

Myths of motherhood. The role of culture in the development of postpartum depression

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Abstract. *Objectives.* This paper intends to offer a theoretical insight into the myths of motherhood and how these myths can bear on the pathogenesis of postpartum depression. *Methods.* From a man's view motherhood is conceptualized as a necessary stage in the progress towards the attainment of femininity. This view is impersonal and external to the experience of motherhood. From a female perspective, motherhood presents itself as a conflicting situation. We will then focus on the necessity to construct a discourse on motherhood by using a code which belongs to women rather than men. The analysis of a blog and a comedy show will provide evidence concerning the evolution of the female discourse on motherhood thus contributing to the debunking of the myths of motherhood. The final section discusses ways in which myths of motherhood can bear on the pathogenesis of postpartum. *Conclusions.* Among "melancholic type" women, who tend to abide by social norms, play established social roles and hide their inner conflicts, myths of motherhood contribute to suppress the contradiction which is intrinsic to motherhood itself making this contradiction uncontrollable and potentially devastating.

Key words: postpartum depression, motherhood, feminine identity, *typus melancholicus*, phenomenology.

Riassunto (*I miti della maternità. Il ruolo della cultura nello sviluppo della depressione postpartum*). *Obiettivi.* Questo articolo intende presentare delle riflessioni teoriche in merito ai miti della maternità e al loro peso nella patogenesi dei disturbi depressivi legati al postpartum. *Metodi.* Dal punto di vista degli uomini la maternità sembra essere vista come funzione sociale e come passaggio obbligatorio per il pieno sviluppo della femminilità. A fianco a questa visione esterna e impersonale della maternità si propone la prospettiva femminile che ne evidenzia le criticità, complessità e conflittualità. Inoltre si analizza la necessità di costruire un discorso sulla maternità a partire da codici femminili. L'analisi di un blog e di uno spettacolo evidenziano che il discorso femminile sulla maternità tende a sfatare i miti sulla maternità stessa. Infine viene discusso il modo in cui questi miti possono avere un peso sulla patogenesi della depressione postpartum. *Conclusioni.* Nelle donne con struttura di personalità "*typus melancholicus*" la necessità di incarnare i miti della maternità contribuisce alla creazione di contraddizioni ingestibili tra le rigide aspettative sociali e i normali conflitti insiti nella condizione materna.

Parole chiave: depressione postpartum, maternità, identità femminile, *typus melancholicus*, fenomenologia.

INTRODUCTION

What is motherhood? Is it the individual experience of a woman facing the birth of her baby? Or rather a social role one has to play in compliance with norms set by one's own culture or social group? And more: how do women really experience motherhood? Nancy Chodorow [1] argues that being mothers is a *task*, not an innate instinct. In all cultures it is given for granted that women play the mother role. In this way, the maternal function becomes one of the few universal and enduring elements of the division of labour according to gender. Chodorow further argues that this identification of women with

the maternal roles has never been seriously studied. As a consequence, it is reasonable to ask oneself how women approach motherhood today.

Adrienne Rich's [2] *Of woman born: motherhood as experience and institution*, one of the most important feminist books on motherhood, starts with this quotation from the Divine Comedy "[...] but to treat of the good that I found there, I will tell of other things I there discerned" (Dante, *Inferno*, 1:3). In these lines Rich conveys the complexity of the maternal experience, freed from timeworn myths and returned to women. In this way women are allowed to bring to light the contradictions and hard-

ships of motherhood. The first part of this paper gives an overview of the development of the concept of motherhood, characterized by a shift in perspective from a man's view which appears to be impersonal and external to the experience of motherhood to a refashioning of motherhood as a crucial stage of identity formation – motherhood as a necessary stage in the progress towards the attainment of femininity). Finally, motherhood expresses itself as a critical, complex and conflicting situation (motherhood as “female experience”). The next section of the paper will focus on the necessity to construct a discourse on motherhood by using a code which belongs to women rather than men. The blog *Nonsolomamma* (not just mothers) and Florence Foresti's comedy show will provide evidence concerning the evolution of the female discourse on motherhood thus contributing to the debunking of the myths of motherhood. The final section will set forth a theoretical hypothesis about the possibility that myths of motherhood contribute importantly to the pathogenesis of postpartum pathology with particular reference to depression.

