Performing the Good Mother

Maternal Identity, Professional Persona and Theatre Practice

In her book, Maternal Thinking: Towards a Politics of Peace, Sara Ruddick argues that a maternal community is essential for the empowerment of mothers. This view is an acknowledgement that motherhood is not a solo performance but in fact requires support and encouragement not just from the private domesticity of one's home and family life, but from the culture at large. And yet the theatre community—both local and global—has been more than reticent to acknowledge motherhood and the way it affects practice on a variety of levels, putting pressure on women to appear as childless in order to maintain their professional status. As women's work in theatre is often regarded as separate and independent from their role as mothers (if indeed it is addressed at all), the equilibrium between their working persona and their maternal identity is often at odds, resulting in considerable stress. At the heart of this anxiety is the issue of balancing work and home life. Using the experience of "Mia," a stagehand, carpenter and technician who has recently become a new mother, as a case study, this paper will investigate the delicate balance between maternal identity and professional persona in relation to theatre practice, focusing on the issues of "passing" as a non-mother in theatre, negotiating new motherhood and breastfeeding with technical production, and the rhetoric of the "Good Mother."

In her book, Maternal Thinking: Towards a Politics of Peace, Sara Ruddick (1989) argues that a maternal community is essential for the empowerment of mothers. This view is an acknowledgement that motherhood is not a solo performance but in fact requires support and encouragement not just from the private domesticity of one's home and family life, but from the culture at large. It presupposes a complex of social structures and relations for women with children among those with whom they live and work, speaking to a way of thinking that is sustained by a sense of belonging. And yet the theatre
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Using the experience of Mia, a stagehand, carpenter and technician who has recently become a new mother, as a case study, this paper will investigate the delicate balance between maternal identity and professional persona in relation to theatre practice, focusing on rhetoric of the "Good Mother," the question of "passing" as a non-mother in theatre, and the difficult tightrope of negotiating new motherhood and breastfeeding with the rather unaccommodating world of technical production.

My purpose is to look at Mia's motherwork and its intersection with her everyday work experiences within the broader context of theatre as an institution. Though her experiences are in no way meant to be read as exhaustive or indicative of all women technicians, they are extremely useful in laying bare theatre's institutional processes, divisions of labour, conceptual practices, discourses, and taxonomies. In short, what Dorothy Smith calls the documentary practices of the institution which, in this case refers to theatre's method of allocating and identifying work processes, many of which are necessary to its functioning but do not necessarily enter its accounting system. Using Smith's theory of the everyday world as problematic, this mode of investigation explores theatre's institutional practices from within the working experience of women as subjects by analyzing their everyday activities, cares, concerns and efforts as active in the social relations of the institution, not as effects of social processes. This type of institutional ethnography employs everyday experience—and the language used to describe it—and affords the feminist researcher a standpoint from which to comprehensively observe and analyze women's work while bypassing institutional discourse and the categories and taxonomies it devises.

The unhappy marriage of motherhood and theatre

For mothers working both in and outside of the theatre, the pervasive and ubiquitous figure of the postmodern übermomm is one of the most toxic ideologies they face. The image of this self-sacrificing superwoman who is calmly and gracefully able to manage both career and family is a myth with which at some point most mothers need to contend. Motherhood within this mythologized and sacred ideal is, as Joan Peters notes, "evoked as a religious calling, a state of being that elevates women above the human condition" (1997: 39). Indeed,
it places the focus of a child’s success from infancy onward almost solely on the mother, viewing her as the linchpin in any future achievements or failures a child might have. This “Mommy Myth,” what Susan J. Douglas and Meredith W. Michaels have coined as the “new momism,” is “the insistence that no woman is truly complete or fulfilled unless she has kids, that women remain the best primary caretakers of children, and that to be a remotely decent mother, a woman has to devote her entire physical, psychological, emotional, and intellectual being, 24/7 to her children” (2004: 4).

