



Caregiving and Female Embodiment:
Scrutinizing (Professional) Female Bodies in Media,
Academe, and the Neighborhood Bar
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Our essay analyzes contemporary discourses of gender, mothering, and caregiving as they intersect with embodiment. We combine an interview featuring the life of one employed mother with academic research, popular media commentary, and our journaling and everyday conversations to develop three “writing-stories” (Richardson, 2000). Our “writing-stories” explore the commodification of the baby “bump,” the facades of embodied caregiving, and embodied caregiving processes in professional contexts. We problematize discourses of caregiving, surface underlying assumptions, and advance alternative conceptualizations that (re)value embodied caregiving. We encourage others to expand and continue our writing-stories.

Key Words: professional, embodiment, motherhood, writing stories, popular narratives of gender, caregiving

We rushed into the local bar, anxious to have a celebratory glass of wine for the completion of Suzy’s dissertation. We ordered our favorite red zinfandel, the “7 Deadly Zins,” and slid into a booth. As we let out a collective sigh of relief, Suzy said to Patrice,

Can you hear that conversation next to us? Those two women over there are talking about their post-baby bodies. One just commented that she wants to know what Tori Spelling did to lose all of her weight so quickly after the birth of her second child. I don’t know exactly what Tori did but it seems unhealthy!

Patrice slyly shifted in the booth to make her eavesdropping more convenient. She replied,

Just wait until those two realize that they don’t have as much control as they’d like over their bodies. In a couple of cases I was in my regular jeans right after giving birth but for my other pregnancies, it took longer and that was just fine. We’ll have to see what happens to you, Suzy!

Over the last few years, we have been engaged in a series of writing stories on caregiving and mothering in academe, media reports, and managerial life. We continuously share and analyze information on these topics, such as a recent study that found that female scientists do more housework than men (Laster, 2009). We ponder the debate around the U. S. military's pregnancy punishment proposal in which individual soldiers could face punishment for conception (Ryan, 2009). We note the latest media hype on the octo-mom, the mother of octuplets, Nadya Sulmen, who proclaimed her long-term desire to produce and raise a large number of children and the accompanying commentary by family members, friends, a former boyfriend, and complete strangers on her mental, physical, and emotional stability (Associated Press, 2009). We think of how paparazzi relentlessly hound the post-baby bodies of celebrities like Tori Spelling, Brittany Spear's little sister Jamie Lynn, Ashlee Simpson, and Bristol Palin. Moreover, cases still appear in the *Harvard Business Review* about whether a woman can be a "topflight executive and a good mother" with all the accompanying mental and physical demands of each (Esarey & Haslberger, 2007, p. 60). We realize that there are many aspects to each woman's case but note that seemingly old (to us) arguments resurface and still focus primarily on individual rather than systemic issues. Even *HBR Case Commentary* (2007; see also Hattery, 2001) analysts, such as Rebecca Matthias (co-founder, president, and COO of Mothers Work) commented that executives never ask themselves how to shift the "burden" from the woman to combined parental efforts. It is as if the female embodiment of caregiving is taken-for-granted, available for public scrutiny, and the sole responsibility of individual women.

In discussions of caregiving, communication scholars have probed its enactment and nature in contemporary society (e.g., Wood, 1994). Women (and men) sometimes need to hide or justify caregiving to offset societal notions that they cannot be both caregiver and ideal worker (Buzzanell

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& Ellingson, 2005; Lair, Sullivan, & Cheney, 2005; Trethewey, 2000b; Trethewey, Scott, & LeGreco, 2006). Gendered and entrepreneurial discourses pervade the professional world, casting women, mothers, and their *bodies* as unfit and in need of repair (Trethewey et al., 2006). However, communication studies grounded in explorations of the body are infrequent, sustaining "the mind/body dualism in the academy" that ignores the "life-and-blood implications for the embodied experiences of people at work" and in other life realms (Trethewey et al., 2006, p. 135). Moreover, we acknowledge that we cannot take embodied experiences for granted or generalize across all individuals because people are shaped by their own biographies as well as "wider cultural frameworks and expectations" (Morgan, Brandth, & Kvande, 2005, p. 5). As we continue to write stories about caregiving and mothering, we add an additional layer of analysis that explores the body and caregiving. We employ and extend Richardson's (2000) writing-stories to consider

caregiving, particularly motherhood, as embodied. However, to ground our discussion theoretically, we describe our conceptual framework and then present our analysis.

A Conceptual Framework of Embodiment

Our conceptual framework is informed by sociological and feminist scholarship on the body. First, Merleau-Ponty's (1962, 1964, 1965) concept of *body subject* illuminates our analysis of embodied experience because it disrupts a mind-body bifurcation, explaining that human perception is inherently embodied. We add Shilling's (2003, 2008) structuration approach to the body that suggests embodied subjects both shape the social environment in which they are embedded and are shaped by their social locations (see also Giddens, 1991). We draw on Goffman's (1963, 1969) work on embodiment and space in which embodied subjects are both practical, in terms of movements in space (in)consistent with public expectation, and moral, in terms of human judgments about the (un)acceptability and (in)appropriateness of movements (see also Doucet, 2009). Goffman's (1963, 1969) work highlights the importance of body maintenance in terms of social roles and interactions because the body "mediates the relationship between an individual's self-identity and their social-identity" (Shilling, 2003, p. 66).

Our work also is informed by feminist understandings of embodiment. Indeed, feminists have long challenged a mind-body distinction and have come to view the body "as both a legitimate source of knowledge and a product of culture that is as open to analysis as any other culturally inscribed phenomenon" (Fonow & Cook, 2005, p. 2012). By incorporating feminism into notions of embodied caregiving, we can problematize the privileging of masculinity in organizational and professional settings as well as detrimental feminine stereotypes that continue to value women for their physical appearance, associate women exclusively with caregiving, and preclude the advancement of gender equitable caregiving processes and practices (Ashcraft & Mumby, 2006; Black, 2006; Buzzanell, 2000, 2001; Martin, 1990; Mumby & Putnam, 1992; Trethewey et al., 2006).

