

## Beyond “Sharenting” a Cute Teething Baby Face

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### Maternal Agency in the Facebook Page of Ibuprofen-Based Analgesics for Children

*Teething is an ordeal for everyone in the family. Mothers are more likely than fathers to look for tips and ideas online for soothing a baby back to sleep. For this purpose, they are also more inclined to use social media that they can access through smartphone applications, such as Facebook. And because women are still the gateway to health-product sales, they are the primary target market for the advertising of pediatric drugs online, including teething pain-relief products. Recent studies have indicated that a large proportion of millennials believe that most marketing campaigns are not tailored to them. These women have trouble both identifying with the nuclear family as well as with recognizing themselves in the usual stereotypes. They find user-generated content more trustworthy and memorable than traditional brand-generated content. In this context, one may wonder how pharmaceutical companies have adapted their advertising discourse in social media in order to get the so-called digital women influencers to participate in the construction of the millennial caring mother. Drawing on recent works in the critical analysis of discourse, I deploy Michael Halliday's systemic functional grammar, and more precisely the transitivity system and its processes, to study the content of a Facebook page dedicated to the promotion of over-the-counter ibuprofen-based analgesics for children. This allows me to identify how the emphasis that has been placed on the efficacy of drugs contributes to overshadowing the nightmarish labour that is necessary to care for a sick child.*

Teething raises one of the most dreadful parental fears: not knowing what to do when one's baby is in pain. The crankiness, drooling, and tears keep parents up at night and make them look online for help and medical support. Considering themselves as primary caregiver for their family members, women are particularly prone to seek out information about health issues (Lee 4). Consequently, they

are also the primary market for the selling of pain relief for kids. The challenge for the pediatric painkiller industry is to increase the brand-name value of their products within a highly homogeneous market (Anderson et al. 1). Maternal anxiety related to the management of a teething baby is a gold mine for the ibuprofen marketers in terms of product differentiation; unlike acetaminophen, ibuprofen also helps reduce swelling of inflamed tissues, including gums. Being on the channel where mothers find their most trusted peers is the main reason why popular over-the-counter pediatric drug brands use a Facebook page. Pharmaceutical marketers that create engaging posts know how to provide women with opportunities to share valuable content with other mothers while, at the same time, conveying messages that humanize their brands. Despite the millennials' eagerness to provide user-generated content, the stressful work of caring for a sick baby and restoring sanity to the household seems absent from these Facebook pages. Through a critical analysis of the texts published on a pharmaceutical Facebook page created for the promotion of a popular ibuprofen-based analgesic for children, this article explains how women's labour of care is effaced by the celebration of the curative effects of medication.

### **The Pharmaceutical Invention of the Caring Mother**

For more than a century, private health-product companies have contributed to shaping the representation of the caring mother. Johnson & Johnson has been particularly active on this front. Its corporate history stresses how baby-powder advertising derived its importance from focusing on feelings of affection between mother and child. It claims that, in the mid-1960s, the company sponsored the first conference on the relationship between the mother and her newborn—with a focus on “the facilitation of a mother’s need to physically demonstrate love to her child”—, bringing together medical experts to recognize the “importance of touch” to both mother and baby, a central notion in the marketing of baby toiletries (Foster 136). Also in the mid-1960s, an Aspirin product for children was advertised as helping both mother and child to feel better (Baillargeon, “Aspirine arrête la douleur vite!” 214).<sup>2</sup>

Even in the twenty-first century, mothers remain the gateway to health-product sales. By targeting the “mom segment,” the health industry reinforces gender stereotypes, since most of its advertising content depicts women not only as bearing responsibility for meeting health needs in families but also as being good at it and feeling happy. However, since marketing surveys suggest that millennial mothers tend to prefer less idealistic pictures of motherhood (Dolliver et al. 5), one might wonder how gender healthcare roles are now being depicted by the corporate world. Moreover, these surveys also claim that retail purchases are influenced by social media and that millennial mothers

are effective brand advocates, since they constantly demonstrate their interest online (Exponential Advertising Intelligence 6, 21; Weber Shandwick 3). In this context, the question to be asked is how the pharmaceutical industry approaches these women so that they get them to view, like, or share their posts, and hence become ambassadors for their brands? How does it portray mothers, in terms of their own agency, compared to the power given to medication? In order to think about these questions, it is important to understand why millennial mothers go on Facebook, and what they get from it in relation to their children's health.