MOTHERHOOD, DEFINED BY MEN, EXPERIENCED BY WOMEN

Evidence drawn from historical and sociological research as well as theoretical-speculative analysis show that the discourse on femininity, and more specifically on motherhood, is shaped by questions of social control, including birth policies, infant mortality, sexual control of women, economic organization of the state, etc. [2-14]. In this paper we propose the idea that this discourse on motherhood is still subjected to the controlling gaze of men, and that this cultural fact may contribute to generate the contradictions and conflicts which are at the heart of postpartum pathology.

It is through motherhood that humankind propagates – this explains why societies have felt the urge to manage and protect it. In a recent assessment of the literature on childbirth, death and motherhood in the Greek world [15], it is emphasized that the central social role that women enjoyed in ancient Greece is tied irrevocably to their maternal function. Women have no other options other than raising a family. The Greek *polis* is so attentively engaged in the control of sexuality and reproduction that women are deemed to be unfit to play any other social role and they are not entrusted with any other responsibility. Aristotle, the great cataloguer of antiquity, claims that man is *form*, man is active and his creative spirit can engender life; women are nothing but a receptacle, nothing but *matter* whose function is to procreate [16]. Aristotle's authoritative judgment shows that culture can effectively impose a social role on women, and that role ends up being interpreted as a biological necessity, a fact of nature.

In this context, infertility is considered a woman's worst fate, a “flaw” that can exacerbate the vicious side of her personality and bring her closer to the devil. There are three key aspects that define women's place in the medieval world order: a) for men, women are first and foremost objects; they need them to assert their power and glory; they can give them away or even throw them away; b) men feel responsible for women's behavior so they feel it is their right and duty to correct and tame their evil nature; c) if adequately managed, women may let their fragile and meek side emerge, which is of paramount importance to produce children and raise them adequately [17].

These interpretations of motherhood, albeit questioned by the ideological movements of the sixties and seventies, is still rooted in our society and makes it difficult for young women to find a balance between social expectations and their personal experience of motherhood [18].

An important contribution to this understanding of motherhood was given by psychoanalysis. If on the one hand psychoanalysis has been the first discipline to approach motherhood as an autonomous object of study, on the other hand the new perspective offered by psychoanalysis appears to be univocal and reductive inasmuch as it describes motherhood as a necessary step in the formation of women's identities.

In his treatment of sexual development and femininity, Freud [19] designates the “female” in terms of lack and absence: men are whole human beings and hold the penis; while women are defined by the absence of the sexual organ and thus they are condemned to experience an unfulfillable desire that is constantly displaced onto substitute signifiers. In a nutshell, motherhood is thought to coincide with the female desire to retrieve what she lacks. It can be configured as a fundamental experience in women's attempt to achieve wholeness by gaining what they do not possess. Among writers influenced by psychoanalysis, H. Deutsch [20] upholds the Freudian theory of the equivalence between motherhood and wholeness and claims that giving birth to a child represents an attempt to compensate for a long-past bereavement and indulge in a natural drive which is at the cross-line between biology and psychology and constitutes the very bedrock of femininity. In the Lacanian theorization, the little girl who takes care of her doll is considered to be on the right track as concerns women's typical vocation – motherhood. By substituting the phallus with the doll, the little girl fashions herself as imaginary mother. By the means of motherhood, in their imagination women gain what they lack [21].

While she recognizes the complex nature of motherhood as a condition which determines momentous changes in women's life, the psychoanalyst Dinora Pines [22] argues that the experience of motherhood should be interpreted as the crowning of an inner desire, the elective possibility for women to fully re-

alize their nature, the very condition that signals the achievement of one's existential goal and a key step in the construction of female identity. Pines argues that pregnancy is the third process of separation/individuation after the infantile and adolescent levels. Going beyond these stages is a necessary step in order to reach adulthood. In Mahler's [23] perspective too, if they want to complete their journey towards identification, women have to go through a series of adaptive and transformative processes which are electively activated exclusively by pregnancy and motherhood.

