

Beyond_words: Making meaning of transitioning to motherhood using montage portraiture.

An arts-based research study

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Dedication

To my husband Anthony, and to my children Isabella and Tonio.

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Abstract

Beyond_words: Making meaning of transitioning to motherhood using montage portraiture. An arts-based research study

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Nancy Gerber, PhD

The purpose of this arts-based research (ABR) study was to conduct a systematic in depth exploration of how first time mothers express and make meaning of what is *beyond_words* in their experiences of transitioning to motherhood. *Beyond_words* for the purpose of this study was conceptualized as sensory-embodied, relational, and imaginal experiences that are difficult to articulate. The research question that this study aimed to answer was twofold: 1) How do first-time mothers express and make meaning of their *beyond_words* experiences, and 2) how are these experiences represented using montage portraiture?

The participants in this study were five first-time mothers in their 30s who represent a homogenous sample of middle class, predominantly Caucasian, heterosexual, highly educated women who have stable partners and homes.

In order to honor and capture the emergent, vital, and multi-dimensional nature of *beyond_words* in transitioning to motherhood, ABR was used as a design of this study. Montage portraiture was the data generation and analysis method that was specifically designed for this arts-based research study. The arts were used throughout the study to both by the participants as well as the researcher to systematically investigate the phenomena under study. The multiphasic data analysis in the first phase included conducting qualitative content analysis that produced the categories and subcategories relative to sensory-embodied, relational, and imaginal experiences. However, due to the epistemological nature of the *beyond_words* phenomena, they cannot be reduced to categories nor authentically described using discursive language. Therefore, the second phase of data analysis and representation included the Portrait Synthesis that portrayed each of the participants and her experiences holistically. To further analyze the data across cases,

the Final Synthesis was conducted. The results were presented to an audience of viewers who authenticated the results. The Portrait Syntheses and Final Synthesis can stand alone as works of art and be presented to audiences outside of the academia in order to holistically communicate the multidimensional nature of *beyond_words* experiences in transitioning to motherhood.

CHAPTER I: INTRODUCTION

Purpose Statement

The purpose of this arts-based research study was to conduct a systematic in depth exploration of how first time mothers express and make meaning of what is *beyond_words* in their experiences of transitioning to motherhood. The transition to motherhood is considered to be the experience of the woman over the first year after birthing her first child (Mercer, 2004; O’Fahey & Shenassa, 2013; O’Hara, 2009; Rubin, 1967). Research on women’s experiences of transitioning to motherhood is well documented. Researchers have identified the predictable or conscious physiological (Afoakwah et al., 2013; Nelson, 2006; Williamson, Leeming, Lyttle, & Johnson, 2009), psychological (Hogan, 2008; Mercer, 1986; Nelson, 2003; Prinds et al., 2014), social (Darvill et al., 2011; Demecs et al., 2011; McMahon, 1995; Nelson, 2003; Prinds et al., 2014), and spiritual (Callister, 2010, 2004; Prinds et al., 2014; Mahoney, 2009; Schneider, 2013) dimensions of transitioning to motherhood that include rewarding and challenging experiences. However, transitioning to motherhood also includes the less visible sensory-embodied, relational, and imaginal experiences that are more likely unconscious and thus beyond conscious awareness and difficult to articulate (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991). These phenomena are conceptualized as *beyond_words* for the purpose of this study.

In the context of transitioning to motherhood, *beyond_words* phenomena have not been explicitly studied. However, mothers’ accounts of those *beyond_words* experiences are inherent in research studies about transitioning to motherhood. For example, embodied experiences of breast feeding (Schmied & Barclay, 1991; Schmied & Lupton, 2001), relational or intersubjective experiences with the child (Nelson, 2006; Schmied & Lupton, 2001), and imaginal experiences such as fantasies of herself as a mother and expectations to motherhood (Hill, 2011; O’Fahey and Shenassa 2013; Or, 2009) are reported as part of the experience of transitioning to

motherhood while also described as difficult to articulate (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991). Based upon the reports in the literature it was posited that new mothers might require a method by which to make visible, give voice to, and to make meaning of these *beyond_words* experiences.

The phenomena that are *beyond_words* are underrepresented in research literature, which may be partly due to their epistemic nature that challenges the use of traditional research methods. Arts- based research, which employs nonverbal artistic methods of investigation (Barone & Eisner, 2012; Jongeward, 2009; Hogan & Pink, 2010; Leavy, 2009; Marshall, 2007; Sullivan, 2005), is considered to be a viable approach to explore *beyond_words* in the transition into motherhood. Five first time mothers participated in this study to explore what lies *beyond_words* of transitioning to motherhood through self portraits created by tracing photographs of themselves and their children and adding drawings to the portrait using montage. The self-portraits are accompanied by textual narratives.

Summarily, *beyond_words* are phenomena that are influential of the mother's self image and relationship with the child, however, they pose a challenge to investigation using traditional quantitative and qualitative research methods.

Problem Statement

The problem that this study addressed was twofold. First, when becoming a mother, a woman encounters multiple and intertwined experiences which are rewarding, challenging and transformative, and which exist in physiological, psychological, social, and spiritual dimensions. Situated and embedded within the multiple transformative experiences of transitioning to motherhood are the *beyond_words* experiences that are essentially non-verbal and/or unconscious, including the sensory-embodied, relational, and imaginal experiences that are influential to the mother's self-image and relationship with the child (Afoakwah et al., 2013; Nelson, 2006; Or, 2009; Schmied & Lupton, 2001; Sered 1991; Prinds et al., 2014). Because of

the unconscious sense-based and embodied epistemic of *beyond_words* experiences, they pose a challenge in translation to verbal expression and thus remain generally unarticulated by the mother (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991).

Second, *beyond_words* experiences are inherent in the transition to motherhood but they are under investigated, and thus they remain underrepresented in the research literature on transitioning to motherhood. The under exploration of this phenomenon in the literature may be because of the epistemic nature of *beyond_words* of transitioning to motherhood that poses a challenge to investigation of these phenomena using traditional research methods.

Rationale

To address the problem that this study posed, the rationale for conducting this arts based study was: 1) to systematically investigate the phenomena of *beyond_words* of transitioning to motherhood which are influential to the mother and her relationship with the child, during the transition to motherhood, and 2) to provide a method by which the new mother can access, translate, and make meaning of her *beyond_words* experiences,.

The nature of the phenomenon of *beyond_words* in transitioning to motherhood in combination with the arts based investigative method were designed to make results accessible to a wide audience who can potentially benefit. Therefore, it was intended that as a result of this study, women's experiences of *beyond_words* of transitioning to motherhood would become available in artistic and written forms to: 1) the mothers-participants, which contribute to their awareness and meaning making of their *beyond_words* experiences of transitioning to motherhood; 2) new mothers and mothers-to-be, who may access the research findings through the art exhibition where these findings will be presented. Accessing the research results in this way was intended to contribute to their awareness and validation of *beyond_words* in transitioning to motherhood; and 3) Finally, the results would be accessible to art therapists and other clinicians who work with new mothers. For art therapists and other clinicians the aim of the

results of the study was to increase awareness of the *beyond_words* experiences during the mother's transition, foster empathy with new mothers during this transition, and provide a practical clinical paradigm that might be used in their work with new mothers.

Contextual Description: Current Literature, Definitions and Gap Analysis

The phenomena under study are *beyond_words* in transitioning to motherhood. In order to clarify the phenomena and context of the study, a contextual description of transitioning to motherhood that forms the basis and the rationale for this study, are be provided here and elaborated in depth in the literature review section.

Transitioning to motherhood is a complex life changing experience (Taubman-Ben-Ari et al., 2009; Prinds, et al., 2014) that includes interactive physiological, psychological, social, and spiritual dimensions with inherent and intertwined rewards and challenges. To provide the reader with an overview of mothers' complex experiences during her transitioning to motherhood, each of these dimensions are defined and summarized below. They will be explored in more depth in the literature review.

The physiological dimension of transitioning to motherhood in the first year includes physical recovery of pregnancy and childbirth in which every major physiological system of the human body (e.g., cardiac, immunologic, respiratory, endocrine) must undergo significant changes and adaptations to a non-pregnant state. This also includes endocrine adaptations that support the physiology of breastfeeding. Postpartum recovery is often associated with postpartum Fatigue (PPF) and body image dissatisfaction.

Breastfeeding has been reported to be pleasurable (Bottroff, 1990; Hauch and Irurita, 2003; Nelson, 2006; Schmied & Lupton, 2001), but also physically uncomfortable or even painful experience (Afoakwah et al., 2013; Nelson, 2006; Williamson, Leeming, Little, & Johnson, 2009). A challenging health condition that negatively affects the woman's physical and mental health is Post-Partum Fatigue (PPF) (McMahon, 1995; Mercer, 1986; Hochchild, 1989; Runquist, 2006; Troy, 2003). Despite the generally challenging nature of PPF, some mothers have been

reported to persevere through PPF through the belief that children bring meaning to their lives (Runquist, 2006). Body image dissatisfaction is yet another factor that relates to the physiological transition to motherhood in that it tends to increase in the first postpartum year (Gjerdingen, Fontaine, Crow, McGovern, Center, & Miner 2009).

Issues related to the **psychological dimension** of transitioning to motherhood include both rewards and challenges as well. Rewards include such experiences as mother-child emotional and psychological connection that mothers experienced from closeness and relationality with the infant (McKinlay, 2013; McMahon, 1995; Nelson, 2003), and personal psychological growth and transformation as a mother that resulted from this connection (Nelson, 2003, Prinds et al., 2014).

The challenges related to the psychological dimension of transitioning to motherhood include depressed mood that can manifest as Post-Partum Depression (PPD), and psychological loss and mourning of self (Nelson, 2003; Hill, 2011; Hogan, 2008; Mercer, 1986). Such losses for example can be the loss of the sense of self, (Barclay et al., 1997, Nelson, 2003; Hill, 2011; Hogan, 2008); loss as an overarching category that includes control over one's life, time, independence, and previous lifestyle (Barclay et al., 1997); or loss of personal time (Mercer, 1986).

The social dimension of transitioning to motherhood is another dimension that includes a combination of rewards and challenges. The relationship with the partner has been found to be strengthened during the first year of the transition (Darvill et al., 2010; Nelson, 2003; Prinds et al., 2014). Conversely, challenges have been found in relationship with the partner such as deterioration of the couple's sexual relationship (Barrett et al., 2000; Nelson, 2003; Pacey, 2004), and change in distribution of domestic labor and demanding role with overwhelming 24-7 responsibilities caring for a new infant (Barclay et al., 1997; Darvill et al., 2010; Nelson, 2003). Balancing work and family was generally identified as a challenge for new mothers (McMahon, 1995; Faulkner, 2013; Newborn, 2012; Nichols & Roux, 2002; O'Reilly, 2010).

A category under the social dimension of transitioning to motherhood was women's social relationships with and support from other women (Darvill et al., 2011; Demecs et al., 2011; McMahon, 1995; Nelson, 2003; Prinds et al., 2014), including their own mothers (Darvill et al., 2011; Taubman-Ben-Ari et al., 2009) that was generally identified as an important source of support.

Finally, unrealistic expectations of motherhood were found to be challenging to new mothers. These idealized unrealistic expectations are often conveyed in the media, by peers, healthcare professionals, and parenting manuals (Cowdrey, 2011; Darvill et al., 2010; Heisler & Ellis, 2009; Hill, 2011; O'Faney and Shenassa 2013; Razurel, 2011), and the discrepancy that exists between the idealized expectations and the reality of motherhood, can be "disruptive to the individual and to relationships" (O'Faney and Shenassa 2013, p.616)

The spiritual dimension of transitioning to motherhood is an emergent dimension in research literature that is beginning to appear in recent studies with a particular focus on childbirth experiences. These studies have identified the spiritual and existential dimension of meaning making in transitioning to motherhood, and found that childbirth was generally a rewarding spiritual experience (Callister, 2010, 2004; Prinds et al., 2014; Mahoney, 2009; Schneider, 2013).

Summary and Gap Analysis: *Beyond_words*

To examine the gap analysis, I created a matrix (Appendix J) and a concept map (Figure 1). Based on the literature on women's transitioning to motherhood, it was evident that transitioning to motherhood is a multi-dimensional, dynamic, and interactive process between the physiological, psychological, social, and, spiritual dimensions. Within these dimensions are a range of rewards and challenges. Although *beyond_words* experiences have not been the focus of the majority of research studies reviewed, embedded qualitative and artistic accounts from

women about transitioning to motherhood pointed to these inherent experiences that were difficult to articulate.

The non-discursive and subtle nature of the *beyond_words* of transitioning to motherhood phenomena as situated in the literature warranted a more systematic exploration. In order to accomplish this, I constructed a matrix that organized the studies on women's experiences of transitioning to motherhood by the dimension in which they were encountered. In addition, the matrix outlined rewards, challenges, and the methods that were used to conduct the studies. As a result *beyond_words* (sensory-embodied, relational, and imaginal) experiences were identified and examples retrieved. For example, on the physiological dimension, breastfeeding was found to be "Sensory and perceptual, it was a 'nondiscursive,' 'embodied' experience that was difficult to describe in words" (Schmied & Barclay, 1991, p 328). Related to the physiological dimension, the psychological dimension addressing the relational aspect of transitioning to motherhood was identified in the breastfeeding experience as one that provides "connectedness, continuity, or oneness" with the baby (Schmied & Lupton, 2001, p.239). Conversely to the rewarding experiences, on the psychological level, more negative imaginal experiences were identified. For example, in Or's (2009) study on clay sculpting, a mother smashed the clay figure that she has sculpted to represent herself, and created a new figure. The mother stated: "It seems to me as a demon [. . .] I'm just not complete with myself. It seems to me a little monster and it's not me" (Or, 2009, p.323).

Another example related to the spiritual dimension emphasized that women found it difficult to articulate their experiences. Sered cited in Callister and Khalaf (2010) suggested, "For some women childbirth 'feels' spiritual and a number of women reported a heightened sense of holiness after birth. However, women lack the language to express that feeling. Even those who had a spiritual experience couldn't find language for it" (p.16).

Based on the synthesis from this matrix, as a conclusion, I identified that the *beyond_words* phenomenon in transitioning to motherhood: 1) spans all of these dimensions, 2)

includes sensory-embodied, relational, and imaginal components, 3) were difficult to articulate verbally, and 4) is under-studied.

To artistically explore and present the multiple aspects of the phenomenon of *beyond_words* of transitioning to motherhood, I created a concept map that attempted to begin to integrate the phenomena relative to the physiological, psychological, social, and spiritual dimensions of transitioning to motherhood.



Figure 1. Concept map of *beyond_words*

Although there are very few research studies that explore *beyond_words* in maternal transition (McKinlay, 2013; Or, 2009), maternal experiences have been the subject of feminist art explorations. To explore the *beyond_words* through various media such as painting, photography, sculpture and installation (Baillie, 2012; Betterton, 2010; Chernik, 2002; Bassin, Honey, & Kaplan, 2012; Lichtenstein, 2012; Liss, 2009) artists have highlighted the diversity of mother's experiences of motherhood and transitioning to motherhood, and suggest both rewards, challenges, and ambivalence that are inherent in this process.

Beyond_words in transitioning to motherhood are phenomena that remain understudied. However, mothers' experiences of transitioning to motherhood on the physiological, psychological, social, and spiritual dimensions have been studied using varying research approaches. The more traditional quantitative and qualitative perspectives and methods have been used to study both rewards and challenges in transitioning to motherhood. Autoethnographies (McKinlay, 2013), art therapy research (Or, 2009), and the visual arts practices (Baillie, 2012; Betterton, 2010; Chernik, 2002; Bassin, Honey, & Kaplan, 2012; Lichtenstein, 2012; Liss, 2009) have attempted to capture qualitative and lived phenomena of *beyond_words* in maternal experiences. However, to date, a systematic inquiry using the visual arts in Arts-Based Research to study *beyond_words* in transitioning to motherhood in the first year, has not been conducted. This research fills the gap from an art therapy informed arts-based research perspective by illuminating the phenomenon under study and providing the mothers with a method to express and make meaning of their *beyond_words* experiences in their transition to motherhood.

The Design and Method

The design of this study is Arts-based research (ABR) that provides a framework to connect the rigor and systematic inquiry of research and the visual arts practice to examine and represent what is *beyond_words* in transitioning to motherhood. The in depth systematic study of the concept of *beyond_words* in transitioning to motherhood demands a worldview, design and method compatible with the phenomena under investigation. In this study I used ABR as a design to explore the *beyond_words* of transitioning to motherhood described previously.

Arts-based research or ABR has been defined as “an effort to utilize the forms of thinking and forms of representation that the arts provide as means through which the world can be better understood and through such understanding comes the enlargement of mind” (Barone & Eisner, 2012, p.xi). The arts-based researcher utilizes artistic tools such as fiction, drama, the visual arts,

etc. during all phases of the research process (Leavy, 2009), and ABR necessarily includes the researcher's involvement in the artistic process (McNiff, 2011).

ABR in the Creative Arts Therapies (CATs), which includes art therapy, dance/movement therapy and music therapy, has been identified as a research approach that is compatible with the ontology and epistemology of CATs (Gerber, 2014; Hervey, 2000; Kapitan, 2010; McNiff, 2011). This arts-based research study aspired to assist the research participants to express and make meaning of their *beyond_words* experiences of transitioning to motherhood using both artistic means as well as verbal reflection that is the basis of art therapy practice (Kapitan, 2010) and has been identified as a valuable method in ABR (Leavy, 2009).

For this arts-based study I developed a special method for data generation and analysis called Montage Portraiture. The method builds on the concept of portraiture, a genre that is used both in the fine arts (Brilliant, 2002; Freeland, 2010; West, 2004) as well as qualitative research (Lawrence-Lightfoot 1983, 2004; Lawrence-Lightfoot and Davis, 1997) and art therapy practice (Alter-Muri, 2007; Costello-Du Bois 1989; Davis Halifax, 2003; Fish, 1989, 2012; Franklin, 2010; Hanes, 2007; Kielo, 1990; McGann, 2006; Wadeson, 2003)

Montage Portraiture was used in data generation, data analysis, and representation phases of this study. In the data generation phase, the participants will be asked to create a self portrait by tracing photographs of themselves and their children, and add drawings to their portrait as they verbally reflect on the artwork to explore what is *beyond_words* in transitioning to motherhood. Data generation also included artistic and written reflexivity from the researcher. In the data analysis phase, the researcher used her personal artistic practice to create montage portraits of the individual participants to reflect their experiences. The portraits were shared with the participants to obtain their feedback. Finally, the Final Synthesis across cases was created. The Portrait Syntheses and the Final Synthesis were exhibited on the premises of Drexel University. External input was sought to obtain feedback, and to implement credibility measures.

Worldview and Theoretical Framework

The worldview of this study is influenced by my own lived experience as a mother, art therapist, and a visual artist. Becoming a mother 6 years ago was a life changing experience for me. Although my children were planned and expected, the complexity of the physiological and psychological maternal experience was overwhelming when I first became a mother. Particularly the first year of transitioning to motherhood prompted a transformation in my identity when I started wondering about the boundaries between the self and the other, my identity as a person and a mother, and the complexity of the maternal experiences. This is when I started to realize that some of these maternal experiences were *beyond_words*: they were embodied, relational, not fully conscious, fluctuated on the continuum of pleasure and pain, and were very difficult to articulate and make meaning of verbally. As an art therapist, I use art making and verbal follow-up to explore human experiences with my clients. As an emerging arts-based researcher, I designed an independent study where I used self-portraiture to explore my embodied experiences as a mother and journaled about my thoughts and feelings that came up during the process.



Figure 2. The researcher's artistic inquiry *Figure 3.* The researcher's artistic inquiry

This exploration opened a door to explore *beyond_words* experiences in transitioning to motherhood, which resulted in greater self-awareness and creative growth. The drawings that emerged from my artistic exploration are in process: now, a mother of two children, I continue to be curious and inspired about maternal *beyond_words* experiences.

In order to honor and capture the emergent phenomenon of *beyond_words* in transitioning to motherhood, this study has been situated within the art therapy informed, arts-based research paradigm that builds on the emergent arts-based research paradigm proposed by Chilton, Gerber, and Scotti (2015). Table 1 summarizes this paradigmatic stance.

Table 1. *Paradigmatic Stance*

Art therapy informed arts-based research paradigm	
Ontology	Inter-Intra psychic Intersubjective Pluralistic Realities
Epistemology	Aesthetics
Axiology	Values of self-awareness and self-expression in living a creative life
Methodology	Montage portraiture

The ontology for this paradigm stems from ontological pluralism proposed by Johnson & Gray (2010). For the purpose of this study, I acknowledge the changing and fluctuating intersubjective realities of my participants that involve conscious as well as unconscious experiences, objective reality as well as fantasies and memories. Therefore, the ontology of this paradigm is pluralistic – it includes multiple dynamic inter and intra psychic intersubjective realities (Gerber, 2014; Chilton et al., 2015; Johnson, & Gray 2010).

The epistemology of this paradigm recognizes both explicit aesthetic and implicit intersubjective knowing (Carolan, 2001; Dissanayake, 2000; Gerber, 2014; Chilton et al., 2015; Hagman, 2009; McNiff, 2011, 1998; Robbins, 1998). Aesthetic ways of knowing that are difficult to express in words, are accessed in art therapy through art making within the

intersubjective context (Chilton, 2014; Gerber, 2014; Gerber, Templeton, Chilton, Cohen Liebman, Manders, & Shim, 2012; Hogan & Pink, 2010).

