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Academic Motherhood and COVID-19

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Pregnancy and Pandemic

In this article, I examine through personal narrative my experience as a sculptor, arts educator, and pregnant woman during the COVID-19 crisis paired with comparable stories and anecdotes collected from other pregnant women's experiences during the pandemic. I hope to explore the effects—social, mental, and career related—of being at different stages of pregnancy during this international crisis. Working in a collaborative environment, such as an art studio, I have gained tremendous support over the years from fellow women, some of whom are also mothers, on how to navigate the ins and outs of working in fine arts academia. Now with the current pandemic underway, these resources are still present yet distant, as they virtually manage and maintain their own family units and careers.

The 2019–2020 academic year was also my first year in a tenure-track faculty role. I am curious about the effects of COVID-19 and the additional effects of being pregnant in a pandemic. What toll will this crisis take on my career as a young female educator and on my perspective as a new mother? I have gathered information from other pregnant women who are experiencing pregnancy during this crisis and have included their statements in this article. I am interested in perspectives of women both in arts-related careers and outside of the arts as well. Although my voice and experience may be the dominant thread throughout the writing, the unifying theme will be of the resilience of the female mind and body, especially during these dynamic and precarious times of pregnancy and pandemic.

Drive-Thru Heartbeat

On March 28, 2020, only fifteen days into the safer at home orders issued in Nashville during the coronavirus pandemic, my husband and I pulled into the parking garage of our birth centre for our week twelve prenatal medical appointment. I pointed to the parking spot labelled “patients park here for lab work,” so my husband could park our car. There were other parking spots with

labels including “in labour” and “ultrasound visit.” It is safe to say that back in February when we found out we were pregnant, we were not expecting to be attending a drive-thru doctor’s appointment to hear our baby’s heartbeat for the first time. Two nurses in face masks came out after we texted to indicate our arrival and type of car. The first nurse took my temperature and asked me if I had been experiencing any symptoms related to COVID-19. You could tell she was nervously waiting for me to answer “no,” and an audible sigh of relief was heard from both her and me when I did so. Next, they proceeded to open the passenger side door to take my blood pressure. Then, they tilted my car seat back and applied some aloe vera gel to my stomach. We then listened for the first time to our baby’s heartbeat from the fetal doppler in the front seat of my car. This simultaneously was bizarre and sweet. We were excited for a healthy heartbeat, but the whole time, I could not stop thinking about if I had somehow just exposed myself, my husband, and my baby to this virus just by leaving my house to have this appointment.

In the early days and weeks of the coronavirus pandemic, there was still much uncertainty surrounding how one could be exposed to the virus. We were all living in a constant state of anxiety as the virus ravaged communities across the globe. Now, as I write this article in August 2020, I can say a lot, and simultaneously not much, has changed. Yes, we now know that exposure to COVID-19 can be mitigated with certain strategies—exposure is lowered when outside, wearing a mask helps to prevent transmission, and six feet of social distance does help keep yourself and others safe. However, Since January, there have been over 4.7 million COVID-19 cases and 150,000 deaths in the United States (U.S.). Among the forty-five countries with more than fifty-thousand COVID-19 cases, the U.S. has the eighth-highest number of deaths per 100,000 people: 47.93 deaths from the coronavirus for every one hundred thousand Americans (Craig).

Beyond the numbers, America’s leadership has drawn strong lines in the sand, which has made this pandemic and the strategies in managing it partisan, controversial, and more difficult to implement. Additionally, the series of protests and civil unrest, sparked by the police killing of George Floyd on May 26, 2020, continue to grow as a nationwide movement for racial justice. To say we are living in a tumultuous time is an understatement, but this is not new information to anyone living in the U.S. Unfortunately, the size of our country paired with a “too little, too late” approach to mitigating the virus has got us to where we are now—high infection rates, continued deaths from the virus, and an uncertain future regarding the end of this pandemic.

This article explores the unique perspectives I can offer as a pregnant woman, an educator, and an artist, all of which have been dramatically affected by various aspects of the coronavirus. No one is unaffected or immune to the changes that quarantine and a global pandemic have placed on our lives. I

offer my experiences in these three categories in an attempt to examine how the changing tides of this year have affected and will continue to affect me and women in similar situations.