From a classical psychoanalytic theory comes the idea that little girls who feel accepted by their families and receive adequate care during their infancy have a precocious desire to have a baby in order to identify themselves with their mothers [24]. This desire to give birth is a sign of well-being. It conveys the idea that a young woman has had a proper affective and psycho-physical development in consequence of which she can fully express her prerogatives and pursue a viable path towards a mature identity.

DEMYTHIZATION OF MOTHERHOOD

As Luce Irigaray [25] claims, the discursive objectification of women as female beings results in a denial of subjectivity, brought about by the workings of masculine representation. Paradoxically, the issue of the sexualization of discourse has never been broached. A perpetually unrecognized law attunes all discursive constructions to the necessities of *one* perspective, *one* point of view and *one* economy, those of the man, who are believed to represent the human race [26]. Irigaray remarks on the absence of a feminist discourse on motherhood – paradoxically, the construction of such a discourse has always been a prerogative of the male gaze – a discourse which should draw from women's (not men's!) desires, values and representations. There cannot be just one *logos*; *logos* has to be culturally fertilized by difference. "Each gender assumes, in itself and for itself, the specificity of its nature and works out its cultivation" [27].

What follows is an example showing how discourses on motherhood revolve around a masculine social and cultural jargon which emphasizes the positive qualities of this condition. If we type the word "motherhood" in the *British National Corpus* and look for the adjectives which tend to co-occur with it, we obtain the following result: good, divine, free, greatest, great, important, radiant, welcoming, relevant, perceived, positive, etc. The first adjective, which bears a negative connotation – *incompatible* – is ranked 22. Unfashionable is ranked 47, difficult 76, desperate 91. These examples bring to the fore the linguistic strategies that frame the social understanding and acceptance of motherhood and the difficulties which arise when it comes to comment on the complexity and the problematic of motherhood.

Only by starting from women's experiences is it possible to understand the complexity of the event-motherhood. The key factor that allows a shift from an external and impersonal view to the cultivation of a female point of view is giving voice to one's own secret doubts. The interpretation of motherhood as a female experience is a recent achievement, accomplished during the second half of the nineteenth century when more attention came to be devoted to women's responses to the birth of a child (an event which cannot be given for granted), when it becomes necessary to deal with both the birth of a child and the *birth of a mother*. Only by starting from this conceptual turning point, can we discuss motherhood as a female experience [6]. In this way, motherhood stops being considered as a natural event which has high chances of happening, and begins to be understood as a complex experience that brings about a crisis in women's life.

This shift in perspective has been emphasized by scholars such as Minuchin [28], Bibring [29] and Grinberg [30] who suggest the need for a more articulated approach to motherhood, underlining that the birth of a baby can be considered a phase in a woman life cycle that calls for a reorganization of her inner world and the search for a new mental space which may host both an idea of the child and an idea of self-as-parent. Through the concept of "developmental crisis", Bibring shifts the focus on women's experience stressing the fact that motherhood is first and foremost a life condition that entails a deconstruction and reorganization of one's own sense of identity. Having a baby creates a state of vulnerability and insecurity which may upset women's psychological balance. In this way, motherhood assumes a more complex connotation which conveys positive aspects alongside with some downsides: motherhood can be complicated, it may occasion conflicts and moments of crisis [31-37].

This new perspective challenges an inveterate cultural prejudice that sees motherhood as the indispensable condition for women to fully express their nature, embodying the most powerful role in the formation of the feminine self and conforming to the stereotype of the happy and fulfilled mother [14]. This prejudice is overcome by a more complex view that considers the birth of a child as a personal and subjective experience, rooted in a complex weave of past-present-future factors of a psychological, relational and social nature, in which conscious and unconscious phenomena intertwine. Not all women react to this experience with prompt readiness [38-40].