The conceptualization of aesthetics for the purpose of this study refers to epistemology and builds on art therapy aesthetics (Levine, 2004; McLagan, 1999; Moon, 2002; Robbins, 1988, 1987) that is informed by aesthetics as meaning making of human experiences in the fields of philosophy, psychoanalysis, anthropology, and feminist theory (Brown, 2011; Davis, 1997; Dewey, 2005; Dissanayake, 2001, 2000; Ettinger, 2006; Hagman, 2009; Johnson, 2007; Lintott, 2011). This conceptualization differs from the traditional notions of aesthetics as pertaining to appreciation of beauty and qualities of taste in that art therapy provides the theoretical and methodological context for the articulation and meaning making from imagery (Gerber, 2014; Levine, 2004; McLagan, 1999; Moon, 2002; Robbins, 1988, 1987). Art therapy aesthetics build on the literature in psychoanalysis, philosophy, and anthropology that view aesthetics as an exploration and meaning making of human experiences. The practice of art therapy, a form of psychotherapy, posits that the generation of and reflection on personal imagery within a therapeutic relationship fosters psychological growth and healing (Kapitan, 2010). Through art making, the client can express what words cannot (Gerber, 2014; Hogan & Pink, 2010; Malchiodi, 2006), and through reflexive verbal discussion, the client can reflect on these previously unutterable experiences, thus becoming more aware, more able to articulate and make meaning of his or her experiences (Robbins, 1987; Malchiodi, 2006).

The methodology of this paradigm is Montage portraiture which is a method that is compatible with the nature of the phenomenon under study, and utilizes art making and verbal reflection both by participant and researcher to systematically investigate what lies *beyond words* in transitioning to motherhood.

The axiology of this paradigm combines art therapy's ethics of care (Chilton, 2012; Finley, 2003; Talwar, 2011) and values of self-awareness and creative self-expression as contributing to living a full, free and creative life (Chilton, 2014, 2012; Gerber, 2014) with ABR

values of social justice that emphasize empowering the participants with a voice and making the results accessible to all (Finley, 2008; Leavy, 2015, 2009; Knowles & Cole, 2008).

Limitations and Delimitations

This study is delimited to the population of first-time mothers in the first year because the experiences of *beyond_words* of transitioning to motherhood are first encountered in the first year.

A limitation of this study is that the participants were recruited in a circumscribed geographical area in the United States and thus the results do not reflect other cultural and geographical areas. Another limitation of this study is that data generation occurred within a short time frame. This study was based on a single contact with the participant that might have compromised building trust that is essential in the art therapy relationship, however it is important to note that this study was not intended as art therapy.

Research Question

The purpose of this study was to conduct a systematic in depth exploration into how first time mothers express and make meaning of *beyond_words* phenomena in transitioning to motherhood. *Beyond_words* for the purpose of this study was conceptualized and operationally defined as the sensory-embodied, relational, and imaginal experiences that are inherent in all dimensions of transitioning to motherhood but are difficult to articulate. The problem that this study addressed was twofold. First, *beyond_words* in transitioning to motherhood is difficult to articulate by the mothers. This study, using an art therapy informed method, aspired to assist the new mother in expressing and making meaning of her *beyond_words* experiences. And thus, the mothers became more aware and more able to articulate their experiences. Second, because of the unconscious, sense-based and embodied epistemic of *beyond_words*, which are difficult to articulate by the mother, the investigation of these phenomena using traditional research methods is challenging. Consequently, experiences that are *beyond_words* remain underrepresented in the research literature about transitioning to motherhood. Because *beyond_words* in transitioning to

motherhood is under investigated, this research contributes to the literature in art therapy and health sciences literature about transitioning to motherhood. Additionally, the art therapy informed arts based research method contributes to the art therapy body of knowledge by exemplifying a specific method of knowledge generation with new mothers that can be extended to other populations. The rationale for conducting this study was that this study offers a method to systematically investigate and represent the phenomenon of *beyond_words* in transitioning to motherhood by which the new mother can access and make meaning of those experiences influential to her self image as a mother and her relationship with the child during the transition to motherhood. Women's experiences of transitioning to motherhood in the physiological, psychological, social, and spiritual dimensions have been researched using the more traditional qualitative and quantitative research methods. Related to transitioning to motherhood, mothers' *beyond_words* experiences have been investigated using more emergent research methods such as autoethnographies, art therapy research, and artistic practice. However, to date, a systematic inquiry using the visual arts in Arts-Based Research to study *beyond_words* in transitioning to motherhood in the first year, has not been conducted.

This study used visual and written forms in artistically and analytically disseminating results that aimed to potentially benefit the mothers-participants, mothers and mothers-to be who access the research findings, art therapists and other clinicians who work with new mothers.

Based upon the identification of the phenomenon, the problem, the rationale and the gap in the literature, the study aimed to answer the following twofold research question: 1) How do first-time mothers express and make meaning of their *beyond_words* experiences, and 2) how are these experiences represented using montage portraiture?

CHAPTER II: LITERATURE REVIEW

Overview

The purpose of this literature review is to review and organize the literature relative to the topic of this dissertation. This literature review is organized into five sections that are presented in the following order: 1) definitions of motherhood, 2) transitioning to motherhood, 3) aesthetics 4) portraiture, and 5) arts-based research.

The first section of this literature review provides biopsychosocial definitions of motherhood to set a context to transitioning to motherhood, which are the focus of the next sections. The topic of this dissertation relates to *beyond_words* in transitioning to motherhood. Because of a lack of research on these phenomena, studies of women's experiences of transitioning to motherhood will be reviewed to provide a context within which the phenomena of *beyond_words* are situated. Women's experiences of transitioning to motherhood are multidimensional and dynamically interconnected. For clarity, the literature in this section is thematically divided into the following dimensions: the physiological, the psychological, the social, and the spiritual dimensions.

The next section is devoted to aesthetics to provide the reader with the conceptualization of definitions and overview aesthetics as the epistemology in the context of this study. The conceptualization of the aesthetics for the purpose of this study refers to epistemology and builds on art therapy aesthetics (Levine, 2004; McLagan, 1999; Moon, 2002; Robbins, 1988, 1987) that is informed by aesthetics as meaning making of human experiences in the fields of philosophy, psychoanalysis, anthropology, and feminist theory (Bollas, 1987; Dewey, 2005; Dissanayake, 2001, 2000; Ettinger, 2006; Hagman, 2009, 2011; Johnson, 2007; Lintott, 2011).

The next section is devoted to portraiture, which relates to the method of this study. Literature in this section will be reviewed from the perspective of the fine arts, qualitative

research, and art therapy. This literature review concludes with a section that provides an overview and recent developments of arts-based research, which relates to the design of this dissertation study.

The literature for this study was searched using key terms relevant to the topic of this dissertation. PsychInfo, Summon 2.0, CINAHL, and Google Scholar were searched to locate the relevant literature. In addition, manual searches were conducted to identify related references. I also used my existing knowledge of the literature in the discipline of art therapy to add to this literature review. Only literature published in English was included. The sources were peer-reviewed journals, book chapters, and books.

The literature in this study is interdisciplinary spanning nursing and health sciences, philosophy, anthropology, psychoanalysis, art history, art therapy, and research methodologies. Definitions of motherhood draw from sociocultural, feminist, developmental psychology and psychoanalytical perspectives. The second section on transitioning to motherhood includes research studies from medical, nursing, and health professions. The section on aesthetics is based on theoretical and philosophical literature from psychoanalysis, anthropology, the fine arts, and art therapy. The section on portraiture draws from art history, qualitative research methodology, and the theory and practice of art therapy. Finally, the section on arts-based research delineates the historical and current developments of this emergent research paradigm.

Definitions of Mother and Motherhood

Motherhood is an essential component of human existence. Although all human beings have a personal experience with motherhood through encounters with their own mothers, grandmothers, and other mother figures, an inclusive definition of motherhood is not easy to articulate. Definitions of motherhood and the mother are complex because they include multiple biological, psychological, and sociocultural aspects. Moreover, because of the variety of individual experiences with motherhood, specific experiences of motherhood stand out for each individual mother and child. Because of these different aspects and personal characteristics, there

is hardly a single, uniform definition of motherhood. Rather, there is an overlap between the different biological, psychological, sociocultural, and personal aspects of motherhood. In an attempt to shed light on the predominant aspects of definitions of motherhood, the following section will provide different perspectives on motherhood from biological, psychological, and sociocultural definitions. Taken together, a multifaceted and overlapping definition of motherhood emerges.

Biologically, motherhood is defined in terms of the women's biological reproductive ability to become a parent (Arendell, 2000; Ashurst & Hall, 1989). From the biological perspective, "women, as females, have the capacity to conceive, gestate, give birth, and lactate" (Arendell, 2000, p.1193). Ashurst and Hall (1989) saw this biological capacity as a defining feature of motherhood "A woman's capacity to create, bear and nurture a child is the very essence of her womanhood, her unique and special capacity—prized, feared, envied, protected, and celebrated" (p. 97).

The interface between biological, ethological, and psychological aspects of motherhood are exemplified in perspectives such as Attachment Theory. The definition of motherhood, from the psychological developmental perspective of Attachment Theory (Ainsworth, 1982; Bowlby, 1969) is one that is inclusive of the mother/child dyad-- the mother and the child are viewed as an interacting, co-affecting unit (Bowlby, 1969). Attachment theory has its roots in ethology in that it relates to both human and animal behavior, and has a biological basis (Ainsworth, 1969; Bowlby, 1969). The seminal work by attachment theorists Bowlby (1969) and Ainsworth (1982) identified that physical contact between the mother and the child in the first year is vital for the child's development. According to Bowlby (1969), attachment behavior is a biological instinctual function: the human infant is drawn to maintaining closeness with his or her mother, and the mother, in turn, is wired to respond to the infant's cues. The infant's ability to cope with stress correlates with frequency and the qualities of maternal care such as physical contact, holding, soothing, stimulation, encouragement, and positive feedback that the infant receives. All of these

characteristics influence the formation of secure attachments. As early as by the end of the first year of life for the child, a characteristic pattern of interaction between the mother and the child has developed. This pattern persists and is relatively stable regardless of whether the interaction has been satisfying or unsatisfying, because both parties have certain expectations to each other's behavior (Bowlby, 1969). Ainsworth (1982) further developed Bowlby's theory of attachment that confirmed the importance of the mother figure in infant's development. According to Ainsworth (1982), mother figure's presence and involvement in infancy and childhood produced favorable child development while absence and lack of involvement resulted in maladaptive developmental outcomes.

From a psychosocial perspective, seminal scholarship on becoming a mother and maternal identity was conducted in the field of nursing by Rubin (1984) and later elaborated by Mercer (2004, 1986). According to Rubin (1984) and Mercer (2004, 1986) developing a maternal identity is a major component of becoming a mother. Maternal identity is more than just a role, it is defined as an inseparable aspect of a woman's personality, the degree of comfort and competency in mothering tasks, and the inherent feeling of love for the infant (Mercer, 2004). When becoming a mother, the woman experiences transformation and expansion of self as she incorporates the child and the related new roles into her identity (Mercer, 2004; O'Fane & Shenassa, 2013; Rubin, 1984).

From the psychoanalytic perspective motherhood was explored in the context of Object Relations Theory (Winnicott, 1971). Object relations theory is a psychoanalytic theory that focuses on early mother-child relationships (Winnicott, 1971; Robbins, 1987, 1986; Scharff & Scharff, 1998). From the perspective of the Object Relations theory, motherhood is a dynamic relational phenomenon and the mother's interaction with the child is crucial in the child's development. The mother or the primary caregiver is the first person with whom the infant establishes a relationship. By internalizing these early communications with the mother, the

infant's self-concept begins to develop (Winnicott, 1971). And thus, similarly to the attachment theorists, the mother from the Object Relations perspective is defined in terms of her attachment and responsiveness to the child. The *good-enough mother* is a term coined by the Object Relations theorist Winnicott (1971). This term denotes the mother's (not necessarily a birth mother) responsiveness and attunement to the infant to provide mirroring and support the infant's ego development. Winnicott (1971) did not imply the existence of a universal, "perfect" mother, but an adaptive mothering that each individual mother provides to her child. He wrote: "The good-enough mother /.../ starts off with an almost complete adaptation to her infant's needs, and as time proceeds she adapts less and less completely, gradually, according to the infant's growing ability to deal with her failure" (p.10).

From a feminist perspective, Chodrow (1978) and Ruddick (1980), among others, disagreed with the biological basis of motherhood and stated that motherhood was defined not based on biological gender, but in the social context. Because girls are prepared and socialized to be caregivers and nurturers, they acquire these relational caregiving characteristics. And thus, motherhood is defined not in terms of inborn necessity but in terms of social roles with the spouse, other women including the woman's own mother, and society at large that are acquired.

From the sociocultural perspective, definitions of motherhood have changed over the years. Motherhood was historically viewed as a relational activity that has to do with the child and providing childcare (Arendell, 2000; Forcey, 1974; Plaza, 1982). Earlier definitions viewed motherhood as a role in service of the child "The mama is a person who is defined by the service she gives to a child; her existence has no meaning except in relation to a child whom she must carry, bring up, attend to, serve, calm down" (Plaza, 1982, p.79). Forcey (1974), emphasized the nurturing role in mothering activities. According to Forcey (1974), motherhood is "a socially constructed set of activities and relationships involved in nurturing and caring for people" (p.357).

From a contemporary sociocultural perspective, motherhood in American society can be seen as socially constructed (Arendell, 2000; Kaplan, 1992; McMahon, 1995; Medina & Magnuson, 2009; O'Reilly, 2010b; Pitts-Taylor & Schaffer, 2009). Within this contemporary social construction, from a feminist perspective, there is a conflict between patriarchal constructions and feminist constructions of motherhood. Despite new feminist constructs, motherhood continues to be dominated by patriarchal perspective that is oppressive to women (O'Reilly, 2010b). Patriarchal motherhood and intensive mothering are terms that have been applied to gender oppressive motherhood in the patriarchal society (Arendell, 2000; O'Reilly, 2004, 2010a, 2010b; Medina & Magnuson, 2009). Seen through the feminist lens, intensive mothering is defined by the expectation of women to devote themselves wholly and exclusively to their children and give up personal and professional opportunities outside of the home (Arendell, 2000; Medina & Magnuson, 2009). The mother portrayed in this ideology is devoted to the care of others; she is self-sacrificing and "not a subject with her own needs and interests" (Arendell, 2000, p.1194). In contrast to patriarchal motherhood, empowered motherhood or maternal empowerment is understood not as a biological mandate but as a relational activity that recognizes the mother's subjectivity as a person and that is potentially empowering for mothers (Arendell, 2000; O'Reilly, 2010a, 2010b). Maternal empowerment is a term that was coined by O'Reilly (2010b) to denote the empowerment of mothers that aims to grant "mothers the agency, authority, authenticity and autonomy denied to them in patriarchal motherhood" (p.20).

From an aesthetic perspective, motherhood has been explored in the psychoanalytical context (Ettinger, 2006; Bollas, 1987; Hagman, 2009). Psychoanalysts Bollas (1987) and Hagman (2009) viewed motherhood as inherently aesthetic in terms of preverbal, sensory-embodied connection and communication between the mother and the child. From a slightly different feminist psychoanalytical-philosophical aesthetic perspective, Ettinger's (2006a) philosophical work and artistic practice concern maternal aesthetics. Ettinger (2006a) developed a theory called the matrixial borderspace that relates to psychic aesthetic prenatal relationality between two

subjects, the mother-to be, and the child-to be. While the psychoanalytic Object Relations theory concerned itself with the actual mothers and children, Ettinger (2006) provided a theoretical and philosophical account of the etiology and environment of relationality, which symbolically is the womb. Ettinger (2006a. 2000b) stated that her theory was different from Object Relations theory in its focus on prenatal experiences, both reality-based and fantasy-based. Ettinger's (2006) matrixial borderspace differs from the Object Relations and attachment theories that emphasize the mother's role in physical and emotional regulation of the infant. From Ettinger's perspective, the focus on definition of the mother is on her potentiality of relationality and co-emergence. As such, the matrix, the womb becomes a shared aesthetic, psychic and relational space for encounter between unconscious subjectivities, "woman-m/Other as assemblage" (p.106). Wrote Ettinger:

The matrixial borderspace is modelled upon a particular conception of feminine/prebirth intimate sharing. The womb/matrix is conceived of here not primarily as an organ of receptivity or 'origin' but as the human potentiality for differentiation-in-co-emergence. Its space is not a maternal 'container', its time is not the inaccessible chronological past. It is the space and time of subjectivization in co-emergence. (Ettinger, 2006b, pp.219-220)

In sum, motherhood is a complex phenomenon that involves multiple interactive dimensions. In an attempt to provide an inclusive definition of motherhood, for the purpose of this study, an operational definition based on the multiple aspects of motherhood emerged. Motherhood for the purpose of this study is defined as a complex subjective and intersubjective phenomenon that involves physiological, psychological, and social aspects and that is culturally situated.

Transitioning to Motherhood

Section Overview

The topic of this study is *beyond_words* in transitioning to motherhood. Because the phenomenon of *beyond_words* has not been explicitly studied in the health sciences literature of transitioning to motherhood, the purpose of this section is to provide the reader with a wider overview of women's experiences of transitioning to motherhood in the first year. Women's experiences specific to transitioning to motherhood will be reviewed as studied in medical, nursing, and health sciences, psychology, and art therapy. Transitioning to motherhood is a major biopsychosocial life changing experience. To provide the reader with the overview of this transition, this section is divided into the following subsections: physiological, psychological, social, and spiritual dimensions of transitioning to motherhood. It is important to note that these dimensions do not exist in isolation of one another but are dynamic, interactive, and interconnected.

Because the topic of this dissertation concerns transitioning to motherhood, the literature in this section is delimited to studies on first-time mothers in the first year after childbirth. The first year after childbirth was selected as a timeframe because in the context of medical and nursing studies, transitioning to motherhood has been defined as inclusive of the first year after childbirth (Mercer, 2004; O'Fahey & Shenassa, 2013; O'Hara, 2009; Rubin, 1967). Although the literature also describes that a relationship begins to form with the infant prenatally during pregnancy (Alhusen, 2008; Cranley, 1981; Ettinger, 2006) for the purpose of this study the phenomenon of transitioning to motherhood is delimited to women's experiences of transitioning to motherhood postnatally. The literature is also delimited to Western-oriented cultures such as the USA, Europe, and Australia because in different cultures the phenomenon of transitioning to motherhood may be experienced very differently due to societal and cultural differences. Only

studies published in English were included. This dissertation aims at investigating a more normative, adult, sample, and therefore, studies focusing on specific subgroups of mothers such as adoptive mothers, surrogate mothers, incarcerated mothers, adolescent mothers, etc, were excluded. Furthermore, studies focusing on specific mental or physical health condition of mothers, such as postpartum psychosis, diabetes, HIV, etc., were excluded.

The focus of this section is transitioning to motherhood, and thus the purpose of this section is to provide a comprehensive overview of mothers' lived experiences during this time. Although some quantitative studies are included to provide a context and prevalence of the phenomena associated with transitioning to motherhood, the lived experience of mothers is best captured by qualitative studies. Qualitative research about transitioning to motherhood seeks "to reveal core components of the maternal transition, the commonalities and differences among women, and the meaning and significance of the experience" (Nelson, 2003, p.466). This literature review includes several metasyntheses and a scoping review of qualitative studies that demonstrated a systematic method to analyze and synthesize multiple individual qualitative studies. For example, Nelson's (2003, 2006) metasyntheses were compiled using Noblit & Hare's (1988) method that utilizes metaphors to reveal similarities and differences between individual studies. Another metasynthesis by Afoakwah et al., (2013) utilized a narrative review of qualitative studies that was adopted from Noblit & Hare (1988). To evaluate the credibility of the individual studies, the metasynthesis by Afoakwah et al (2013) used "the Critical Appraisal Skills Programme (CASP) for qualitative studies (Oxman, 2006) and Joanna Briggs Institute for Evidence Based Nursing—Qualitative Assessment and Review Instrument (www.jbiconnect.org/connect/downloads/QARL_crit_appraispdf.pdf)." (pp. 71-72). Scoping review was another form of metasynthesis that was utilized by Prinds et al., (2014) following Arksey and O'Malley's (2005) approach. Although scoping review is a new method, it is comparable to metaanalyses and metasyntheses of qualitative studies (Prinds et al, 2014).

In addition to the metasyntheses of qualitative studies, I manually searched references to locate specific studies, or to locate more recent studies. The individual studies utilized well established qualitative research methodology such as grounded theory, phenomenology, or narrative research. Generally, the individual studies reported methods of reliability and trustworthiness used in qualitative research. Such methods were, for example, member checking (Runquist, 2006), triangulation of data (Nichols & Roux, 2002; Williamson, Leeming, Lyttle, & Johnson, 2012), memoing and reflexivity (Darvill et al., 2010; Runquist, 2006; Williamson, Leeming, Lyttle, & Johnson, 2012), and "an independent confirmability audit (where a grounded theorist colleague not involved in the study reviewed all coding, abstracting, and tracked decisions and documentation)" (Runquist, 2006. p.30).

In this section of the literature review, research that has been conducted about the phenomenon of transitioning to motherhood in the first year is presented. Although this transition is a complex experience that involves several simultaneous and dynamically inter-connected dimensions, for clarity that, the literature reviewed in this section is organized around the following topics: 1) the physiological dimension of transitioning to motherhood; 2) the psychological dimension of transitioning to motherhood; 3) the social dimension of transitioning to motherhood, 4) the spiritual dimension of transitioning to motherhood, and 5) *beyond_words* in transitioning to motherhood.

