and also for us when listening to the dialogue between the two since we too assume that breast is best. The confusion is exacerbated by Azra’s ‘from now on’, which eventually we took to mean ‘at the moment’. Perhaps Azra senses that she needs to account for her practice to this interviewer as she explains that it was her stepmother who made the bottle, suggesting that she is still not sufficiently confident to take responsibility herself. We also reflected on the

possibility that for Azra there is nothing untoward about other women in the family taking the initiative on how to feed the baby and it is only from our perspective that the mother should be in charge of these decisions. It might well be that Azra's point is rather to convey that her husband and stepmother are both supporting her. She is young, and up till now she has lived as a daughter in this family, assisting other women to take care of their children.

In her next statement, Azra's hesitancy continues as she illustrates the voices of others pushing and pulling her in different directions with respect to what she wants to do, which this time she generalises as 'some people':

Azra: yeah (Int.: but you) but some people say that if you give them, if you mix them it's not really good 'cos um then his immune system plays up because (Int.: right) not best to mix but (Int.: uhuh) um she's telling me that with the breast he won't really fill up (Int.: right) um to give him both and (Int.: uhuh) um 'cos

It was easy to recognise that Azra is faced with differing advice here, but not clear to what extent Azra feels conflict between the health advice 'not to mix' and her stepmother's warning her that breast feeding will not fill him up, not give enough milk to ensure survival and growth. She did however make clear the importance to her of getting the baby used to the bottle.

There is something plaintive about Azra's expression of lostness that follows: 'I'm a new mum not really know a lot about feeding breast and [...] not really know what's going to happen if I mix them you know'. She has come back to the difficult point; she is unsure about feeding and how to combine breast and bottle. Not knowing what will happen is frightening for anyone who has a new baby's survival to ensure. She will have to establish feeding practices somewhere in between the opinions of the experts ('breast is best') and her stepmother, who, like many in the Bangladeshi community in London,

encourage some bottle feeding. It is likely to add to her insecurity that the stepmother is only a little older than she is, and a recent immigrant to the country that Azra has lived all her life, not a replacement for Azra's own mother who died.

This dilemma of where to get support and how to choose between conflicting advice was common for new mothers in the Bangladeshi community in East London, as we know from the wider project. Another Bangladeshi-origin mother was in tears as she tried to resist the pressures to bottle feed which, she said, came from everywhere 'from my sister, mother-in-law, aunties, the lady down the street'. She held out only because her husband was so supportive. Within the research, a focus group was conducted with health professionals who worked with new mothers in the same area of London. They emphasised the difficulties in getting Bangladeshi women to breast feed and the role of their mothers-in-law and others in encouraging bottle feeding as a safeguard. What counts as reasons for introducing the bottle is a contested issue in the cultural border work between British health nurses and new mothers within extended families with roots in Bangladesh.

The interviewer continues by asking about how the breast feeding is going. Azra makes it clear that this is 'alright actually' because he now latches on and 'drinks really well ...from the breast'. The 'actually' comes across as if Azra is speaking in contrast to an imagined voice that regards breastfeeding as superior to bottle feeding. However, the decision to bottle-feed when breastfeeding apparently seems to work fine confuses the interviewer who is rooted in the belief that bottle feeding is suitable when breastfeeding fails. So the interviewer pursues reasons to explain why Azra might not wish to breastfeed by asking whether Azra is 'enjoying' the breastfeeding. But Azra answers from a different angle:

Azra: I enjoy it actually 'cos when I'm watching tv or when I'm upstairs at night time and I don't want to come downstairs and make him a bottle and give it it's best to just put him on the breast and then

(Int.: it's quite convenient) yeah.

Here, Azra expresses a feeling (of enjoyment), a wish (don't want) and an opinion ('it's best to'), signs of her own voice in relation to the white interviewer who appears to her (the two 'actuallys') as coming from a position on breast feeding that is doubtful about combining breast and bottle feeding. Although other parts of this interview suggest that her position is not fixed, Azra seems to be on a different track, like many around her, where the combination of breast and bottle feeding provides safeguards: the bottle will ensure that her baby gets enough, and the breast is convenient and complies with expert advice.

Three months later, as we saw in the second interview, she is comfortable in asserting a personal decision ('I've introduced the bottle feeding for him as well erm when he was two months (.) I actually introduced it'.), contradicting the evidence from what she said in the first interview. What has happened in between? Fortunately, we also have the observation data to explore more fully what was going on for her.