We combine both phenomenological explorations of the body as lived experience (Marshall, 1999) with cultural and discursive representations and interpretations of the body as text (Butler, 1990, 1999). Marshall (1999) argues that in combining both phenomenological and interpretive understandings of the body, we recognize the "external (biological) body and internal (social) self as distinct at a given moment and from a given perspective, but seamlessly united overall" (p. 70). Hird (2007) explains that some feminists have been hesitant to study caregiving, particularly pregnancy and childbirth, as embodied practices because these processes have been linked with biological determinism. However Bailey (2001) suggests that "pregnancy, childbirth, and the post-natal body are interesting not just in offering surface change but also in affecting internal experiences of the body" (p. 110). Both the corporeal sense of caregiving and the embodied subjectivity of caregiving are interrelated because the material body is inseparable from cultural discourses that constitute the body (Butler,

1990; Grosz, 1994). As such, the boundary between embodied representation and corporeality is blurred (Bronfen, 2000).

Embodied representations and corporeal experiences can inform research in and about professional contexts. Workplaces are supposedly disembodied so that considerations of the body are not emphasized by workers (an admittedly masculine construction) (Kerfoot, 2000; Morgan et al., 2000; Trethewey et al., 2006). However, the body has worked as a metaphor of organization in which men's bodies are constructed as rational, technical, firm, and self-contained. In contrast, women's bodies are emotional, uncontrollable, soft, and fluid (Linstead, 2000). The body and embodied experience are relevant to professional and organizational contexts as dress and physical appearance of the body become codes of (in)appropriate professional behaviors.

Embodiment also is a process that is "shaped by the expectations of others such as clients, members of the general public and customers, and increasingly, by representations in the media" (Morgan et al., 2005, p. 4). Indeed, embodiment captures the visible and tangible nature of human behavior (Witz, Warhurst, & Nickson, 2003). In bringing together sociological, feminist, and organizational understandings of the body and combining both phenomenological and interpretive analyses throughout this paper, we see the body as a communicative tool that can transform social structures and processes and offer individuals a means of resistance.

Writing-Stories

We use writing-stories to weave together several data forms and surface crystallized insights about embodied caregiving in everyday life. Although writing-stories typically are brief episodes or stories that describe the contexts, methodologies, and socio-political circumstances in which writing is produced and research is conducted (Richardson, 2000; Townsley, 2002), we use them in a slightly different way. We crystallize our writing-stories. In crystallization,

The scholar draws freely on his or her productions from literary, artistic, and scientific genres, often breaking the boundaries of each of those as well. In these productions, the scholar might have different "takes" on the same topic, what I think of as a postmodernist deconstruction of triangulation. . . . in postmodernist mixed-genre texts, we do not triangulate, we crystallize (Richardson, 2000, p. 934; see also Ellingson, 2008)

In this spirit of mixed genres, we include multiple forms of data: our analysis of an interview with an employed mother; our discussions about media reports and scholarly materials; our ongoing sensemaking about embodied caregiving and motherhood as captured by our email memoing, personal journaling, routine conversations, and observations; and our reflections on our participation in informal get-togethers where talk featured caregiving and mothering. Our writing serves as data collection and analysis (Richardson & St. Pierre, 2005). Thus, our writing-stories are embedded in the contemporary social milieu and in our autoethnographic productions of knowledge.

Importantly, these writing-stories allow us to deconstruct dominant discourses to show how gender is produced and how the body is maintained (Butler, 1990).

We begin by examining episodes from a lengthy interview with "Julie," a white, middle-class, college-educated, married mother of two "live births" (and two "very early term miscarriages") who lives in a Midwestern community in the United States. She had her children when 27 and 29 years old and worked as a circulation director for a newspaper at the time of her second child's birth (where she continues to work). The interview itself forms the backdrop for our own discussions of our personal choices and experiences and those of others. Our writing-stories help us explore the political ramifications of these choices and experiences and present our thinking about embodied caregiving and mothering at this particular moment in time.

We acknowledge that our analyses are influenced by our own social positions as white, middle-class, heterosexual female academicians interested in possibilities for feminist transformation. However, we differ in relevant ways. Suzy is an assistant professor who is part of a committed relationship in which conversations about children have begun to increase in frequency and intensity. In addition, she has friends who recently have become mothers. Patrice has several biological children of whom the youngest is 15-years-old. She has friends who are having grand/children and other friends who have elected not to have children. Thus, we write from academic and personal spaces as we attempt to understand discursive and embodied constructions of caregiving and as we explore methods of everyday contradiction and resistance to detrimental practices associated with gendered caregiving.

Our writing-stories explain how our individual life texts are constructed as well as how we surface and problematize caregiving and mothering. To engage in surfacing-problematizing processes, we work through three analytic levels: (a) surfacing and deriving assumptions; (b) evaluating the values of extant approaches; and (c) proposing alternative conceptual models of understanding caregiving as embodied (MacDermid, Roy, Zvonkovic, 2005). Following surfacing through writing-stories and derivation of assumptions about caregiving and the body, we problematize embodied caregiving and mothering. In this second phase of surfacing-problematizing processes, we take a value stance on caregiving equity and propose some alternative ways of revisiting caregiving and mothering as embodied to advance theory in these areas. We delve into seemingly oppositional processes that hinder women (and men) from broadening caregiving experiences. Implicit in our writing stories and critique are mind/body, male/female, and public/private tensions, such as rational/emotion, control/resistance, and work/home. In the third phase, we use "tensions" to highlight both ongoing reconstructions and potential for innovative performances that enable stability and change in our social world. Thus, we are guided by questions such as: What are some of the different meanings of embodiment? How do these meanings vary depending on point of view? What is embodied caregiving? How can current feminist theorizing account for embodied caregiving?