The Physiological Dimension of Transitioning to Motherhood

The physiological dimension of transitioning to motherhood in the first year includes three predominant experiences of breastfeeding, Postpartum Fatigue (PPF), and body image dissatisfaction. Although the physiological experiences also affect psychological adjustment, these phenomena will be reviewed here separately because they have a biophysiological etiology and impact that is distinct from purely psychological factors that will be reviewed in the following section of this literature review.

Breastfeeding is a new physiological and emotional experience to first-time mothers. Breastfeeding has been widely acknowledged as providing optimal nutrition for infants, and it has been promoted because of health and developmental benefits to the child (Afoakwah et al 2013; Eglash, Montgomery, & Wood, 2008; Horta, Bahl, Martines, & Victora, 2007; McBride-Henry, 2010). Moreover, health benefits have also been found for breastfeeding mothers (Blincoe, 2005). According to Eglash, Montgomery, & Wood (2008), exclusive breastfeeding for the first 6 months is recommended by national and international organizations such as World Health Organization, American Academy of Pediatrics, and American Academy of Family Physicians. Despite the benefits of breastfeeding, breastfeeding rates in the Western societies are low (Eglash, Montgomery, & Wood (2008; Nelson, 2006). In the United States, according to the Centers for Disease Control and the Prevention National Immunization Survey (NIS), published in 2014, data on births during the year 2011 reported that 79.2 % of mothers initiated breastfeeding but only 18.8% exclusively breastfed at 6 months. According to Scott & Colin (2002), over 80% of all Australian mothers who gave birth experienced difficulty breastfeeding while still at the hospital. In the United States, Li, Fein, Chen, & Grummer-Strawn (2008) conducted a closed-ended survey research obtaining self-report data from 1323 mothers about their reasons for weaning the child in the first year. The results from this study indicated that for mothers who weaned their children in the first month and before the 2nd month, the three predominant reasons were the following: “Baby had trouble sucking and latching on” (53.7% and 27.1%, respectively), “Breast milk alone didn’t satisfy my baby” (49.7% and 55.6%), and “I didn’t have enough milk” (51.7% and 52.2%).(p.71). These statistics provide a context within which to understand the mothers’ experience of breastfeeding.

In studies about breastfeeding, mothers experiences were found to be “not just a physical activity, but an inextricable matter of the body, soul and mind” (Afoakwah, 2013, p.74). Women experience breastfeeding differently and it can include both positive and/or a challenging experiences therefore the literature about first-time mothers’ breastfeeding includes both positive

and negative accounts. Reviews of qualitative studies about breastfeeding have been compiled by Afoakwah et al (2013) and Nelson (2006).

In multiple qualitative studies accounts of women report breastfeeding as a pleasurable experience (Bottroff, 1990; Hauch and Irurita, 2003; Nelson, 2006; Schmied & Lupton, 2001). Nelson (2006) conducted a metasynthesis of 15 qualitative studies to synthesize women's breastfeeding experiences. Nelson concluded from this research that breastfeeding was an "engrossing, personal journey," which is very physical and requires maternal commitment, adaptation, and support from multiple sources" (p.13). Nelson (2006) stated that for some women, breastfeeding is experienced "as intimate, physically pleasurable, peaceful, and even sensual" (p.16). Schmied and Barclay as cited in Nelson (2006) found that breastfeeding was "... sensory and perceptual, 'nondiscursive,' and 'embodied'" (p 328). Breastfeeding also provides "connectedness, continuity, or oneness" with the baby (Schmied & Lupton, 2001, p.239). Hauck and Irurita (2003) identified breastfeeding as a rewarding experience. One mother in their study stated: "Breastfeeding gave me one link to a positive mothering side ... I felt that I was being a good mother in breastfeeding. It was rewarding, feeling satisfied within, being happy with your nurturing abilities at that stage" (Hauck & Irurita, 2003, p.66).

Breastfeeding has also been reported as a challenging physically uncomfortable or even painful experience (Afoakwah et al, 2013; Nelson, 2006; Williamson, Leeming, Lyttle, & Johnson, 2009) that may lead to cessation of breastfeeding. Sources of physical discomfort are typically engorgement of the breasts and nipple soreness (Afoakwah et al., 2013; McBride-Henry et al, 2009; Nelson, 2006), plugged ducts, and mastitis (Eglash et al., 2009). Leaking of breast milk can also be a cause for physically uncomfortable experiences and anxiety associated with breastfeeding. According to Schmied & Lupton (2001), when reflecting on incidence of leaking of breastmilk, some mothers expressed feeling "sticky, messy, dirty, embarrassed, and uncomfortable" (p.243). The lived experiences of breastfeeding difficulties were studied by Williamson, Leeming, Lyttle, & Johnson (2009). They analyzed 8 first-time mothers who

reported significant difficulty with breastfeeding in the first month using audio journals and interviews as data. The participants reported the following challenges: latching the infant on, producing enough milk, and pain. Moreover, the participants highlighted the feelings of inadequacy and shame about being mothers. The authors concluded from this research that “this situation had problematic implications for their identity as a mother “because the participants had internalized breastfeeding to be ‘natural’ process that should not be complicated” (Williamson, Leeming, Little, & Johnson, 2009, p.16). Crossley (2009) reached similar conclusions in her autoethnography about her personal experiences in attempting to breastfeed her baby. Crossley (2009) stated that she felt a strong pressure from the society to breastfeed, and also desired to do so. However, despite trying, she experienced setbacks, and when the baby was not gaining weight, eventually resorted to bottle feeding her infant. Crossley (2009) felt that she had “failed” to breastfeed, and consequently experienced a sense of guilt, inadequacy, and isolation.

Another physiological response in the process of transitioning to motherhood is Postpartum Fatigue (PPF). Post partum fatigue is a health condition specifically associated with the post partum period (McMahon, 1995; Mercer, 1986; Hochchild, 1989; Runquist, 2006; Troy, 2003). PPF is defined as an “an etiologically complex phenomenon that causes a woman to feel negative, uncomfortable, and less efficient than usual” (Troy, 2003, p.253). This condition can last into the second year after delivery (Runquist, 2006; Troy, 2003). PPF has both physiological and psychological etiology (Troy, 2003). According to Milligan as cited in Troy (2003), the physiological etiology includes “length of labor, type of delivery, and blood loss associated with delivery” (Troy, 2003p.253) According to Campbell as cited in Troy (2003), physiological factors contributing to PPF are “maternal hormonal shifts, maternal anemia, wound/episiotomy healing, discomfort/pain, and breastfeeding” (p.253). Psychological aspects of PPF include “nonsupportive partner, sleep difficulties, and depression” (Troy, 2003, p.253).). According to Troy (2003), PPF was consistently reported as a major challenge in transitioning to motherhood. Gjerdningen et al. (1996) conducted a survey study about physiological changes in the first year

of motherhood with 436 first-time mothers. Gjerdingen et al. (1996) found from this research that PPF was a prevalent outcome that was highest in the 1st month after childcare but remained a concern over the whole first year of transitioning to motherhood. Runquist (2006) conducted a grounded theory study with 13 participants to study the experience of PPF. From this research, the participants described PPF as an “an overwhelmingly negative, distressing, subjective experience that changed every aspect of participants’ lives” (p.30). Runquist (2006) found that PPF included both the physiological and psychological dimension. On the physiological level, PPF manifested as “body soreness, body aches, and weakness. Pain was a component of each of these categories” (Runquist, 2006, p.31). The mental dimension manifested as “negative self perceptions, irritable, cranky mood, and a reduced ability to pay attention due to a slowing down of the mind, lack of focus, or unsteady or rambling thoughts (Runquist, 2006, p.31). These two dimensions resulted in stress and worry. Despite these challenges, Runquist (2006) identified the predominant theme of “perseverance through PPF” (p.30). Self-transcendence was connected with the persevering process. Runquist (2006) concluded from this research that “participants found the strength to persevere through a belief that their children brought purpose and meaning to their lives” (p.32).

Body dissatisfaction is yet another factor that relates to the physiological transition to motherhood. Among women in the Western society, there is “normative discontent” with their bodies that is well documented (Marshall, Lengyel, & Utioh, 2012; Wolszon, 1999; Tiggemann, 2004). For example, Tiggemann (2004), evaluating body image across the lifespan, concluded that body image dissatisfaction remains stable across the lifespan. In this context, mothers are generally not viewed distinctly from women who do not have children. One study that did reference mothers specifically was that of Gjerdingen, Fontaine, Crow, McGovern, Center, and Miner, (2009). These authors did a study specifically on post partum mothers and found the decline of mother’s body satisfaction from 1 to 9 months postpartum, which was associated with

“eating/appetite abnormalities, greater weight, worse mental health, non-black race, non-breastfeeding status, and fewer immediate family relationships.” (p.492).

In sum, the physiological dimension of transitioning to motherhood includes physiological issues such as breastfeeding, postpartum fatigue, and changes in body image. These experiences, although manifested on physiological level, also affect the psychological and social dimensions of transitioning to motherhood that will be discussed in the next sections.

The Psychological Dimension of Transitioning to Motherhood

Issues related to the psychological adjustment in the first year include both rewards and challenges. Rewards include such experiences as mother-child emotional and psychological connection (McKinlay, 2013; McMahon, 1995; Mercer, 1986, 2004; Nelson, 2003), and personal growth and transformation (Nelson, 2003, Prinds et al., 2014). Psychological challenges of transitioning to motherhood include Post Partum Depression (PPD) (O’Hara & McCabe, 2013), and psychological loss of self (Hill, 2011; Hogan, 2008; Taubman-Ben-Ari, O., Shlomo, S., Sivan, E., Dolizki, M., 2009).

Mother-child connection is one of the rewarding experiences that characterizes transitioning to motherhood in the first year (McKinlay, 2013; Mercer, 2004; McMahon, 1995; Nelson, 2003). Nelson (2003) in her metasynthesis of 11 qualitative studies, called such connection *engagement*, which was defined as “making a commitment to mothering, experiencing the presence of the child, and being actively involved in caring for her child” (p.467). Nelson (2003) noted that the studies in her metasynthesis used different terminology and metaphors that referred to the maternal commitment, the maternal infant bond, and active involvement that characterize engagement during the transitional period” (p.469). Smith-Pierce (as cited in Nelson, 2003) found that a characteristic of mother-child connection was the mother’s love, which was reported by the participants to be surprisingly strong. Bergum and Smith-Pierce (as cited in Nelson, 2003) found that another characteristic of such engagement was that mothers

wanted to be with their infants, and expressed difficulty separating from them. Such psychological connection was also facilitated by the physical connection through breastfeeding (Afoakwah et al., 2013). In fact, according to Schmied and Lupton (2001), breastfeeding has been indicated as “essential for bonding or securing a relationship between a mother and child” (p.235). In addition to mother-child emotional and psychological connection, personal growth and transformation was identified as another psychological dimension common to transitioning to motherhood (Barclay, Everitt, Rogan, Schmied, and Wyllie, 1997; Mercer, 2004; Nelson, 2003; Taubman-Ben-Ari et al., 2009; Sethi, 1995). Nelson’s (2003) meta-synthesis revealed that psychological and emotional engagement enabled growth and transformation. For example, Barclay et al., (1997) conducted a grounded theory study with 55 first time mothers and identified that transitioning to motherhood includes not only growth but also change. Sethi (1995) conducted a grounded theory study with 19 primiparas and multiparas. This study identified the dialectic of becoming a mother as a predominant theme. According to Sethi (1995), this process is characterized by a circular pattern of contradictions and resolutions, and as a result of this process, the woman is transformed into a new self as a mother of her particular infant” (p. 242).

Taubman-Ben-Ari et al. (2009) conducted a mixed methods study about personal psychological growth with 102 first-time mothers. This study sought to provide a multivariate understanding of new mother’s transition to motherhood both during pregnancy as well as after giving birth. The purpose of this study was to explore positive and negative aspects that are related to both psychological growth and perceived challenges during transitioning to motherhood. The authors concluded that in order to learn and grow from transitioning to motherhood this transition must be assessed as a challenge. “In order to experience growth, people must experience and learn something new about themselves and discover new meaning in life” (p.965). After delivery, two variables corresponded to an increased personal growth: problem-focused coping and maternal grandmother’s support. “These findings again indicate that

external resource of support, along with the way the situation is appraised and handled, rather than internal resources, play a role in the ability to grow from transition to motherhood” (p.965).

The phenomenon of the psychological mother-child connection and personal growth has been studied using depictions of the relationship through art making in the context of art therapy by Hocking (2007) and Or (2010). Apart from the more traditional numerical and interview research data, art therapist Or (2010) conducted a phenomenological-hermeneutic study with 24 first-time mothers of 2-4 year old children involving clay sculpting and semi-structured interviews to study mother-child relationship. The participants were instructed to sculpt themselves and their children. Or (2010) found that when mothers sculpted figures of themselves and their children, they experienced mentalization and nonverbal and verbal exploration of the mother-child relationship, which contributed to personal growth and change. Art therapist Hocking (2007) conducted a qualitative narrative study (N=3) that used self-portraiture and artistic metaphors to examine the development of the first time mother’s sense of self during pregnancy. The results, presented through the participants’ artwork, indicated that mothers’ sense of self emerged and came to incorporate the child as they progressed in their first pregnancy.

McKinlay (2013), from the discipline of ethnomusicology, conducted an autoethnography to study her relationship to her children through maternal song. McKinlay (2013) reported on the special aesthetic connection and reciprocity that singing created between her and her children. McKinlay concluded from this research that maternal song can be beneficial “in creating places of excitement, empowerment, love, and peace in the home for mothers and children” (p.718-719).

In addition to these rewarding psychological experiences of mother-child emotional and psychological connection and transformation, there are also challenges related to the psychological dimension of transitioning to motherhood. The psychological challenges related to transitioning to motherhood include depressed mood that can manifest as “post-partum blues” or

Post-Partum Depression (PPD), and psychological loss and mourning of self (Churchill & Davis, 2010; Hill, 2011; Hogan, 2008, 2010; Holton, Fisher, & Rowe, 2010; Mercer, 1986).

Depressed mood immediately following childbirth is referred in the literature as “postpartum blues” (O’Hara & McCabe, 2013; Pacey, 2004) or “baby blues” (Razurel et al., 2011). Decreased energy and increased depressed symptoms are related to the normal adjustment several weeks after giving birth that tends to resolve as the new mother adjusts to motherhood (O’Hara & McCabe, 2013; Perry et al., 2011). However, postpartum blues can develop into Post Partum Depression (PPD), a mental illness that is related to psychological transitioning to motherhood. Although it is not a normative condition, PPD is widely experienced by mothers in the first year of their transition to motherhood. It is estimated that it affects up to 19% of new mothers (O’Hara & McCabe, 2013). Moreover, it is likely that this rate is probably even higher because many new mothers do not report symptoms or seek help because of the fear of stigma associated with mental illness, or fear of being seen as inadequate mothers (Perry et al., 2011). Postpartum Depression, also called Postnatal Depression, is a serious mental illness that occurs in the woman up to one year after giving birth, and is characterized by depressed mood and a decrease in positive engagement with the infant and thus has negative consequences for both the mother’s and the child’s mental health and development (O’Hara & McCabe, 2013; Perry et al., 2011; Sword, Clark, Hegadoren, Brooks, & Kingston, 2012).

To explore the lived experiences of mothers living with PPD, Beck (2002) conducted a metasynthesis of 18 qualitative studies that revealed four overarching perspectives related to the experience of PPD: a) unrealistic expectations; b) “spiraling downward”, which refers to accumulation of depressed mood and negative attitudes; c) “pervasive feelings of loss”, which refers to loss of self, identity, and meaningful relationships; and d) “making gains” which refers seeking help and progressing in recovery (p.453). Edhborg, Friberg, Lund & Windstrom (2005) conducted a grounded theory study with 22 women who experienced symptoms of PPD and found that these symptoms could be explained in terms of losses and change in relation to the

self, the child, and the partner. Roseth, Binder, & Malt (2011) conducted a phenomenological study with four women about the lived experience with PPD, and found that mothers living with PPD either rationalized and isolated themselves, or alienated themselves from the child and social relationships, thus undergoing a loss of self.

Psychological loss can range from a normative to a more serious pathological issue that presents itself as a challenge in transitioning to motherhood. (Nelson, 2003; Hill, 2011; Hogan, 2008; Mercer, 1986). Women are often unprepared for the psychological loss of selfhood associated with the transition ahead (Churchill & Davis, 2010; Hill, 2011; Holton, Fisher, & Rowe, 2010). According to Nelson (2003), loss is a common theme in new mothers' experiences. Such losses for example can be the loss of the sense of self, (Barclay et al., 1997, Nelson, 2003; Hill, 2011; Hogan, 2008) or loss as an overarching category comprised the of control over one's life, time, independence, and previous lifestyle (Barclay et al., 1997); or loss of personal time (Mercer, 1986).

Loss was identified as a category in a grounded theory study with 55 first-time mothers (Barclay et al., 1997). Loss was experienced in a variety of ways and included such specific themes as "Loss of time impacted on relationships and on time for self.", "Loss of freedom and independence", "loss of control over one's own life", "loss of previous lifestyle and loss of rewarding social roles", (p.724). "Loss of sense of self was exhibited by many women as loss of confidence, self esteem and a negative perception of themselves as mothers" (Barclay, 1997, p.724). New mothers reported that transitioning to motherhood with the new experiences affected them so that they experienced a shift from a confident, self-contained person to a person who lacked confidence. The lack of confidence manifested in concerns about handling and emotionally regulating the child and doubts about how to best address these issues. Some mothers expressed guilt over the loss of self and confidence (Barclay, 1997).

Psychologist Hill (2011) provided an autoethnographical account of her transitioning to motherhood in the first year. According to Hill (2011), this was a time characterized with intense

joy but also marked by confusion and losses. She experienced loss of self that came as a surprise to her: “I had expected to feel many things after the birth but bereaved of my former self and life was not one of them” (p.40).

Psychological loss of self was the predominant theme in art therapist Hogan’s (2008, 2010) case study research about new mothers anger in transitioning to motherhood. Hogan (2010, 2008) found that transitioning to motherhood is associated with a loss of self. Hogan’s (2008) research focused on angry feelings that may emerge post partum because of the multiple losses: loss of a sense of self, and loss of control of the body, and feelings of being violated due to medicalization of childbirth. Hogan (2012) studied the use of art therapy as a means by which women could explore their transition into motherhood by assisting the mothers in “ the reconstruction of a new self-identity, albeit a multifaceted one” (p.71).

In a seminal research study, Mercer (1986) conducted a study with 295 women using both quantitative and qualitative data to study maternal role attainment using both adult and teenage sample of mothers. From her research, the loss of personal time emerged as the biggest challenge experienced by new mothers. By personal time, Mercer (1986) referred to the more pragmatic everyday personal and social activities such as showering or grooming herself, and socializing with the partner. 92% of the adult sample of this study identified this theme as an acute challenge in the 1st month after childbirth. This percentage decreased over time, making up an average of 17% in the adult sample by the end of the first year (Mercer, 1986, p.201). Another challenge associated with psychological loss was “loss of freedom” which was referred to as always having to be present to take care of the child’s needs. The average percentages of adult mothers who identified this challenge at 1, 4, 8, and 12 months after birth were 28%, 9%, 18%, and 10%, respectively (Mercer, 1986, p.202).

To summarize, the psychological dimension of transitioning to motherhood includes multifaceted experiences. On the one hand, new mothers experience personal growth and transformation, and establish a bond with the infant, which is rewarding. Conversely, this

transition is also associated with a series of normative losses, such as the psychological loss of self, and more pathological psychological challenges such as PPD.

The Social Dimension of Transitioning to Motherhood

The social dimension of transitioning to motherhood refers to the relationships and roles that the new mother has with her partner, other women including her own mother, work and family balance, and expectations to mothers from society at large (Prinds et al., 2014; Nelson, 2003; McMahon, 1995; O’Faney and Shenassa, 2013).

The birth of an infant was reported to change the relationship with the partner. Sometimes it was reported to strengthen the relationships (Darvill et al., 2010; Nelson, 2003; Prinds et al., 2014). Conversely, the birth of the infant was also reported to contribute to a strain in relationship with the partner (Nelson, 2003; Prinds et al., 2014). On the positive side, the mothers reported that the birth of the infant strengthened their relationship with the partner. For example, Darvill et al. (2010) found an overarching theme of forming a family unit: “A striking similarity existed in the way they described having a child as being the process by which they and their partners became a family unit” (p.363). Cudmore as cited in Nelson (2003) suggested that the birth of a child “transforms the couple into a family” (p. 91). Callister et al., as cited in Prinds et al. (2014) conducted a study with 24 Russian women found a stronger connection with the partner. One participant from this study stated: “My relationship with the father of my baby has changed for the better. We call the baby ‘our happiness’” (Callister et al., 2007, p.23).