Considering Motherhood as a Young, Emerging Academic

I teach sculpture at a private university in Nashville, Tennessee, and have just finished my first year as an assistant professor in a tenure-track position as of May 2020. Previous to my academic career, I spent the better part of a decade developing my artwork as a professional artist, participating in international artist residencies, owning a sculpture studio for large-scale commission work, and creating and exhibiting artwork in a variety of forms, including gallery exhibitions, and public art installations. Careers in academia are highly coveted and competitive, and even though I had worked hard towards this goal, I still considered myself lucky to achieve a tenure-track assistant professor role at the age of thirty-two when awarded the position in 2019, immediately upon completing graduate school. Given the considerable effort I made to secure a job in academia over the past ten years, I placed the idea of having children on the backburner until I felt my profession and finances could sustain the decision. However, in November 2018, my healthy, vibrant father died unexpectedly at the age of sixty-one; this event sent shock waves through my immediate family as we all reeled from the loss. As luck would have it, I sought solace in a mentor and mothering academic, who is a supportive female arts educator always open about her experience of having children while seeking tenure in her career. These open conversations about motherhood amid the academic duties of teaching helped to negate my earlier beliefs that I would have to choose one or the other to find success; men do not often face the same decision. The strategy of deciding to not become a mother or hiding the fact that you are is disparaging (Eversole et al). Perhaps, in some ways, I hid this desire to become pregnant from myself, as it lay dormant while I pursued professional goals. However, the loss of such a close family member and mentor as my father, paired with achieving tenure-track employment, allowed me to shift my perspective and reevaluate my timeline for becoming a mother.

The university I work at places high value on teaching and service for evaluating tenure applications. Although the university still considers research important, the institution provides numerous opportunities for development as an educator that can be evaluated for tenure consideration. Jumping into my first year as fulltime faculty, I was eager to engage in these opportunities but struggled to find the right balance to continue to create in my own studio practice. I had been warned that in the first year, I may not make any new artwork and to accept this role shift from an artist to an educator. During this

shift, I reconsidered the prospects of becoming pregnant during this lull in my art practice. By good fortune, I found myself among supportive female colleagues and strong advocates for mothering in academia, who normalized parenting at an early stage in my academic career and fought for each individual's timeline for starting a family to be accepted within our institution. By late 2019, my husband and I had finally committed to the idea of trying to get pregnant, and in late February 2020, we discovered we were pregnant. A week later, Nashville was devastated by a deadly tornado outbreak on the night of March 2, becoming the sixth costliest tornado in American history; it killed twenty-five people, injured 309, and left more than seventy thousand Nashville residents without power (Sutton). Less than two weeks after this catastrophic event, while the city was still recovering from the tornados, the effect of the coronavirus began to sweep across the nation.

The fall semester had been a fairly normal first semester of teaching, not without the pressure and stress of adjusting to my course load of teaching three studio art classes, integrating into a new work atmosphere, and beginning to understand the dynamics of institutional service. However, nothing could have prepared me, or anyone for that matter, for what the spring semester of 2020 would bring. I worked for the first eleven weeks of my pregnancy in our normal in-person, onsite work environment. I taught my 3D Principles of Design and Sculpture II class, with some minor safety modifications, but, in general, the coursework and what I was able to do remained the same. Fortunately, I did not experience much, if any, nausea, morning sickness, or other pregnancy symptoms, which allowed me to carry on as usual. However, on March 11, as COVID-19 struck North America, I went from teaching very hands-on, technical skills to moving my three studio courses to an online format while being twelve weeks pregnant, which left me in a dizzying state. I tried, as many other studio arts professionals around the world did, to quickly reroute my curriculum to be taught remotely. I considered inclusivity aspects of students' access to reliable internet, their ability and space to create three dimensional forms in their new quarantined living arrangements; I also extended a large amount of grace to both them and me as we navigated classes, skill demonstrations, and project critiques over the new Zoom platform. I was not alone in this endeavour: "Many educators have approached dramatically altered spring semesters by embracing such contingent ways of making – without a chop saw, while taking care of children – and in so doing have opened larger conversations about making work without the expected institutional resources" (Dancewicz). Aki Sasamoto, who teaches sculpture at Yale admits that it is important to talk about both the coronavirus and the variety of practices that are possible in times of difficult situations without the institutional resources we are accustomed to (qtd. in Dancewicz). Rather than a skills-based project teaching the basics of welding, our projects shifted to

exploring the human body as a sculptural element, the performative aspects of sculpture, and the use of everyday, found objects as a material in which to develop content.