### Why Do Millennial Mothers Use Facebook?

Millennials' usage of social network sites is a sign of the times, and is not just a generational personality trait (Bergman et al. 709). The arrival of a first child seems nonetheless to be a peculiar time for this practice to peak among young adults. The Web has become the most important source of parenting advice for millennial mothers—right after their own mother; infant-care books, which were the top resource for the Baby Boomer generation are today rarely used (Crowdtap 10).<sup>3</sup> Feeling overwhelmed with new responsibilities does not keep new parents away from the social media. On the contrary, their social media consumption is increasing as they use it both for parenting purposes and as a lifeline (Prior 2). Unlike the media usage of baby boomers, which primarily involved watching television and reading magazines, their media consumption is highly interactive, to the point that they feel the pressure to keep pace with what other parents are posting and sharing (Crowdtap 13). Millennials are, above all, content producers, not viewers. On a daily basis, they spend 30 percent of their media time on user-generated content—that is, media content created by their peers including conversations and peer reviews. They find this kind of information more trustworthy and memorable than what is transmitted through traditional media sources (Crowdtap and Ipsos Media CT 1, 5-7). Therefore, user-generated content provides pharmaceutical marketers great access to millennial mothers' time, a trusted channel to deliver their message as well as memorable experiences. The challenge for a brand of ibuprofen-based products is to encourage its customers to create and share content in partnership with them and, in the best case, to transform their personal Instagram accounts or Facebook pages into illustrated timelines of their child's teething and tooth loss.

Facebook is particularly attractive to parents both because it allows them to stay in touch with their friends and relatives and because they see it as a source of useful information. In other words, it functions both as a bonding network that helps them to maintain strong emotional support and as a source of bridging social capital (Bartholomew et al. 212). According to a study done

by Pew Research, parents are significantly more likely than nonparents to log onto Facebook daily and to be friends with their own parents and neighbours (Duggan et al. 6).

Turning to social media for parenting-related information and support remains a gendered practice. Eighty-one percent of the mothers participating in the Pew study were using Facebook, compared to 66 percent of fathers (Duggan et al. 5). Although fathers acknowledge that they give and receive support through social media, mothers are still more likely to engage in these activities than they are (Duggan et al. 17). Women are significantly more prone to share, post, or comment with greater frequency, and they are more likely to receive support via social media (Duggan et al. 17, 26). Mothers' need for connecting and interacting with other women that are similar to them in their life situations is intense. Looking for child-health information is an integral part of the invisible caregiving work that rests on the shoulders of women. Not surprisingly, another Pew research study reveals that 52 percent of women doing online searches choose medicine and health among the top three topics that interest them, whereas only 22 percent of online men made that choice (Kennedy and Funk 8). What characterizes millennial health seekers is the multiplication of "cognitive authorities" on which they may rely.<sup>4</sup> Unlike their grandmothers or mothers who used to turn to popular books for guidance—such as Benjamin Spock's *Dr. Spock's Baby and Child Care* or William and Martha Sears's *Baby Book*—millennial mothers do not restrict themselves to a particular model of childcare. This does not necessarily mean that they rely on isolated elements of a fragmented mosaic of knowledge. They would prefer to constantly look for new insights, eagerly anxious to contribute to the creation of an ever-changing parenting subculture (Gutting and Fromm 16). Blogging is still a popular activity for self-expression and identity preservation, but the growing use of mobile phones over computers to go online has changed the dynamic of interaction in the mamasphere. Sites to which mothers can access through smartphone applications offer a better potential for keeping in touch with the world. These platforms make it easier to ask questions and to get responses from the online circle during the night without having to turn on the computer (Gibson and Hanson 320).