In contrast to these positive findings, studies have also found strain in the relationship with the partner following childbirth. For example, the change in distribution of domestic labor and childcare was a source of conflict between the partners (Barclay et al., 1997; Cowdery et al. 2005; Darvill et al., 2010; Nelson, 2003). Cowdery et al. (2005) found that in traditional gendered families, mothers had closer relationships with their children than fathers did, but also experienced greater burden in childcare related activities. According to Cowdery et al., (2005), this caused frustration in some mothers because they perceived the inequality of child related

tasks and time. For example, one participant stated: “He’s out playing golf and I’m still at home working... You don’t play until the work is done, and my work is never done” (p.340). Another common theme that caused frustration between the partners was the sexual relationship (Barrett et al., 2000; Nelson, 2003; Pacey, 2004). Smith-Pierce (as cited in Nelson, 2003) identified the new mother’s decreased sexual desire after childbirth was a major theme. In a review article, Pacey (2004) stated that “couples have great pleasure from their baby, but many suffer significant losses in companionate activities, sex and mutual nurturing and attentiveness” (p.242). According to Pacey (2004), studies generally have found a decreased sexual activity during pregnancy and the postpartum, “reaching a point near zero in the immediate postpartum period and then a slow increase over the first year to pre-pregnancy levels”(p.239). Common problems with sexual functioning after childbirth include “dyspareunia”, “lack of libido and vaginal dryness”, and “negative body image and anorgasmia associated with pain and trauma” (Pacey, 2004, p.239). Barrett et al. (2000) conducted a study with 484 first-time mothers and found that “over 80% of women experienced at least one sexual problem in the first three months after delivery and two-thirds of women were still experiencing problems at six months postpartum” (p.240). Despite the high prevalence of sexual problems in postpartum women, only 15% of the women addressed their sexual problems with health care providers (Barrett et al., 2000).

A category that falls under the social dimension of transitioning to motherhood is women’s social relationships with and support from other women (Darvill et al., 2011; Demecs et al., 2011; McMahon, 1995; Nelson, 2003; Prinds et al., 2014). Connecting to women from different generations was a predominant theme in several studies (Callister, 2004; Callister et al., 2007, 2010; Darvill et al., 2011). Darvill et al. (2011) found that social connections with other women to be beneficial to the new mother. Demecs et al (2011) conducted a qualitative study with 7 participants to study pregnant women’s experiences in attending a prenatal program that incorporated creative arts activities. Although this program was not explicitly designed as creative arts therapy, creative activities such as singing, dancing, storytelling, and weaving were

incorporated into the prenatal group to promote emotional health and peer support. From this research, a theme of being connected with other women emerged. The participants of this study experienced an increased sense of trust and comfort, which provided the necessary support in preparation to childbirth and motherhood (Demecs et al., 2011).

Connecting with their own mothers was identified as another theme related to the social dimension of motherhood (Darvill et al., 2011; Taubman-Ben-Ari et al., 2009). In a grounded theory study with 13 new mothers, Darvill et al. (2011), found that connection with their own mother was a predominant theme. All women in this study stated their mother's role in "offering support during pregnancy and in the postnatal period" (p.362). For the women whose mothers did not live close by, not being able to obtain practical support was perceived as disadvantageous. Taubman-Ben-Ari et al. (2009), found from a mixed methods study with 102 first-time mothers that maternal grandmother's support was positively correlated with personal growth during transitioning to motherhood. Related to the relationship with maternal grandmother, awareness into how the young women were mothered emerged as a theme in art therapist Or's (2009) study. Or (2009) used clay sculpting of mothers and children in a study with 24 Israeli mothers to explore their mental states and insights as mothers. Or (2009) found from this study that one insight that mothers gained from the clay sculpting and interviews was awareness of their relationships with their own mothers. These insights emerged in the context of intergenerational transmission. Clay sculpting triggered women's mentalization and insights which related to how the childhood experiences and relationship with their own mothers affected them as mothers. One participant was disappointed to recognize the resemblance she had with her own overprotective mother, and stated; "I feel like my mother, the same, and it kills me" (p.324). This participant realized that she did not want to repeat her own mother's overbearing behavior, and attempted to give her children more independence. Another participant from this study recalled explicit painful childhood memories during the sculpting process. She interpreted her clay figure as the maternal hug that she had been deprived of as a child. This participant had experienced maternal absence

in early childhood because of her mother's devotion to career and subsequent death when the participant was still a child. From the sculpting interview, this participant gained insight into the fact that by focusing on providing her child with the emotional support and physical availability, she had compensated for her own mother's absence (Or, 2009).

Balancing work and family was another category that was identified under the social dimension of transitioning to motherhood (McMahon, 1995; Faulkner, 2013; Newborn, 2012; Nichols & Roux, 2002; O'Reilly, 2010). In the United States, 57.3% of mothers worked in 2013 (US. Department of Labor, 2014). Returning to work can be rewarding but balancing work and motherhood can also be a challenge (Newborn, 2012; Nichols & Roux, 2002; O'Reilly, 2010). Most mothers who are employed also carry out the majority of household tasks (Nichols & Roux, 2002; O'Reilly, 2010), and thus mothers face "competing commitments between work and family" (McMahon, 1995, p.79). Killien as cited in Nichols and Roux (2002) identified that such role conflict can result in fatigue and depression, and cause occupational stress. Newborn (2012), in a review article stated that studies generally suggest that returning to work is a predominantly negative experience for mothers, "at least in the United States, where adequate, paid maternity leave is not guaranteed and good quality childcare is often hard to arrange" (p.263). Returning to work was a predominantly negative experience as reported in Nichols & Roux's (2002) study on maternal perceptions among those mothers (n=74) who returned to work.. Under the umbrella of the negative perceptions of returning to work, five subcategories emerged, which were presented in percentages. The most prevalent negative perception was that of participants role conflict/overload (35%), which related to difficulty balancing the work and family, leaving the infant, and unrealistic expectations. Twenty three per cent (23%) of the respondents stated that family stress was an issue, which related to insufficient preparation, marital conflict, and separation anxiety. Family/child issues that related to unavailability and cost of childcare, and lack of family support, were reported by 18% of the respondents. In addition, 15% reported

financial problems, and 9% reported psychosocial problems such as depression, lack of personal time, and lack of sleep.

Despite these challenges, in the same study by Nichols & Roux (2002), mothers also reported resiliency building, which was viewed as positive adaptations. The four subthemes of resiliency building included social support (33% of participants), which related to support from husband and family; maternal role satisfaction (23%) which referred to enjoyment of motherhood; positive adaptation (23%) which related to personal resiliency and communication with partner; and work satisfaction (23%).

Unrealistic expectations of motherhood is a topic that relates to the social dimension of transitioning to motherhood. The fact that new mothers are unprepared for the transition to motherhood and have idealized expectations about the transition is well documented (Churchill and Davis, 2010; Cowdrey, 2011; Darvill et al., 2010; O’Faney & Shenassa, 2013). These idealized expectations are often conveyed in the media, by peers, healthcare professionals, and parenting manuals (Cowdrey, 2011; Darvill et al., 2010; Heisler & Ellis, 2009; Hill, 2011; O’Faney and Shenassa 2013; Razurel, 2011). According to O’Faney and Shenassa (2013), the expectations relate to the way that mothers adjust to the transition: “When expectations are based on incomplete or incorrect information and conflict with the reality of a situation, the dissonance that results can be disruptive to the individual and to relationships” (p.616). One source of unrealistic expectations becomes apparent with communication from the healthcare providers such as midwives and nurses (McLellan & Laidlaw, 2013; Razurel, 2011). According to McLellan & Laidlaw (2013), many mothers, particularly primiparous, expect the health care professionals to assist them with gaining knowledge and confidence to take care of their infant. For example, Razurel (2011) found that for the mothers who struggled with breastfeeding, there was a discrepancy between the idealized image that they obtained from antenatal classes and the actual experiences.

Another unmet expectation was division of labor between the partners (Biehle & Mickelson, 2011; Cowdery & Knudson-Martin; Wardrop & Popadiuk, 2013). Psychologists Biehle and Mickelson (2011) conducted a quantitative study using questionnaires and scales with 104 couples (208 individuals) who became parents for the first time about expectations to division of childcare and play pre and post partum. Findings from this study indicated that mothers experienced violation of expectations in that they expected that fathers would contribute more to childcare related tasks. In a qualitative study about post-partum anxiety with 6 first-time mothers, Wardrop and Popadiuk (2013) found that the lack of perceived support from husband was one of the major themes relating to postpartum anxiety. In particular, the majority of women in this study reported that in their assessment, their husbands did not contribute to childcare related tasks to the extent that they had expected prior to giving birth, and this contributed to the participants' anger and frustration. In a qualitative study with 50 couples Cowdery and Knudson-Martin (2005) explored how construction of motherhood related to gender equality. Cowdery and Knudson-Martin (2005) found from this study that idealization of motherhood was related to the views of motherhood as a gendered talent, which in turn related to gender inequality: "Couples of this study began with beliefs of idealized motherhood, then responded to childcare tasks and demands in ways that maintained an unequal workload, deepened mothers' connection with their children, and encouraged fathers to step aside" (p.343).

The third set of unrealistic expectations of transitioning to motherhood was portrayed by the media (Hill, 2011; Marshall, 1991). Parenting magazines and manuals can present an unrealistic, idealized picture of new motherhood (Marshall, 1991). While magazine images and parenting guides tend to emphasize the positive aspects of becoming a mother, the more realistic images of sleep deprived, exhausted mothers hardly ever are published (Hill, 2011).

To summarize, in the social dimension of transitioning to motherhood, the new mother develops and negotiates her relationships and roles that as a new mother with others such as her partner, employer, and other women, which can be a source of support and conversely, a stressful

experience. Balancing work and family, and expectations of motherhood from society at large were identified as potential sources of stress for the new mother.

The Spiritual Dimension of Transitioning to Motherhood

Spirituality has been recognized to be at the core of human existence (Tanyi, 2002), and an important aspect of health and well being (Callister & Khalaf, 2010). Although there has been a recent interest in the role of spirituality in health care research in general (Callister & Khalaf, 2010; Tanyi, 2002), relatively little is known specifically about spirituality in women's transitioning to motherhood (Callister & Khalaf, 2010). Moreover, the term spirituality is ambiguous in wider nursing and health sciences research literature (Tanyi, 2002), and spirituality in transitioning to motherhood has not been clearly defined in research literature (Prinds et al., 2014). According to Callister and Khalaf (2010), in nursing and health sciences literature, spirituality has been referred to in a variety of ways. For example, themes that refer to this term include "spirituality as religion, spirituality as the meaning and purpose of life events, spirituality as connectedness to others and/or a Higher Power, spirituality as nonreligious values, spirituality as holism, and spirituality as self-transcendence" (p.17). To clarify and define the term, Tanyi (2002) conducted a concept analysis from 76 articles and 19 books to define spirituality for the nursing discipline. From this analysis, Tanyi (2002) proposed the following definition of spirituality:

Spirituality is a personal search for meaning and purpose in life, which may or may not be related to religion. It entails connection to self-chosen and or religious beliefs, values, and practices that give meaning to life, thereby inspiring and motivating individuals to achieve their optimal being. This connection brings faith, hope, peace, and empowerment. The results are joy, forgiveness of oneself and others, awareness and acceptance of hardship and mortality, a heightened sense of physical and emotional well-being, and the ability to transcend beyond the infirmities of existence (p.506)

Spirituality was a dimension of transitioning to motherhood that emerged in Prinds et al. (2014) scoping review. In a scoping review of 11 qualitative studies about the meaning of transitioning to motherhood, Prinds et al. (2014) used the existential psychological framework to identify the existential dimension of *Überwelt* that comprises spiritual and existential aspects of meaning making of transitioning to motherhood. This dimension relates to the transcendent aspect of motherhood experience and thus is intangible and even difficult to articulate (Callister, cited in Prinds et al., 2014). The studies investigating the spiritual dimension of transitioning to motherhood have a particular focus on childbirth experience (Callister, 1992, 2004; Schneider et al., 2013). Prinds et al. (2014), in the scoping review of 11 qualitative studies identified that a general finding was that childbirth was a spiritual experience: “creating meaning in life was also related to transcendent ideals both fulfilling purposes of life, but to some mothers also strengthening the experience of a transcendent dimension, for example in the feeling of closeness to God” (p.740).

Callister and Khalaf (2010) conducted a secondary analysis on their previous phenomenological research on childbirth and spirituality that spanned 20 years. Callister and Khalaf (2010) conducted this multinational research with women from different religious denominations. The authors concluded from this research that spirituality was an integral part of child birthing experience-- the majority of the participants agreed that childbirth was a spiritual experience. Most of the women in this study believed that God would assist them in the process of childbirth. In addition, religious beliefs and rituals such as prayer were identified as a coping mechanism that women relied on for assistance during delivery.

Some women used religious language to describe their experiences of transitioning to motherhood. Callister (2004, 1992) conducted open ended qualitative birth narratives to study spirituality and childbirth experience. For example, one mother from Callister’s (2004) study reported ‘When the baby was born I felt the Spirit of the Lord touch my heart’ (Callister, 2004,

p.513). In a study with Mormon women, there was a strong link between the religious beliefs and the meaning associated with childbirth, 'being blessed with a baby' was a theme that emerged (Callister,1992, p.9).

Spirituality was also expressed in nontheistic terms (Prinds et al.,2014). For example, one Australian mother stated: '... having a 'connected' experience with a Higher Power, a profound or life-altering experience...' (Callister et al.,2010, p.5).

Schneider (2012), from the perspective of social work, conducted a grounded theory based on the survey research with 119 women about the role of spirituality in their experience of transitioning to motherhood. Schneider (2012) concluded from this research that

Themes regarding the spiritual dimensions of childbirth emerged from the data and support current research demonstrating the importance of spirituality in women's lives and the meaningful and transformative nature of childbirth experiences (p.212)

To summarize, the spiritual dimension of transitioning to motherhood is emerging in nursing and health sciences research, and becoming more clearly defined. This dimension of transitioning to motherhood refers to the existential meaning making and purpose in life that may or may not be connected with religiosity. This dimension of transitioning to motherhood has been identified as highly prevalent and influential among women, particularly during childbirth. Despite the powerful impact that spirituality has on women during childbirth, it has been suggested that spiritual experiences are difficult to define and articulate (Callister & Khalaf, 2010).

In summarizing the research studies on transitioning to motherhood, this section of the literature review outlined the dimensions of women experiences in transitioning to motherhood: the physiological, the psychological, the social, and the spiritual dimensions. From reviewing the literature, it became evident that although *beyond_words* experiences were not explicitly studied, mothers' accounts of those *beyond_words* experiences were inherent in the four dimensions of

new mothers' experiences. For example, in embodied experiences of breast feeding (Schmied & Barclay, 1991; Schmied & Lupton, 2001), relational experiences and intersubjectivity in connection with the child (Nelson, 2006; Schmied & Lupton, 2001), and imaginal experiences such as fantasies of herself as a mother and expectations to motherhood (Hill, 2011, O'Faney and Shenassa 2013; Or, 2009) are experienced yet difficult to unarticulate (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991).

Transitioning to motherhood is a life changing experience, and has been suggested that the experiences of transitioning to motherhood are difficult to articulate or put into words (Prinds et al., 2014; McBride-Henry et al., 2009; McMahon, 1995; Schmied & Barclay, 1999). Therefore, traditional research methods are limited in studying this phenomenon. However, a few research studies have been conducted relative to the *beyond_words* of motherhood. For example, an autoethnographic study by McKinlay (2013) about maternal song as musical connection between the mother and the child, and an art therapy study by Or (2009) about mothers' mentalization of mother-child relationship through clay sculpture, were included in the section titled the psychological dimension of transitioning to motherhood of this literature review. However, beyond the text based research, artistic practice as research has been posited as a form of Arts-based research (Sullivan, 2005). Therefore, this literature review will include in addition to the more traditional text based research also artistic explorations of motherhood and transitioning to motherhood.

Beyond-words in Transitioning to Motherhood: Artistic Practice

The visual arts practices are not reflected in the more scientific research literature on transitioning to motherhood in the fields of health sciences. Nonetheless, artists have used their art practice as a method to explore motherhood and transitioning to motherhood through various media such as painting, photography, sculpture and installation (Baillie, 2012; Betterton, 2010; Chernik, 2002; Bassin, Honey, & Kaplan, 2012; Lichtenstein, 2012; Liss, 2009). Baillie (2012) described an art exhibition called *Modern Madonnas* that showed the work of 13 British mothers-

artists who explored maternal subjectivities including maternal aesthetics using sculpture, video, photography, installation, and other media. For example, one of these works, Debi Retallick's *Mother and Child* sculpture, featured a large white papier mache sculpture of a pear that contains smaller pears inside that invites the viewer to reflect on the embodied maternal-child bond.



Figure 4. Debi Retallick. *Mother and Child* (2013)

In contrast, another artist, Maggie Rose, in her video *Eating Eggs*, explored the mother's ambiguity about the issue of fertility. Another author Chernick (2002) reported on an exhibition titled *Maternal Metaphors* where mothers- artists have used the visual arts to explore maternal ambivalence that is difficult to express in words through artistic media such as photography, drawing, and installation. Chernik (2002) stated: "Our culture publicly celebrates motherhood to such an extreme that any form of ambivalence-mother-toward-child especially-is difficult to express" (p.29).

Representations of motherhood in various arenas of contemporary society such as the popular culture, art, medicine, and psychology influence how motherhood is perceived.

According to authors Parker (1995) and Bassin, Honey, & Kaplan (2012), we are presented with a

limiting image of the mother in our society. “The predominant image of the mother in white Western society is of the ever-bountiful, ever-giving, self-sacrificing mother” (Bassin, Honey, & Kaplan, 2012, p.2). Authors Brand and Granger (2011), and Liss (2009) added that representations of the mother in visual art are still a stigma: they are either idealized or invisible and thus do not adequately show us the lived experience of motherhood.

This stigma has been challenged by feminist artistic practice that emerged in the 1960s in the U.S (Liss, 2009), and between 1973 and 1984 in Britain (Betterton, 2010). Feminist art practice seeks “to give artistic expression to one of the most mythologized and misappropriated chapters in a woman's life” (Chernik, 2002 p.29), “for both women and men need to see expression of these complex issues as well as read about them” (Chernik, 2002, p.24). Artistic practices do not offer conclusions but open up a dialogue about motherhood, and challenge stereotype and idealization (Bassin, Honey, & Kaplan, 2012; Chernik, 2002; Lichtenstein, 2012; Liss, 2012).

Summarily, transitioning to motherhood is a life changing experience that occurs in multiple dimensions of a woman’s life. The physiological, psychological, social, and spiritual dimensions of transitioning to motherhood as identified in the literature were reviewed in the previous sections. *Beyond_words* in transitioning to motherhood is the topic of this research study that is operationally defined as sensory-embodied, relational, and imaginal experiences that are inherent in all dimensions of transitioning to motherhood but are difficult to articulate (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991). There are very few research studies (McKinlay, 2013; Or, 2009) that relate to the *beyond_words* experiences of transitioning to motherhood, however, examples from artistic practice that have explored these phenomena, were also provided in this section of the literature review. Based on the examples of artistic practice as an exploration of what lies *beyond_words* in transitioning to motherhood, and related to the topic of this study, aesthetics, which is the topic of the next section, is positioned as the epistemology for the purpose of this study.

Aesthetics

Section Overview

This dissertation focuses on *beyond_words* experiences of first-time mothers as they transition to motherhood. In this arts-based study, (self) portraiture is used to express and make meaning of what lies *beyond_words* in first-time mothers' transition to motherhood. And thus, an overview of aesthetics as a way of meaning making relative to the epistemology of this study will be presented in this section.

The conceptualization of the aesthetics for the purpose of this study builds on the term as it is used in art therapy which is informed by the wider conceptualizations of aesthetics as meaning making of human experiences in the fields of philosophy, psychoanalysis, anthropology, and feminist theory (Brown, 2011; Davis, 1997; Dewey, 2005; Dissanayake, 2001, 2000; Ettinger, 2006; Hagman, 2009, 2011; Johnson, 2007; Lintott, 2011). This conceptualization differs from the traditional notions of aesthetics as pertaining to appreciation of beauty and qualities of taste in two ways: 1) from the perspective of art therapy, aesthetics is viewed as poiesis (creating something new), and meaning making of human experiences; and, 2) aesthetics as positioned in this study contains the notion of the sublime, which is “a complex experience located where negative and positive emotions merge in a precise combination to make one's own mental, emotional, and psychological strength particularly salient” (Lintott, 2011, Kindle Locations 5574-5575), and thus challenges the traditional notion of “beauty” associated with aesthetics (Lintott, 2011; Levine, 2004; Robbins, 1989).

Aesthetics for the purpose of this study is operationally defined as the expression and practice of meaning making in a wide range of human experiences. Specifically, in the context of this study, aesthetics refers to the first time mothers' expression, responding to, and meaning making of the multidimensional experiences that she encounters when becoming a mother.

For the purpose of this study, the literature is delimited to aesthetics as meaning making as discussed in the literature of art therapy, feminist theory, psychoanalysis, anthropology, and

philosophy. Positioned as such, the literature in this section excludes aesthetics as pertaining to beauty and taste. In the following section I will provide definitions and a contextual background of aesthetics relative to this study.

Aesthetics as Meaning Making of Human Experiences: Definitions and Origins

Aesthetics is complex topic that has challenged authors from interdisciplinary fields such as philosophy, art history, anthropology, psychoanalysis, and the fine arts. According to Langer (1953), aesthetics has a variety of definitions including “the science of the beautiful”, “the theory or philosophy of taste”, “the science of the fine arts”, or...”the science of expression” “ (p.12). As such, aesthetics is a term that “has acquired notoriously abstract and sophisticated connotations; it is associated with philosophical or critical debates that often seem rarified or pedantic” (MacLagan, 1998, p.9).