The Pregnant Sculptor

As Patricia James states in her qualitative study “The Construction of Learning and Teaching in a Sculpture Studio Class,” “the metal shop was a harshly physical world filled with raw and found materials, industrial-sized machines, and brazing equipment. . . . It was a potentially dangerous, visually dense, odor-filled, and noisy place where students cut, pounded, and brazed odd pieces of rusty junk or scrap metal into objects that were transformed into expressive and sometimes funky or surrealistic sculpture” (145). James perfectly paints the scene for any number of typical sculpture studios across the country. As a sculptor, I consider myself a very practical person. You have to be when you are responsible for a studio space filled with dangerous equipment and tools. In my own work, I use pneumatic and electric machinery for stone carving as well as various metalworking tools, such as welders, plasma cutters, and wood shop saws. I am familiar with the physical exhaustion of working long hours with heavy, toxic materials, loud noises, and large-scale artworks.

As a woman in the field of sculpture, I am accustomed to working harder and longer than my male counterparts from sheer lack of physical discrepancies. The role of a female in the often male-dominated field of sculpture has and continues to expand in recent decades thanks to the various waves of the feminist movement and its effect in the workplace. With this flip, more and more women have taken over leadership roles in sculpture-related occupations, both in and out of academia. This is not a new concept as women have been challenging the stereotype of sculpture as a man’s world for decades:

Sculpture was once considered the domain of ambitious male artists, a medium as challenging in its physicality as it was limitless in scope. But for several decades, artists from Eva Hesse and Senga Nengudi to Phyllida Barlow and Ursula von Rydingsvard have carved a place for women working in contemporary sculpture. And in 2018, it’s arguably female artists who are creating some of the most interesting, challenging, and ambitious forms—freely taking the body apart, prodding taboos, and embracing the grotesque. (Thackara)



Figure 1. Casey Schachner directing the install of Stringer, her large-scale, site-specific artwork at Blackfoot Pathways: Sculpture in the Wild (BPSW)



Figure 2. Casey Schachner, Stringer, 2017, BPSW, lodgepole pine, steel, 30' x 17' x 10'

I always knew if and when I ever got pregnant it would be difficult given my chosen artistic field. The particular challenge of maintaining a career in a studio area filled with safety hazards, from the equipment and tools themselves to the dangerous chemicals used, is a unique challenge for a pregnant woman. My job as a sculpture professor and as a visual artist is very physically taxing on the body, even without the addition of growing a human. I was always concerned that having a baby would result in a dramatic pause to my career both as a visual artist and as a sculpture professor because it physically had to be. How am I supposed to demonstrate safe table saw practices with a large pregnant belly out in front of me? How can I keep myself, my students, and my unborn child safe and still do my job? As a female in a sculpture studio, am I going to be replaced by a male who can perform these duties while I am out on maternity leave? These are the concerns I had if and when I became pregnant.

In the article “You Can Be a Mother and Still Be a Successful Artist,” Nikki Maloof, a painter, shares how that there is “an old-fashioned myth that having a baby is going to make it impossible to work,” which is a notion I clearly fear, and I’d reason many professionally-driven women in a variety of industries fear it as well. As one woman notes, “As a career-focused individual with a job that I love, I feared losing a sense of self and motherhood setting me back from all the hard work I had done—especially considering that men still make up more than 85 percent of top leadership roles in the United States” (qtd. in Cashdan). I realize that it was sheer lack of exposure to these conversations about mothering, careers in academia, and the fine arts that led to my fears and doubts. The access to female role models in sculpture has always been motivating, and I find it important now more than ever for young female artists to have access to mothering role models in the arts who are open about their choice into motherhood. As sculptor Tara Donovan states, “While I understand the pressures of the art world all too well, the notion that women must sacrifice the pleasures of motherhood for the sake of a ‘career’ reflects insidious double standards from a bygone era” (qtd. in Cashdan). We are still a generation of female artists recovering from this bygone era of masculinity dominating the artworld, and, in some sense, we must retrain our mindsets to what is possible now.

Teaching Art in the Time of COVID-19

Beside the changes in our physical environments, syllabi and resources, educators also find ourselves in the role of mentor to students grappling with their own variety of changes and feelings about their experiences with virtual learning. The simple fact that students are struggling to make work in a converted home/art studio environment (assuming they have the space to do so) does not negate the bigger issue that “they aren’t getting what they’ve paid for as consumers of higher education” (Dancewicz). How can a student have a comparable studio experience when creating art without access to materials, tools, and space associated with a university studio? How does working in their apartment or dorm, detached from the community of makers they are used to working with, the tools their tuition privileges them to access, and the space needed to create, effect their sculpture-making? Kyle Dancewicz states that “Art educators are still troubleshooting questions about how to work with students remotely in real time ” and argues that these “profound dilemmas” are being negotiated by educators and students “under immense stress,” which are professional, financial, and health related.”