We organize our three writing stories around different aspects of embodied caregiving: (a) embodied experiences of commodification from “the bump” to “babies as the new accessory”; (b) embodied evidences of everyday caregiving airbrushed out of existence; and (c) caregiving as embodied pleasure and burden in professional spaces. These stories have fluid boundaries that invite overlap and intersections. We note that these are not the only ways in which to discuss embodied caregiving and we admit the focus on pregnancy and mothering, given that these aspects are brought to the fore in Julie’s interview and are prevalent throughout popular media and our own everyday conversations.

Embodied Experiences of Commodification from “The Bump” to “Babies as the New Accessory”

Julie framed pregnancy toward the beginning of her interview as a wonderful time in her life because her whole body seemed to celebrate and glow with anticipation of her child’s birth (“I was very healthy and everything, I just figured pregnancy is great, I mean my skin was beautiful, my hair was growing, my nails, all those things”). Later, her expression of pregnancy as an embodied experience captures the other side of new motherhood in which pregnancy and caring for an infant changes the shape and feel of her own body. Julie acts as her own mirror when commenting on her new body:

Pregnancy is just awful on a woman’s body [LONG PAUSE], it’s really hard to be post-partum . . . nothing fits you and you are tired and you’re up in the middle of the night with the baby and that’s the hardest thing I think of . . . I work out, I eat healthy, look I’ve got rice cakes everywhere you look [LAUGHTER], and I had no idea of what was going to happen ‘specially after nursing . . . there’s no way to really be prepared until you’ve done it, so it was kind of hard . . . depressing a little, like, not like you should put this in the survey but where are my perky little boobs?—They’re gone! [LAUGHTER]

Julie’s “perky little boobs” are gone as are her firm body, her energy after sleep-deprived nights, and her ability to fit into her professional clothes. Julie also comments on the toll that nursing took on her body:

You become this udder [LAUGHTER], and so everything else is like uh, I mean you’re leaky, you’re putting pads in your bra because the breast milk and it leaks, it’s just not, huh, it’s just not a pretty time in a woman’s life.

In this passage, Julie describes her own body as an udder, a female mammalian body part and a means to an end. Julie becomes, in essence, a milk-producing animal. New mothers, according to Avishai (2007), seem to view breast-feeding as a project for which they had to prepare, set goals, and acknowledge failures. In doing so, they “experienced breast-feeding primarily as a production—both in the sense that it is a laborious process, involving the making of goods, and in the sense that it involves constant monitoring of the total output” (p. 149). These conceptions of breastfeeding indicate how embodied processes can objectify and commodify aspects of caregiving. Julie laments that “nobody

prepared” her for any of these changes and she finds them “depressing” but is not sure that she wants to share these thoughts (“not like you should put this in the survey”). She couples these laments with her everyday experiences—her repeated efforts to rouse her husband from sleep to help her (“I got to yell at him because I was running around the house like crazy and he’s sound asleep, and I was waking him up and he wouldn’t get up”), her frantic attempts to rush around the house getting ready for her job while also caring for an infant, her ongoing challenges to squeeze into more tailored clothing for her place of employment, and her dismay at her reflection. These hectic moments in her life come to a head when she questions where her former embodied self has gone (“where are my perky little boobs”). Shilling (2008) comments that “Bodily change . . . happens frequently in circumstances over which individuals have little control” (p. 1), a sentiment with which Julie might agree as she reacts to changes.

From Julie’s account, we note that it seems that she perceived little control over her post-pregnancy body. When we have talked about these passages, we acknowledged that Julie will not find her answers in popular media. Julie’s storied attempts at managing her post-pregnancy body do not resemble media representations of maternal caregiving. Indeed, celebrity bumps are the “new sexy” that allow us to “see pregnancy as the ultimate form of womanly fulfillment without having to think of motherhood” (McClure, 2006, p. 20). Tabloids feature headlines about changes in famous women’s bodies speculating on possible “bumps”—Is Angelina Jolie pregnant again?—or commenting on the health of the woman and fetus given the woman’s past behavior (e.g., Nicole Richie’s eating disorders).

The fascination with and trivialization of human life invoked by use of “the bump” may recreate U.S. society’s ambivalence about mothering and caregiving. The “bump” is chronicled in tabloid pages as is a woman’s rapid weight loss and return to her perfect size “0.” Post-partum experiences are unnoted unless considered deviant (re: Brooke Shields, Andrea Yates). Upon birth, the “bump” is transformed into photo opts (re: Suri, the daughter of Tom Cruise and Katie Holmes) and the “new accessory” as famous women are pictured carrying their birth offspring or children adopted from developing countries (re: Meg Ryan, Angelina Jolie, Madonna).

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The baby bump as an accessory draws attention to the ways in which pregnancy has been commodified. This understanding of the commodified pregnant body extends research that positions the pregnant body as both private *and* public (e.g., Chase & Rogers, 2001; Kukla, 2005). We notice that in these media examples, the pregnant body is public but also commodified. In specific, the very real aspects of maternal

caregiving are ignored as the focus shifts to the "bump" and post-pregnancy bodies. This commodification relates to the very real pressure individuals face in staging acceptable public performances and preventing embarrassment (Goffman, 1969). The commodified bump becomes an acceptable representation and performance accessory of motherhood. Indeed, "the achievement of social and economic success hinges crucially on the presentation of an acceptable self-image" (Shilling, 2003, p. 81).

However, ordinary women seem to reject the notion of the commodified mothering body. Women like Julie describe very different bodily and childrearing experiences from those of media stars. For ordinary women, the "new accessory" is not a picture-perfect bump and socially-correct infant. Instead, our accessories are more along the lines of infants' vomit covering the only clean blouse suitable for business meetings. Our accessories are the seemingly endless "essentials" to infant caregiving stuffed into an oversized and unmanageable baby bag. We often do not have time to be concerned with appropriate presentations and self-management.

