

**ANALYSING MOTHER AS A SOCIAL CONSTRUCTION THROUGH
THE PROCESS OF SCIENTIFIC MOTHERHOOD PRACTICED IN A
BENGALI FAMILY IN KOLKATA**

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ABSTRACT

Scientific motherhood refers to a practice of mothering informed by expert knowledge. The practice evolved as medicine and science replaced other traditionally feminine domains of knowledge including practices related to fertility and birth. The movement to scientific motherhood redefined the child and child raising and also altered women's identities from producers to consumers of mothering knowledge. This paper tries to focus on the aspects of changes involved in the practice of this kind of motherhood that has led to development of the terminology of scientific motherhood in accordance with varying circumstances occurring within the domestic sphere in Kolkata. Therefore this research is an attempt to define the newly constructed mother that has shifted from the traditional ways of mothering.

Keywords: motherhood, scientific motherhood, medicine, surrogacy, globalization

SOCIAL CONSTRUCTION OF MOTHERHOOD

The approach that motherhood is a social construction rejects the assumption that practices of mothering, traits of mothers, and meanings of motherhood are in any way natural, biological, essential or inevitable. Rather, it implies that the ways of perceiving and experiencing motherhood in society are the result of processes of social construction. In other words, motherhood is thought of as something that is constantly being made by members of society. This happens, for example, through everyday interactions, discourses, and social practice. Motherhood is just one of many aspects of social life to which social constructionist approaches have been applied. Scholars like the philosopher Ian Hacking have criticized the inflationary use of the term social construction and its arbitrary application. However, the idea of social construction continues to be a very important and popular theoretical concept in many areas of research, and is currently widely used in the social sciences and humanities (Sardadvar, 2010).

According to Sardadvar (2010), in general, work on the social construction of motherhood focuses either on historical processes or on aspects of present construction. The works of Elisabeth Badinter, Yvonne Schütze, and Victoria Clarke are certain e.g.s of contributions with a historical perspective. While looking at motherhood in France from the 17th century to the present, Badinter pointed out that maternal instinct and mother love have by no means been typical characteristics of mothers in social reality. Schütze followed the development of the normative pattern of mother love in Germany from the late 18th century until the late 20th century, illustrating how notions of the “good mother” changed throughout history. Clarke examined the construction of lesbians as parents in psychological literature on lesbian parenting from 1886 to 2006. Other scholars have focused on aspects of current construction processes. For example, Jennifer Lynne Smith looked at the construction of motherhood in the in vitro fertilization policy debate in Australia while Rebecca W. Tardy dealt with the social construction of motherhood through health care conversations. Again Ann Phoenix analyzed the social construction of teenage motherhood and Glenda Wall focused on moral constructions of motherhood in breastfeeding discourses. In short, contributions on the social construction of motherhood challenge the assumption that there are any given characteristics of motherhood, mothers, or mothering. They deconstruct social and cultural connotations of motherhood that are often taken for granted. Among them are, for e.g, the assumptions that there is a natural specific bond between mother and child, that mothers are essentially different from fathers or nonmothers, that biology determines the way that motherhood is experienced, or that there is a universal maternal instinct. Instead of taking assumptions like these for granted, contributions on the social construction of motherhood try to make visible how dominant meanings or widespread connotations of motherhood have emerged, changed, and are constantly being (re)produced by members of society.

UNDERSTANDING SCIENTIFIC MOTHERHOOD

Scientific motherhood was first phrased by Rima D. Apple in 1995 and is used for the description of the application of scientific approaches to child rearing. It is a part of a set of “scientific” expectations from women that took effect in the late 19th century, parallel to the advances in science and technology. This set, all derived from middle classes, included cleanliness, tidiness, preparing well-balanced diets, and ideal houses. These ideals spread through newspaper ads and advice columns, which were influential throughout the early 20th century. In this period, the advice columns that both prescribed new expectations from women and promoted new products such as baby formula were accompanied by expert advice and promotion of science and merchandise. The integration of childrearing practices with scientific information is still of importance today as is expert support in pregnancy. Many mothers whose intuitive practices and female networks were replaced by scientific motherhood have turned to

the Internet to create a new network in which they can exchange information on scientific motherhood as well as its intersection with alternative approaches to motherhood. Scientific motherhood marks a transformation from mothers as parts of female networks to mothers as sole authorities responsible for the growth of a child. Although charged with these responsibilities, they also began to be viewed as lacking the knowledge relating to children not only in Europe and North America but other areas of the world such as the Ottoman Empire and the Balkan and Arab countries that emanated from it. The newspaper articles that declared the rise of modern technologies and progressive ideas also criticized the “old ways,” the most popular of which was how ignorant mothers treated their children. In fact, in the late nineteenth century, the modernization process debarred female networks that included older women, grandmothers, sisters, other relatives, neighbours and midwives. The discourse on ignorant mothers spread to include the alleged ignorance of midwives to prove the necessity of the medical profession and to underline the expertise of male professionals. The new terminology of medical practices distinguished them from traditional methods and midwives transformed into arbitrators between women and medicine. Improvements in previously high levels of infant and maternal mortality granted credibility to medical practitioners. While middle classes rapidly took on the new means and ways, women from classes that had less access to medicine continued to transfer mutual help and knowledge through female networks. In the meantime, eugenic practices that promoted the reproduction of whites and while seeking the prevention of reproduction among unwanted populations influenced Europe, North America, and the colonial countries, as well as semicolonial countries like Iran, South America, and republican China. While glorifying motherhood, women who did not measure up to the ideal were despised with eugenic as well as scientific motherhood discourses. While eugenics oozed into both scientific motherhood and population-control practices that were a part of large-scale, social transformation projects, the modern state, in collaboration with medical experts, utilized these practices to establish new relations of governance with women. By the same token, birth control methods became available to more women, simultaneous with new advice and information on mothering methods. In fact, scientific motherhood was a part of the idealization of motherhood at the start of a fertility decline. Nevertheless, the difficulties of being wholly responsible for one’s baby and having to listen to experts on every aspect of child rearing soon accompanied a relative success in making mothers a tool for new ways of government and although the now-established relationship between mothers and experts survived, scientific motherhood in its barest forms came to an end. Now, the ability to have few children and care for them as experts recommended for the mother became a new way to measure the development of a nation. Along with the requirements of social medicine from the 1840s onward, the promotion of public health and domestic hygiene went hand in hand with scientific motherhood and influenced the relationship between developed and underdeveloped countries. These discourses continued to critique poor mothers, and poverty