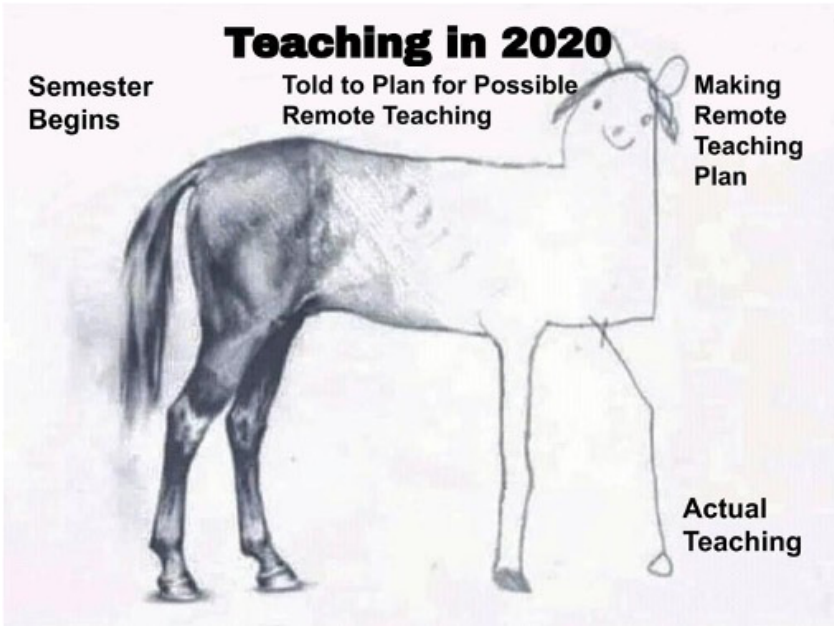


Figure 3. Teaching in 2020 (via Renea Fey), @zachlieberman. Twitter, 14 March 2020, 2:35 pm.

Another reality of teaching remotely during the COVID-19 pandemic is the shift to working remotely and its effects on work-life balance: “We’re at our computers very early because there’s no commute time ... and because no one is going out in the evenings, we’re also always there” (Davis). With a dining room converted into a makeshift office/sculpture studio, I find myself working more hours per day than normal. Establishing boundaries while working from home seems like a vital conversation that is missing from most workplaces, especially the university campus, as we scramble to accommodate the needs of the students. I am grateful for the opportunity to work from home while pregnant and reduce my risk of exposure to the virus; however, I find myself facing higher levels of stress due to trying to stay more focused and on task while discerning when to prioritize pregnancy needs over work needs. The workload and stress will undoubtedly be much higher when the baby arrives, as mothers working in academia, have increasing concerns, challenges, and obstacles. “The glass ceilings, sticky floors, maternal wall, baby penalty and now ... a ‘COVID-bind’” show how women, and especially mothers, are facing more challenges in academia, resulting in fewer submissions to academic journals (Cohenmiller).



Figure 4. Example of Sculpture II work by student Kirsten Agee. Artwork created from home exploring the notion of the body and wearable sculpture



Figure 5. Example of 3D work by student Grace Swing. Artwork created from home exploring assemblage, found object, and accumulation

Over the course of the final weeks of the spring semester, and the abrupt shift to online teaching, I also transitioned from my first to second trimester of pregnancy. As COVID-19 ransacked major urban areas like New York City, my own city of Nashville was trying to grasp how to navigate a large population and to control the spread of this virus. The birth centre my husband and I chose to have our prenatal care made the difficult decision to prevent partners from coming physically to the prenatal appointments; however, partners were allowed to attend virtually. We felt fortunate to have toured the facility before the quarantine took place back in February because it was the first and last time my husband would be able to go into the offices until the arrival of our baby. There certainly was disappointment, as we realized any expectations we might have had about the pregnancy process were quickly changing due to the current global circumstances. Simultaneously, we acknowledged our place of privilege—that is, to be experiencing this pregnancy from the perspective of middle-class, heterosexual, and married couple, who both remained employed

during the pandemic. There were many stories of pregnant women delivering their babies alone, without their partners, and wearing masks while in labour at hospitals overrun with COVID-19 patients. In terms of race, statistics show that “African American women across the income spectrum and from all walks of life are dying from preventable pregnancy-related complications at three to four times the rate of non-Hispanic white women (qtd. in Taylor et al). Access to essential health needs for all pregnant women became an overwhelming concern as the pandemic grew.