### Why Big Pharma Creeps into Mothers' Facebook Feed

There are many reasons why symptoms of sick children worsen at night, and this can make everyone in the family miserable. Facebook allows one to ask for help without addressing a demand to any person in particular at the risk of sounding importunate. This does not mean, however, that the answers obtained are comparable to the compassionate advice you would receive directly

from a loved one. As observed by Alexandre Coutant and Thomas Stenger, the social dimension of platforms such as Facebook may be overestimated: what’s new with the so-called social media is not the ongoing chatter. These platforms merely reveal social exchanges already taking place in other spheres of daily life that never leave traces. To describe these devices as “social” masks the commercial exploitation of users’ participation and the economic interests that are at stake (Coutant and Stenger 84). The data that mothers share on Facebook—along with information about their browsing habits—belong to Facebook; as such, these data can be sold to advertising enterprises, which in turn use them to better target and address potential female consumers on their own newsfeeds. Because this commerce of signs, symbols, and words keeps men out of the picture, it perpetuates inequity in the sexual division of domestic care labour rather than preventing it.

The provision of mutual support in the mamasphere has been studied by a number of scholars,<sup>5</sup> but apart from papers on Johnson & Johnson’s Baby-Center forum (Hammond-Rashley; Seigal; Goriss-Hunter), very few have been written on the special twist put in social media by corporate discourse on the construction of contemporary caring mothers. The marketing staff of pharmaceutical companies understand that there are millions of women on Facebook (in a show of solidarity and desire for more agency) who are eager to share ideas about what is best for babies. This is exactly why the health industry has exploited this terrain as well.

Admittedly, mothers’ use of social media affects their representations of motherhood as their own content contributions influence, conversely, the understandings of motherhood held by others (Basden-Arnold and Martin 4). Not only do women “do gender” online, but they also “do motherhood” (Schoppe-Sullivan et al. 276). Motherhood is performed in the Web through the repeated displays of modes of interaction with children. Under the pretext that nearly a third of millennial mothers are single parents and have trouble identifying with the nuclear family, the market industry recommends the production of commercials emphasizing, on the one hand, the relationship between the mother and child and, on the other hand, the construction of a personal identity for women (Weber Shandwick 8). If these recommendations have the advantage of encouraging the production of more open messages regarding possible representation of mother-only families, they are not pushing against the existing heteronormative framework and they do not allow the transmission of a fair representation of the household division of labour. The use of social media for advertising purposes can provide an opportunity for the millennial woman to express what she is, but because the public construction of her identity as a mother still takes place in commercial settings that target only women, she still appears as the only one responsible for the care lavished

on her child. This is at odds with other marketers' claim that the millennial mothers have difficulty recognizing themselves in the usual clichés and that they are tired of images of incompetent fathers (Weber Shandwick 8; Dolliver et al. 5; Krashinsky). Henceforth, we can ask how the healthcare industry goes about seducing women online, targeted strictly according to their role as mothers, while it meets the demands expressed on the Web for more realistic and diversified representations of parenthood. One can also question the place given in the messages to the workings of a medication (or its brand), compared to the work of the parent, mother, and father in the performance of care relationships.

## Method

The purpose of the study is to highlight how the millennial caregiving mother has been constructed in a discursive context in which identity markers are used to get women to share advertising content for child medication. More specifically, this article focuses on the qualitative grammatical analysis of the content posted on a Facebook page for ibuprofen, a nonsteroidal antiinflammatory drug used for reducing fever and relieving aches and pains. In February 2016, the products were recalled by Health Canada due to clumps in the bottle that could have led to inconsistencies in the dosing. The Facebook page is now closed. For both legal and ethical reasons, the name of the page and the brand will not be disclosed.

Concretely, I have done a detailed and systematic analysis of both the texts and images published in the Facebook page as well as the contributions and commentary of the Facebook page fans themselves. I used a theoretical frame that is familiar to scholars involved in critical discourse analysis, namely the grammar of Michael A.K. Halliday, and more precisely, his study of a system of representation called "transitivity." According to Halliday, transitivity confers on the clause the status of representation; it is the cornerstone of the semantic organization of experience. The task of the researcher is to analyze the types of transformation processes represented by: the verbs as they are used in grammatical clauses to describe processes; the way actors are related to each other through the verbs; and the context in which action represented by the verbs takes place.