### **Has the baby grown?**

At the first observation immediately after the new mother and baby have returned from hospital, and shortly before the first interview, we see Azra 'in her element' in the home of her father, with extended family present, with the kind of support she will describe to the interviewer a few days later. The observer notes, when the baby is five days old:

*I could see the baby's head and he was feeding slowly rhythmically and gently from Azra's left breast. Azra said that feeding was going fine. (She seemed pleased and proud).*

This description of mother and baby is almost tableau-esque in its quality, all the more reassuring because the observer knew from her previous visit of Azra's anxieties about the impending birth. We noticed, however, that Azra continues to squeeze her breast, perhaps to reassure herself that enough milk is getting through:

*I asked the baby's name and Azra said that she had not thought of one. Azra was pressing her left breast all the time as though to encourage the milk to flow. The baby sucked slowly and his head moved slightly [...] Azra touched his hair with her hand soothingly and smoothing his hair forward over his forehead.*

Some days after the first interview, Azra, her husband and the baby son, now past two weeks and named Zamir, moved into their own flat on the twelfth floor of a tower block, away from the bustle, immediate supports and surveillance provided by the extended family. Two weeks later, Azra nonetheless chose for the observer to visit at the father's house. On arrival, the observer is greeted immediately with the question: has the baby grown? She answers that he has. In the following extract, we learn more of the importance of Azra's father's voice to her, not only for support but also for setting criteria for how she should manage her tasks and priorities in becoming a mother whose baby grows. Having a big baby boy is inextricably linked to both customs and relationships, and thus to emotional involvement between family members. Observation note with Zamir at 7 weeks, in the father's house:

*(Azra) said that her father had been away on a pilgrimage for a month and had just returned. ...She told me that her father did not think that he had grown. She said he was 6 pounds, so-many ounces and that he was now 10 pounds so-many ounces. Her nephew, who is the same age as Zamir and was a really big baby, looked almost 6 months old. Azra said that she felt lonely in her flat and came here (to*

*father's house) often. It was so quiet at her flat. Azra told me that her sister was about to arrive.*

Perhaps the observer's confirmation that the baby had grown made it possible for Azra to convey her worries. Her father's voice loomed large, giving the impression that Azra was left feeling that he was questioning her capability as Zamir's mother. The evidence of his four pounds weight gain does not seem to resonate the way that the 'really big baby' does. Her father's internalised voice was, it seemed, no less present when she was at her own flat, where she had greater responsibility for getting it right; indeed she preferred being at her father's house with the supports it offered.

### **Trying to make the baby grow**

In the following extract, drawn from the observation taking place a month later at Azra's flat, a feeding bottle stands on the table. This extract is preceded by an account of discord between mother and baby as Azra gets Zamir out of his chair somewhat roughly, complaining that he is 'naughty' for being sick on her clothes. Zamir has reached the age that Azra later pointed out as the time when she introduced the bottle. Observation note when Zamir is 2 months 3 weeks:

*Azra tried to give him the bottle and Zamir refused to take it. (I found this painful to watch because she seemed to be forcing him to feed and he was struggling to prevent her.<sup>3</sup>) She tried again but this time by putting the teat at the corner of his mouth and at an angle to find a way of his accepting the teat. Zamir gyrated his body in protest. Azra tried again and Zamir cried.*

---

<sup>3</sup> The principle of noting the observer's affective response is part of the method, typically bracketed, as in the phenomenological method, to distinguish it from external description

Like us, the observer found this a difficult interaction, mother and baby apparently at odds. Later Azra tells the observer that the milk product she is using is 'Hungry Baby formula', an image that stands in stark contrast to the baby who refused to feed from his bottle. When we began our secondary analysis, in hearing about this situation highly charged with negative affects, the group's feelings at first included wanting to intervene, to side with the baby and to judge Azra harshly, or wishing to reduce the anxiety by referring to the fact that we all know how any parent can have 'a bad day' and get into conflict with the baby. It could be part of Azra's notion of 'getting him used to the bottle' that she had to try rather forcefully to get him to accept. Her wish to make him grow overrules his avoidance. Spending time studying the material slowly in small steps, the group's associations led to considering the affective situation in the light of what was already known about Azra and her family.

The observer herself, in direct and relatively frequent contact with Azra, had the opportunity and indeed faced the necessity for processing the possible meanings of Azra's affect and what lay behind it. To the observer, and later to us as secondary analysts, Azra's behaviour conveyed immense anxiety about the baby's growth, emphasised by the many references she makes to her father questioning Zamir's size. Her worry that Zamir was not getting enough sustenance is evidenced by her repeated insistence on making him drink from the bottle.