Patrice: Babies as accessories are so funny. For me, the baby was almost an afterthought to all the other stuff that got carted along. I had four kids aged four and under. To get out of the house, I had three car seats lined up in the back seat of the Volvo station wagon and one seat in the front for Brendan, the oldest. To walk anywhere, I had Brendan straddle the area between the twin seats facing each other (that held Sheridan and Ashlee) and I kept Lisette in a snuggly pouch right next to my chest. Stuffed in stroller pockets and around the twins were pacifiers, extra diapers, extra pants, bottles, powder formula, baby wipes, apple juice, and all sorts of other things. It took forever to go anywhere and the babies were the least of the accessories. Once everything was packed up, someone would projectile vomit all over me and everything else and we'd begin the preparation process again . . . I never thought I'd own dry-clean only clothes again or smell like anything other than vomit. Babies are just so cute at a distance. You never really put it all together until you are struggling to get out the door with all those baby things!

For Patrice, one part of the embodiment of caregiving became the challenging processes of gathering, carrying, and pushing, or the very real physical labor of care. Both Patrice and Julie comment that they were unprepared for all of the changes in their lives. While Julie is not sure that she wants some of her responses to go into the interviewer's findings, her generosity in sharing these details prompted us to (re)consider aspects of our lives. As Suzy journaled and shared with Patrice, "while having a baby would be stressful and wonderful and crazy, I could handle it. Watching my friends go through this makes the idea of mothering and the accompanying bodily changes more real, more accessible to me."

It is the realities behind the "bump" and the rearing of real children (rather than the fashionable "accessories") that we appreciate in Julie's stories and in our own demystification of mothering. It is the reality that combats the commodification of the "bump." Julie's story and our own writing-stories reveal the power of discourses

that share pregnancy and mothering experiences. Whereas mothering advice tells mothers *how* to mother, it is through these stories of uncertainty, surprise, irony, and contradiction that other mothers may realize they *can* mother.

This tension—between embodied media representations and ordinary embodied realities—offers an opportunity of resistance. As we tell, write, and share our stories of embodied caregiving, we counteract the commodification of the bump through everyday talk, experience, and understanding. Media attention focuses on the bump and then the baby and promotes an illusion of control; this focus masks the realities and the bodily changes in which we often have little to no control. Although we acknowledge the tensions between the role of media in sustaining oppressive gender ideologies and the power of individual consumers to resist these messages (Dow, 2006), we view the sharing of realities as a potential means to counteract gender oppressive media representations.

Embodied Evidences of Everyday Caregiving Airbrushed Out of Existence

Patrice reminded Suzy, “Get your bathing suit out and come over to my house for our next meeting, poolside!” “That reminds me,” Suzy replied, “my best friend and I were at the mall the other day, looking for summer bathing suits. She gave birth to twins five years ago, but no matter how much she diets and works out, she complains that her belly will never be the same.”

Patrice responded:

Yup, her body may never be the same. But I still miss the feelings of having a life inside of me, and I actually enjoy the rounded belly—now a little too rounded!—that reminds me of carrying my babies. I loved my body at those times.

Not so with Julie! She explains that men “are so in love when you are pregnant, it’s just disgusting, oh you look so beautiful, you’re like ‘okay, I’m fat, think what you want.’” Indeed, for many mothers, following the birth of the baby, the goal is getting back to a pre-baby body as quickly as possible. Julie adds:

I felt awful about myself after the first pregnancy, even though I wasn’t very heavy and I didn’t gain, I only gained 32 pounds and within after 10 days of having the baby I only had about 8 pounds left to lose to be back to my regular weight and after I got the go ahead at 6 weeks to ah, to do some regular physical activity didn’t have any problems.

Unprompted, Julie explains that she did not gain that much weight and was ready to get back into her physical workout routine with her doctor’s approval. In fact, later in the interview, she brags about her quick physical recovery following the birth of her second child:

My first pregnancy I had a harder time, it took me 5 weeks just to be able to walk, but my second one was so much better. The baby was smaller and everything was better medically that I was back, I mean, my doctor almost strangled me when I told him I was playing softball after 4 weeks.

The interviewer adds, "Everyone was really impressed that you were there, too."

In contrast to earlier commentary in which Julie felt she had little control over the loss of her "perky boobs," here Julie explains aspects of her body over which she did feel she had control. This distinction adds a more complex dimension to caregiving, indicating that some bodily changes are more negotiable than others. Still, we wonder why "everyone" is impressed when women push themselves to reenter their pre-baby work routines and other activities sooner than advised or expected. Julie herself seems to wear her post-baby weight-loss as a badge of honor. Why do we find rapid return to pre-pregnancy weight so appealing and fascinating? We wonder why is there pressure to hide the embodied aspects of post-pregnancy?

We return to media representations of the body. Although popular media lay bare pregnant bellies on magazine covers (e.g., Demi Moore on the cover of *Vanity Fair*; Elizabeth Hasselback on the cover of *Pregnancy*), post-baby celebrity bodies are routinely scrutinized by paparazzi. The latest trends include celebrity websites with titles like "Bodywatch" where avid readers can get the most up-to-date information about post-baby bodies. For example, recent headlines exclaim that Rebecca Romijn lost 60 lbs. after the birth of her twins without exercising (Bodywatch, 2009). And Tori Spelling laments the pressure to lose her baby weight following the very public outcry regarding her dramatic weight-loss (*US Magazine*, 2009). There is a perception of control over post-pregnancy bodies that is perpetuated by media.

As popular media continue to airbrush wrinkles, stretch marks, and blemishes out of existence on the pages of magazines, so do ordinary women (and men) engage in airbrushing the evidences of everyday caregiving from their bodies.¹ Many new mothers elect surgery to hide the traces of pregnancy and childbirth on their bodies. Instead of working out to lose excess postpartum weight, some women get tummy tucks to mask the effects of pregnancy on their bodies (D'Enbeau & Buzzanell, 2009). The American Society for Aesthetic Plastic Surgery (2008) reported that liposuction and breast augmentation were the top surgical procedures in 2007, an increase in 9% from the previous year. These statistics relate to the view of the body as a reflection on self-maintenance, control, and production; as technologies have increased the malleability of and ability to control the body, the body has become destabilized (McDowell, 2009). However, although cosmetic surgery is similar to other body management strategies in terms of control, "its interpretation as a symbol of women's internalized oppression, self-loathing and/or vanity differentiates it from other beauty practices and, ultimately, requires women who have had their bodies surgically altered to narrate their actions in a way that normalizes them" (Gimlin, 2007). In effect, some techniques to mask caregiving require more justification than others based on gendered norms and expectations. For instance, losing weight naturally through diet and exercise are viewed more favorably than elective surgical procedures.