This meticulous work allows one to examine the congruence between the sociological roles— that is, those enacted in everyday life practices—and the grammatical roles of subjects and beneficiaries of the action depicted within a textual portrayal of these roles. For instance, the sentence "We started X (name of a brand), trusted by doctors for more than fifty years" is a misrepresentation of how agency is actually distributed in a real-life situation where

a mother, alone, measures and gives her child a dose of oral suspension that has previously been recommended by one physician. One has to wonder, who is actually “we”? Who are the ones that “have started X (the brand)”? What does precisely “to have started” mean? What did “we” start exactly, and what is “trusted by doctors”? Which doctors? All of them?

Mothers may be the prime target of advertising, but that does not mean they are discursively represented as the main actors of caretaking. The main hero of the pharmaceutical narrative of caretaking could be the father in order to please female consumers who like to see caring dedicated fathers at work. It could also be a physician or a nurse, so as to associate the brand with medical figures, or it could be the medication or the brand itself in order to showcase the curative value of the product. Therefore, the first question to be asked is “who are the actors of domestic pharmaceutical care?” This question can be divided into two subquestions: “who is represented as contributing to the recovery of the sick person, and under which conditions?” and “who is shown as the beneficiary of domestic pharmaceutical care, and under which conditions?” The beneficiary could be, of course, the child, but it could also be limited to the suffering part of the child’s body or its state of illness. In the case of institutional advertising—that is advertising employed by companies to market themselves rather than their products—the beneficiary can be stakeholders, regulators, prescribers, pharmacists, or committed citizens concerned with a public-health issue.

The discourse analysis of the ibuprofen Facebook posts was conducted in two phases. First, I have sketched a broad characterization of motherhood as portrayed in the messages under analysis. Following this, I have undertaken a microanalysis, sentence by sentence, of how the primary or dominant agents are constructed. To this end, I have looked at the functional relationships between subjects, verbs, and patients or recipients in each clause, and I have examined how they interrelate with one another through transitivity patterns.

In the following section of this article, I will first describe how motherhood is portrayed in the context of a Facebook brand page for teething pain management. I will then present a few sample posts from the corpus to illustrate how, in the corporate discourse and in the comments, agency is distributed among the various agents involved in caretaking.

## Analysis

### *1) The Portrayal of Motherhood in a Context of Teething Management*

At first glance on the ibuprofen Facebook page, one can see stereotyped and conservative representations of motherhood. Baby’s primary caregiver is the mother. Obviously, women are the primary target market—the segment the

ibuprofen maker believes will give the best chance to sell. The fathers seem completely absent during the teething and biting stage, except for Father's Day. Men are not even considered as a secondary target audience. The women shown are predominantly white, heterosexual, middle-class, joyful, and healthy.

The tone is in line with the humorous confessions-of-unfit-mother trend that is currently taking place in many mommy blogs, whereas the myth of the good mother, paradoxically, still prevails. In response to the invitation addressed to the Facebook fans, the ibuprofen page is dotted with photos and videos of women literally confessing to having done something that is supposed to be unworthy of a good mother. Meant to be funny, some confessions are actually quite sad if not pathetic: "I spend more time than needed in the bathroom so I can get a break"; "I can't wait to get away from my kids sometimes. I need alone time (even away from my husband)"; "I pretend I have to go to the bathroom so my husband and kids have to unload and put away the groceries." Of course, nobody would condemn a mother who needs a little break from her family. The fact that the strategies used to get a bit of rest are framed as sins rather than hints and tips, even with humour, suggests that these women might actually be fundamentally dedicated to their families since they know they should be somehow conflicted about their deceptive behaviour.

Beyond uploading photos and videos, writing comments, or downloading coupons, women's main occupations appear limited to putting away the groceries, freezing fruits (for soothing gums), dipping a clean washcloth in cold water or breast milk, and wiping the floor after bathing time. The domestic spaces in which most activities take place are the kitchen and the washroom, two environments associated with body care, cleaning supplies, and baby toiletries. Giving a bath—conventionally viewed as a soothing and joyful routine—is described in jocular remarks with an emphasis on wet floors: "Swimming in the pool during summer counts as giving the kids a bath. Right?!"; "How does my bathroom floor stay so clean? It gets washed every time my kids take a bath."; "Do your little ones leave more water outside the tub than inside?"