We were reminded that Azra was without her mother amidst her anxiety and in the background must have lurked the memory of the mother's stillborn child standing as a painful reminder that not all babies thrive. Azra herself tended not to talk about the significance of relationships within her family, but during the final interview, she starts to cry when talking about how different the year would have been if her mother had been there. She imagines how happy her mother would have been to meet her grand child and

tells the interviewer how much she had wanted that. It is as if she is more able to realize what she has been missing when she is fairly well established as a mother herself. At the time when Zamir was two months, it was her father's internalised voice that seemed to be fuelling her desperation about Zamir's feeding and growing, representing on the one hand the charge that she is not successfully mothering Zamir, and on the other hand his strong emotional engagement in her baby as his grandson. His practical involvement seemed all the greater in the absence of Azra's mother. It was the father who had arranged for her marriage and thus laid the ground for her transition from daughter and child to mother and adult woman. It seems she had internalised his wishes and wants to repay him by managing well.

Just after the difficult interaction between mother and baby son around the bottle feeding, we noted the observer processing Azra's anxiety, rather than keeping it at bay; recognising it as contributing to Azra's persistent attempts to force Zamir to feed. The observer then provided a comment that made sense of Azra's behaviour, giving it a positive connotation and indicating her sympathy with Azra's intentions:

*I commented on his having more to drink this week as I noticed the bottle was bigger. Azra said yes it was a 6 ounce bottle. I said that must be because he is getting bigger.*

As if tacitly accepting the observer's contribution, Azra goes on to repeat and add to what she had told the observer a month before about her father's concerns, what this means in the family, and the competing voices that are still making themselves felt:

*Azra said that her Dad thinks that he [Zamir] is small. She told me that her cousin has a really big boy of four months who she is thinking of putting on solids. Azra said although you are not meant to feed solids to babies until they are six months. (She looked at me to verify this view.) Azra again tried to make Zamir feed, who*

*was now clearly upset and distressed. Azra stopped trying to feed him and sat him up and he calmed down and looked around the room. Azra tried again to feed him and he accepted the bottle.*

One way of thinking about how the interaction moved forward so that Zamir could feed successfully is that, as Azra began to experience herself as in the presence of someone who was not being hostile or critical, she could contain her own anxieties more successfully. Her relationship to the baby changed, lifting him out of his repetitious avoidance. Zamir then felt his mother's availability, and the two could come together for a feed.

Azra's invocation is again of her father's disapproving voice. This time, however, the baby being compared to Zamir is a month older, enabling her to look forward to a time when she could introduce solids and make her baby catch up. The cousin is introduced as a contrast; a successful mother who not only has produced a big baby, but wants to make him even bigger by putting him on solids, earlier than is recommended in government advice. By her anxious use of comparisons, Azra appears to accede to the idea that her baby's size is a measure of her success as a mother, especially because he is a boy.

This analytic focus on internalised voices helps us to make sense of the puzzling claim with which we started. The strength of the pressure to do something to make the baby grow looks like one reason why, in the second interview, Azra insisted to the interviewer that she introduced bottle feeding at two months, Zamir's age at the above observation. In this observation we also find, however, that:

*Azra said when she was only breast feeding him he was always attached to her and she could get nothing done. Zamir is very demanding.*

This suggests that for Azra the decision to prioritise bottle over breast feeding is linked to emotional as well as nutritional considerations and is a part of the means through which Azra regulates the emotional intensity of her relationship with her baby.

On the one hand she is complaining about Zamir's attachment (she 'could get nothing done'), on the other hand Zamir's 'demanding' character provides a useful fit with her wish to make him grow. Even within the same observation (once anxiety was reduced and mother and baby had found each other again), Azra and Zamir demonstrated that there were other ways of expressing emotional closeness apart from breast feeding:

*Zamir was feeding quietly and calmly, Azra was looking at him and he returned her gaze. [...] The fingers of Zamir's right hand were gently around his mother's finger as she fed him. I commented on his doing this and Azra said he had only just begun doing that to her. I noticed that he also touched his mother's hand with the fingers of his left hand.*

Over the following weeks we noticed signs of Azra's increasing attachment to the baby and that she no longer seemed so distressed by it. For example, two weeks later, following a visit by Azra, her husband and Zamir to her husband's relatives in the North of England, Azra reported that Zamir enjoyed it there because there were lots of people to hold him. The relatives had commented on how Zamir would strain his head backwards to look out for his mother as she left the room, singling her out. Azra seemed pleased in relaying this information. In this account, we see both how Azra appreciates having other adults around to hold the baby and the knowledge that she is now special to him (he follows her with his gaze when he is held by someone else). Immediately after, Azra tells the observer that she now prefers to stay at home with him rather than go back to work, as planned: the association of the two pieces of information suggests a positive affective link in her mind.