In addition to these focused definitions, aesthetics also has a wider meaning that includes a wide range of human experiences (Dewey, 1953; Johnson, 2007; Langer, 1953; MacLagan, 1998) that stem from the sensory knowledge (Cooper, 1997; Hagman, 2009; Harris Williams, 2010). Elaborating on Dewey’s ideas, Johnson (2007) placed aesthetics at the cornerstone of human meaning making. Johnson stated: “Aesthetics is properly an investigation of everything that goes into human meaning-making, and its traditional focus on the arts stems primarily from the fact that the arts are exemplary cases of consummated meaning” (p.xi). He continued: “(1)Aesthetics is not just art theory, but rather should be regarded broadly as the study of how humans make and experience meaning, because (2) the processes of embodied meaning in the arts are the very same ones that make linguistic meaning possible” (p.209). And thus, aesthetics allows for the expression of experienced but nonverbal and unconscious meanings.

The origins of aesthetics have been proposed to stem from the early mother-child relationship as discussed by psychoanalysts Hagman (2011, 2009) and Bollas (1987), and anthropologist Dissanayake (2006, 2000). Hagman (2011) wrote that “A person’s aesthetic is the formal dimension of the unique way in which he or she experiences, responds to, and engages the

world” (p.16). Hagman (2011) believed that aesthetics is related to the early mother-child relationship, going back to a way of knowing that is “nonrational and irreducible” (p.17).

Hagman (2011) wrote:

We see its most archaic presentation in the curve of the mother’s shoulder during nursing, her heartbeat and breath, the melody of her voice, the balance of her eyes and smile – all embedded in the warmth, nourishment, and security in the mother-infant interaction (Hagman, 2011, p.1)

Psychoanalyst Bollas (1987) stated that aesthetic experiences are reminiscent of early encounters with and handling by the mother who organizes the infant’s world before he or she is able to do it. Bollas (1987) wrote:

The mother’s idiom of care and the infant’s experience of this handling is one of the first if not the earliest human aesthetic. The uncanny pleasure of being held by a poem, a composition or a painting... rests on those moments when the infant’s internal world is partly given form by the mother since he cannot shape them or link them together without her coverage (Bollas, 1987, 32–33)

Dissanayake (2006, 2000) offered an anthropological perspective on aesthetics and wrote that the early experiences of mutual communication, holding, singing, gaze, etc. between the mother and child elicit aesthetic experiences and belonging. From an evolutionary perspective this aesthetic connection between the mother and the child is seen as an important means of maintaining relatedness, group cohesion and ultimately survival of the group. Dissanayake stated:

It is in the inborn capacity and need for (1) mutuality between mother and infant (the prototype for intimacy and love) that four other essential capacities and psychological imperatives are enfolded and embedded and gradually, in their time emerge. Mother-infant mutuality contains and influences the capacity for 2) belonging to (and acceptance by) a social group, (3) finding and making meaning, (4) acquiring a sense of competence

through handling and making, and (5) elaborating these meanings and competencies as a way of expressing or acknowledging their vital importance. (Dissanayake, 2000, p.8)

Dissanayake (2000) stated that aesthetics are rooted in the early communication between the mother and the child:

Human infants come into the world ready to engage with others. During their first year, before being able to do much of anything else, they are exquisitely sensitive to certain kinds of sounds, facial expressions, and head and body movements that others present to them. (p.3)

According to Dissanayake (2006) these ancestral traits of intersubjectivity in aesthetics are still present: “Even today, when the arts are typically created and even appreciated in solitude, their origins in the mechanism of mutuality suggests that they are motivated by a desire of intersubjective communication and response” (p.316).

Art Therapy Aesthetics

Aesthetics is at the core of art therapy theories according to both seminal (Henley (1992), MacLagan, 1998; Read Johnson, 1991; Robbins, 1987, 1988; Wadeson, 1996) and recent authors (Gerber, 2014; Levine, 2004; Moon, 2004). Art therapy authors offer particular perspectives on aesthetics (Levine, 2004; McLagan, 1999; Moon, 2002; Robbins, 1989, 1988) that will be delineated below.

Levine (2004) used the Greek concept *poiesis* (creation of something new) as a basic concept for the theory of expressive arts therapy. *Poiesis* in the context of creative arts therapy refers to “the act of responding to what is given, imagining its possibilities and reshaping it in accordance with what is emerging” (Levine, 2004, p.71). Art and aesthetics in healing go back to tribal times where art had a symbolic meaning in an interactional context. “The arts were particularly suitable for the traditional practice of healing insofar as they always involve both a physical and a psychological dimension” (Levine, 2004, p.17). Therefore, “We will never be able to understand the therapeutic role of the arts until we go beyond the mind-body split which

characterizes modern thought” (Levine, 2004, p.18). According to Levine (2004), the works that are created in the context of creative arts therapy are not always “beautiful in the sense of traditional aesthetics” (p.72). The purpose of creative arts therapy is not to create something “beautiful” but offer an outlet for an expression of a variety of human experiences:

Beauty and terror, joy and suffering, come together in the therapeutic aesthetics of expressive arts therapy. Poiesis depends upon our capacity to respond, with the full range of human resources, to what affects us. Only in this way can we take account of both the wonder and the horror of the world in which we live (Levine, 2004, p.73)

Art therapy processes call for the need to expand the meaning of aesthetics so that it does not just refer to judgment of its execution or qualities of taste such as “good art” or “bad art” (Mclagan, 1999):

Every pictorial image has its own aesthetic qualities, and these will appear in details and local passages as well as in the overall effect. These qualities do not depend on the professional status of the artist; they are an inevitable result of any kind of mark-making, representational or not, and we respond to them even when we are not aware of the fact (p.306)

According to MacLagan (1999), the viewers’ responses to aesthetics in art are not only intellectual and analytical, but also embodied. “Our response to aesthetic qualities is a complex one: Far from being detached or disinterested, it is an embodied one, that is, it involves the body at a number of levels simultaneously, in a combination of physiological and imaginative response” (p.307). MacLagan (1999) advocated for the closer attention to the interplay between the analytical and the embodied processes, which necessarily calls for the greater inclusion of the aesthetics in discussion of art therapy theory and practice.

Psychoaesthetics is a theory developed by art therapist Robbins (1988, 1987, 1986) relative to aesthetic intersubjective experiences within the Object Relations framework. Robbins (1987) referred to aesthetics as “making the inanimate animate, giving form to diffuse energy or

ideas, breathing life into sterile communications. *Communication* is a key word here, for a completed work of any medium becomes art only when it touches us as a living truth“ (p.22). According to Robbins (1987), this relationality and communication stems from mother-child relationships and works on two levels: the client’s relationship with the artwork, and the client’s relationship with the therapist. Robbins (1988, 1987) proposed that art making within the therapeutic relationship, which he referred to as psychoaesthetics, offers a unique way to access these early mother-child aesthetic intersubjective processes. Robbins posited that the early relationship between mother and child is symbolically recreated in the art therapy relationship, which provides a holding space for expression of sensory and preverbal processes in symbolic artistic form.

An art therapy relationship may seem strangely close to a love affair /.../ It contains all the trusting qualities of an early mother-child relationship where the basic mode of communication is one of a soft touch or perhaps a sweet sound (Robbins 1994, p.32)

Robbins (1986) stated that the therapist understands his or her client through the frame of perception: a crucial factor in the therapeutic relationship is the therapist’s “responsiveness to a variety of sensory and perceptual cues” (p.17). The challenge to the therapist in this process is “to relate aesthetics to developmental issues as he seeks new and different structures to promote individuation and differentiation” (p.28).

Relative to meaning making of a variety of human experiences, aesthetic significance, in addition to beauty, can also arise from the sublime as exemplified by illness narratives, for example where “the sublime aspects of illness experience penetrate the sensuous and material world of the disease and its treatment (Radley, 1999, p.780). Although the term sublime is generally explicitly not used in the art therapy literature, it is implied in this context. Art therapy aesthetics are not just what gives pleasure to the senses (Moon, 2002; McNiff, 1998; Robbins, 1987; MacLagan; 1994), this is would limit art therapy art to “superficial gratification” (Moon, 2002, p.136). Instead, art therapists contend that aesthetic significance can also emerge from a

client's struggles and even pathology – the sublime (Moon, 2002; McNiff, 1998; Robbins, 1987).

Moon (2002) wrote:

When we are moved to tears by tender expression of pain, in awe of the courage required for a client to transform internal experiences into tangible form, or witness a client giving artistic expression to something that could be articulated in no other way, we comprehend beauty in forms that deviate from conventional aesthetic standards (p.137)

Relational and intersubjective aspects of aesthetics relate to art therapy because art making and meaning making in art therapy necessarily occurs in the intersubjective space between the client and the therapist (Gerber, 2014; Gerber et al., 2012; Henley, 1992; Levine, 2004; MacLagan, 1999; Moon, 2002; Skaife, 2001).

Gerber et al. (2012) placed art therapy within the intersubjective artistic matrix which is defined as “the dynamic intermediary space between people in which the fantasies and realities of individuals converge, interact and inspire creativity, resulting in an expressive art process that represents and makes meaning of our experience of self/other” (p.42). Gerber (2014) stated that aesthetic intersubjective communication is at the core of the art therapy process that allows the client to convey his or her story in the intersubjective environment witnessed by an art therapist.

Cathy Moon (2002) suggested that art therapy art can be seen in the context of a new aesthetic that she refers to as a relational aesthetic that calls for “an expanded view of beauty” (p.136). Relational aesthetics that builds on the work of art therapists Robbins, McLagan, and Levine, but arose independently from the relational aesthetics in the fine arts, was defined by Moon (2002) as “an aesthetic concerned with the nature of artistic phenomena and aesthetic sensibilities within the context of relationships” (p.140). Relational aesthetics differ from the traditional understanding of aesthetics in that its main purpose is to “promote healthy interactions within and among people and the created world” (p.140) rather than offer sensory pleasure. And thus, according to Moon (2002), art therapy aesthetics have the capacity to provide access to art making, engage people in art making, provide opportunities to sharing the artwork, foster self

esteem and dignity, promote trust, foster healing to the individual artist and the community. Crucial to this understanding of art therapy aesthetics is the fact that art is created in the intersubjective space. According to Moon (2002), art therapists can “move beyond synthesizing therapeutic and traditional aesthetic principles and begin to contribute to a new aesthetic, one that is inclusive rather than elitist and that is based in an ethic of care” (p.139).

Skaife (2001) offered intersubjectivity as a framework for the practice of art therapy where “art is seen as a material, communicative gesture outside any individual consciousness” (p.42) that has the capacity to make embodied experiences visible in the intersubjective space. Connection between people then, rather than insights from the individual unconscious, becomes the main therapeutic goal. Skaife (2001) stated: “The purpose then of therapy will be to help the individual reconnect with others and with the world in a fruitful way” (p.40).

To summarize, from an art therapy perspective, aesthetics is viewed as expression and meaning making of a variety of human experiences such as sense-based, embodied, relational, and imaginal experiences. Artistic expression that includes the beautiful and the sublime is proposed to promote the intersubjective therapeutic relationship and its work towards healing.

Feminist Perspectives on Aesthetics

From feminist perspectives, aesthetics have been explored relative to motherhood (Ettinger 2006; Lintott; 2011). These perspectives will be presented below.

In recent feminist thought, a theory relative to maternal aesthetics, the matrixial borderspace, was developed by Bracha Ettinger (2006), a feminist theorist, psychoanalyst, and artist. Ettinger’s theory concerns female difference and subjectivity, which instead of phallogentric binary is situated within the Matrix, which is a relational concept that springs from the symbol of the womb. Ettinger (2006) named this theory the matrixial borderspace that is defined as “the psychic sphere which is trans-subjective and sub-subjective even if and when it arises in the field of the separate individual self and even if and when it operates in the intersubjective relational field.” (p.218). The aesthetic of Ettinger’s matrixial borderspace is

rooted in the relational and the feminine (Berthelsen, 2014). The matrixial borderspace has an analogy with pregnancy: instead of an encounter of objects and subjects, Ettinger proposes “an encounter between I and an uncognized yet intimate non-I neither rejected nor assimilated” (p.218). Within the matrixial borderspace, aesthetics is a way of knowing and co-poiesis, co-creation of something new (Ettinger, 2006a, 2006b). “In this matrixial dimension, subjectivity is thus a co-poiesis of “I and non-I” (Ettinger, 2006a, p.17). Ettinger (2006a) also stated that the matrixial is a symbolic concept that relates to the pre-natal possibility matrixial severality, not the actual mother-child dyad or “object relations”.

Ettinger’s (2006) aesthetic as epistemology comprises both artistic practice and psychoanalysis, and she is able to gain her unique insights by shifting between the two (Pollock, 2004). Ettinger uses diverse materials and methods such as (family) photographs, portraits, painting, photocopying, and montage. For example, her painting *Eurydice* uses superimposed painting over a specific type of photocopying technique that enables the artist to revisit the past and in fact, stay with the liminal moment that the title of the work points to. Photography plays a specific role in Ettinger’s work (Berthelsen, 2014) in that she uses photography not as the fixed historical “truth” but revisits and reworks.

From a feminist artistic perspective, Bickel, McConaghey, Jordan, and Bartley (2011), building on Ettinger’s work, proposed a collective artistic inquiry as a fundamentally relational artistic activity and meaning making. The three women artists engaged in collaborative artistic inquiry about mothering thus disrupting the notions of an individualistic artist that is prominent in our society. According to Bickel et al., (2010) “Ethical and aesthetical artistic collaboration needs to arise from strong individual integrity that can co-encounter and co-engage with an/other within the larger workings of the group” (p.166).

Lintott (2011) wrote about the feminist sublime in the context of aesthetics and relative to aesthetics of motherhood. The sublime is “a complex experience located where negative and positive emotions merge in a precise combination to make one's own mental, emotional, and

psychological strength particularly salient” (Lintott, 2011, Kindle Locations 5574-5575). Specifically, Lintott (2011) conceptualized the feminist sublime which is in contrast to the masculinist, cerebral accounts outlined by Kant and Burke, for example, focus on the embodied aspects of the feminist sublime that contain pain and terror: “the sublimity experienced in the throes of labor and birth is not purely intellectual or otherwise mental. It is decidedly physical as well” (Lintott, Kindle Locations 5640-5642). According to Lintott (2011), the feminist sublime is particularly difficult to articulate as exemplified in women’s birth stories, for example. And thus, aesthetics provides form of expression of a wide range of women’s experiences, including the sublime that is experienced but difficult to articulate.

To summarize, this section was devoted to definitions, origins, and conceptualization of aesthetics relative to this study. Literature from a range of disciplines such as philosophy, psychoanalysis, anthropology, art therapy, and feminist theories were reviewed. Aesthetics for the purpose of this study is operationally defined as an expression and meaning making of a wide range of human experiences. Specifically, in the context of this study, aesthetics refers to the first time mothers’ expression, responding to, and meaning making of the multidimensional experiences that she encounters when becoming a mother. The literature on aesthetics contributes to the understanding of portraiture that is used as the method of this arts-based dissertation study. The next section is devoted to the review of literature on portraiture.

Portraiture

Section Overview

Portraiture covers a broad, transdisciplinary range of inquiry that is used in the fine arts as well as qualitative and arts-based research. Art therapists make specific use of portraiture as a clinical intervention as well as for art therapist’s reflexivity. The purpose of this section is to orient the reader to the diverse perspectives, theories and applications of portraiture as relevant to the research topic of this dissertation. Portraiture relates to the research method of this

dissertation, and it provides a context to both investigate and represent the *beyond_words* in transitioning to motherhood in this arts-based dissertation study.

This section will begin with a review of literature on portraiture from the perspective of the fine arts. First, the definitions and the historical context of portraiture will be provided. Next, literature on portraiture and self-portraiture will be reviewed in terms of their relationality and reflexivity. Of particular interest in the context of this dissertation are portraits of mothers and children which will be illustrated in this section. Finally, relative to the topic of this dissertation, an overview of montage as an artistic technique will be provided.

Next, in this section, an overview of both seminal work as well as recent uses of portraiture in qualitative research which was developed by Lawrence-Lightfoot (1983) and Lawrence-Lightfoot & Davis (1997), will be provided. The definitions and applications of textual portraiture as a genre in qualitative research was adopted as a metaphor from visual practice to provide a multifaceted and contextual picture of an individual or an organization. Apart from the method of portraiture that was developed by Lawrence-Lightfoot, I will also outline the function that (self) portraits such as drawings or photographs have as data elicitation in qualitative research.

Third, related to but slightly different from the use of portraiture in qualitative research, the use of portraiture in arts-based research is presented as an extension of qualitative research that involves a partial return to the earlier concept of portrait in visual art. In arts-based research portraiture as a method of data collection, analysis, and representation of findings extends beyond the text and uses images to convey a multidimensional nuanced portrait of the research participant (Gerstenblatt, 2013; Jongeward, 2009; Rippin, 2012).

Finally, in addition to the use of portraiture in the fine arts and research, art therapists have used visual portraiture both as a clinical intervention with clients (self-portrait) (Alter-Muri, 2007; Davis Halifax, 2003; Hanes, 2007; McGann, 2006), and as a method for art therapist post-session reflexivity (Fish, 1989, 2012; Kielo, 1990; Wadeson, 2003) or a way of establishing

rapport and providing the client with non-threatening mirroring (Costello-DuBois, 1989; Franklin, 2010).

Portraiture in the Fine Arts

Portraiture in the fine arts has primarily been investigated in the context of art history (Nairne & Howgate, 2006; West, 2004), and philosophy (Brilliant, 2002; Freeland, 2010; Gadamer, 1985). The literature in this section is organized in three main topics: This section will begin with the definition of portraiture, followed by a brief history of the genre. Then, relationality and reflexivity as a specific characteristic of portraiture and self-portraiture will be reviewed. The final topic is organized around the theme of mothers and children: literature on portraits of mothers and children, and portraits and self portraits by women will be reviewed. In addition, relative to the method employed in this dissertation, a review of literature on the artistic technique of montage will be provided.

Definitions. Portraiture has been defined in the most general terms as “a work of art that represents a unique individual” (West, 2004. p.21). According to Freeland (2010), “A portrait is a representation or depiction of a living being as a unique individual possessing (1) a recognizable physical body along with (2) an inner life, i.e. some sort of character and /or psychological or mental states” (Freeland, 2010, p.5). Brilliant (2002) stated that portraits are “art works, intentionally made of living or once living people by artists, in a variety of media, and for an audience” (p. 8). Moreover, Brilliant (2002) defined portraiture through asking three questions that the portraitist must answer: “What do I (you, he , she, we, or they) look like? What am I (you, she, he, etc.) like?, and Who am I (you, etc.)?” (p.15).

Since portraiture is generally defined as a representation of a person, it also asks a philosophical question: What is a person? Freeland (2010) clarified the connection between portraiture and philosophy: “Philosophical debates and theories about the nature of the self are relevant to portraiture because we can see signs of their influence in the visual evidence of how

painters depicted persons” (p.83). Several authors (Brilliant, 2002; Freeland, 2010; Gadamer, 1985; West, 2004) agree that portraits can depict a person’s physical appearance and also reveal a “person’s true inner self or ‘air’” (Freeland, 2010, p.80).

The German philosopher Gadamer (1985), in his writing on aesthetics, devoted a section to the portrait. For Gadamer (1985), the portrait contains the essential qualities of the sitter: “What a picture is remains, despite all aesthetic differentiation, a manifestation of what it represents, even if it makes it manifest through its autonomous expressive power“ (p.132). The portrait, however, has different associations for each viewer, and thus is seen and interpreted differently by the viewer. Moreover, Gadamer (1985) saw the portrait as a mediator between the characteristics of the sitter and the universal characteristics of nature: “Even an individual portrait, if it is a work of art, shares in the mysterious radiation of being that flows from the level of being of that which is represented” (p.132).

The portrait is not just a depiction of the visible characteristics but delves deeper into their personality and individuality (Brilliant, 2002; Freeland, 2010; Nairne & Howgate, 2006). “The portrait should allow something of someone’s personal interior life to be made available in public, and this purpose – to bring out hidden information – should be important to both artist and the eventual viewing public” (Nairne & Howgate, 2006, p.7). In sum, a portrait “reaches toward an understanding of its sitter” (Nairne & Howgate, 2006, p.15).

As philosophical and historical conceptualizations of what a person is change over time or throughout history, so do portraits to reflect these changes (Freeland, 2010). The portrait can powerfully depict and question such issues as identity, class, gender, and roles in the society (Freeland, 2010; Nairne & Howgate, 2006). In addition to the individual depicted, the portrait can explicitly or implicitly paint a wider picture of the person and her or his time (Freeland, 2010; Brilliant, 2002; West, 2004). This can be accomplished through careful consideration of the dress, the background, and the objects or other people that are included.

Historical and current contexts of portraiture. In the fine arts, portraiture became prolific in the 15th century and continues to thrive as an artistic genre today (West, 2004). Before the 15th century, portraiture as commonly understood today was rare (West, 2004). Examples of early portraiture arguably date back to as early as the Upper Paleolithic era (McDermott, 1996). Examples of early portraiture have been found the Neolithic period, and this genre was also used in Ancient Greece and Rome (West, 2004). In the 15th century, portraits first appeared in religious paintings. Gradually, people began to be represented outside of the religious context, and also people of different social classes and occupations began to appear in portraits. By the 17th and 18th centuries portraiture was a widely spread genre in Europe, and the portraitist was a professional whose services were available for purchase (West, 2004). At the end of the 19th century, artists began experimenting with the genre to “explore their own psyches, represent their intimate circles, or serve as manifestos of artistic style or purpose” (West, 2004, p.17). Although portraiture has been used by people throughout history in different cultural contexts (Freeland, 2010), it is a predominantly Western phenomenon (Brilliant, 2002; West, 2004). As such, it “is especially sensitive to changes in the perceived nature of the individual in Western society” (Brilliant, 2002, p.8). According to West (2004) and Brilliant (2002), the emphasis on the individual in Western societies explains, in part, the wide use of the genre of portraiture in the West. “The very idea of individuality is thus socially and historically constructed and contingent, and portraiture both grows from and reinforces this particularly Western concept” (West, 2004, p.17).