In line with the theory of the birth of "the senses of the Self", Stern [38] argues that the physical birth of a baby corresponds to the psychological birth of the mother which expresses itself through the formation of a new identity: the sense of being a mother. He claims that this process of reorganization is finalized at the dawn of the motherhood mindset. A personal mindset is what helps us to organize our values, our distinguishing qualities and the peculiarities that

turn a person into a coherent and unique individual. Having a baby brings about a change in one's own priorities. It influences preexisting relationships and redefines roles formerly played.

While all this happens, mothers are called to handle a new set of tasks, including feeding, nurturing and caring for the baby, playing with him, putting him to sleep and beginning to love him. Mothers will have to redirect their previous mental organization, their previous set of values and needs, and cope with the duties and responsibilities of motherhood. Stern's words describe in an effective way a range of difficulties experienced by some women: "When you have a child you find yourself suddenly alone with a tiny alien without the instructions for use. Around you, life goes on as always: your friends work, your partner shows up only from time to time, your mother or mother in law either don't show up or are too intrusive. You find yourself living a new experience, a titanic and traumatic one, in utter loneliness; an experience spent in crying, sleepless nights and nappies: it's a madness, at the beginning it's nothing but a mad ride, and you can't share your feelings with anybody" (blog *Nonsolomamma*).

Stern goes on arguing that the maternal mindset will have to learn to coexist with other identities to achieve a balance between pre-existing identities and the new identity as mother. The most complex task appears to be finding a compromise between the maternal role and work. Each woman finds her own strategy to solve the inevitable conflict between the demands of work and children care, and these solutions play a crucial role in allowing for a successful integration of old and new tasks. Quite often, as a result of this process, many mothers feel their inadequacy when it comes to time management and the establishment of their priorities [38, 41]. Let's give a look at the personal experience of another blogger: "When I went back to work, I left at home a three-year-old-dwarf and a five-month-baby and my colleagues expected me to be the same person as I was before. I started thinking how complicated it is to reconcile these two worlds, how surreal it is to be a working mom, how invasive the sense of guilt, inadequacy and loneliness" (blog *Nonsolomamma*).

Owing to the demands related to raising one's children, to the psychological challenges involved in this experience, the development of the psychological skills of the mother assumes a great importance. Maternal skills and mothers' willingness to derive gratification from the exercise of those skills are strongly interiorized and sustained on a psychological level. On an evolutionary level these skills are inscribed in the psychological structure of the woman. Nevertheless, the very skills and needs that create the woman as mother, also give rise to potential contradictions in the maternal function [1].

In support of Nancy Chodorow's point some recent genetic research has shown that young women inherit from their mothers patterns of maternal behavior which they tend to replicate. In their turn

they transmit these patterns to their own daughters and grandchildren [42]. Although patterns of behavior may not be passed on genetically, some studies have shown that parental care ability is actually transmitted through what scientists call a type of non-genomic or epigenetic inheritance that is beyond the genes [43-45]. What seems important to highlight is that the discourse on the ability of women to procreate, based on genetics and "biological facts", are automatically projected onto another field of maternal experience: the rearing and education of children. Whereas it is a matter of fact that women are biologically constituted to produce offspring and feed them, the discourse on the biological constitution of women has nothing to do with the more subtle moral aspects of the maternal role, which is a cultural phenomenon and stems from a desire for order and social control. The fact that maternal love is considered a trans-historical fact of human existence does not provide proof that this attitude is universal [3]. In other words, if it is a fact of nature that women are geared for motherhood, the way women have performed this role for centuries, including moral attitudes and social expectations, has little to do with biological facts and is probably a cultural phenomenon that derives from the male gaze on femininity and maternity.