Case Studies

In preparing research for this article, I used Google forms and surveyed ten women who were pregnant or still currently pregnant during the time of the COVID-19 outbreak in July 2020. In this article, I examine my experience as a sculptor, arts educator, and pregnant woman during the COVID-19 crisis, which are paired with comparable stories and anecdotes collected from other pregnant women’s experiences during the pandemic. One woman gave birth in April 2020, during the height of the pandemic. She writes about her experience in the following statement:

I planned for a natural birth with a doula (whom I had already hired) and ended up deciding to go with a timed/planned c-section for security purposes. It drastically impacted my labour/delivery plans and for me making this choice was the hardest part of the impact of COVID-19. Coming up with a plan that felt safe was what overshadowed the pregnancy the past few weeks of my pregnancy. Delivery and being in the hospital [were] extremely stressful, as one had to interact with so many people and one was extremely worried whether one would get exposed—at any given moment. Hospitals did not feel safe, yet, for me personally, [they] felt safer than an in-home-delivery. I called friends of mine who are nurses/doctors to weigh the options and identify the path with the least options for exposure and one that gave me and my husband the most control to secure our baby would be born healthy.

Women across the country and globe have shared their stories and concerns for labour and delivery amid the coronavirus outbreak—from considering a major change to their birth plan to whether or not they should allow family members to visit their newborn. And, certainly, the worst and most crippling fear of all is what happens if myself or my unborn child is infected with COVID-19? An article in *The New York Times* shines light on this troublesome topic and concludes that researchers reported strong evidence that the coronavirus can be transmitted from a pregnant woman to the fetus. The

article follows the story of a Parisian mother who gave birth in March while testing positive for COVID-19, whose baby is healthy now at more than three months old but developed symptoms of inflammation in his brain as an infant (Belluck).

Although the news of this story provides some relief to expecting mothers that an unborn child can contract COVID-19 in utero but can survive postdelivery with a full recovery, it was also a troubling article because the long-term effects of this virus on infants is still largely unknown. The news of this story also came out just weeks after the Centers for Disease Control and Prevention updated and expanded its list of people at higher risk of severe COVID-19 to include pregnant women (“CDC Updates”). With the addition of pregnancy to the category of higher risk individuals, many employers and institutions have been making additional accommodations to their pregnant employees. One case study interviewee shared this statement: “I have felt very supported by my employer although I’m always fearful I may be furloughed; my career hasn’t really been effected by the virus. My supervisor is probably giving me more leeway than if there were not a pandemic right now. Even after my three-month leave, I will likely spend an additional two months working from home.”

Personally, being isolated from colleagues during the entirety of my pregnancy and planning for an upcoming hybrid Fall 2020 semester not only has caused a wide range of emotions but also has resulted in many learning opportunities. Working in a collaborative environment, such as an art studio, I have gained tremendous support over the years from fellow women on how to navigate the ins and outs of working in fine arts academia; this advice has recently included how to navigate the planning of maternity leave. Now with the current pandemic underway, these resources are still present yet distant, as they manage and maintain their own family units and careers virtually. Brigid Schulte, a Pulitzer prize-winning journalist and author of *Overworked*, observes that “Now that more couples are working from home, it’s impossible to ignore the fact that women bear so much more of the burden of childcare and housework” (qtd. in Gross). This adjustment due to COVID-19 is new to my mothering colleagues and mentors just as it is new to me and they can only offer advice based on their own personal experiences with family leave time in a pre-COVID world. In my experience, I am seeing an attempt by employers to extend maternity leave benefits to allow for more at-home work time for women during their pregnancy and also during postpartum. This doesn’t necessarily represent additional medical leave time however, as in my case, it may be an accommodation to teach virtually to prevent unnecessary exposure in my third trimester of pregnancy. A participant in the case study writes:

I actually felt more supported, as I received an extended period of maternity leave (as I initially wasn't that needed due to the adaptation to changes occurring). I was able to be the first on my team to transition to work-from-home and to be frank having a child during the pandemic gives you way more time with your baby. In addition, instead of needing to return to work, I started working from home which allows me to see my baby during lunch breaks, coffee/tea breaks and on top of that I don't lose any time commuting. Many [have] reported about the negative impact, I did not actually experience it that way. It's been a wonderful time for me & my partner as time has slowed down, there are way less distractions and we could fully dedicate our lives to our little baby.