What is more, this popular media emphasis on the changing nature of post-baby bodies appears to resemble ordinary conversations in which anyone can claim the right to make commentary.

Suzy: I recall a few students in my class last year who were talking about how big one of their TAs looked when she was pregnant. The students were slightly horrified and questioned whether the TA would ever be able to lose the weight. I gently let them know that they were being obnoxious. But I was amazed at how comfortable they felt making commentary about my friend's pregnant body and how easily they speculated about what her post-baby body might look like.

Suzy's commentary about her students' remarks is, in part, a reaction to the depersonalization of her friend who is reduced to a mere body on which anyone can ruminate. Her friend and others in similar circumstances are, as Bailey (2001) suggests, "reduced to their biology ... [in ways that] operate as a form of social control" (p. 110). However, Bailey also notes that "bodily change is a resource on which women can draw in negotiating their social positioning" (p. 110). Thus bodily change can work as both control and resistance. Public commentary may induce pressure on women to self-regulate and discipline their bodies. In a recent *New York Times* interview, psychotherapist Susie Orbach explains, "What I am seeing is franticness about having to get a body. I wish we could treat our bodies as the place we live from, rather than regard it as a place to be worked on, as though it were a disagreeable old kitchen in need of renovation and update" (Solomon, 2009). We, too, wonder why we wouldn't want caregiving to show? What do we gain with these constant renovations that cover the foundations of our bodies?

Suzy: Is there something to be ashamed of when it comes to caregiving and our bodies? In an awards show interview, Jessica Alba looked amazing in this sleek dress but then readily admitted that she had a tight body suit underneath her gown to hide her post-pregnancy curves. Every entertainment show talks about how celebrities immediately lose their pregnancy weight—like it's a contest. I remember when Jamie Lynn Spears gave birth at 16 years. Entertainment shows were applauding her for losing her weight so quickly. To me, it sounded like they were saying that a teen pregnancy is the best way to lose baby weight since her youthful body bounced right back!

We ask: Where does the evidence of caregiving show on these bodies? Why are we so anxious to cover up our pasts, especially our maternal pasts? We see a connection between controlling and shaping our post-pregnancy bodies and a larger pressure to remove caregiving and carework evidences.

Patrice: I did a talk a few years ago at an OSCLG conference. You might have been there. I was talking about my paternal grandmother. She was Irish with white skin, red hair turned snowy white, and blue eyes. I remember looking at her face and seeing wrinkles deeply etched in that skin colored like Ivory soap.

They intrigued me. I guess people now would be appalled that someone could have such wrinkles. They'd use botox to soften them and slather their faces with creams day and night to take away the effects of aging. But I thought that her wrinkles were beautiful. I wondered which line around her eyes signified her different children. She had 10 children and 7 lived to adulthood. Which one was my dad—her joy when she saw him walking up the hill to their house in Carnegie, PA, after she received letters sent by the government saying that he was missing in action and feared dead. Which one was my aunt Grace who died right before her high school prom and graduation? Which signified the smiles that she shared with my grandfather with whom she walked every day holding hands until they died in their 80s? Those wrinkles are like my belly—they remind us of lives born unto us, and of lives lived fully.²

We are left wondering how we talk about the caring of others when we try to deny the maturing of our life experiences. Perhaps we need to change the gaze to value caregiving etched onto our bodies. To combat the assumed "male" and "masculine" gaze that scrutinizes female bodies (Beetles & Harris, 2005; Budge, 1989), why not invite a gaze that appreciates wrinkles and bellies as the markings of a life lived fully, as evidences of embodied caregiving. Indeed, masking the evidences of caregiving highlights the potential problems of women entering the public sphere *as women*, "with all the attendant difficulties of asserting equality and difference simultaneously and of challenging reigning public norms about women's proper place" (Hausman, 2007, p. 483). Why can't we leave women's bodies alone?³

Patrice: And then I think of how my kids have cared and still care for me. My son now visits me in my office to bring me some chili he made (he likes to cook at his own place) and to give me a kiss on the head if I'm working at my desktop computer. I recall when he and his older sisters were younger and I was single-parenting them. I'd fall asleep and I'd feel them remove my glasses, tuck a blanket around me, and whisper that the house was locked up. The exhaustion of caregiving would catch up with me. But the joys of knowing that they harbored the capacity of deep caregiving of others gave me such peace and joy. The marks left on my body and the exhaustion of providing care remind me that care is embodied. Tasting my son's chili and feeling his kiss on my head make it all worth the bone weariness and constant self-questioning about whether my mothering was good enough.

As we reflect on embodied caregiving, including what we see as a persistent removal of caregiving evidences, we think about what is lost when we ignore the embodied aspects of care. Removing the marks of caregiving works to discipline and control our bodies, transforming subjectivities to produce dominant versions of ideal selves (Foucault, 1977, 1978). In some ways, it seems as if popular commentary and media enact a form of surveillance that reigns in individual bodies and encourages conformity and a disembodied sense of self by emphasizing extreme post-pregnancy weight-loss regimes. At the same time, individual mothers often contribute to this emphasis on masking the effects of caregiving on our bodies. In this way, we contribute to the discourses

and social milieu that demand airbrushing evidences of caregiving. By not embracing our bodies as we are, we reinforce and perpetuate dominant discourses that advocate youth, firmness, and containment—features typically constructed as masculine.

Caregiving as Embodied Pleasure and Burden in Professional Spaces

Patrice was sitting at her desktop hoping to get one email written, her body sagging when there was a knock. She thought to herself,

I don't mind the opportunities for interaction—I love that part of my work—but it sometimes takes me the entire day to get that one email done. I wake up in the middle of the night composing email. It's true. . . . On the other hand, I feel so blessed to be able to do so many exciting things and work with so many great people!