To sum up, the discourse on motherhood can be emancipated from social and cultural myths only on condition that women manage to find their own way of living this experience and arrive at a personal understanding of the interplay between social and cultural representations, on the one hand, their own expectations, values and social and cultural condition, on the other hand. In this way, the narrow dichotomy good mother/degenerate mother may acquire a host of intermediate evaluations thanks to which it is possible to understand the difference that exists between womanhood and motherhood [46, 47].

BLOG AND COMEDY: TWO EXAMPLES OF THE FEMININE DISCOURSE ON MOTHERHOOD

Blog

In public communication, censorship is used to short-circuit discourses on motherhood. Women are still afraid to show how shocked they are by motherhood, how difficult it is to accept limitations in their lives spent in routine practice, repetitive rituals, and periods of partial social isolation. They are afraid of being considered "different" – "degenerate mothers" – if they say that spending the whole day with their baby can be boring, that their baby is not only a wonderful creature and that they wish they could renounce maternity leave to go back to work.

Those are the messages that women post on Elasti's site: Elasti is Claudia De Lillo, a 38 year old financial journalist, who defines herself "a flexible mother" of three "hobbits":

“Is this ‘what mothers never say’”. We do express our feelings...but nobody gives a damn!!!!!!

If the new bill passes we will be able to talk about our feelings freely even on the phone since our ‘confessions’ will not end up in the newspapers!”

“I am still on maternity leave, what else should I do apart from taking care of these three wonderful creatures? And what’s more, I’ve got broad shoulders. These were my thoughts but I overestimated myself and underestimated my three hobbits”.

“The most frustrating period of my life has been maternity leave: only sleepless nights, poops and baby food as discussion topics at the recreation grounds; fat to get rid of; envy for my husband and my girlfriends who went to work. Fortunately it all comes to an end! Of course, getting organized is a pain, and the feeling of guilt kills you, but can you understand how different it is when you “only” have to work eight hours a day?”

“I developed a profound hate for public gardens, school parties, admission lists for kindergarten, teachers and school reports, swim class, the laundry hung out everywhere to dry up, the hectic and a bit neurotic sociability of children, the birthday parties, the sleepless nights, the grated apples, the regurgitation stains, which are the indisputable and disgusting evidence that you are raising toddlers”.

“I know how you feel...I have got two hobbits, a 9-year-old boy and a 7-year-old girl, operated by nuclear energy batteries”

“I’ve got my 8 hours of relax at work and a cooperative husband, but notwithstanding this I share your feelings, which by the way, you describe in a brilliant way”.

“Oh how I agree with you...and today my elder child has got intestinal virus! Working at the office was a piece of cake, even commuting to work was an interesting diversion when compared to baby care”.

“Resist is the watchword...now and always!”

“Sooner or later they will all go to kindergarten or school... (provided that these institutions will be still operative and still open for admission)... and Catechism in the afternoon... We will leave them on the highway (but not on the Salerno-Reggio-Calabria which is still to be completed)...or on the bridge connecting Calabria to Sicily...at least they would enjoy a sunbath...provided that the climate doesn’t change too fast and we are not importing oil from South America... (I am delirious, you see... there’s always someone who feels worse than you do!!!)”.

“How I understand you! My Wink opens up her eyes at 6.30 a.m. and tells me – mum where are we going now? – to the kindergarten, my love – and then when you come and pick me up where are we going? – we are going to wait for daddy – and where are we going? Nuclear batteries my foot...”

Comedy

In France the magazine *Marie Claire* named Florence Foresti as Person of the Year 2009 “because she finally set women free from the shame of baby blues”.

The comedian is filling theatres with a monologue which debunks the myth of motherhood. Her show has been sold out for several months and she has conquered the title of most loved comedian in France. She defines herself “motherfucker”: “A strange animal, a monster according to somebody”.

“I gathered ideas from my everyday life”, she tells before going on stage. “I did not have to look far for inspiration. During my pregnancy I met passive resistance. Some women were unwilling to have a talk or share jokes; others wanted me to see motherhood exactly the way they saw it, in keeping with old and new stereotypes. This was unexplored ground in comedy. The audience agreed with me”.