At this point, being a mother to a baby boy in the context of an extended family stretching across different areas in England and to Bangladesh will matter more to her than being a young woman in her workplace in London. The attachment between her and Zamir

is not just a matter between the two of them but also of belonging as a mother in her wide family network.

### **In charge of successful feeding**

Azra's positive feelings about her baby's attention to her were mirrored in how she asserted her role in making decisions about feeding. As Zamir became more in control of his body posture and approached an age when introducing solid food was a possibility, the observer describes the feeding practices that they accomplished. For Azra, Zamir reaching four months became a landmark. In the following observation she introduces the topic of solid feeding with the observer, connected with putting Zamir into the high chair.

Observation note when Zamir is 4 months, in Azra's flat:

*Azra put Zamir in the chair; he was sitting upright and looked as though he was driving the chair. Azra told me Zamir was four months old now and that she was going to put him onto solids. She said you are not meant to until babies are six months old but it said on the packet four months.*

In this extract we have a picture of a baby who can sit upright and looks to the observer as if he is fairly in control of his position ('in the driving seat' is the metaphor that springs to mind from the observer's association with Zamir's upright posture). This is rather different from the struggles that the observer has witnessed when Zamir was being fed with a bottle on Azra's lap. It feels too as if Azra is 'in the driving seat' as far as decisions about how to feed her baby are concerned. When previously, at two months, Azra mentioned the government health policy of not introducing solids until six months, she looked to the observer for confirmation, as if needing verification by an expert. But now her decision to move Zamir on to solid food is clear-cut and defies the current expert advice of midwives and health visitors in her locality. Azra no longer checks with the observer but announces

her decision, supported by the authority of what is written on the packet. There is no mention here of family members (although we know her cousin was considering putting her baby boy onto solids at four months), just an announcement that this is what she is going to do.

The conflicting internal voices have receded. This does not mean that she prefers to be 'independent' of her family, nor that their advice ceases to be offered or used; we know that successful feeding has come about because she has been able to process emotionally the tensions arising from her internalised voices of those around her. Now, she is on her way to establishing her own agency as Zamir's mother within her family of origin through the ways in which she is taking a stance regarding their involvement and support. She is finding her own voice as she draws on her relationships with others and builds up a relationship as the uniquely special mother of her baby – qualitatively different from her earlier responsibilities as caretaker of other small children in the family. Such a development does not only apply to feeding, but is expressed in feeding. The change works through in practice: four weeks later, we seem to be witnessing a vindication of Azra's decision to introduce Zamir to solid food. Observation note with Zamir at 5 months old, in Azra's flat:

*She told me that Zamir was on solids now. I asked if he was enjoying eating food and Azra said he did seem to enjoy eating food. I commented on how much he had filled out and his face looked fuller. Azra said that she gave him a variety of food; chicken, fish, and vegetables. Her sister had not done this with her child and now the child will only eat vegetables and no meat. She said that she gave him some fruit in between meals. Zamir was bigger and his sturdy look was emphasised by his large hands and feet, which give him a robust appearance. Azra said that Zamir*

*was much more attached to her; he cried whenever she put him down. (The observer noted that Azra seemed pleased at being singled out like this.)*

Not only does Zamir relish this food (none of the earlier battles to get him to eat enough), he enjoys a range of different kinds that by implication gives him all the nutrition that he needs. What is more, Azra is more successful than her (older) sister whose child will not eat meat. Meat signifies as providing better nutrition than vegetables, her sister's child consequently seen as having a problem with solid food.

Weaning this baby on to solids turns out like a success story supported by just the kind of evidence that has mattered to Azra. Her account is packed with references to Zamir's changes towards growth, strength and development: filled out, fuller face, bigger, sturdy look, robust appearance. It seems that Azra's more assertive decisions as a mother have paid off: she is a successful mother, measured by her baby's growth and development, and a successful daughter to her father. The accomplishments of her feeding the baby have been a central part of this transition.