Another mother-to-be shared her experience working at a hospital:

We are required to wear masks anytime that we are not in our personal office. While this is the safest way, I do find it more difficult being pregnant. I am winded much easier due to the pregnancy which makes wearing a mask seem extremely suffocating. My supervisor has been very understanding of my desire to remove myself from any and all unnecessary meetings in order to reduce my risk during this time so that support has been great. I feel that my career path is still on track.

The responses from these women reflect the resilience of the female mind and body, especially during these dynamic and precarious times of being pregnant amidst a pandemic. What I found most interesting in their feedback is an overall sense of hope. COVID-19 has introduced extreme experiences for pregnant women that are known risk factors for postpartum depression and anxiety such as 'exposure to excessive stress, living alone, inadequate social support, partner conflict, financial hardship, and a history of trauma' [all which] place the pregnant and postpartum woman at increased risk for the development of mental health challenges" (NIHCM 5). Perhaps the most valuable take away from these interviews is the shared advice from current pregnant women on how we can support future pregnant women, which comes from what they have learned from this unique experience. Some advice shared during these interviews amid the pandemic include:

- Host virtual meeting groups for pregnant women and/or new mothers.
- Additional delivery transparency from healthcare providers especially in changing circumstances.
- Support should come from lots of different sources: medical professionals, friends, family, and even strangers who are in the same

situation. We [pregnant women] might need a little more support right now as we learn to navigate what it means to be pregnant during this pandemic.

—The biggest toll is that I am unable to build relationships with other moms and seek advice/input.

—One is constantly worried if the child interacts with anyone aside from your household members. I wonder if one becomes overly cautious and anxious about others interacting with one's child.

This being my first year in a tenure-track faculty role, I have experienced more than most do in their first two semesters of teaching. This role, paired with the effects of COVID-19 and the additional effects of being pregnant in a pandemic, have created in me a 'mental load' that at times has felt insurmountable and exhausting (Gross). Pregnant women in 2020 are all still learning the consequences—social, mental, and career-related—of being at different stages of pregnancy during this global crisis. As I write this article at thirty-three weeks pregnant, my COVID-19 pregnancy journey is far from over. I am teaching virtual studio art classes for the fall 2020 semester, an accommodation given to me to teach remotely as a high-risk individual. This does ease some of the stress to know I am not exposing myself or my unborn child to the coronavirus, the virus which will inevitably return to campus when the students return early September. As of today, August 17, 2020, an article in the Washington Post indicates that the list of higher education institutions moving to remote learning this fall continues to grow as the infection rates across the U.S. do as well; the article highlights the “enormous challenges ahead for those in higher education who are pushing for professors and students to be able to meet on campus” (Anderson).

Conclusion

At this point in time, I find myself worrying less about what this year as a pregnant woman means for my long-term career goals, such as its effects on my tenure application or my artistic practice as a mother. I'm more concerned about what this year means in terms of the future practice of the studio arts and the profession of teaching in general. In her article “Teaching Art Online Under COVID-19,” Kaitlin Pomerantz perfectly articulates these concerns and fears felt by art faculty across the country, who have “questions about where this valuable teaching data, all these new free online lessons, will be housed and how they will be used in the future, with schools completely mum on the matter of intellectual property.” Are our jobs going to be replaced permanently by online learning if we do too good of a job teaching online?

Will the additional amount of prep time for virtual or HyFlex teaching be considered as research development? What will higher education and a career in academics look like in the years following COVID-19?

As an artist and pregnant woman, I'm left pondering the words of Katherine Wardi-Zonna that art making should be a "therapeutic treatment explored by pregnant women, because first and foremost, they are in the process of creating themselves" (263). As a maker, the process of creating another human being has been akin to the process of creating one of my sculptural works in stone or metal. It has had its challenges, both physical and mental, and it has been a long, arduous process that I've found both rewarding and exhausting. I have found that maintaining my artistic practice in the same capacity as prepregnancy has been nearly impossible, but I can attribute that primarily to the isolation of COVID-19 and secondarily to growing a human for the past eight months. This time away from actively making has provided me period of reflection to reevaluate larger systemic issues in our American culture, which have been highlighted within the constraints of the coronavirus pandemic.

With the entirety of my pregnancy happening during COVID-19, I am encouraged by the words of one of the soon-to-be mothers in my survey, who states, "Babies will be born no matter what, so if nothing else, it has at least provided some sense of hope and certainty for the future that life will go on." Much like women who have delivered babies during times of hardship, the experience of childbirth is a natural one and one that continues with or without a pandemic.

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