“My challenge is to investigate and debunk the hackneyed ideas on the condition of women”.

“Pregnancy? It feels like a hangover. You wake up in the morning, you feel like throwing up and you swear to yourself: never again will I drink a drop of alcohol for the rest of my life. The difference is that pregnancy lasts nine months and you think that you will never make love to a man anymore”.

“Being a mother is a dirty job”. The actress goes to the theatre after cooking dinner for her two and a half year-old daughter. “Today, at the recreation ground I met some dads. Good, they will realize how boring it is. If there is a man out there who enjoys sedating a brawl for the swing chair, quick, introduce him to me”.

The day I told my friends that I was pregnant they said goodbye to me as if I was leaving for a one way trip. They gave for granted that I would give up my nights at the disco or the *mojito bender*”. “Either woman or mother. This isn’t right, one has to square the circle somehow”.

During the show, Foresti is chased by a mysterious “gang of pediatric nurses”, who are strongly determined to make sure that people talk about motherhood in “positive terms”. This dramatic device aims at showing that motherhood is among the few life stages that are still firmly controlled by right-thinking people and governed by political correctness. “They say that you experience ‘baby blues’ after childbirth”. Brilliant! You almost picture yourself on your hospital bed singing and playing guitar. Nobody dares to use the right word for this emotional state: depression”.

“Goodbye, I’ve got to go back to penal labour”, Florence says on stage. In this way she announces that it’s time for her and all the mothers in the audience to go back home, perhaps feeling a bit relieved.

Critics dubbed her the first post-feminist comedian. Women in the audience identify with the image of a chronically inadequate woman: not motherly enough, not good enough as wife and lover. British women coined the term “slummy mummy” for these restless and confused mothers, who do not conform to the traditional role models.

These two examples – *Nonsolomamma* and Florence Foresti’s theatre – show how women are developing a different awareness of their new maternal role. In

the blogs they talk freely and ironically about their disorientation at childbirth, their doubts and uncertainty, their sense of being unprepared and inadequate to deal with this new situation. Posting messages on the web allows women to bypass cultural orthodoxies and construct a more authentic discourse on motherhood and thus the web becomes an effective expressive means to share frustrating and restraining experiences which otherwise would pass by without any acknowledgment. Other women react in a different way: by means of a provocative language and a sarcastic tone, Florence Foresti turns the stage into a vehicle for debunking myths of motherhood, easing the tension and dismantling the *clichés* stratified around this myth.

MOTHERHOOD AS DISEASE

Is there any relationship between the myths of motherhood and the pathogenesis of postpartum depression? How can motherhood – seen as women's most fulfilling and gratifying experience – be connected to the development of postpartum depression? As regards women who are considered to be prone to postpartum depression, what is the discourse on motherhood?

Women who blindly accept the standard discourse on motherhood are obliged to exercise their procreative function in an impersonal way. In this way motherhood ceases to be a personal experience and acquires value only to the extent to which it adheres to social and cultural stereotypes. If women surrender unconditionally to the myths of motherhood, created by men and secularized by culture, they are more likely to feel inadequate, unworthy and incapable. Every attempt made to adhere to an ideal prototype is destined to failure considering that this prototype does not account for women's responses to the birth of a child.

In former studies [48-50] we hypothesized that women with a particular values constellation referred to in psychopathological literature as *typus melancholicus* (TM), experience motherhood as a social duty to perform in conformity to the dictates of tradition and that the adoption of this attitude is likely to turn motherhood into a traumatic event.

TM is a personality type which is more likely to develop major depression (melancholia) [51-87]. The traditional values which shape the TM's social behavior include *orderliness* and *conscientiousness*. They may have a pathogenic valence in so far as they bring forth a particular kind of mindset and behavior which reflects the myths of motherhood we described above. TM mothers seem overidentified with social representations of maternal roles which reflect time-honored male expectations. Their system of values, which shapes the inner core of these women's personalities, heightens their psychopathological vulnerability.