But Azra's own association in this extract is to Zamir's attachment. By this time she seems pleased about his attachment to her, as if it establishes that she is the special one, the mother among the many who help look after Zamir. Her decisions about feeding have not, it seems, endangered this attachment. On the contrary, to lay claim to her centrality in this way strengthens her sense of identity as a mother, and with this her willingness to stand by her decisions. Within the extended family, the comparisons that previously caused her such anxiety have abated or are in her favour. Through the ways in which Azra has conjointly reworked her relationship with her baby son and those with other family members, she has established her transition from a daughter and younger sister to a mother. In such ways is maternal identity established through the micro-processes of becoming, instantiated in the detail of everyday feeding arrangements in the

context of emotional relationships that are themselves constantly being reconfigured through these practices.

### **Internalising external voices**

We approached this material by slow reading, spending time in carefully exploring it through our own affective responses. As a result, we offer an understanding of the link between external voices, internal voices and one's own voice - their affective relationship; for example, Azra's father's actual comments (external voice) about the big baby were received by Azra through whatever psychic configuration of meanings held her unsureness, anxiety and prior experience as she embarked on becoming a mother. These voices can be seen to express a change in subjectivity that complements dialogical theory of the self.

One may ask where is the voice from her husband when it comes to feeding, and what does Azra make of it? His absence in this analysis, in contrast to what seemed like the primacy of her own father, reflects his (relative) absence from her accounts, even though he is present in their everyday life. We learn that her husband bottle feeds the baby from an early age when he is around and when Azra needs help, but she does not go into details. Perhaps we researchers assume that the engagement of the male co-parent should be greater than that of the mother's father. However, Azra is living in an arranged marriage, which means that it was her father who took the initiative which would transform Azra into an adult woman with children of her own. Moreover, her husband has no immediate family in the UK (his family of origin in Bangladesh sends gifts and is, according to Azra, eager to hear about the baby). In Azra's mind the marital union cannot be questioned, and she announces that her husband's plans are the same as hers. What matters to Azra seems to be that he is supporting her goals for their son's development.

The way Azra sometimes spoke through the voice of others can be seen as an example of Bakhtin's (1986) idea of appropriation; that one speaks through others' voices so that what one says belongs to someone else before making it 'one's own', populating it with one's own intentions. We could see the way her own voice regarding feeding practices became firmer, more intentional, referring less to others and manifesting fewer moments of hesitation. But how is a voice appropriated, to become one's own? Enid Balint, from an object relations psychoanalytic perspective, claims that 'external reality can in any case only exist for the individual if it is introjected, identified with and then imaginatively perceived' (1993: 95). Without this imaginative perception, an external voice may be internalised (initially as a persecutory voice in this example) but not made one's own. By drawing on Bion's theory of thinking, we can fill in the processes involved in what Balint refers to as 'imaginative perception'. Imagination involves not unbridled fantasy but a creative intermediate space (Winnicott 1971/1985) where the obdurate and frustrating aspects of reality can be thought about and transformed (Hollway 2011; Gentile 2007). Azra's introduction of solids earlier than recommended, a change in feeding that suited both her and Zamir (and family concerns with baby boys' growth) seems one such example: in Bakhtin's terms an appropriation of external voices to create her own voice.

The cultures expressed in these voices are never stationary. The internalised voices are not carbon copies of the external voices, but rather they are mediated by everything in Azra's inner and outer world that is relevant, some unprocessed and some processed. Gradually, over a period that inevitably involved a multiplicity of micro-processes, Azra found her own 'voice' as a mother. This does not mean that other voices, imagined or real, disappeared, or that they were free from anxiety in other areas of her learning to become Zamir's mother. Rather, in the feeding context, she could use and transform them in the

service of taking charge *as Zamir's mother*, making decisions and taking actions that felt right to her.

### **Conclusion: Becoming a mother through culture**

We have selected one case and one existential theme in order to demonstrate how a theoretically guided and empirically detailed analysis can show the link between feeding the baby as a universal feature of the human condition and a set of cultural practices, an affective link expressing personal investments. The contribution from Azra's case is to show the interpenetration of her *personal transition* into becoming a mother with the ongoing *cultural transition* lived by members of families of Bangladeshi descent in the East End of London. Anyone would claim that persons and culture are interconnected in complex ways. By following the theme of feeding the baby, and thus showing how it happens in this particular case, we learn that feeding is not just a matter of unfolding the baby's capacity to demand and receive, nor the mother's to offer and regulate. The case of Azra and Zamir brings attention to contested issues beyond their relationship, because she is living in and between cultural meanings and tensions that characterise Bangladeshi settlement in England.