For many women theatre practitioners, this all too real pedestal represents a particularly difficult obstacle to overcome, particularly when working conditions call for extended periods of absence from one’s children due to the unusual operating hours of professional theatre. As Diane Eyer has observed:

The Good Mother changes form with the Zeitgeist and is an ideal that is always grossly overstated, not so much for the sake of the children, but rather for the restriction of mothers who must be kept in “their place.” Therefore, mothers are hardly guilty of hurting their children if they do not conform to these hyped-up images of the Good Mother. Yet...these ideals have been socially constructed, ...[and] mothers are now faced with a greater arsenal of scientific studies directed at them than ever before...study after study says that... [a woman’s] very biology has programmed her to care exclusively for her young children. (1996: 68)

As I argue in an article in a recent issue of the Journal for the Association for Research on Mothering, women’s work in theatre is often regarded as a separate, independent identity from their role as mothers, and their relationships with their children often undergo considerable stress (Rusch-Drutz, 2004). At the heart of many working women’s anxiety is the issue of childcare. For most women who assume the combination of work and mothering, concerns often arise in regards to solving this problem so that both parties are reasonably satisfied. But the distinctive nature of the time commitment necessary to theatre-making—such as touring, which requires women to be away from home for long periods at a time; tech week, which necessitates extremely long days with a short turnaround before returning to work the following day; and sporadic bouts of night-time work leading up to and during the run of a production—makes some work practices visible while rendering others imperceptible, leaving children and their mothers frustrated over the murky relationship between these two worlds. What is more, theatre’s documentary practices rarely account for women’s roles as mothers within the institution, forcing them to conceal their motherwork when it “interrupts” their professional labour, adapt male standards of practice, and, in many cases, attempt to pass as non-mothers so as not to draw unwanted and gendered attention to themselves.
Interview analysis: Mia’s story

Let me now provide an example as a case study for this discussion. Mia is a 33-year-old white, heterosexual woman living in downtown Toronto. She has been working as a professional stagehand, carpenter and technician in the Toronto theatre community for the past ten years. Mia generally works on four or five shows a year at various theatres throughout the Greater Toronto Area, with an average three to five week rehearsal period—including tech week—followed by a four to six week run. She is a full member of IATSE, the International Alliance of Theatrical Stage Employees, and her primary responsibilities include constructing sets, wiring the stage for electricity, and hanging and operating lighting. At the time of our interview her daughter was six months old. With the exception of one or two “quickie gigs” (unusually short term contracts of one to two days work for special events), Mia has only taken on one major production since giving birth, an experience she describes in some detail on the pages that follow. Excluding these paid work occasions, Mia rarely leaves her daughter’s side—doing what she calls “the stay-at-home-mom thing because that’s best for the baby right now.” In addition to these short contracts and one fully mounted production, she plans to return to work full time in a few months. Her husband works in the same profession but with the unusual advantage of being a full-time lighting operator and technician with a major Canadian theatre, giving him the ability to take paid parental leave through Employment Insurance and receive a benefit package from his employer. Unlike her husband’s long-term contract with the theatre, Mia’s work, like most artists and theatre practitioners in Canada, is contract based and she is unable to claim benefits of any sort. Prior to starting a family, both she and her husband saved up to accommodate for what they knew would be close to a year’s lack of income on her part. In our interview we discuss, among other things, her transition into new motherhood, its affect on her professional practice, and her feelings about choices she has made with regard to her baby daughter.