The last two sentences, both written in a brand's post, illustrate quite clearly a phenomenon that will be discussed in the next part of the article: the effacement of the mother's actual domestic work and, concurrently, the effacement of children's misbehaviour. Mothers do not have to clean the floor; the work gets done by itself. The action of cleaning an object is grammatically expressed in what Halliday calls a relational-attributive clause: the floor "stays clean." The cleanliness is simply a circumstantial attribute of the floor. No actor is involved, but only a carrier and an attribute. The floor simply happens to be clean! Similarly, the kids do not splash water outside the tub; they "leave more water outside than inside." The process involved is just physical body movement, without intention to act upon something or someone.



In advertising, maternal gratification and the praise of baby’s redemptive innocence go back to the Victorian era (Loeb 139). In a commercial Facebook page dedicated to teething pain management, one cannot resent children’s naughty whims and habits, so the discourse on young children’s misbehaviour is organized rhetorically in order to put the blame on other agents. Language is the means by which the experience of caretaking is represented. Different syntactic organizations give more or less emphasis to certain actors, or remove them entirely. These actors are linked by various processes, which are realized by verbs. Six different types of processes involved in the construction of agency have been identified by Halliday: material, mental, verbal, existential, relational, and behavioural. All verbs fit into one of the processes. For this study, I focus on three types of processes: the material, the relational, and the verbal processes.

## *2) Who Are the Actors of Teething Pain Management?*

### *The Material Process*

The material process takes place in clauses that describe what an actor is doing to an entity (as in “The gnawing provides pressure that helps ease aching gums”) or in clauses that represent the happening of something (as in “Last molar is coming”). In the case of the ibuprofen Facebook page, “teething,” “teething pain,” and teeth themselves are prominent actors of these clauses, as it is the case in questions such as “Is baby’s teething pain making you want to jump overboard?” This metonymic emphasis on the pain conceals the dreadful reality of a suffering and needy child, a strategy that is in line with the images of smiling and happy babies that abound on the page. A post with a crying baby in pain is not likely to get many likes and shares.

Teething pain is framed as the root of many evils. A controversial post that raised the disapproval of breastfeeding groups epitomizes this tendency to blame teething pain for all problems afflicting moms and babies. The post—that had been quickly removed from the ibuprofen Facebook page, with an apology (Kemp)—insinuated that the eruption of the first tooth causes breastfeeding cessation: “Humans breastfeed their babies an average of 3 months. 1<sup>st</sup> tooth comes in around 4-7 months. Coincidence? We don’t think so.” In this case, the first tooth itself is represented as the actor responsible for having caused breastfeeding cessation. The brand, represented by “we,” and indicated in the lower right corner of the post, is framed as the saviour that could potentially make longer breastfeeding possible. Actually, the idea that giving ibuprofen to a baby encourages continued breastfeeding after four months raises serious concerns, as there is not enough data to support a recommendation for the use of ibuprofen under the age of six months (Sullivan and Farrar 583). As a matter of fact, both the Canadian Paediatric Society and the American Academy of Pediatrics do not recommend ibuprofen to infants under six months without

first having checked with a physician (Canadian Paediatric Society; American Academy of Pediatrics). Moreover, it is worth mentioning that the word “humans” is used in the first clause to designate the breastfeeding parent, and not “mothers” or “women.” This allows the brand to distance nursing a baby from maternal role expectations, and as a result, to keep the pharmaceutical company from being accused of putting pressure on women to breastfeed. Such an approach would be at odds with mothers’ confessions about how they have wriggled out of household chores.

The mother is definitely not the prime actor of material clauses. She is rarely the one that transforms a situation or makes things happen. In many sentences, her work seems to get done by itself. Not only one can read that (as discussed earlier) “the floor gets washed every time the kids take a bath,” but also “Who hasn’t had to use *a little ‘creativity’* when their children wouldn’t clean up after themselves or eat all their veggies?” – as if “using creativity” for dealing with these issues was just a walk in the park– and sentences such as “I get more cleaning done in ten minutes before someone comes over than I do in a week,” suggesting incidentally that mothers don’t do that much after all. The eclipsing of women’s housework in painkiller advertising dates as far back as the 1930s (Baillargeon “Medicine Advertising” 97). The tasks of caring for sick children are not more apparent in the context of a commercial Facebook page. They are merely implied rather than expressly stated.