It is interesting to note that women as subjects of portraits have been treated differently from men (Meskimmon, 1996; West, 2004). While men have been portrayed based on their social and professional status, and identified by name, portraits of women were historically depicted not as themselves but embodying a role such as a goddess, a heroine, or a historical figure, often even lacking the name of the sitter. And thus “portraits of women related them to abstract ideas of beauty rather than status or character” (West, p.149). Idealized beauty is a strong theme in

portraits of women that has its roots in the Italian Renaissance era, and this trend persisted into the middle of the nineteenth century. It is interesting to note that women were idealized in this way not only by men but also by other women, and even in women artists' self-portraits (West, 2004; Meskimmon, 1996).

Contemporary artists employ portraiture to explore issues of culture and identity (Brilliant, 2002, Martin, 1995; West, 2004). Wrote West (2004): "Postmodern visual culture has explored the relationships between individuality, social role, and cultural, sexual, and gender stereotypes, but artists deal with these concepts as unstable, fluctuating, and indeterminate" (p.205). According to Brilliant (2002), the postmodern era has seen a resurgence of interest in (self) portraiture to explore identity issues in terms of social role, gender and sexuality.

In sum, portraiture in the fine arts is used to capture the inner and outer qualities of the individual sitter and thus, facilitates the viewer's relationship with the sitter. Moreover, contemporary portraiture asks the viewer and creator to consider the relationship between individual identity and stereotypical representations of identity. Self portraiture is a subgenre of portraiture where the artist is both the sitter and the viewer. As such, portraiture and self-portraiture provide opportunities for relationality and reflexivity, which will be discussed in the next section.

Relationality and Reflexivity in Portraiture and Self-portraiture

The origin of relationality in portraiture. Creation and interpretation of the portrait occurs in a complex intersubjective environment: between the sitter and the artist, and between the sitter and the viewer (Freeland, 2010; Silver, 1995; West, 2004). For this study, the portrait's relationality will be understood as the connection established between the subject and the spectator that is rooted in the mother-child relationship (Brilliant, 2002). Portraits, in this light, go beyond the representation of a specific person and tap into a more profound relational issue that "involves the representations going back to the earliest stages of life, when the interacting self comes into existence" (Brilliant, 2002, p.9). These early experiences stem from the mother-

child relationship, specifically the infant's experiences of being held and looked at by the mother: "That child, gazing up at its mother, imprints her vitally important image so firmly on its mind that soon enough she can be recognized almost instantaneously and without conscious thought (Brilliant, 2002, p.9).

Brilliant (2002) stated that when the child learns to speak, she or he will attach a name to the image as well as integrate the mother's character and role into the whole picture. These are the precursors of individuation within the self-other processes and identity development which share similarities with the portrait in the following way:

Recognizable appearance; a given name that refers to no one else; a social, interactive function that can be defined; in context, a pertinent characterization; and a consciousness of the distinction between one's own persona and another's, and a possible relationship between them (Brilliant, 2002, p.9)

From these early mother-child experiences stems also the question of relationality of the human nature. "Making portraits is a response to the natural human tendency to think about oneself, of oneself in relation to others, and of others in apparent relation to themselves and to others" (Brilliant, 2002, p.14).

The portrait invites the viewer to relate to it, and the viewer with his or her own associations, memories, and cultural background becomes an interpreter of the portrait:

The spectator becomes an integral part of the identity of the portrait, not by recognizing the specific individual behind the portrait, but through recognizing a relational experience of identification through the mark-making or artistic medium, through openness or transience of image, or 'deferred' image, through concept and poetic imagination (Weiss cited in Tamboukou, 2013, p.8)

According to authors Silver (1995) and Rippin (2012), we are attracted to portraits because of the relationality that we form with it through the sitter's gaze that is captivating. Wrote Rippin (2012): "Portraiture is fascinating because the subject returns our gaze. The subject knows

that they will be looked at and looks right back at us, sometimes across considerable time and space” (p.315).

In sum, the relational aspect of portraiture prompts the viewer to relate to the sitter through aesthetic representation. In addition, the portrait also provides reflexivity through self-portraiture, which will be discussed next.

Reflexivity and self-portraiture. Self-portraiture is a genre that has been widely employed in art history. Examples of artists who have created self-portraits include Rembrandt van Rijn, Vincent van Gogh, Egon Schiele, Frieda Kahlo, Gwen John, Lucien Freud, Jo Spence, Cindy Sherman, to name a few. In contemporary art, self-portraiture, where the artist represents him or herself, is a prolific genre (Hall, 2014; Freeland, 2010; West, 2004) and artists often paint self-portraits during their career. It is proposed that contemporary artists often use self-portraiture to explore identity issues in the postmodern era (Hall, 2014; West, 2004).

Despite the popular belief that associates the birth of self-portraiture with the invention of glass crystal mirrors in Renaissance, the history of self-portrait dates back to the Medieval Ages (Hall, 2014). According to Hall (2014), although indeed self-portraits became prolific around 1490 AD, it is important to acknowledge its earlier roots because rather than just mirroring back physical likeness, self-portraiture engages memory and imagination, and in addition to physical likeness offers a much richer window into the artist’s inner life (Hall, 2014). Contemporary artists, consistent with the poststructuralist philosophical thought, deny the existence of a single, unified, self, and may instead represent a multiple aspects of the self or represent multiple viewpoints (Martin, 1996; Meskimmon, 1996). As such, self-portraiture provides an opportunity for reflexivity of the self through artistic practice. According to Martin (1996), question that artists ask include

How do I look? What image do I present to the world? How do I activate the power of the look and with what preconceptions? How do I find myself reflected in the images that

surround me, or not? How do I mediate and interrelate those pre-existing images with my ever changing self-image? How might I represent myself? (p.xv)

In the context of reflexivity, the artistic process, not just the finished image becomes an ongoing practice of reflection and meaning making. As an example, Jo Spence made this reflexive process available through her written accounts of her self-portraiture process in which she discussed how photographic self-portraiture allowed her to deconstruct her past and her identity. This reflexive self-portraiture was proposed by Martin & Spence (1985) to be a therapeutic technique where the artists took turns photographing each other as they embodied their childhood photographs. Spence wrote about her process:



Figure 5. Jo Spence. Untitled (1985)

The starting point was the school photograph, which immediately evoked memories of my hair being pulled tightly back and tied and controlled. What I wanted was to change my visual image, to transform the inner image of myself from that time, and to explore my potential for changing this 'personal archetype' to something with which I felt happier... through a series of stages. During the session I used no visible reference material but through my visual memories of self and parents tried to get in touch with

parts of myself that had never been allowed to speak, either visually or verbally, parts that had been silenced, buried, glossed over (Martin & Spence, 1985, p.75)

Barbosa (2011) studied photographic self-portraiture as a reflexive practice. Barbosa (2011) found that this practice promoted greater self-awareness and was therapeutic for her: “active engagement with self-portraiture as creative process is a empowering method of inquiry that leads to artistic knowing” (p.4). Barbosa created this self-portrait titled “The Mirror Collector” based on a vision that she had about herself in a reflection that she recorded in her journal:



Figure 6. Luciana Barbosa. The Mirror Collector (2011)

... she is serene and happy. She sees herself as the result of several generations. She understands/feels the beauty of life and accepts herself for just being, exactly the way she is, with the marks that have stayed and the ones she's created (p.39)

From this vision, Barbosa described her process of collecting the props for the photo shoot, discussing her ideas with friends, actually taking a series of photographs using a wireless remote, and her choice of the final image, all of which were stages of her reflexive process.

Self-portraits by women. Of particular interest relative to the topic of this dissertation is the use of self portraiture by women as a representation of the self. Feminist scholars and artists agree that there is no single ‘female essence’ (Meskimmon, 2003; 1996; Chadwick, 2001). In other words, women artists work cannot be referred to as a unified category of “female art” or “women’s art” as opposed to their male counterparts. However, there are significant historical and cultural developments that point to the specific dynamics of women’s self portraits:

Every woman who paints a self-portrait, sculpts a likeness, or places herself in front of the lens of a camera whose shutter she controls, challenges in some way the complex relationship that exists between masculine agency and feminine passivity in Western art history (Chadwick, 2001, p.9)

Self-portraiture offers an opportunity to explore and negotiate this relationship between women’s own subjectivities and the historically and culturally constructed image of the woman as a passive model. Simultaneously in being both an observer and the observed, the act of self-portraiture “requires a translation of sensations” (Chadwick, 2001, p.12), which serves as a powerful tool of self-exploration, and construction of the self.

Relative to the topic of this dissertation, motherhood is a theme that is present in contemporary women artists self portraiture (Betterton, 2013; Maioli, 2011; Meskimmon, 1996). According to Meskimmon (1996) a woman experiences a dramatic change in identity when becoming a mother because of the unique roles associated with childcare as well as the social expectations that are placed on mothers. Meskimmon (1996) pointed out the parallel between procreation in terms of producing a child and artistic creativity in terms of producing a work of art. Despite this parallel, women until the mid-twentieth century were commonly excluded from professional creative activity and believed that procreation was their only vocation. And thus, there was a paradox that exists for women: “On the one hand, birth was the ideal model of artistic creation; on the other, only men could engage in this form of ‘birth’ as women’s actual child-bearing capacity rendered them inadequate for artistic pursuits” (Meskimmon, 1996, p.140). The

aesthetics of self-portraiture permitted women artists to explore “the realities and fantasies of the maternal body through self-representation in ways which brought this feature of women’s experiences to light and also queried the relationship between artistic creativity and maternity in new ways” (p.141). To illustrate this claim, Meskimmon provides examples of women artist’s work. For instance, Mary Beth Cryor created a series of photographs titled *Rites of Passage* (1979) where the artist photographs her process of giving birth. With this work, the artist “controls the representation of her procreativity and channels it into ‘creativity’” (Meskimmon, 1996, p.143).



Figure 7. Mary Beth Cryor. Rites of Passage #4 (1979).

Another example is a painting titled *Self-Portrait of My Sixth Wedding Day* (1906) by a German artist Paula Modersohn-Becker who painted a nude portrait featuring herself as pregnant. With this painting, Moderson-Becker questioned the “natural or “uncivilized” role of women (Meskimmon, 1996, p.142) that was prevalent in the early modernist era male painters’ work by. By featuring herself as a “primitive” woman who is pregnant (procreative), as a painter of this portrait, she also positioned herself as an artist (creative), and thus challenged the “natural” or procreative role that was generally attributed to the women of her time.

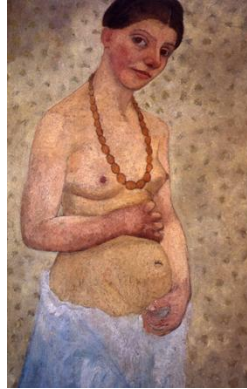


Figure 8. Paula Modersohn-Becker. *Self-Portrait of My Sixth Wedding Day* (1906)

Portraits of Mothers and Infants

In the visual arts representations of mothers and infants have been popular subjects for centuries (Emery & Emery, 2007). A large number of artworks have been created by individual artists over the years, and each of them is unique because of the subjective styles of individual artists (Emery & Emery, 2007). Despite the differences between individual artists' works, in specific eras, artists depicted mothers and infants in specific ways. For example, the mother-infant dyad has been portrayed in the context of religious paintings. These paintings were not created to portray individual mothers and children with their subjectivities and unique differences but to render an idealized iconic image for devotional purpose, such as in Raphael's *Tempi Madonna*. Mothers and infants have also been portrayed in natural settings in the context of the everyday life such as the works of Mary Cassatt to portray mother's bonding with and care of the infant. In addition, contemporary artists such as Jenny Saville have used self portraits as a mother to convey mother's subjective feelings and also the mother's ambivalence toward the child. To provide the reader with an overview of representation of mothers and infants in the fine arts, I chose three examples. I will start with a religious painting by the Renaissance painter Raphael, followed by an impressionist Mary Cassatt, and finally provide an example by the contemporary painter Jenny Saville.

Religious paintings: Raphael's Tempi Madonna. Historically, Madonna and child is a theme that has been very popular in art history (Emery & Emery, 2007; Hurlll, 2011; Vernon, 2005). The first known Madonna was painted 15 centuries ago in Byzantine and Greece, and this theme has been employed innumerable times since (Hurlll, 2011). Authors agree that Virgin Mary stands for the idealized embodiment of motherhood (Gomez, 2013; Hurlll, 2011; Emery&Emery, 2007; Vernon, 2005). Gomez (2013) stated: “The Virgin Mary, icon of purity and paradigmatic image of the unconditional loving and caring mother, represents the idealization of motherhood *par excellence*” (p.33). Another author, Hurlll stated: “The Madonna is the universal type of motherhood, a subject which, in its very nature, appeals to all classes and conditions of people” (Hurlll, 2011, Kindle locations 131-134). Vernon pointed out the Virgin’s “maternal role as giver of nourishment” (p.61). Historically, although religious icons of Madonna and child represented the mother-child relationship, they did not depict a specific woman with her child but were supposed to evoke devotion in religious followers (Freeland, 2010). Moreover, icon painters historically were monks who had to follow prescribed schemas of representation with very limited individual artistic freedom (Freeland, 2010). The religious icon was seen as a creation of God, not the product of the artist’s labor: “At times a miraculous or divine force was supposed to have caused an icon to come into existence on its own, using no human agency at all” (Freeland, 2010, p.54)

During the Renaissance era, representations of Madonna and child were frequently painted by great masters. Although the Madonna has been represented in different roles, the best well known representation is that of *Mater Amabilis*, Madonna of love. It is important to note that in the past, scholars saw this relationship as “idealized and devotional” (Hurlll, 2011). This type of representation of the Madonna places her in close proximity of the baby: holding, kissing, or caressing him.. An example of this type of portrayal is exemplified in Raphael’s *Tempi Madonna* (Hurlll, 2011; Gomez, 2013). Gomez stated that Tempi Madonna embodies the “infinite compassion and boundless affection towards her child” (p.33).



Figure 9. Raphael. *Tempi Madonna*

Realistic representational mother-child portraits: Mary Cassatt. Artists have also depicted real mothers and children, rather than idealistic or iconic models to represent religious symbols. According to authors Freeland (2010) and Pollock (2005), one of the most accomplished portrayers of mothers and children in art history was the impressionist painter Mary Cassatt (1845-1926). Her work “questioned, transformed, and subverted the traditional images of Women, Madonna, Venus, Vanity and Eve, in accordance with the aspirations of the movement of women to be ‘*someone* and not *something*’”(Pollock, 2005, p.57). Mary Cassatt showed women and children predominantly in the domestic environment with mothers caring for their children such as bathing or combing the child’s hair. Her most famous paintings feature the aesthetic of mothers and children by revealing the sensory close physical contact involving caressing, holding and kissing that have a tactile quality. A well-known example of her work is a portrait of a mother and a child titled *Baby’s First Caress*. The painting features the mother-child dyad in close physical proximity to one another that embodies the mothers holding and the sensual moment of the child’s touch. “Cassatt caught a rarely-portrayed moment, a child’s first intuitions of separateness from its mother as it reaches out to examine her as an object distinct from itself” (Pollock, 2005, p.31).



Figure 10. Mary Cassatt, *Baby's First Caress* (1891).

Despite their sensitive portrayal and artistic quality, today Cassatt's paintings have been sometimes met with criticism because of romanticizing and idealizing motherhood: her art invariably portrayed the positive sensual aesthetic of motherhood, leaving no room for ambiguity (Freeland, 2010). Although her paintings depict the mother-child aesthetic in a particular style and content, the subjects do show emotions and inner life and are therefore not mere objects or representations of roles. "They show subjects who are unique and autonomous, with intact physical boundaries, with their own thoughts and feelings, pursuing activities and interests" (Freeland, 2010, p.216)

Contemporary mother-child self-portraiture: Jenny Saville. An example of contemporary portrait of mother and child is the work of the British artist Jenny Saville. Although her paintings point to the great masters' portrayal of mothers and children, her work is not an idealization of motherhood. In contrast to idealized and romanticized images of the mother and child, Saville uses self portraiture to explore other emotions than love and devotion in mother's relationship with her child. Her work elicits sensory reactions, points to the topic of the female body in contemporary culture, and has been found to depict ambivalence towards motherhood (Kuspit, 2011; Maioli, 2011; Meagher, 2003)

Ambivalence toward motherhood in Saville's work was identified by Kuspit (2011). Kuspit (2011), a distinguished art critic and philosopher, analyzed Saville's (self) portraits of mother with children titled *Mothers* that feature a woman in the nude with her two infants that points to the Madonna and child images of Leonardo and Michelangelo. According to Kuspit (2011), Saville's treatment of the mother and the child experience suggests ambivalence and mothering that is not "good enough": the infants are crying and wiggling, and the mother's expression "is by no means loving – it seems angry or at least irritated or troubled" (p.252). According to Kuspit (2011), Saville's work questions Hagman's claim of the aesthetic relationship between the mother and the child. Instead of aesthetics of pleasure and beauty, Kuspit (2011) quoted Saville who stated that her aesthetics are "ugly, beautiful, repulsive, compelling, anxious, neurotic, dead, alive" (p.252), and thus the mother has ambivalence toward her children, which in Kuspit's (2011) interpretation, points to failure at mothering.

Saville's paintings evoke sensory experiences in the viewer, wrote Meagher (2003) in the discipline of womens' and cultural studies. Saville's nudes challenge objectification of women's bodies, however, her nudes are not mere objects: she portrays lived bodies that elicit sensory-visceral reactions, particularly that of disgust, in the viewer. Whereas traditional paintings of the female nude generally elicit aesthetics of beauty, Saville's work elicits "aesthetics of disgust" (Meagher, 2003, p.24). Saville invites viewers to experience themselves as disgusting and thus interrogate their relationship with their embodiment. According to Meagher, women's embodiment is laden with contradictions and ambiguities, and women can have changing feelings about their bodies ranging from contentment to disgust. According to Meagher (2003), Saville's work "offers the opportunity to think about what it means for women to live in a perpetual struggle with the abject female body. Saville's paintings suggest that the abject female body isn't merely a fat body, but a body that refuses to comply with the contemporary ideals of a tightly managed feminine form" (p.38)

An embodiment and cultural studies scholar Maioli (2011) stated that Saville's fleshy nudes address the double meaning of both "*materia* (matter) and *mater* (mother)". (p.70). According to Maioli (2011), Saville's work, while pointing to the oppression of female bodies, also turns to mother's body as a source of empowerment. Wrote Maioli (2011): "Fat, curves, and even cellulites are female characteristics, and ones that are typically considered disgusting or even animal in spite, or because of, their being closely connected to the most feminine quality: motherhood" (p.75). Read as such, Saville challenges the Western contemporary beauty standards that undermine the mother's body. In her art, wrote Maioli (2011), "fat is not a negative issue but an empowering statement of freedom and a claim of the power of motherhood" (p.78). Maioli stated that Saville's work concerns itself with the postmodern issue of identity as a construction, which in her work is expressed in the form of pastiche or assemblage.



Figure 11. Jenny Saville. Mothers.

Montage and Montage Portraiture in the Fine Arts

To provide an overview to montage portraiture that relates to the method of this dissertation, the following section will delineate definitions of montage, and provide examples of the use of montage in portraiture in the fine arts.

Montage is a term that has been approached and defined in slightly different ways by different authors and disciplines (Butler-Kisber, 2009; Denzin, 2001; Weingrod, 1994), and thus

the term is somewhat ambiguous (Ojanen, 2015). In the arts, the term montage is used in the genres of cinematography, the fine arts, and literature. Montage originally came to be used as a filmic term. According to the *Oxford English Dictionary* the cinematographic term montage denotes “the process or technique of selecting, editing, and piecing together separate sections of films to form a continuous whole; a sequence or picture resulting from such a process”. The same dictionary defines montage a “the act or process of producing a composite picture by combining several different pictures or pictorial elements so that they blend with or into one another”.

Montage became widely used by artists with advances in photography in the early 20th century (Butler-Kisber, 2009, Weingrod, 1994). According to Weingrod (1994) “A montage is a two-dimensional arrangement of existing pictures such as photographs, drawings, paintings, or prints that may have been fragmented, torn, and overlapped and then positioned into a composition” (p.1). According to Weingrod (1994), montage is a technique that is frequently confused with collage and assemblage. The clearest factor that differentiates montage from the other two techniques is the fact that it is two-dimensional, whereas the other two may have relief elements as in collage or be entirely three-dimensional as in assemblage. According to Butler-Kisber (2008), montage differs from collage in that the former relies on manipulation of photographs while collage is a technique where photographs or magazine images can be combined with other cutouts and ephemera. Butler-Kisber (2008) stated that it was artists of the Dada movement that introduced the term “photomontage”, a technique similar to collage but one that uses photographs.

An expert in qualitative research, Norman Denzin (2001), defines montage in the context of a wider research methodology: “Montage ... creates the sense that images, sounds and understandings are blending together, overlapping, forming a composite, a new creation. The images seem to shape and define one another, an emotional, gestalt effect is produced” (p.29).