Here she talks about her attempts at finding a balance between new motherhood and work:

For one thing I’m very lucky because [my husband] is in the same profession. But I have watched other people’s marriages completely crumble because of it. I’ve also watched other people’s marriages be okay. It’s hard to balance anything while you’re on call, that’s true, but I’d have to say I have a very well-adjusted, happy baby, so I must be doing something right. Which I think is actually a very good marker for whether or not your life is in balance, quite frankly. How do you balance? Well, sometimes you don’t. That’s the truth. There are weeks when you just don’t. That sometimes means not taking a show, or that extra call to stay home with the baby. During tech week for a show it means that you may not be home—or not at home when the kid is up, right? It’s funny because it used to be unreasonable to ask me to be up before ten [in the morning]. If you’re asking
me to work until eleven, twelve, one, two, three o'clock in the morning the night before; then it's just not going to happen. But now she [her daughter] gets up so early and so I've got to get up with her so I'm running on empty. I worked really hard before [I had the baby] so that I'd be able to set aside a little nest egg and take some time off. Because I was breastfeeding I knew that I wouldn't have the time, or that if I did have the time after a little while, I wouldn't have the energy. I know it's not forever, like I'll be back steady in the fall. That'll be a transition for me, finding a full-time babysitter who works nights. I don't want to think about it just yet. I suppose that the older she gets, the less willing I'll be to upset my life. I want to be more involved with family.

Mia's assessment as to what makes for a good mother and a well-balanced family life is a happy and well-adjusted baby. This is certainly a reasonable measurement, but while it is a very good indicator of her child's well being, it does not take her own welfare into account. Her attitude and demeanour seem particularly well-adjusted, given the conflicting demands of her theatre practice and motherwork, but her language indicates that her daughter's happiness is more important than her own, suggesting that as her child gets older, too many theatre contracts will keep her away from home, "upsetting her life." Moreover, it places the bulk of the responsibility for her daughter's happiness in her lap, not her partner's.

Mia sees herself as lucky because her husband is in the same profession and therefore understands the erratic time commitments that are involved in theatrical production, which for her is very important, as she's witnessed (as she indicates here and elsewhere in the interview) a number of marriages break up when one partner does not understand the irregularities involved in this kind of lifestyle. Though she realizes that part and parcel with this existence is an acceptance of the fact that at times it is simply impossible to balance home and work responsibilities, she assumes the primary care of her daughter (even though her husband is both capable and willing to stay at home on paid leave), and talks about her feelings of "guilt" and "confusion" when she decides to take on paid work. Her response in the short time she has been a mother has been to not take too many extra calls (even though they would supplement her "nest egg," what she sees as her financial contribution to the family) during her unofficial—that is to say, unpaid—"maternity leave" of roughly six months. Her challenge, when she returns, will be "finding a full-time babysitter who works nights," a rather unusual childcare arrangement to be sure.

Since having the baby, she has taken on one major show, which left her "miserable" (as she tells me a little later on in the interview) and feeling as though she were "running on empty" because during tech week she was at the theatre until very late at night (or very early in the morning) and would have to return to the house only to be woken up several hours later by her daughter's
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early rising. The erratic hours and lack of sleep (coupled with missing her infant child) were very rough on Mia’s post-partum system, which at four months was still recovering from labour and childbirth. Extended night-time working hours and an inconsistent weekly day schedule while working on the show (she had a two-week period in which to build the set and another to load it into the theatre) interfered with her breastfeeding (which for her daughter was roughly every three to four hours). Unable to pump her breast milk at work and find a suitable pattern for regularly replacing certain feedings with formula, Mia decided to give up breastfeeding much earlier than she had intended. She describes the difficulty in coming to that decision in this section of our interview:

Yeah, I would have liked to continue nursing for the full year or at least until now, but I just couldn’t. It was too much pressure. Yeah, literally it was pressure on my boobs, too. I was walking around so full that it became painful and I was hardly about to excuse myself for twenty minutes to half-an-hour every three to four hours to go pump in a corner somewhere. Oh, excuse me while I plug my electric pump into this extension cord here. You don’t mind if I unplug this drill and whip it out right here, do you?.... Yeah, like I’m going to do that with all these guys around who can’t handle the fact that I’ve got breasts, much less that I’m a mother.... It was bad enough when I was pregnant—people looking at me funny if I even thought about going anywhere near a ladder. Thank G-d I’m small and you couldn’t really tell for the first while, because once it became public knowledge, people treated me so differently. Man, did I get looks. So I was going to be damned if I was still going to feel like that after I had the baby too. So I just stopped putting so much pressure on myself and gave it up. They say it’s so much better for the baby to nurse for the first year for [the prevention of] allergies and stuff but I just couldn’t do it all. One day she can tell her therapist that everything stems back to the fact that she wasn’t breastfed for long enough. Oh well...