replaced genes as the blame for everything that went wrong in the social arena. Scholars of the subject of scientific motherhood agree on the pursuit for resistance to these practices (Aksit, 2010).

Aksit (2010) stated that the survivals of female networks against derogatory discourses, and more commonly, the coexistence of multiple ways for motherhood, were forms of such resistance throughout the late nineteenth and early twentieth centuries. As the intense cooperation between medicine and the modern state to establish new channels in regulating women became more established, new means such as the Internet became channels for women to seek advice from each other. Women also combined their search for better motherhood with scientific discoveries, and reformed their networks via new technologies.

VIEWS REGARDING MOTHER AS A SOCIAL CONSTRUCTION THROUGH THE PROCESS OF SCIENTIFIC MOTHERHOOD PRACTICED IN A BENGALI FAMILY IN KOLKATA

In this section the author discusses some of his personal observations while emphasising on the process by which doctors specialized in the fields of homoeopathy and allopathy are shaping the process of child care enacted by mothers in the modern context in Kolkata. Henceforth through such child caring process the author focuses on a completely different notion of scientific motherhood that segregates itself from the pre-established notions as developed by Rima. D. Apple.

The author states two different situations in which he was undergoing allopathy and homoeopathy treatment. The first stage reflects on an important phase in the author's life which was a stepping stone towards moving to the next stage. It was the month of March and the mercury was rising towards 36 degree Celsius in Kolkata showing indications of excessive heat. I appeared in the cbse class ten board exams and the exam centre was in a reputed cbse school located in park circus. After completing mathematics exam due to my unconscious mind and intensified tensions I completely forgotten to drink water. As a result after coming back home dehydration started and later on in the evening I started vomiting and severe stomach pain occurred that became simply irresistible. Looking at my miserable condition everyone was worried. My mother called the allopathy doctor and took an appointment to visit him so that he can prescribe some medicine. The situation in the home was very tense as another exam was scheduled to happen just after one day. After examining myself the doctor prescribed some heavy doses of anti-biotic drugs like Pan D, Norflox TZ and Lomotil and instructed my mother to apply such medicines for five days at different times that is before breakfast in the morning and then after lunch in the afternoon while the rest medicines after dinner in the night. Along with such medicines for a quick rehydration of the body the doctor also suggested for some oral

rehydration salt powder that would provide some energy and prevent the body from being dried up in the scorching sun. Following the doctor's instructions my mother with all her effort took best care of myself so that I could recover quickly and prepare myself for the upcoming exam. My mother's gentle care towards myself helped me to perform better for the remaining exams.

Another situation arised after ten years and the coincidence that surprised the author was that it was again the month of March. My mother and myself were invited to attend an upanayan ceremony. The most interesting thing is that the same kind of unconsciousness stood up which was created earlier during my class ten board exams. Again I forgot to drink water after having lunch and in order to quench my thirst and relieve myself from the moisture and humid climatic conditions resulting from heat I took some cold drinks. In the night I realized that I was not feeling comfortable which lead to increasing gastritis pain coupled with severe dehydration. I couldn't sleep well due to my uneasiness. In order to look that my health conditions doesn't get worse any more my mother consulted a very reputed homoeopathy doctor based in Kolkata who was busy all the time dealing with some critical patients in his residential clinic that was near our home. The doctor after examining myself minutely prescribed certain homoeopathic medicines which comprised of certain mixtures of lycopodium mixed with aloe which could produce a quick curing effect and retain a better health. Along with this he also adviced to take some powdered homoeopathic globules that could bring certain comfort and better digestive capabilities.

Therefore in the first stage scientific mothering depicts a picture which is framed according to the mode of care prescribed by the doctor through applying allopathic medicines. The advice of such medical expert shapes the structure of the process of child care that mothers has to adopt for a quick improvement of their child's health. But while moving forward in the next stage a shift in the child caring process occurs in accordance with the advice of doctors that suggests homoeopathic medicines after dealing with the patients and realizing the symptoms behind the occurrence of certain diseases.

CONCLUSION

Medical Science has played an influential contribution towards determining the role of mothers towards child care in the present contexts in Kolkata. After independence till the present era medical science has improved towards a large scale showing indications of remarkable development for healing people's lives. As society progressed from the stage of modernity to post modernity complicated diseases has also occurred and the main cause behind such occurence is the increasing rise of global warming. With the help of homoeopathy and allopathy child care techniques involved with mothers has created two different notions of scientific motherhood that doesn't bear any resemblance with the pre-existing notions of scientific

motherhood as suggested by Rima.D.Apple. Thus this research is an attempt to reveal a different sense of scientific motherhood in this era of globalised world through certain observations.

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