It turns out to be Suzy at the door and the email message waits to be sent later. We begin our conversations by talking about exhaustion and pleasure, family noise and solitude, work and the desire for a break from work! We feel exhaustion sometimes for the care we give others—our students, Suzy's work at crisis shelters, our siblings, parents, and others. These and other intersections of caregiving and work permeate our lives. Indeed, McDowell (2009) notes that “the good mother now is a mother who enters the labour market to raise her own income and skill levels for the benefit of her children, a mother who no longer occupies the home as a continuous presence” (p. 88). Julie also comments on the normalcy of pregnancy in professional settings:

Yeah everybody was pretty normal about it, it wasn't really any negative reaction at all, I think that it's becoming more normal for women in the workplace to become pregnant, it's actually very normal to be pregnant, to stay and work through their maternity leave, I mean through their pregnancy and to come back to work.

However, the ironies of caregiving in professional contexts are revealed later when Julie indicates that some women may want to hide the evidences of pregnancy in the workplace. She notes her hesitation at revealing her first pregnancy in her workplace:

But, it's really funny because it's a small company with an older generation of upper management, so I really was afraid at first to reveal my pregnancy, and in fact I didn't tell anybody here until I was huh, I just absolutely could not hide it even with the biggest clothes and just letting people think I gained weight because I was almost 6 and a half months, 7 months pregnant and, so one day I just wore a maternity outfit in.

Julie explains how she felt the need to hide her pregnancy from her employer because she was up for a possible promotion. This pressure reflects the notion that “organizations shape the meanings and discursive management of bodies in addition to expecting women to discipline their bodies to conform to the workplace” (Putnam

& Bochantin, 2009, p. 59). In these passages, we notice that Julie's understanding of how pregnancy is viewed in professional contexts shifts with perspective. She explains that it is normal to be pregnant in the workplace, but she simultaneously felt the need to hide her burgeoning belly. It may be that the idea of motherhood is acceptable in professional contexts, but the expanding belly, the embodied pregnancy, disrupts typical worker constructions as disembodied (Trethewey et al., 2006). These excerpts highlight the idea of multiple players and a broader social context that is implicated in self-understandings of bodily experiences and discursive constructions of embodied experiences (Marshall, 1999).

We journal about similar situations.

Suzy: I recall working with a client in the women's shelter. She was 6 months pregnant and going on job interviews. She asked me to help her find interview clothes that would hide her pregnancy. I did my best but went home thinking, 'Clothes cannot hide the fact that she is pregnant.' I didn't like that I helped her (failed) attempts at hiding her expanding body. I was thinking she should be proud of it. But am I naïve in thinking employers do not take pregnancy into consideration when making hiring decisions? A few years ago, a good friend who was pregnant while she was on the job market was told she would have a difficult time finding a job with her pregnant belly. I was infuriated with that comment. I have other friends who want to be pregnant while on the job market but are worried about things like getting sick on an interview.

We return to Julie's interview. With her second, Julie was more comfortable revealing her pregnancy: "My second pregnancy basically had to hit some of the people over the head, I came in with a maternity outfit and it was very obvious I was pregnant." Maybe it does get easier? Or maybe when one has a proven track record as a good worker despite pregnancy and young children, then it gets easier.

These examples of how caregiving and pregnancy unfold in professional contexts highlight Goffman's (1963, 1965) practical and moral embodied agencies. Practical embodied relations include movements considered normal, natural, and acceptable with public expectations. Julie's explanations of her own personal experiences and our observations of others depict the tensions of pregnancy in professional contexts. Pregnancy may be considered normal in some contexts, but in others, such as the working-class positions Suzy's clients in the shelter are pursuing and some academic contexts, normalcy is not a given. Goffman also proposes moral embodied relations to cover judgments made about how people maintain or disrupt routine interactions. Moral embodied relations may offer individuals the opportunity to problematize their situations, to disrupt disembodied constructions of professionalism.

Julie talks about returning to work after the birth of her baby:

I mean it's been hard coming back to work, I've only been back a couple of months now but huh [LONG PAUSE], I understood of what it was

going to feel like so I could get myself ready for it emotionally, and remind myself of the reasons why I work, that it's for the benefit of my family not just for my own, that's how I justify it, I don't work just for my own personal satisfaction although that's good benefits, I benefit to it, but I work for the benefit of my family, so it's hard to keep it in perspective.

Julie justifies leaving her baby for work by indicating that her work will benefit her family, a rationale consistent with scholarly research (McDowell, 2009). In contrast, we sometimes journal about work as a welcome relief from caregiving responsibilities. Doucet (2009) explains that "mothers are embodied subjects who move through domestic and community spaces with intersubjective, relational, 'moral,' and normative dimensions framing those movements" (p. 91). We return to our writing-stories and try to make sense of all that we have read, seen in the media, and overheard at the neighborhood bar.

Patrice: Right now, I have a headache. The teenagers are screaming about how their lives suck because we are getting rid of something that they planned to put into the basement. Two other kids and their friends are here. There are "fire and water recovery" workers here to put back furniture that was water damaged in our recent basement flooding due to a burst pipe. These workers are going in and out of the house. The terrier is barking in the backyard. The kitten is meowing. The other cat is being quiet (not a good sign). One of the twins needed to borrow my minivan to move something. I have a headache. I had tons of stuff to get done. I'm supposed to be leaving for a business trip—I AM leaving for a business trip. I am packed and am imagining quiet times in airports, on flights . . . Starbucks coffee (a special treat) and paperback novels . . . And I've loaded all kinds of stuff on my laptop. Having a family is supposed to be lovely but it's hard to balance anything when every time you turn around, there's something else to do. Cooking and cleaning up dinner takes hours; kids on half day from school means that you are negotiating things they want to do and where you are willing to take them (and pay for it); and then there's all the other stuff—homework, lessons, sports practices. I got nothing done today, my body aches, and I am longing for a quiet business trip. What do parents do when they never get away to an office or on a trip? Maybe they have a higher tolerance for noise and chaos than I have today. I usually do tolerate—sometimes even enjoy—the chaos. It's just today.