In this example, Mia responds to balancing the physical and emotional demands of her child with the realities of her work in the theatre. The specificity of her job as a stage carpenter for this particular production necessitated highly irregular working hours, interfering with her breastfeeding, which, as Rhonda Shaw has noted, is in fact a set of practices, not a single unified act (2004: 124). Moreover, the physical pain associated with ongoing engorgement during long, physically intensive working hours makes it extremely uncomfortable for her to work. As one of only two women on this particular carpentry crew, Mia feels that any further notice of her postnatal body will draw too much unwanted attention. This, coupled with the embarrassment she feels over having to excuse herself to pump her milk for 20 to 30 minutes at a time (an experience she likens elsewhere in the interview to feeling “like a cow”) at least twice in a full eight-
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to ten-hour shift, and the awkwardness of dealing with the mechanics of the pump itself in a carpentry shop, puts her too much at odds with her work environment. As the only other woman on her crew, Mia is more than reticent to single herself out in her workplace by discussing her lactation needs with her employer. As one of very few women in her local who has ever taken any kind of maternity leave (either paid or unpaid), much less lactated on the job, Mia refuses to distinguish her postnatal body, already overly displayed during pregnancy. Mia’s reluctance to discuss the matter with her co-workers speaks to both the gendered nature of theatre and the semiotic of breastfeeding. As Fiona Giles observes, “We think of lactating women as immediately postpartum, still wrapped in the aura of childbirth and laden with the trappings of infancy” (2003: xi). Literally dripping with physical difference, Mia’s maternal body is at odds with her surroundings, contributing to her anxiety, pressuring her to quickly return to her prenatal state in which she was just another worker. Thus her ability to perform well at work is weighed according to a male standard in which the only room provided for the maternal body is on stage, definitely not behind it.

Expressing milk with an electric pump (as opposed to the manual variety) is a loud, cumbersome and, for most, private act that requires a number of preconditions to be met in order to insure its functionality and the health and safety of both mother and child. Electric pumps, it goes without saying, require electricity, which in this example means an outlet (though there are a number of battery-operated models available), and are (as any woman who has ever used one will tell you) notoriously noisy, interfering with the privacy of the act by humming in a loud, monotonous drone. They also require a sanitary environment for their proper use, meaning that the area should be well ventilated and free of dust and dirt—difficult for someone working in a carpentry shop or trying to express milk in the privacy of a bathroom stall, which is where Mia tried to pump before deciding it was too demanding and demeaning. Finally, once the milk has been expressed, it must be refrigerated immediately. Mia responds to this issue by putting the milk in a labelled, generic-looking cooler in the company fridge for fear of both ridicule and someone mistakenly using it for coffee.

Unable to comfortably adapt the demands of her postnatal body to the confines of theatrical production in a carpentry shop, she decides to stop putting so much pressure on herself and discontinue her breastfeeding—what Giles calls “the leakiness of motherhood” (2004: 41)—a course of action which leaves her feeling decidedly guilty. Naomi Bromberg Bar-Yam’s research on nursing mothers indicates that both the length of maternity leave and the number of working hours upon return to the workplace have a direct bearing on successful lactation (2004: 133). She points to a number of key factors that are essential in helping employed women to continue breastfeeding effectively, including the length of the initial maternity leave, the hours women work upon return to the labour force, prenatal and post partum
education and support, and the proximity of the child to the mother's workplace (128). Bar-Yam notes that the existence of "workplace lactation support" can also aid employees by indicating that the workplace "understands the importance of the roles as mothers and that they, as people, cannot be separated into 'workers' and 'mothers,'" whereas "nursing mothers with no lactation support face the opposite situation. For them, breastfeeding in the workplace is their indication to their employers that they are both 'workers' and 'mothers' and that these roles cannot be separated" (131). Unable to separate her working life from her mothering, Mia does not even disclose to her employer that she is breastfeeding, much less having difficulty maintaining her nursing schedule, echoing what Shaw has characterized as the invisibility of lactation in contemporary western cultures (2004: 125), and precipitating her decision to discontinue. With no lactation support from her employer, feelings of discomfort about her postnatal body as one of only two woman on her crew, lack of time to properly express her milk, and in need of a clean and well ventilated space in which to continue pumping her breasts, Mia "gives up," convinced she should stop putting so much "pressure" on herself, as it is impossible to successfully accommodate both her professional and familial demands, though guilt-ridden over not providing the best care for her for her daughter's optimum development.