Women are given orders: “Keep it cool”; “Take a breather”; “Try something different”; and “Download coupons.” The use of the imperative as in “Show us your chompers!” does not totally suppress the mother (or the parent), since the possessive “your” is a trace of her involvement, and an expected activity is put forward. However, this representational choice corresponds to what Theodore Van Leeuwen calls a phenomenon of “backgrounding”: the excluded actor is not explicitly mentioned, but her identity can easily be inferred. The use of the imperative gives the mother the impression that she plays a central role as a contributor. But in fact, her role as a caregiver in the narrative of her child’s relief is minimized in favour of the medication’s effectiveness. This is especially the case in sentences such as “Take the teething misery out of Tuesday and turn to the simple, effective solutions of Brand X”; and “Get the irresistible smile back with the simple, effective solutions of Brand X.” The concrete task of giving medication to the child is not even mentioned. The advertised products are shown as the number-one actor that can transform the situation, most notably in the brand’s tagline—“Brand X soothes at the source”—and in sentences such as “Brand X provides more effective, longer lasting fever relief with less liquid than Brand Y.”

In the followers’ comments on the ibuprofen Facebook page, children are represented as having a more active role than on the company posts: mothers

upload photos of children explaining that baby “is teething” or “working on a first molar.” The child is the one who is at the centre of the story rather than the toothache. Nonetheless, the mothers, in their own words, tend to efface themselves in the same way that they are excluded from the transformative discourse on care in the company’s posts: the mothers’ discourse is solely focused on the child: “It seems as though he is always teething, good thing he’s so cute”; and “My country girl has been teething since she was four months! She’s one now and working on her top molars.”

Representations include or exclude social actors in order to suit the interests of the writer. It is in the interest of a pharmaceutical company to cast the pain or illness as the villain of its narratives and its drugs as a saviour in the course of action. Because the mother, who is also the reader and a content producer, must feel concerned more than anyone else by the content of the texts, she must be given a special place in the pharmaceutical narrative of caretaking. In a promotional text, sociological agency is not always realized by the grammatical relationship of the subject and the verb. It can also be realized by possessive pronouns as in “so *your* little one can get back to dealing out the fun” (Van Leeuwen). In phrases such as “the chill and the pressure help ease the aching,” the mother is excluded, but the exclusion does leave a trace because the relevant action of giving baby a frozen washcloth is included and the caretaker is present in other parts of the text. The mother is not radically excluded from the representation of baby-pain management in the same way that the father is outrageously marginalized. Her sociological agency is not entirely suppressed. However, her participation in the production of commercial representations that rhetorically enhance the agency of others (e.g., medication, chewing devices, or her own child) is a form of discursive exploitation that is consistent with the stereotypical images of maternal abnegation, and, conversely, is in contradiction with the popular portrayal of millennials—jokingly conveyed in the confessions—as being overtly self-absorbed.

### *The Relational Processes*

The relational processes are those of “being” and “having.” Their function is to characterize or identify. In attributive relational processes, a carrier is characterized with an indefinite number of attributes, as in “She has been more fussy lately but this little girl is such a trooper” and “Baby teeth are the best and so darn cute.” The relational clauses are used to classify, judge, describe, and give information about an entity. They reveal the writer’s judgment about someone or something.

Relational processes in the ibuprofen Facebook page are numerous and redundant. It’s through this type of clause that the differences in the representational choices concerning fathers and mothers are the most striking.

Whereas mothers are humorously described as being “better under pressure,” dads are depicted as being “a son’s first hero” and “a daughter’s first love.” As for the material clauses, the focus is on teething rather than on the suffering or biting child. In the clause “Teething doesn’t have to bite,” there’s no specification that it is the child’s teething that is in question, or, more literally, that it is the child himself who bites. Actually, most babies try to bite. Not only does this socially incorrect gesture bruise the parents’ sensitive skin, but it also hurts their feelings as it raises doubts about their capacity to discipline kids. Nominalization through the use of gerunds is a representational choice that also has the effect of backgrounding the doer of the clause (Van Leeuwen): “Teething doesn’t have to bite” hides the actor that grows a tooth. The person that suffers, or is responsible for making others suffer, is somehow excluded from the clause. The use of hashtags<sup>6</sup> such as “#shark” and “#chompers” is a form of relational process that characterizes the child as having the property of biting people, but without naming explicitly the carrier of this attribute. The proximity of the hashtag to the mother’s affectionate words or a cute child’s photograph adds an element of comicality to the relation that is established.