Orderliness is a stressed version of order which is

clearly observable in the field of interpersonal relations and it aims at maintaining an atmosphere free of conflicts that could engender feelings of guilt. The TM embodies the prototype of promptness; through her way of being for others she prevents any risk of being in debt. The heightened sense of order is accompanied by another fundamental trait: a higher-than-average desire to better one's performances. The TM feels she has a duty to carry out several tasks in a functional and regular way. Within this *cliché*, activity in itself is more important than the enjoyment that comes from achievement. The following is a good example of orderliness: "*I planned everything in my life. Once I got married and my husband got his last promotion, I thought it was the right time to have a baby*".

Conscientiousness manifests itself in the need to prevent guilt attribution and guilt feelings. The behavior of the TM is affected by the need to be accepted by others – who become the impersonal embodiments of secularized norms. So this behavior is not based on personal criteria, but rather on social expectations. Every deed performed is a toll that must be paid, a necessity that compensates for any shortcoming. The underlying question behind any action taken by the TM is: "*What's the right thing to do in this occasion? What do others expect me to do in this situation?*". It is in this way that the TM tries to keep her conscience meticulously clean and sheltered from feelings of guilt. It is of paramount importance that one cannot be blamed for anything. So, a TM mother would say the following: "*I always try to do everything with my baby so that nobody can blame me for anything*". In the TM's mental order there is no room for exceptions, no space for a flexible adaptation to the situation. This mental order rules out that margin of freedom which allows us to interact with the world in a subjective manner [65].

Alfred Kraus [52] studied the TM in light of social role theory [88]. He lays emphasis on the unconditional adherence to pre-established roles that are socially assigned and brings to light two further traits that are typical of the TM: *hypernomia-heteronomia* and *intolerance of ambiguity*.

Heteronomia is an exaggerated receptiveness to external norms, every action is guided by an impersonal motivation, which is related to socially established criteria. Obviously, the social norm at play here is the social role attributed to mothers by tradition. *Hypernomia* consists in an excessively rigid adaptation to the social norm, where the excessive aspect is due to the indiscriminate and stereotyped application of rules estranged from their context and from the function they fulfill in a given situation: "*I do everything because I have to, because that's the way to do things. I feel like I do everything mechanically, out of necessity. Besides, that's what mothers are expected to do. There are things that need to be done and must be done in a certain way*". Hetero- and hypernomia appear to be the trait of TM with high-

est pathogenic valence with reference to the development of postpartum depression.

Table 1 reports first-person statements by five women who share a hetero/hypernormic view of motherhood (left column) and show the drift into psychopathology (right column). A drift which originates from the clash between a view that is rigidly anchored to the myth of motherhood and the reality of maternal experience.

The necessity to inscribe oneself in narrow identity configurations leads people to typify others and themselves which entails flattening their personal characteristics on the model of simplified prototypes that do not allow for the coexistence of contradictory features within the same person or relation. Owing to her *intolerance to ambiguity*, the TM can only cope with social situations that confirm the pre-established image she has of herself and others. This attitude becomes an obstacle to authentic interpersonal relationships and makes it difficult to deal with situations which demand an understanding of the complexity of an emotional state. “Sometimes when my baby girl cries I think I would like to be somewhere else. Then I say to myself that a mother should not have these thoughts. She is my daughter and I should always be patient and helpful. The problem is that I feel guilty for these feelings. I should be happy but I am not. Motherhood should be the most fulfilling state in a woman’s life, why it is not so for me?”

The TM is unable to gain an awareness of her own

and others’ individuality (*idioagnosia*) because she is exclusively focused on the exemplar type. In this way her intersubjectivity is mutilated, in so far as it is deprived of the emotional implications that come with the recognition of one’s own subjectivity and that of the other. As it were, since she approaches the other only through the *medium* of the role, the TM is not responsive to individual feelings, needs and desires; the TM is only responsive to stimuli coming from a pre-established social identity, shaped on the basis of traditional social roles. The TM’s life is made up of tasks she has to complete in an effective way and with rigour, in accordance with fixed and unchanging norms. “One has to do all that he can do, and do it the best he can, and do it alone so that nobody can ever criticize him”. The risk entailed by this need is that one’s own and others’ expectations remain unheeded, in this way one may fall prey to a condition characterized by feelings of guilt.