We note that embodied caregiving does not happen in isolation but intersects and overlaps with other life aspects that can at times exacerbate or enhance caregiving priorities. The tensions can sometimes only be relieved by escaping to work (or sipping a glass of wine).

Patrice: Caregiving is exhausting. Some of it is the uncertainties. When raising children or caring for others, there are some signs that you might be doing things 'right' but for the most part, you never really know until much later on. Even then you can't be sure if you'd done all that you could or not.

The uncertainties can be exhausting. And then there's the trying to figure out how to handle things. Like when Lisette became engaged at age 18 and I was so very frustrated and worried. Gosh, I probably gained 10 pounds just thinking about all the possible directions her life could have taken and how, really, she was 18 and was considered legally an adult in the United States. So the physicality of feeling tugged in different ways—trying to recognize her autonomy and knowing that she could just take off and go elsewhere—and trying to protect, advise, hope, and suggest. . . . The whole tension of not pushing too far, trying to pull her close, hoping to give her space to make a good decision, wondering what was the right decision, and so on. It was exhausting physically, mentally, emotionally, relationally . . .

Embodied caregiving often includes exhaustion, especially in contexts where caregiving in our private lives

traverses into professional contexts. Widerberg (2005) notes the gendered nature of tiredness as it pertains to the household division of labor, including caregiving. The presence of women in men's lives "is a precondition for the men's opportunity to relax or cultivate hobbies" (p. 103). Women's heavier workload is rationalized through appeals to status quo or rationality (for men's justifications of women's

Dominant mothering discourses argue that women must be "good" mothers, but after they deliver the baby, their bodies must not show the effects of caregiving and mothering. Dominant discourses of mothering and gender clash as mothers are held to physical standards of non-mothers (and never the reverse!).

work in the home, see also Buzzanell, D'Enbeau, & Duckworth, 2010). Women's embodied exhaustion because of caregiving is normalized and naturalized by men's talk of tiredness. In contrast, caregiving responsibilities for women are characterized as both positive and negative because of their bodily costs. Indeed, Widerberg adds, "one does get tired and worn out living up to the standards of a traditional woman" (p. 109). Of course, in an era of perceived gender equality, for some women to admit they are tired is to admit that they are burdened with an unequal amount of caregiving work and that their household may not possess a gender equitable division of labor. Although we enjoy the thought of a glass of wine at the end of a long day of embodied caregiving, we problematize this short-term, individualized solution. We must expand our understandings of how embodied caregiving may appear normal in some contexts and less so in others, shifting with perspective; how private caregiving spaces bleed into our professional spaces; and how embodied caregiving may unequally impact some individuals over others.

Assumptions Derived from Writing-Stories

In this section, we lay out and evaluate a number of assumptions from surfacing-problematizing processes as well as subsequent contributions of our writing-stories. In the beginning of the article, we argued that embodied caregiving is taken-for-granted, available for public scrutiny, and the sole responsibility of women. Here, we unpack these and other assumptions revealed through our writing-stories to consider alternative, embodied conceptualizations of caregiving.

First, we articulate how embodied caregiving positions the body as a discursive and material process. Indeed, embodied caregiving includes both the corporeal caregiving that we wear on our bodies and the embodied subjectivities that result from discursive constructions and cultural interpretations of caregiving. One critique of a social constructionist approach to the body is that “we hear about the social forces constructing the ‘body,’ but we know less about what is actually being constructed. This means that while the body may be named as a theoretical space, it is all too frequently left uninvestigated” (Shilling, 2003, p. 63). This is often because of repetitive and routine performances that deny the constructedness of the body (Ellingson, 2006; see also Butler, 1999). We contribute to the literature on mothering by adding a focus on the embodied aspects, effects, and implications of caregiving.

Second, in considering both phenomenological and interpretive caregiving processes and representations, we are able to explore the commodification of maternal bodies and processes, like the “bump” and other accessories. We must notice the realities behind the “bump” to cherish the changes our bodies go through and value the evidences of caregiving. This emphasis on commodification could be tied to an increase in the association between self-identity and individual bodies (Shilling, 2003). Our writing-stories reveal how we can become focused on isolated parts of changing pregnant bodies. This extreme focus can promote a form of disembodied caregiving that perpetuates a mind-body bifurcation and masks the realities of everyday care (for disembodied pain, see Morgan et al., 2005). In thinking through commodification processes via writing-stories, we open a space for critique and change.

Third, dominant mothering discourses argue that women must be “good” mothers, but after they deliver the baby, their bodies must not show the effects of caregiving and mothering. Dominant discourses of mothering and gender clash as mothers are held to physical standards of non-mothers (and never the reverse!). These discourses are informed by powerful and limiting gender stereotypes, “constructed and performed in certain ways (and then the production obscured) in support of configurations of power that are the result of specific historical events and contingencies” (Ellingson, 2006, p. 300). In this way, we consider the “self-discipline involved in *compliance* with dominant mothering standards from the perspective of those deemed as ‘good mothers’” (Avishai, 2007, p. 136). This theme of control highlights that, although we have an unprecedented amount of control over our bodies, we are still “living in an age which has thrown into radical doubt our knowledge of what bodies are and how we should control them” (Shilling, 2003, p. 3). Our individualized control is sometimes moderated by social control.

Fourth, we note that women's bodies act as physical sites in which individuals can enact, comment upon, and reject larger cultural discourses. However, feminist principles that reinstitute the importance of embodied experiences (Fonow & Cook, 2005) may be co-opted and used against women. Social control via public commentary works to regulate and discipline women's bodies, in effect, removing individual agency from embodied experience. For instance, lipo-suction and anti-wrinkle treatments are offered as a false sense of agency as women attempt to (re) claim their pre-baby bodies, in the pursuit of "extreme" bodies that leave no trace of pregnancy, mothering, and caregiving (Gimlin 2007).