Most of the relational clauses in which the child is the carrier of an attribute are found in the women’s comments and contributions. The child is always described by the mother as being adorable and adored, no matter how fussy baby gets: “X is about nineteen months old and is showing her pearly whites”; “Soon to be teething ... my precious baby”; and “She’s not a baby ... but she’s got all four top adult teeth coming it in at one! And she’s the light of my life.” Teething or the child’s teeth are the most prominent carriers of negative attributes: “My baby isn’t a baby, but them (sic) molars are killer!” and “I remember teething to be horrible for her.” Very rarely does a mother produce a comment that is less flattering for her child. When one allows herself to do so, she uses words of love, such as “my little,” to highlight her attachment to her kid: “X is my little shark. He attacks mommy when I’m not looking.” Otherwise, cute babies never bite; only jaws may snap at you.

Finally, the brand and a corporate partner that produces pacifiers and teething toys are literally described as lifesavers: “Ibuprofen brand X and baby-products brand Z have been lifesavers for us” and “You’ve been a lifesaver.”

In sum, relational clauses are mainly used to flaunt the merits of the advertised products, to offer a positive representation of babies, and to reveal with humour and in a soft tone the hassles of domestic life, and all this, while they perpetuate old gender division between mothers’ and fathers’ attributes.

### *The Verbal Processes*

The verbal processes involve saying things to others. They take place in clauses in which someone says something to someone else or in clauses in

which someone projects indirect speech as a separate clause. They could also be clauses in which someone invites someone else to say something, as it is often the case in corporate Facebook pages that encourage the fans to engage in “the conversation.” Most of the verbal processes found in the posts of the ibuprofen Facebook page belong to this type. Mothers are asked to contribute to the corporate discourse on care by “sharenting,” that is by uploading photos or videos of their children. They are also invited to confess the harmless lies they had concocted in order to give themselves a break. These confessions have largely taken the form of homemade videos in which women reveal white lies on a piece of paper, such as “If my kids want to go to (sic) playground, I told them that it is (sic) holiday so it’s closed.” The invitations to confess a lie are done using the imperative form: “Write down your confession, record a video or snap a photo, and upload it in the comments below.” This category of verbal processes is called “conative” because it shares the ability of material processes, for a “sayer” to act on another participant, qualified by Halliday as a “target.” In a spirit of patronizing benevolence, the drug company kindly gives its seal of approval to women’s expression of resistance by inviting them to perform what one may call “bad, but not so bad mommy humour.” The kids become in turn the target of their mothers’ verbal processes through creative and meant-to-be-funny survival lies: “When I get rid of a toy, I tell my daughter that it ran away”; “I tell my daughter that her favourite cartoon characters go to sleep at night so she can’t watch them”; and “I tell my son I will text Santa Claus if he doesn’t behave.” Using humour to overcome the dichotomy between the good and the bad mother is in tune with how motherhood tends to be depicted in early twenty-first century popular culture (Podnieks 1001; Mendonça 159). Amusing narratives of personal transgressions may help to find relief and to reverse a situation of disempowerment to one of empowerment (Wansick 541). However, the concealment of the sore distress parents are subjected to when a baby is in pain contributes in the ibuprofen Facebook page to maintaining the idea that caring for a sick child is an enjoyable and fulfilling activity; mothers have no reason to complain, as long as they have the proper over-the-counter meds on hand.