Montage in portraiture has been used by contemporary artist (Brilliant, 2002; West, 2004; Vaughan, 2009; Middleman, 2013). Montage when used in portraiture is particularly effective in

its ability to reflect the changing identity which in the postmodern Western conceptualization is regarded as “unstable, fluctuating, and indeterminate” (West, 2004, p. 210). Moreover, although traditionally, portraits have been unidimensional images, some contemporary visual artists are turning to montage portraits in the attempt to reflect the shift in identity from the fully integrated, stable, self acknowledging the simultaneous existence of multiple selves and “the fragmentary nature of human existence” (Brilliant, 2002, p. 132). In contemporary visual art, montage portraiture can also be used to record the person as she or he changes and develops over time, or focus in a specific period that is significant in the person’s life. An example of this is Andy Warhol’s biographical portrait titled *Sixteen Jackies* (1964) that was created after the assassination of President Kennedy.



Figure 12. Andy Warhol, *Sixteen Jackies* (1964).

This montage of portraits shows Jackie Kennedy in different emotional states before and after the assassination. This biographical portrait “draws attention to her as an actual, sentient individual, deeply affected by the swift change in her personal condition, and therefore less defined by her public persona” (Brilliant, 2002, p. 134).

Arts-based researcher Leavy (2009) discussed Maryjean Viano Crowe’s artwork entitled *All-consuming myths* that concerns itself with gender roles in the United States. Leavy (2009) stated that Viano Crowe used collage and montage portraiture to explore the performance of

“gender roles revolving around the preparation of baked goods” (p.223). According to Leavy (2009), one of the images entitled *Pie in the Sky* (1993-1994), for example, invites the viewer to challenge women’s assumed roles as homemakers.



Figure 13. Maryjean Viano Crowe, Pie in the Sky (1993-1994).

Another example of montage portraiture was described by an art historian Middleman (2013) who wrote about montage in the context of the feminist aesthetic based on the work of artist Anita Steckel (1930-2012). Steckel used photographs, watercolor, collage, and drawing to create montages that criticized sexual oppression, war, and racism. Throughout her career, she created critical and even shocking imagery that owed its effect to the technique of montage. Steckel’s portraits represent a striking difference from traditional techniques such as painting, for example. Steckel, cited by Middleman (2013) stated about this technique: “No matter how upsetting the subject matter of a painting, we feel relatively safe. We know it isn’t really real. But paint an image into a photograph, which we are conditioned to believe an unconditioned reality – then there sets up uneasiness of another sort” (p.22).



Figure 14. Anita Steckel, Untitled. Revisions on the Photo Album Series (2011-2012).

Summarily, montage is a term that has been used widely in different artistic disciplines and research approaches. Despite some ambiguity of the term, across disciplines, montage refers to the process of editing, juxtaposition and superimposition.

Portraiture in Qualitative Research

History of Portraiture in Qualitative Research

In qualitative research, portraiture has been used as inquiry to capture the complexity of the person or an organization (Lawrence-Lightfoot, 2004, 1997), or the lived experience of a phenomenon (Moustakas, 1990). The method of portraiture was developed by Lawrence-Lightfoot (1983) and elaborated on by Lawrence-Lightfoot & Davis (1997). Lawrence-Lightfoot (2004, 1983) was inspired by portraiture in the fine art to develop the method of text based portraiture to provide an in-depth and multidimensional description of a person or an organization. In a different qualitative research approach, heuristic inquiry, this method has also been used by Moustakas (1990) who used portraiture as a method in the data analysis phase of heuristic inquiry. This section will outline and define the method of portraiture in qualitative research. Then, I will provide an overview of application of this method in qualitative research. Although portraiture is a creative research method, traditionally, portraiture in qualitative

research has been textually based. Recently, however, visual methods have also been incorporated into portraiture in arts-based research (Gerstenblatt, 2013; Jongeward, 2009; Rippin, 2012).

To introduce this section, I will briefly discuss heuristic inquiry developed by Clark Moustakas (1990). Although Moustakas did not identify portraiture as an overall method of inquiry, his work is worth mentioning here because he used portraiture as a method of analysis. Moustakas (1990) developed a research method called heuristic inquiry that seeks to represent the lived experience of a phenomenon. The outcome of heuristic inquiry is “an aesthetic rendition of the themes and essential meanings of the phenomenon” (p.52) that Moustakas (1990) referred to as “creative synthesis of the experience”(p.52), which is text-based in nature. Although Moustakas (1990) did not use portraiture as a method of inquiry throughout the study, “portraits” were used as a method of analysis. Moustakas (1990) referred to portraits as textually based narratives that are created by selecting the participants “who clearly exemplify the group as a whole” (Moustakas, 1990. p.52). The individual participant’s experience is synthesized

utilizing the raw data, individual depictions and autobiographical material that was gathered during preliminary contacts and meetings, contained in personal documents, or shared during the interview. The individual portraits should be presented in such a way that both the phenomenon investigated and the individual persons emerge in a vital and unified manner. (Moustakas, 1990, p.52)

Portraiture as a separate genre in qualitative research was fully developed by Lawrence-Lightfoot (1983) and Lawrence-Lightfoot & Davis (1997). Lawrence-Lightfoot’s work on portraiture is, although not explicitly named arts-based research, considered to be one of the early examples of arts-based research (Barone & Eisner, 2006; Cahnmann-Taylor & Siegesmund, 2013). Lawrence-Lightfoot & Davis (1997) and Lawrence-Lightfoot (2005) liken the methodology of portraiture as a research approach to the practice of the visual artist. Indeed, Lawrence-Lightfoot (2005) recounted that she learned her earliest lessons in this methodology by

sitting for portrait artists, and stated: “In addition to portraying my image, the piece expressed the perspective of the artist and was shaped by the evolving relationship between the artist and me” (p.5). Both the artist and the researcher search to capture the essence of the person. Lawrence-Lightfoot (1997) defined portraiture as “a method of qualitative research that blurs the boundaries of aesthetics and empiricism in an effort to capture the complexity, dynamics, and subtlety of human experience and organizational life” (p.xv).

Lawrence-Lightfoot (1983) first introduced the method of portraiture in her award-winning book, *The good high school*. In this book, she provided separate portraits of six high schools that focused on what was good in them rather than what was pathological. The data were collected over a period of three years. The book provided a thorough description, narrated by the author and illustrated with direct quotes from the interviewees, of the each school, their cultures, the teachers and the students of these good high schools. By goodness, Lawrence-Lightfoot (1983) meant not perfection but a complexity of parts that compose a portrait. Lawrence-Lightfoot (1983) recognized that goodness was a changing concept: “it is not static or absolute quality that can be quickly measured by a single indication or success or effectiveness” (p.23).

From *The Good High School*, Lawrence-Lightfoot with her co-author Davis (1997) developed their method of portraiture that combines the philosophy of phenomenology with ethnographic techniques set in the context of the narrative. They provided examples of the work of portraiture, where the voices of the participants are combined with the voice of the researcher to produce a story that has a beginning, a middle, and an end. This method makes use of a variety of data: ethnographic observation, document data, interviews with multiple participants, and researcher’s memos and journal entries.

Portraiture, however, is not just an extension of phenomenology and ethnography but serves as a unique method because of the essential role that aesthetics plays in portraiture. Lawrence-Lightfoot & Davis (1997) stated that the purpose of portraiture was

To combine empirical and aesthetic description, in its focus on the convergence of narrative and analysis, in its goal of speaking to broader audiences beyond the academy ..., in its standards of authenticity rather than reliability and validity..., and in its explicit recognition of the use of the self as the primary research instrument (p.14)

The authors place this method in sharp contrast to the positivist paradigm in that portraiture does not seek to provide a de-contextualized outcome. Lawrence-Lightfoot (1997) argued that human experience is too multidimensional and complex to be reduced to isolated phenomena. Moreover, the person can never be separated from the context where they find themselves. The aesthetic of research is brought out by the portraitist who uses herself as a research instrument and is constructing meaning in collaboration with her research participants. “At the heart of the aesthetic experience- a primary condition – is a conversation between two active meaning makers, the producer and the receiver of a work of art. This conversation results in a co-construction of meaning in which both parties play pivotal roles” (Lawrence-Lightfoot & Davies, 1997, p.29). Although portraiture combines different sources of data and brings together the voices of different participants, it is the voice of the portraitist through which the story is presented. “The portraitist’s voice, then, is everywhere—overarching and under-girding the text, framing the piece, naming the metaphors, and echoing through the central themes” (Lawrence-Lightfoot & Davis, 1997, p. 85).

While Lawrence- Lightfoot's (1983) work that used portraiture as a method, *The Good High School*, earned her the Outstanding Book Award from AERA in 1984, this method has also received criticism. Specifically, English (2000) criticized this work from the postmodern stance. English argued that Lawrence-Lightfoot’s method lacked transparency and was biased by the researcher’s perspective. The biggest flaw that English (2000) found with this method was the fact that in organizing the portrait in a singular story and presenting “the essence” of the participants, the participant’s experience is in fact reduced by eliminating multiple story lines. “Reducing the potential multiplicity and diversity of simultaneous truths to a singular story line,

no matter how compelling or interesting, may be the most important disfigurement of the ensuing portrait placed on the verbal canvas” (p. 26).

This criticism was partly addressed by Banister & Hodges (2005) who proposed the inclusion of full transcripts and/or video footage to improve transparency of qualitative research in general and portraiture, in particular. Banister & Hodges (2005) proposed that readers need greater transparency and access to raw data to be able to judge the quality of the research and assess the trustworthiness of the researcher’s conclusions. Moreover, visual and video representation enriches the presentation of research findings: “While textual descriptions, if well done, can give readers an image that is compelling, the addition of digital graphics, video and audio create a portrait that is deeper and richer than the text alone” (Banister & Hodges, 2005, p.6).

Recent Uses of Portraiture in Qualitative Research

Based on Lawrence-Lightfoot’s seminal work (1983), portraiture has also been used in recent research studies, primarily in education (Bloom & Erlandson, 2003; Lawrence-Lightfoot, 1983, 2007; Chapman, 2005; Harding, 2005).

Portraiture has been used in the field of education in the context of Critical Race Theory (Chapman, 2005; Harding, 2005) that “advocates for researchers to demonstrate the strength and complexity of people of color in ways that value the cultural traditions of the people being represented” (Chapman, 2005, p.28). And thus, according to Chapman (2005), “the blend between CRT and portraiture is a viable partnership” (p.28). Both Chapman and Harding explored the experiences of Caucasian teachers in racially diverse classrooms. Chapman (2005) focused on giving participants “voice” without marginalizing them a concept that is central to this method. She presented a case study of a Caucasian teacher who worked in an ethnically diverse classroom. She used portraiture as a method to go beyond the binary depiction of successes and pathologies in the school setting. “The portraiture method rejects flat, stereotypical explanations

for school success or failure and depicts the multiple layers of contexts represented by events and people” (p.29). To construct the portraits, Chapman (2005) interviewed the teacher and the students individually as well as in focus group settings. In her portrait, Chapman (2005) uses her own voice to weave these perspectives together. The voice of the portraitist promotes emancipation by painting the complexities of the participants as well as the larger social contexts that have an impact on the participant’s lives. In a similar context, Harding (2005) applied portraiture to specifically examine how a Caucasian teacher was negotiating cultural and racial differences to deliver successful teaching experience in a school comprised of children of color.

Bloom & Erlandson (2003) applied Lawrence-Lightfoot’s method of portraiture to the study of three African-American female high school principals. Bloom & Erlandson (2003) extended the method of portraiture by incorporating the voice of the audience to the voice of the actor or the participant, and the artist or the researcher. The voice of the audience was presented through feedback from reviewers. The reviewers were six school principals whose written responses to the portraits were also added to the final representations. As such, the finished portraits of these principals are constructed using the researcher’s observations and interpretations, the direct quotes from the participants as well as other sources such as newspaper interviews and letters, and the reviewer’s feedback and observations.

To summarize, portraiture in qualitative research was developed by Lawrence-Lightfoot (1983) and Lawrence-Lightfoot and Davis (1997), and has been used as a textual method to portray various aspects of a participant’s experience or organizational life. Beyond this text-based method, portraits and self-portraits have also been employed as data elicitation in qualitative research, which will be discussed next.

(Self) portraits as a Data Elicitation Method in Qualitative Research

In a qualitative research study about young people’s identities in Italy and England, Bagnoli (2009) used self-portraits with young people to elicit oral interview data. Bagnoli (2009)

instructed her participants to use paper, pencils, and felt tip markers to draw a self-portrait. This instrument was found to be “a creative way of interviewing that is responsive to participants’ own meanings and associations” (p.547).

Photographic personal and family portraits in the context of qualitative research also appear as data elicitation (Zartler & Richter, 2014; Vivienne & Burgess, 2013). For instance, photographic portraits of family members have been found to be a powerful data elicitation method with children about sensitive family issues that may be difficult to put into words (Zartler & Richter, 2014):

Photographs may encourage children to bring up sensitive aspects of family life, e.g. issues that respondents may find difficult to articulate... Visualisations support children in verbalising their thoughts, but also stimulate narrations on issues that are not displayed (Zartler & Richter, 2014, p.42)

In the context of queer identity work and activism, Vivienne & Burgess (2013) presented case studies that used personal photography, including portraiture, in the context of Digital Storytelling to elicit data, that is narrations, and represent these stories in the 3-5 minute Digital video format. The Digital Story includes photographs, voice over that is usually narrated by the participant/author, and sometimes accompanied by music. Vivienne and Burgess (2013) discussed the evocative power that photographs can elicit in the process of creating the digital stories.

Portraiture in Arts-based Research: Collage Portraiture

In contrast to the more traditional forms of research including qualitative research that relies on text-based data, portraiture as a fine arts practice has also been used in arts-based research (Gerstenblatt, 2013; Jongeward, 2009; Rippin, 2012) in the disciplines of social work and organizational studies. The term montage portraiture, which will be used as a method for this dissertation study, has not been used in qualitative and arts-based research. However, a similar

approach, collage portraiture, has been used. Examples of collage portraiture in arts-based research will be provided below.

In the discipline of social work, Gerstenblatt (2013) provided a description of collage portraiture, a method of data collection, analysis, and representation.



Figure 15. Paula Gerstenblatt, Collage Portrait of CH

Collage portraits were created using text as well as pre-existing and created images and artwork. She used this method to study the culture and history of an African-American family in rural Texas. This method offers the qualitative researcher several advantages: exploration of “sensitive issues that might be difficult to articulate with words” (p.306); depth and breadth of lived experience using both images and text; engagement of marginalized participants; ability to share research findings with the participants, which resulted in a way of pride an accomplishment for them as well as an opportunity to foster community belonging.

Jongeward (2009) stated that more traditional text-based research methods are not always sufficient for educational research: “Traditional forms of research limit the nature of research inquiry, interpretation, and representation” (p.239). Relying on artistic practice, Jongeward (2009) used visual portraiture and collage in an artistic inquiry to “convey the integrity and diversity” of her participants (p.240). Through the researcher’s intuition as well as research data, she created a whole picture of the participant using mixed materials such as oil

pastels and construction paper. According to Jongeward (2009), this process enabled her to “discover and represent meaningful patterns within complex phenomena” (p.250).

Rippin (2012) used portraiture as a fine arts method to analyze and represent her research findings. In the discipline of organizational studies, she used collage, montage, and quilting to create a portrait of a business leader. Rippin (2012) stated that the challenge of this research was to represent an esteemed business leader as a person with strengths and flaws, not just an idealized symbol of the company. Rippin found that using the visual methods of collage and montage helped her convey this. Rippin (2012) stated: “What this method of presentation allows is a simultaneous presentation of a number of facets of identity, in a way that the sequential nature of academic writing cannot” (p.315).



Figure 16. Ann Rippin, Anita and Me (2010–2011)

Portraiture in Art Therapy

Portraits in art therapy have been used both as an art therapy intervention (self-portraiture), and as art therapist’s reflexivity as post-session imagery. In the following section, I will review the literature on both of these aspects.

Self-portraits as an Art Therapy intervention. Self-portraiture has been used as an art therapy intervention by art therapists with various client populations (Alter-Muri, 2007; Davis Halifax, 2003; Hanes, 2007; McGann, 2006)

According to Alter-Muri (2007), despite the wide application of this genre in the fine arts, self-portraiture is not often used as an intervention in art therapy. However, according to Alter-Muri (2007), self-portraiture provides opportunities of reflexivity of the self, and thus it could be used therapeutically as an art therapy intervention, for example with clients who suffer from depression. Self-portraiture has been used with a wide range of clients, and can be particularly useful with “individuals who experience physical illness, sexual abuse, or traumatic stress, and for clients who have eating disorders or who are adjusting to the aging process”(Alter-Muri, 2007, p.335). Despite its potential benefits, self-portraiture as an art therapy intervention can also have risks (Alter-Muri, 2007). Using this intervention with people who obsessively focus on their faults, or who are suicidal because this powerful intervention brings the self into focus and may thus exacerbate these tendencies. Overall, “Self-portraiture is an excellent tool for self-awareness and – in conjunction with an experienced art therapist – self-portraits can be a journey towards increased self-knowledge and can add to the journey of healing” (Alter-Muri, 2007. p.339).

Hanes (2007) reported on self portraits that were spontaneously produced by chemically dependent clients in art therapy sessions. Hanes (2007) stated that self-portraiture can assist the chemically dependent client to face his or her denial of addiction by reflecting to the client his or her “false sense of self and distorted worldview” (p.36). And thus, the client can begin to acknowledge and confront their addiction.

Self-portraiture with women has been addressed by Davis Halifax (2003) who theorized about the use of self-portraiture as an intervention within feminist art therapy practice. Drawing on contemporary feminist art practice, she stated that encouraging women to create self portraits in art therapy in order to reflect on and question their experiences as gendered beings. Davis Halifax (2003) stated that women’s subjectivities have historically been marginalized in our society and she proposed that creating self-portraits can be an “autobiographical and empowered act” (p.41).

McGann (2006) used self-portraits as an intervention in her work with adolescent girls of color. According to McGann (2006) adolescence is a developmental period that is crucial in one's identity formation. According to McGann (2006) "the effects of intra-family prejudice and societal racism can severely compromise their ability to embrace their ethnic identity" (p.197). McGann (2006) employed sculptural self-portraiture as a therapeutic tool to explore the issues of identity in adolescent girls.

Portraits as self reflexivity for art therapists. Art therapists use response art both as the final image as well as the process of creating it to reflect on their clinical work, clarify confusing feelings, explore their counter transference issues about their clients, and communicate their work to others (Costello-Du Bois 1989; Fish, 1989, 2012; Franklin, 2010; Kielo, 1990; Wadeson, 2003). "Response art is defined as "artwork created by art therapists in response to material that arises in their therapy work" (Fish, 2012. p.138). According to Fish (2012), response art has a potential to deepen the therapeutic relationship between the artist and the therapist if shared with the client because of the authentic reflexive quality that it possesses. On occasion, this imagery contains portraits of the client and/or the art therapist (Costello-Du Bois 1989; Jones, 1983; Fish, 1989, 2012; Moon, 2002; Wadeson, 2003).

Wadeson (2003) described art therapists' uses of the art for professional processing and development. Wadeson (2003) stated that art making is a useful tool for art therapist's professional processing to express and explore the strong feelings and reactions to the clients that are difficult to verbalize. Although she did not specifically discuss portraiture, it became evident from the case examples presented that many of the examples were art therapists portraits of the clients that they worked with. Wadeson (2003) noted that art therapists produce both spontaneous images as well as more elaborated pieces, and both these techniques are useful in professional processing.

In a seminal article, Jones (1983) described his early work with mentally ill patients in a state hospital in the United States in the 1940s. Although in these early days, art therapy as a

profession was in its infancy, Jones intuitively engaged his skills as an artist to help his patients. He also painted portraits of his patients in response to the misery that he witnessed in the state hospital at that time.



Figure 17. Don Jones, *Regressed* (left), *Restrained* (center), *Blind and Deaf* (right)

Cathy Moon (2002) stated that portraiture is a way for the art therapist to bear witness to his or her client. Moon (2002) described portraiture as a method to engage resistant clients in her work: when she encountered a client who was not willing to engage in art making process, she asked the client's permission to draw a portrait of him or her. According to Moon (2002), this intervention assisted the art therapist to foster a therapeutic alliance, which was received by the client as an attempt to make a non-threatening connection: "Taking the time to do someone's portrait is perceived as taking the time to notice and, at some level, to care" (p.215).

Fish (2012) described a portrait that she created as a novice art therapist in response to a chronically mentally ill patient. The first encounter with the patient on a psychiatric unit left the therapist frightened and overwhelmed. When she created a portrait of the patient, "The drawing acted as a container, helping me bear disturbing feelings that lingered after meeting her" (p.140). According to Fish (2012), drawing the patient's brought back the sensory vividness of the encounter with the patient. Portrait drawing assisted the therapist in processing her feelings about the client, and develop acceptance and empathy for the client.