We believe that it is Julie's partial recognition of these gendered traps that prevents her emancipation from gendered, embodied stereotypes (for "partial penetration" in critical studies, see Willis, 1977). Indeed, Julie's acts of resistance are routine, local, and often discursive in nature (Prasad & Prasad, 2000; Mumby, 2005). These are individual moments of resistance that may not combat the institutionalized systems that maintain detrimental gendered stereotypes and standards. Indeed, Kushner (2005) found that ordinary women's caregiving experiences were influenced by institutional systems that perpetuate and privilege particular gendered, professional, and entrepreneurial discourses. Moreover, intersections of gender, entrepreneurialism, and consumerism advocate that individual women bear the unequal burden of caregiving responsibilities but then seek out ways to mask the evidences of caregiving as they balance work and life aspects.

However, in the end, we believe that "women are not necessarily passive agents in accepting their plights" (Putnam & Bochantin, 2009, p. 60; see also Buzzanell & Liu, 2007). We see this process of writing stories together, and inviting others to extend these writing-stories, as an opportunity to actively combat problematic gendered norms and propose alternative conceptualizations of caregiving that attend to embodiment. In thinking about our bodies as negotiable spaces, not simply negotiable discursive constructions, resistance may become possible. For instance, as resistance, we must combat the notion that the traces of caregiving must be airbrushed from our bodies. We must reconstitute the gaze and revalue our bodies. We must reconsider the everyday, ordinary realities of embodied caregiving.

In sum, we talked about Julie and other new mothers feeling unprepared as they transitioned into motherhood but we also spoke about ongoing transitioning and expansions of caregiving. In combining the interview of one working mother with our journal entries and conversations, as well as popular media representations, we present one picture of "how 'real' people navigate the cultural codes of professionalism in everyday life or how they respond in daily interaction across various contexts to institutionalized expectations for professional demeanor" (Cheney & Ashcraft, 2007, p. 161). We consider how caregiving intersects with professional contexts, how organizing mediates power, and the consequences for individuals (Trethewey, 2000a, p. 12). We explore the tensions of embodied caregiver and disembodied worker. We also consider how popular media invoke mothering discourses to perpetuate gendered myths that privilege some aspects of embodied caregiving (e.g., the "bump") while diminishing others (e.g., the subsequent weight gain).

We also contribute in three ways to writing-stories as a method of inquiry. First, in presenting our different stories, we problematize the dominance of some stories over others and the notion that some stories should prevail over others. In addition, we invite others to expand our stories to account for a multiplicity of embodied caregiving experiences. Antelius (2009) notes that because the body is a communicative tool, the moving of the body is a story happening through space and this story can challenge existing social structures: "We must learn to listen for those other kinds of stories and see what they might tell us, and teach us, about our world. When we do so we discover that there are social structures hidden in the creation of our narratives" (Antelius, 2009, p. 376). Thus we use writing-stories to think about who else is a part of our caregiving experiences, either literally or in our imaginations, influencing our understandings and perspectives of embodied caregiving (Marshall, 1999). Second, our writing-stories answer recent calls to problematize researcher embodiment (Ellingson, 2006). In sharing our own embodied experiences with caregiving, we highlight our personal successes and challenges and show how our own bodies can influence our understandings and analyses of contemporary caregiving. Third, we employ a feminist analytic lens to our writing-stories that demands acknowledgement of our own privilege while also highlighting gender inequities in our own embodied lives and others. Writing-stories as process offers a means for feminist scholars to extend embodiment theorizing.

These writing-stories are influenced by our own positionalities as well as that of Julie, and fail to adequately address other identity intersections like class, sexual-social orientation, and race/ethnicity. Our omissions are problematic as "economically subordinated bodies are valued less by society, are treated differently by their inhabitants and others, and, as a result, live different and often shorter lives" (Paap, 2008, p. 102). Furthermore, we acknowledge that we are writing from Western perspectives where there is a tendency to think about the body as in-process; a project to be worked on, altered, changed, and subdued (Shilling, 2003). We also have focused heavily on pregnancy as this process pertains to embodied caregiving. However, we view this focus as an invitation to others to expand on our writing-stories.

Last, although our writing-stories do not explicitly acknowledge policy implications of embodied caregiving, we do recognize the importance of policy informed by research. Our recommendation is to create greater awareness of motherhood and especially motherhood penalties which, combined with the "business case for diversity," means that industry, government, academe, and not-for-profit sectors lose critical talent (Correll, Benard, & Paik, 2007; Perriton, 2009). Therefore this is not just an issue of understanding caregiving or feeling good about helping people with families but a critical loss of workplace talent on societal and global levels. Scholars can look to policy examples from other parts of the world for guidance. For instance, the father's parental leave system in place in Norway legitimizes father's embodied experiences by giving them leave from work for reproductive and caregiving responsibilities (Kvande, 2005). This quota system requires working fathers to take work leave to stay home and engage in carework. Kvande (2005) describes this "embodied fathering" as placing time and focus on the child's needs.

Despite these limitations, we offer writing-stories that present the different aspects of female embodiment. We return to our celebration at the bar and watch the women strolling in—a magnificent parade of body shapes and sizes—and raise our glasses to these women's bodies. We invite readers to continue these stories, add their own unique experiences, and to explore intersections of caregiving and embodiment.

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Notes

¹ We are not arguing that media influence individuals to utilize elective surgical procedures and products to mask the effects of caregiving on their bodies. We are pointing out what we see as similarities between media airbrushing techniques and the use of elective surgeries and products on ordinary bodies.

² We recognize our shift here from evidences of caregiving to descriptions of careworn. However, we see these two aspects of embodied care as intricately related and impossible to separate. There appears to be little conceptual difference in these processes.

³ We recognize that there are instances in which we should not leave women's bodies alone. For example, there was a time when women and women's bodies were ignored in fields such as health and sports or subsumed under an exclusive view of the body as male (DeFrancisco & Palczewski, 2007). However, caregiving and mothering are areas in which women's bodies have been subjected to frequent and often unsolicited public scrutiny (Kukla, 2005).

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