CONCLUSIONS

Motherhood can assume a pathological valence for women – it’s the case of TM mothers – who tend to adhere to the impersonal and “masculine” discourse on motherhood. This discourse – which has been popular from the times of ancient Greece up to the present but also informs (albeit in part) the technical jargon of psychoanalysis – presents motherhood as the apotheosis of femininity and leads mothers into assuming a role which is functional to the stability

Table 1 | *Value-structure and psychopathology*

	Hetero/hypernomia	Psychopathological failure
CASE 1	“I thought it was right to have a baby in this moment of my life. My husband had had a promotion and I had my job. We had a beautiful house...only a child was missing! So we decided to have a baby. The baby arrived soon afterwards and I felt euphoric. I focused on all the things that needed to be done: the medical checks; the dietary restrictions; the training course for pregnant women; the proper arrangements for the arrival of the baby... everything that needs to be done during the pregnancy.	“Then the baby arrived and I lost control. Nothing was like I had programmed and imagined. I can’t manage everything, I am not able to be a mother”!
CASE 2	“My mother didn’t work, she stayed home with me and my brother. That’s what a good mother should do: raise her children and devote herself to her children”.	“But I’ve got a job and I don’t know what to do. I can’t make a decision, I feel guilty. I think it would be right to stay home with him. What can I do to be a good mother? If I decided to go back to work I would never forgive myself but, if I stay home, I think I could go crazy” .
CASE 3	“When my daughter was born I tried to do my best to be a good mother and do everything that a woman who loves her child and family is expected to do. A good mother should always be attentive, present, devoted to the needs of her baby, happy when she takes care of him and she should perform motherly tasks with thoughtfulness”.	“But how do you do it? I can’t do it! I am unhappy. I feel inadequate as mother and woman”.
CASE 4	“We women were born with this gift; the possibility to become mothers, this is what I have been told throughout my life. And I was also made to believe that raising one’s own child was the most fulfilling experience in a woman’s life”.	“I think I did my best to be up to these expectations but I don’t feel gratified by motherly work and I feel terribly guilty. What can I do now? I can’t go back but I can’t go on either”.
CASE 5	“I have always thought that motherhood would be the best and most fulfilling moment of my life. It’s like I have lived all these years waiting for this event and getting ready to deal with it in the best possible way”.	“Finally the moment has come, but everything is different from what I expected. It’s terrible to realize that I am unable to be the kind of mother I have always dreamed of being and I can’t be anything else”.

of the family and social order. This means giving up many prerogatives of women which are not compatible with motherhood.

In the case of these hetero/hypernormic women, who tend to abide by social norms, play the established social roles and hide their inner conflicts and tensions, myths of motherhood contribute to suppress the contradiction which is intrinsic to motherhood itself making this contradiction invisible but still painful and hence uncontrollable and potentially devastating. The conception of motherhood as the fulfillment of female nature, rather than a period of existential crisis characterized by the dichotomy between social expectations – “how I should be” – and personal experience – “how do I feel with regard to this new situation” – is at the heart of this contradiction.

Heteronomy, as well as the attitude to subscribe acritically to these myths on motherhood, forcing oneself to live motherhood in keeping with rigid

and impersonal schemes that do not take into consideration women's authentic experience of motherhood, may worsen this contradiction and bring the mother on the verge of psychopathological illness.

This urge to meet social expectations which are construed around the idea of motherhood-as-apothecosis of femininity, rather than the idea of motherhood-as-crisis, together with the constant growth of tasks related to motherhood, creates an emotional overload which is hard to deal with and leads to the development of depressive pathology.

Conflict of interest statement

There are no potential conflicts of interest or any financial or personal relationships with other people or organizations that could inappropriately bias conduct and findings of this study.

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