Breastfeeding is advocated by health officials as the best nutritional choice for baby, nature's perfect food, as indicated in the popular mantra "Breast is Best." Even packaging on prepared formula encourages it. Though there are many circumstances which prevent breastfeeding as a natural course of action following childbirth, most mothers who give birth to a healthy baby under routine circumstances in an Ontario hospital will be encouraged to breastfeed almost immediately after labour. Toronto Public Health Publications distribute a pamphlet that is given to mothers in greater Toronto area hospitals entitled "Breastfeeding Your Baby" (they do not put out a pamphlet on formula feeding) upon their discharge. Moreover, the province of Ontario, through OHIP, routinely sends a follow-up lactation consultant to a nursing mother's home (with the mother's permission) within six weeks of delivery. Mia's guilt over her decision to stop nursing speaks to the rhetoric of the "Good Mother," as it is manifest in the municipal, provincial and national healthcare systems, which equate a mother's decision to breastfeed as providing the best for her child. Though Mia realizes that the sporadic and intensive binge nature of work in her area of theatre practice makes it at times difficult to maintain a balance between work and family, her decision to discontinue breastfeeding after four months creates feelings of guilt foisted on her both by the healthcare industry and her own pre-existing feelings of physical difference brought on while working during her pregnancy, a situation which made her feel "bad enough." This case confirms with Giles observation that "the details of how we fit breastfeeding into our lives, or decide that it doesn't fit, are not well known" (Giles, 2003: xii). Although she stands by her choice, her wry comment that her
daughter will one day need therapy as a result of her decision points to her naturalizing of “Good Mother” ideology. Moreover, Mia’s account of her experience returning to work in the professional theatre speaks to her concealment of her motherwork and her inability to integrate it with her paid labour by blurring the lines between the two, and pointing to the construction of the maternal subject in theatre and its invisibility within theatre’s accounting procedures.

The good, the bad and the invisible mother in theatre practice

Andrea O’Reilly has observed that “the discourses of motherhood script all women’s lives whether they are biological mothers or not” (1999: 12). And yet the Toronto theatre community has been relatively silent about motherhood and the ways in which it directly affects both women’s lives and the production of theatre on a variety of levels. There are, as I have noted elsewhere, reasons for the absence of parenting discourse in the theatre community, among them the exclusion of mothering as a topic for dramatic and performative work; its omission as an issue worthy of consideration among theatre artists in general (and the ways in which it has been by-passed as a topic for feminist theatre practitioners in particular); and its lack of address at the institutional level (Rusch-Drutz, 2004: 93). As Elaine Aston, one of the few feminist dramatic theorists to document work on motherhood and theatre practice, observes, “The pressure on women to ‘appear’ to be without children is particularly acute—especially for women working in professional theatre,” further noting that as a result of this anxiety, many women feel the need to “pass” as non-mothers (1999: 178-179). Jill Greenhalgh, artistic director of the Magdalena Project, an International Network of Women in Contemporary Theatre, concurs. Writing in the Magdalena newsletter on the theme of motherhood and theatre, she refers to the working mother’s “legacy of guilt,” suggesting that, “it almost feels as though we are being treacherous to our work by even giving space to speak about children within an artistic context” (1995: 1). Eyer and others have called this predicament a “maternal wall,” one that either “keeps mothers from having access to work they have already been hired to perform” or “keeps them out of the workplace altogether,” since pregnant women and new mothers often work themselves harder to maintain the occupational standard in order to avoid being perceived as inadequate, lest they risk “punishment on the job” (1996: 29). She cites the growing trend of women like Mia who shorten their maternity leave or decide not to take it at all, and lie about family responsibilities and medical appointments “for fear their standing at work would be jeopardized” (29).