Culture is both internal and external, instantiated here in Azra's particular, unique, situated way of becoming a mother. Worrying about how to feed Zamir, getting him to latch on or to accept the bottle, introducing solids, making him as big as his cousin, all these involve a number of often contradictory and divergent cultural prescriptions. Becoming a mother means inevitably to draw on and challenge the many voices that have their say about what is best for the baby and the way the mother does her mothering. Cultural values and traditions about how to care for and feed children should therefore not be regarded as something that 'surrounds' or 'influences' the mother and the child.

The formulation of becoming *through* culture represents our attempt not to reify culture, especially not to start, intentionally or unintentionally, with cultural difference. As Azra imaginatively perceives the possibilities available to her in her East London setting and family, the ‘I’ figures as more of an active agent in ongoing events. In such ways Azra not only becomes a mother according to available cultural values and resources, but she is part of a larger process of cultural changes as British families of Bangladeshi origin in East London create ways of living that suit them in their circumstances.

We suggest an account of personal agency in which a dynamic, processual subjectivity will draw on as well as transform the web of relationships that a culture has to offer. As a consequence of how she draws on emotional qualities from her relationships to other family members when she works on the tensions created in the relationship to her baby son, Azra can take action in ways that are then recognised by those around her as characteristic of being Zamir’s mother. This work is emotional in character and requires ‘imaginative perception’, going beyond what is available from others.

This version of agency avoids, we think, reproducing some of the binaries that characterise debates about culture and self (for example, Kagitcibasi 2007, Schwartz 2004), where ‘individual’, ‘autonomy’ and ‘separateness’ (often partially conflated) are set in binary relation with ‘collectivism’, ‘embeddedness’ and ‘relatedness’. Azra remained ‘embedded’ in her family; she was neither an autonomous nor dependent individual. What happened, in our view, was that a combination of her own wishes, satisfactions, practices and outcomes of her own thinking – all accommodating to the reality of *being* a mother – took a new shape in the processes of *becoming* a mother as a psychological trajectory.

## References

- Adams, M. (2010). Losing one's voice: Dialogical psychology and the unspeakable. *Theory and Psychology, 20*, 342 – 361.
- Bakhtin, M. M. (1986). *Speech genres and other late essays* (Translation by V. W. McGee). Austin, Tx: University of Texas Press.
- Balint, E. (1993). *Before I was I*. London: Free Association Books
- Bion, W. R. (1962). *Learning from experience*. London: Karnac.
- Burkitt, I. (2010). Dialogues with self and others: Communication, miscommunication, and the dialogical unconscious. *Theory and Psychology, 20*, 305 – 321.
- Gentile, J. (2007). Wrestling with matter: Origins of subjectivity *Psychoanalytic Quarterly, 76*, 547-583.
- Hollway, W. (2011). In between external and internal worlds: Imagination in transitional space. *Methodological Innovations Online, 6*(3) 50-60.
- Hollway, W. (2012). Infant observation: Opportunities, challenges, threats, *International Journal of Infant Observation and its Applications, 15*, 21-32.
- Hollway, W. & Jefferson, T. (2012). *Doing qualitative research differently: Free association, narrative and the interview method*( 2<sup>nd</sup> Ed.). London: Sage.
- Josephs, I. (2002). “The Hopi in me”: The construction of a voice in the dialogical self from a cultural psychological perspective. *Theory and Psychology 12*, 161-172.
- Kagitcibasi, C. (2007). *Family, self and human development across cultures: Theory and applications*. (2<sup>nd</sup> Ed.). Hillsdale NJ: Lawrence Erlbaum.
- Layton, S. (2007). Left alone to hold the baby. *International Journal of Infant Observation and its Applications, 10*, 253-266.
- Miller, L. (1989). Introduction. In L. Miller, M. Rustin, M. Rustin & J. Shuttleworth (Eds.), *Closely observed infants*. London: Duckworth.

- Ogden, T. (2009). *Rediscovering psychoanalysis: Thinking, dreaming, learning and forgetting*. London: Routledge.
- Thomson, R., Moe, A., Thorne, B. & Nielsen, H. (2012). Situated affect in travelling data. *Qualitative Inquiry* 18, 310-322.
- Urwin, C. (2007). Doing infant observation differently? Researching the formation of mothering identities in an inner London borough. *International Journal of Infant Observation and its Applications*, 10, 239-252.
- Wertsch, James V. (1993). *Voices of the mind. Sociocultural approach to mediated action*. Cambridge MA: Harvard University Press.
- Winnicott, D.W. (1971/1985). *Playing and reality*. London: Routledge.