Inanimate objects can participate in verbal processes through a figurative language technique called “personification.” Advertisers may turn products or body parts into a person by giving them human abilities such as speech, but such was not the case with the ibuprofen campaign. Neither the medication nor the teeth speak to anyone. The brand is the only nonhuman entity that engages in verbal processes, and it does so by urging mothers to produce content, thus converting them into “mombassadors” who spread the narrative that “Brand X soothes at the source” to their own network of friends. One would expect user-generated-content campaigns to be more authentic in expressing

the millennials' parental anxiety related to teething pain management. Actually, the content that users are asked to provide must fit into the framework of the campaign and reflect the brand's personality, not the users' challenging realities.

## Conclusion

Social-media marketers claim they understand the changes in millennials' lives and know how to really connect with new mothers. By giving mothers the opportunity to stage themselves as being work-shy, nonchalant, and more self-centred than expected, one may think that commercial Facebook pages allow millennial women to perform motherhood in a way that is breaking free from the previous generations. It is worth recalling that pictures of mothers relieved of domestic tasks were also characteristic of Victorian advertisements (Loeb 181) and that taking analgesics for women in the 1930s was associated in advertising with social life, not work (Baillargeon "Aspirine arrête la douleur vite!" 212-13). The idea that commercial goods increase leisure time is by no means a new one. The novelty in social-media marketing is that women willingly undertake the task—for only free goodies or a chance to win an e-gift card—of producing and sharing content that more closely reflects the image they want to project about who they are as mothers. Knowing that they can only contribute within the framework established by the marketing agency, they encode their experience with the set of options provided by the transitivity patterns of over-the-counter pediatric drug advertising.

Advertising language is representational and imbued with ideology. The study of the transitivity patterns can be used to uncover representational meanings conveyed in the text and the role of actors involved in various transformation processes. In a previous critical discourse analysis of a Facebook page created by pharmaceutical marketers to buy in to the notion of ADHD, I noticed the tendency to portray mothers as heroines of preventive intervention (Niquette, "Marketing pharmaceutique et médias sociaux" 104; Niquette, "The Exploitation of 'Sicko-Chatting'" 299). The content of Facebook pages designed for the promotion of over-the-counter pediatric analgesics seems to offer a much different picture. Issues related to mothers' agentivity are not the same. The goal of disease branding—as for the ADHD Facebook page—is to induce the person bearing responsibility for child health to recognize the signs of "illness" and to take the steps necessary to ensure that medical and school authorities proceed accordingly. The aim of advertising for over-the-counter drugs—as for the ibuprofen Facebook page—is to convince mothers of the product's effectiveness. In the latter context, there is reason to believe that the strategy is one of representing the role of the millennial caregiver as a partner in the fight against a painful body, disentangled from the suffering child it incarnates,

while at the same time leaving entirely the merit of the curative action to the branded medication. In short, this study brings to light how the backgrounding of mothers’ agency in the commercial discourse on pharmaceuticals—in favour of the biochemical and physiological effects of the commercial product—is made possible by bringing women to contribute to the production of a friendly and funny portrayal of maternal care, emptied of its haunting and laborious aspects.

## Endnotes

<sup>1</sup>I thank William J. Buxton for helping me revise the text.

<sup>2</sup>The Canadian Paediatric Society and American Academy of Pediatrics recommend not giving acetylsalicylic acid (Aspirin) to children or teenagers because in the 1980s, it had been linked to the risk of Reye’s syndrome, a rare but serious condition that injures the liver and the brain (Canadian Paediatric Society; American Academy of Pediatrics).

<sup>3</sup>The Crowdtap research team engaged with a total of nearly 1000 U.S. men and women over the course of October 2015. In countries that provide public healthcare, the situation might be different. For instance, in Québec, all new parents are given a free guide titled *From Tiny Tot to Toddler* that is still described by the new generation as an important reference book (INSPQ “Évaluation du guide” 33).

<sup>4</sup>Authorities whose influence is blindly accepted, based on their reputation as experts, and upon which would lay most of people’s second hand knowledge (Wilson).

<sup>5</sup>Notably Ley; Friedman; Petersen; McLeod Rogers and Green; Pedersen and Smithson; Van Cleaf; and those cited in Friedman and Calixte; Basden Arnold and Martin.

<sup>6</sup>Marketers use hashtags in social media in order to help make a connection in the consumers’ mind between a campaign concept and the brand. These meta-data tags allow the brand’s followers to keep track of a campaign if it goes viral.

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