While Mia’s experience is unique and hardly suggestive of all young mothers’ experiences in Toronto theatre, it speaks to the social relations of their working conditions in immediate and important ways. Mia’s feeling that she must behave according to a male standard is indicative of the fact that she is one
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of only a handful of women in her local of IATSE, placing her gender at odds with the institutional standard. Her return to work stems from economic need, as IATSE does not have any form of maternity or parental leave for its workers (this type of leave is administered by individual theatres based on the nature and length of one’s contract). Moreover, the fact that according to the federal government Mia is self-employed and works on a contract-to-contract basis, disqualifies her for maternity benefits administered via Human Resources and Development Canada under the Employment Insurance Act.

Additionally, Mia’s inability to negotiate her breastfeeding due to the nature of her contingent work hours and unsanitary work space speaks to the fact that theatre sees motherhood as a privatized activity that is unrelated to its day-to-day functioning. To her mind, these factors force her to either live up to the untenable normative prescription of the Good Mother or fail miserably. Because it has been so difficult to be one of only a few women in her local, it is easier for Mia to cloak her motherwork and become an invisible mother in what remains largely an “old boy’s” network.

But Mia’s is only one story among many. The lack of discourse on mothering and theatre has put the art form—on the cutting edge of so many critical ideas about women and representation—in the virtual dark ages with regard to issues of motherwork. Though theatrical theory has become quite central to areas of women’s and cultural studies (witness the appropriation of the “performative” in so many other disciplines), theatre has yet to address the performative of mothering as it intersects with professional practice. With the prevailing notion in Toronto theatre that mothering is a woman’s personal predicament, divorced from the institution of theatre proper, change is unlikely to occur at as rapid a rate as in other areas of the workforce. For this reason, women’s experiences of motherhood in theatre in all their complexity and diversity need to be addressed at the institutional level. And though the road to a maternal community in theatre has been strewn with obstacles, change in institutional practice is worth fighting for as it is essential for recognition of motherwork in the structures of theatre practice.

1Mia’s name has been changed in order to maintain her anonymity.

2Mia’s initial interview was obtained as part of research for my doctoral dissertation, Interviewing the Mothers of Invention: A Qualitative Analysis of Women Theatre Practitioners in Toronto, which set out to look at theatre’s function as a workplace and the ways in which a specific group of 25 women operate within this institutional environment. Mia was one of 16 mothers interviewed.

3In “Stage Mothers: A Qualitative Analysis of Women’s Work Experiences as Mothers in Toronto Theatre,” I argue that the social conditions of motherhood, childcare and the emotional labour of motherwork interact with theatre as an institution in immediate and central ways, though it is a topic that has been
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all but absent from feminist theatrical discourse and/or research on the working conditions for women in theatre (Rusch-Drutz, 2004).

4Diana Kalnins and Joanne Saab's *The Hospital for Sick Children: Better Baby Food* maintains that, “Breast feeding is recommended for infants. Formula feeding is an adequate nutritional alternative, but does not provide the many immunological benefits of breast feeding” (9). In a discussion of “Why breast is best,” Sears and Sears, the leading attachment parenting advocates in North America insist, that "Breastfeeding does good things for baby. Breastfeeding does good things for mother... Breastfeeding matters!” (118).

5See Enfalac, Evenflow, and Similac, among other brands.

References