Costello-Du Bois (1989) used her skills as an artist to routinely draw portraits of her clients with their permission in a hospital setting. According to Costello-Du Bois (1989), patients have never refused to be subjects of portraits, in fact, they have sought the art therapist out to draw a portrait of them. Costello-Du Bois (1989) undertook portrait painting in order to provide the patients with her “non-verbal vision” and “immediate observation and feelings” about them (p.68). Costello-Du Bois (1989) stated that drawing and sharing portraits with the clients was therapeutic for the patients and they appreciated the undivided attention they received from the therapist “It seemed to be a way of giving quiet affirmation”. (p.68). Moreover, according to Costello-Du Bois, portraiture was perceived by the patients as “encouraging and inspiring” (p.70). Wrote Costello-Du Bois (1989): “It is one way I can participate in drawing out the uniqueness of the individual”. (p.70)



Figure 18. Judith Costello- DuBois, Untitled

In sum, portraiture has been used as a way of representation and inquiry in the fine arts, qualitative research, art therapy, and arts based research. In the context of this arts-based dissertation, arts-based research approach deserves closer attention, which will be the topic of the next section.

Arts-Based Research (ABR)

Section Overview

Arts-based research (ABR) is an innovative research approach that is gaining acceptance in educational and social sciences, the visual arts, and art therapy. Because this research approach is still emerging and developing, I will provide an overview of ABR in this section. I will start this section with definitions of ABR, followed by an overview of the historical context and current developments of ABR. Next, ABR in the fine arts will be addressed. Finally, ABR as a specific research approach in Creative Arts Therapies, will be delineated. Throughout, the position of ABR as a paradigm or worldview will be defined and elaborated on.

Definitions

Arts-based research (ABR) is a research approach that, because of its new and emergent status, has multiple and varied definitions. For instance, arts-based research has also been referred to as art-based research (McNiff, 2008), arts-based inquiry (Finley, 2008), artistic inquiry (Hervey, 2000), arts-informed research (Cole & Knowles, 2008), arts-based educational research (ABER) (Eisner, 2008), and a/r/tography (Sinner, Leggo, Irwin, Gouzouasis, & Grauer, 2006; Springgay, Irwin, & Kind, 2008). Definitions of ABR also differ. Arts-based research was broadly defined by Leavy (2009) as utilization of artistic tools such as fiction, drama, the visual arts, etc. during all phases of qualitative research. Arts-based research is defined by Barone & Eisner (2012) as “an effort to utilize the forms of thinking and forms of representation that the arts provide as means through which the world can be better understood and through such understanding comes the enlargement of mind” (p.xi). McNiff (2011) emphasized the researcher’s active artistic engagement in the research process:

I define art-based research as involving the researcher in some form of direct artmaking as a primary mode of systematic inquiry. ... Often art-based research will combine personal inquiry with clinical practice involving others,

but the defining feature involves a significant commitment to the former” (p.385)

Finley (2008) promoted the inclusion of a political, activist stance in arts-based research. She wrote: “Arts-based inquiry is uniquely positioned as a methodology for radical, ethical, and revolutionary research that is futuristic, socially responsible, and useful in addressing social inequities” (p.71).

Recently, ABR has been posited as a paradigm or worldview (Chilton, Gerber, & Scotti, 2014; Rolling, 2013). Rolling (2013) defined ABR as a paradigm as follows:

The multisystemic application of interactive analytical, synthetic, critical-activist, or improvisatory creative cognitive processes and artistic practices toward theory-building. Best at addressing questions that can neither be measured with exactitude nor generalized as universally applicable or meaningful in all contexts. Stems directly from a researcher’s artistic practice and creative worldview (p.33)

Despite variations of terminology and definitions, central characteristics of ABR are clustered around the following themes: 1) artistic means for data collection, analysis, and representation (Barone & Eisner, 2012; Hervey, 2000; Leavy, 2009, McNiff, 2011); 2) empowerment of participants and promotion of social justice (Cole & Knowles, 2008; Finley, 2008; Leavy, 2009); 3) promotion of different ways of thinking, not providing quantifiable truths (Leavy, 2009; Barone and Eisner, 2012; Rolling, 2013), and 4) communication of findings to wider audiences outside the academia (Barone, 2008; Cahnmann-Taylor & Siegesmund, 2008; Leavy, 2009; Finley, 2008).

Brief History and Current Developments

Aesthetic ways of knowing have been universally acknowledged, throughout the development of humankind, to reflect truth and meaning for human beings (Aristotle, 2006; Cooper, 2006; Gadamer, Harris-Williams, 2010; Rolling, 2013). However, contrary to these long held beliefs, ABR as a viable form of research dates back only to the 1980s (Cahnmann-

Taylor & Siegesmund, 2008; Rolling, 2013). At that time, several researchers were experimenting with and developing varying forms of arts-based research. For instance, educators Eisner and his student Barone started to develop arts-based methodologies (Barone & Eisner, 2012) while, simultaneously, sociologist Lawrence-Lightfoot (1983) developed her innovative method of portraiture to convey a multidimensional picture the high schools that she studied. It was not until 1991 that the term *arts based research* was first introduced by Eisner (Barone& Eisner, 2012). Eisner (Barone & Eisner, 2012) defined ABR as “a process that uses the expressive qualities of form to convey meaning” (p.xii). In the 1970s and 1980s, art therapist McNiff (1998, 2008) began to experiment with art making as a systematic mode of inquiry. McNiff (1986) theorized that “the arts therapies need to view creative expression as ‘the primary process of the profession’ and create ‘theory indigenous to art’ (pp. 6-7). In 1998, his influential book *Art-based research* was published. McNiff (1998) defined ABR “as the systematic use of the artistic process, the actual making of artistic expressions in all of the different forms of the arts, as a primary way of understanding and examining experience by both researchers and the people that they involve in their studies (p.29)

During the early developments of ABR in the field of education, the focus was on the literary art forms such as fiction (Cahnmann-Taylor & Siegesmund, 2008). In subsequent decades, ABR has gained prominence and expanded beyond the literary genres and included other artistic genres such as music, drama, and the fine arts. Recent influential work on ABR has been published in the context of social sciences (Knowles&Cole, 2008; Leavy, 2009; Rolling, 2013), education (Barone& Eisner, 2013; Cahnmann-Taylor & Siegesmund, 2008), the fine arts (Sullivan, 2005) and the creative arts therapies (Hervey, 2000; Kapitan, 2010; McNiff, 1998, 2011).

ABR is still an emergent research approach, and today, discussion about its definition, credibility, and further developments of this research approach continue (Cahnmann-Taylor & Siegesmund, 2008; Eisner, 2008; Leavy, 2009; Rolling, 2013). These developments are not

without challenges (Cahnmann-Taylor & Siegesmund, 2008; Eisner, 2008; Rolling, 2013).

According to Cahnmann-Taylor & Siegesmund (2008), the two biggest challenges that ABR in education face are 1) quality of research, and 2) utility and applicability of ABR. The quality of ABR is vital to establish this research approach as legitimate, and distinguish high-quality scholarship from amateur endeavors that just experiment with form. The problem that ABR faces is the fact that because of the novelty of ABR, there are few training opportunities that would prepare “current and future researchers to practice methods of inquiry that embrace tools and techniques from the arts as well as the sciences. Without explicit training, there can be no critical community to establish what constitutes quality in arts-based research” (Cahnmann-Taylor & Siegesmund, 2008, p.11). The other challenge apparent in ABR is its real utility vs. fascination with novelty of form: “There are still more researchers writing about arts-based research criteria than those producing examples of what it looks like in each area of the literary, visual, and performing arts” (Cahnmann-Taylor & Siegesmund, 2008, p.12).

Eisner (2008) identified three areas of debate or tension in ABR: clarity of communication, generalization, and aesthetic properties. These tensions are elaborated on below.

Pertaining to the clarity of communication through arts-based work, Eisner (2008) asked: “Will the images made through arts-based research process possess a sufficient degree of referential clarity to engender a common understanding of the situation being addressed?” (pp.19-20). In other words: will the reader or viewer of arts-based work understand what the work attempted to convey, or is the work so abstract of conceptual that the meaning of it becomes obscure.

The second tension that Eisner (2009) identified was the question of generalization that relates to the trustworthiness of arts-based work. Although Eisner (2008) stated “the general resides in the particular”, he recognized that this claim is not always accepted in the scientific communities, and thus, criteria of trustworthiness of arts-based work continue to be a source of debate.

The third tension, according to Eisner (2008) “is the tension between the desire to achieve a work product that has aesthetic properties and the desire to achieve at least some degree of verisimilitude in our work” (p.21). By this, Eisner (2008) referred to the temptation on the part of the arts-based researcher to depart from the original findings in order to emphasize the aesthetic qualities of representation of findings.

According to Leavy (2009), arts-based methods are in the process of development and “have not reached their potential” (p.264). According to Leavy (2009), development and further research is needed both in technical aspects as well as legitimacy in professional arena. Leavy (2009) offered two suggestions: “greater attention to aesthetics and the building of cross-disciplinary research partnerships” (p.265).

With the development of ABR, Rolling (2013) recently proposed that ABR needs to be recognized not as a set of methods but as a paradigm or worldview. Rolling (2013) stated that the ABR paradigm is not seen as replacing existing paradigms, rather it serves to provide a particular worldview within which arts-based research can be conducted and understood. Rolling (2013) stated “My aim...is not to mark out an alternative research paradigm, but an autonomous paradigm that generates its own language, meaning, and possibilities – rather than one being ever modified to survive the onslaught of criticisms often suffered by qualitative researchers” (p.69).

ABR and the Fine Arts

Although ABR can be conducted by using varying art forms such as the literary arts—poetry or fiction—it also embraces other art forms such as music, drama, and the fine arts: “the concept of literacy needs expansion from a process concerned essentially with the making of meaning in language to a process in which meaning is made throughout the interpretation of forms in whatever medium they happen to appear” (Barone & Eisner, 2012, p.62).

Since the research in my current project proposes that the *beyond_words* in transitioning to motherhood may be difficult to access through words alone, and thus uses visual imagery as the primary investigative method a focus on the use of visual images or the graphic arts in ABR is

warranted here (Sousanis, 2015; Sullivan 2005, Weber, 2008). Weber (2008) provided 10 reasons why visual images are particularly important in the context of arts-based research: “Images can make us pay attention to things in new ways” (p.44), “Images are likely to be memorable” (p.45), “Images can be used to communicate more holistically, incorporating multiple layers, and evoking stories or questions”(p.45), “Images can enhance empathic understanding and generalizability”(p.45), “Through metaphor and symbol, artistic images can carry theory elegantly and eloquently” (p.45), “Images encourage embodied knowledge” (p.46), “Images can be more accessible than most forms of academic discourse” (p.46), “Images can facilitate reflexivity in research design” (p.46). “Images provoke action for social justice” (p.46)

Artistic practice is proposed to provide a method to explore the nonverbal experiences that are not quantifiable and not easily accessible by verbal means alone (Marshall, 2007; Sullivan, 2005; Fox, 2001). This approach focuses on inquiry through artistic practice (Marshall, 2007; Sullivan, 2005). Art practice as inquiry was defined by Sullivan (2005) as a set of creative activities undertaken by artists as a way of investigation: “the critical and creative investigations that occur in studios, galleries, on the Internet, in community spaces, and in other places where artists work, are forms of research grounded in art practice” (p.xi). Art practice as inquiry shares with traditional research in social sciences the systematic rigor. However, what distinguishes art practice as inquiry from the more traditional social science research is “the role imagination and intellect plays in constructing knowledge that is not only new but has the capacity to transform human understanding” (p.xi-xii).

Particular to this approach, and relevant to the study of the human mind and behavior, is that images can convey feelings and ideas that are not always conscious or accessible by language: “Visual imagery, in working on a conscious and unconscious level, and in presenting phenomena in ways that defy reading, can evoke and articulate ideas in ways verbal language cannot” Marshall (2007, pp.27-28). Art practice as inquiry opens up new perspectives and ways of seeing (Fox & Geichman, 2001; Sullivan, 2005) “A critical art practice not only considers

what is apparent or assumed, but addresses that which may be neglected, contrived, and contested” (Sullivan, 2005, p.146)

ABR and Art Therapy

Using art as a means of self-expression, meaning making, and articulation in the intersubjective space is compatible with the theory and practice of creative arts therapies (Hervey, 2000; Kapitan, 2010; McNiff, 1998, 2011). McNiff (1986) articulated that because art therapy recognizes that creative activities are ‘the primary process of the profession’ (p.6), developments in ABR offers unique and evolving approaches that are compatible with the ontology and epistemology of art therapy. Art therapy processes are not always quantifiable or measurable, and thus, ABR facilitates investigation of such processes.: “Research is a process of disciplined and systematic inquiry where modes of investigation are determined by the nature of the issues being examined” (McNiff, 2011,p.388). ABR is specifically relevant to the field of art therapy because it uses “creative expression as a way of knowing, communicating and furthering personal and social development” (McNiff, 2011, p. 387).

Kapitan (2010) proposed that because art therapists utilize art for clinical purposes, art making and processes inherent in arts-based research are compatible with art therapy practice: “Art has central place in the field of art therapy, and influences what art therapists value and pay attention to, how they interpret clinical information, and how they help their clients resolve life problems” (p.162). ABR as a way of inquiry enables the art therapist to utilize the strengths that she uses in artistic clinical work to inform her research as well: “Art based inquiry does not eliminate the perspective and practices of the artist but rather privileges them – whether the artist-client, the artist-therapist, or the artist-researcher – in the larger concerns of social science research” (p.162). In the context of ABR, “research is less like a puzzle or a problem to solve and more like a work of art to be appreciated” (p.xviii)

According to dance/movement therapist Hervey (2000), Creative Arts Therapists access and use knowledge that is artistic, aesthetic, sensory, subjective, and poetic. These kinds of

knowledge stand in contrast to the traditional positivist research approach that relies on logical, mathematical, and linguistic forms of knowledge (Hervey, 2000). Hervey (2000) suggested that creative arts therapists should value their unique knowledge, and choose research methods that enable them to inquire about these types of knowledge. Hervey (2000) stated: “Whatever research methods we choose need to realize our authentic values or else they will bring us no joy, no intrinsic reward, no meaning, and no power” (p.17). Hervey (2000) stated that her intention was not to undermine the valuable research in creative arts therapies is conducted using traditional research approaches. Rather she aimed at presenting an alternative approach that in her view matches more closely creative arts therapists’ aptitudes and worldview.

ABR as a paradigm for art therapy was recently articulated by Chilton, Gerber, & Scotti (2014) who viewed ABR beyond a set of methods but as a worldview that has its own unique philosophical underpinnings. According to this worldview, “the philosophical assumptions of arts-based research and art therapy share similar perspectives on the nature of truth, reality and knowledge” (p.3). This worldview acknowledges multiple intersubjective realities and aesthetic knowledge.

CHAPTER III: METHODS

Design: Arts-Based Research

The design of this study is arts-based research (ABR). Barone & Eisner (2012) stated that “Arts based research is an effort to extend beyond the limiting constraints of discursive communication in order to express meanings that otherwise would be ineffable” (p.1). Furthermore, arts-based research is “rooted in aesthetic considerations and . . . culminates in the creation of something close to a work of art” (p.1). McNiff (2008) emphasized that arts-based researchers actively engage in art making “as a primary way of understanding and examining experience by both researchers and the people that they involve in their studies”(McNiff, 2008, p.29).

An arts-based research (ABR) design was selected for this study for two reasons. First, ABR was selected because of the compatibility of the epistemic of *beyond_words* with the arts-based research philosophy and approach. *Beyond_words* represents the sensory-embodied, relational, and imaginal experiences that have been identified to be difficult to articulate by new mothers (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991). Since the research in my current project proposes that the phenomena of *beyond_words* in transitioning to motherhood represents unconscious and emergent knowledge that is difficult to access through words alone, an arts-based research design that uses both visual images as well as verbal reflections was warranted.

Second, ABR was selected because it is situated within the theoretical perspective of art therapy in this study. Art therapist Kapitan (2010) stated that “Art therapy offers unique perspectives on research because of the way art therapists think about and approach their creative work in the context of a helping profession” (p.xviii). Through art making, the client can express what words cannot (Gerber, 2014; Hogan & Pink, 2010; Malchiodi, 2006), and through verbal discussion, the client can reflect on these previously unutterable experiences, thus increasing

awareness, articulation and the assign meaning to his or her experiences (Robbins, 1987; Malchiodi, 2006). Leavy (2009) stated that in the context of arts-based research, the art therapy theoretical perspective can be validating and empowering for research participants: “Arguably, the creative process and verbal follow-up could be an empowering experience for the research participants as well, where they retain control, share their experiences, and have their feelings and perspective taken seriously” (p.229).

Location

The geographical location of the study was within the 5 boroughs of New York City (Brooklyn, Manhattan, Queens, the Bronx, Staten Island), or in the Philadelphia Metropolitan area that includes Montgomery, Bucks, Delaware, and Chester Counties. The actual data collection sessions took place in the participants’ homes for their convenience. The rationale for using the mother’s home as the data collection location was to minimize the inconvenience for mothers of infants traveling to a research location. Infants have feeding and sleep routines that are most easily managed in the comfort of their homes. The infant was present during the data collection phase if the mother so desired.

Time Period

The study commenced following IRB approval on February 27th, 2015, and continued until the conclusion of the study.

Participant Type

The study permitted recruitment of ten (10) participants. Of this 10 the first five eligible individuals who agreed to participate, reviewed and signed the consent form, would be enrolled in the study. The remaining five (5) participants would be invited to remain on a waiting list. In case one of the enrolled participants withdrew from the study, the next eligible participant on the waiting list would be able to enroll in the study. Although the study allowed and was approved

for ten participants, it was designed for five participants. The rationale for projecting for 10 participants was to compensate for any withdrawals from the study.

The final results are based on 5 participants' data. The participants were healthy adult women (over 21 years old) who are first-time biological mothers who had given birth to a live singleton child at 37 or more weeks of gestation within a year prior to the beginning of the research study. Individuals of all racial, ethnic, religious and socio-economic backgrounds were eligible for the study.

Justification for Participant Number

This was an exploratory arts-based research study. In keeping with the exploratory nature as well as other participant selection criteria for arts-based and qualitative research five (5) was selected as the number of participants for the following reasons:

- 1) Five participants facilitated the collection of exhaustive arts-based and textual data for the purpose of conducting an in-depth exploration of the phenomenon under study.
- 2) Five (5) participants was compatible with the range of participants in arts-based research studies that have used portraiture (Gerstenblatt, 2013; Jongeward, 2009; Rippin, 2012). Specifically in studies that employed portraiture in ABR, Rippin (2012) used one participant, and Gerstenblatt (2013), and Jongeward (2009) recruited three participants.
- 3) In more traditional qualitative research approaches, the number of participants vary from study to study (Baker & Edwards, 2012), however in comparable in-depth explorations such as narrative research and phenomenology, the number of research participants has been suggested to be 1-2, and 3-15 participants, respectively (Creswell, 2013).

Summarily, 5 participants were chosen because this number was comparable to other similar studies, was warranted based on the amount and types of data generated in an in-depth exploration, and representation of the phenomenon under study while also was large enough to provide a range of individual experiences.

Inclusion Criteria with Justifications

- Participants in this study were only females because the study was focused on the phenomenon related to biological motherhood.
- Participants must be adult women (21 and older) because this study aimed at a normative adult sample.
- Participants for this study were first-time biological mothers who had given birth to a live singleton infant within 12 months prior to research. First-time mothers were included because this is the time that the mother experiences the most significant role and identity transition. Up to 12 months after giving birth was an inclusion criterion because this time frame has generally been referred to as the time frame for transitioning to motherhood (Mercer, 2004; O’Fahey & Shenassa, 2013; O’Hara, 2009; Rubin, 1967).
- Participants would have born an infant at 37 or more weeks of gestation who was admitted to a newborn nursery. 37 or more weeks of gestation was a criterion because this study aimed at a normative sample of mothers who have carried to term.
- Participants were residents within the 5 boroughs of New York City (Brooklyn, Manhattan, Queens, the Bronx, Staten Island), or in the Philadelphia Metropolitan Area that includes Montgomery, Bucks, Delaware, and Chester Counties.
- Participants were able to read and speak English. This was a criterion because this is study included an in-depth open-ended interview.

Exclusion Criteria with Justifications

- Individuals were excluded from the study if they had been diagnosed with a severe mental illness such as schizophrenia, bipolar disorder, major depressive disorder, or postpartum depression. The reasons for this exclusion criterion were first, that the study was

aimed at collecting data from a normative sample, and second that this criterion could minimize risks for any mothers struggling with a serious mental illness.

- Individuals could not participate if they had multiple children or were pregnant with their second child because the study focused exclusively on transitioning to motherhood for first-time mothers.

Recruitment

Recruitment commenced after the approval from the Drexel University Institutional Review Board (IRB) on February 27th, 2015. Participants were recruited through identifying and contacting referral sources who were in contact with new mothers, and were sensitive to and familiar with women's issues of transitioning to motherhood. Purposeful and snowball sampling (Patton, 1990) were used to identify and contact referral sources who referred the potential participants to the researcher. In addition to recruitment using referral sources, the researcher also posted flyers at various locations at Drexel University such as in the Bellet Building, the New College Building, and other strategic campus locations accessible to students, faculty and staff who are new mothers. Specific recruitment methods are described in more detail below.

Recruitment Methods:

Step 1: Locating and identifying referral sources. Purposeful and snowball sampling methods were used to identify referral sources. Purposeful sampling “focuses on selection of information rich cases whose study will illuminate the questions under study” (Patton, 2001, p.231). Snowball sampling was used to identify and locate additional referral sources. In snowball sampling the initial referral sources, as described below, were asked to identify additional healthcare professionals and support group facilitators who were in contact with new mothers who might also act as referral sources. Referral sources in this study were defined as two major groups: 1) practitioners, faculty, and students who are creative arts therapists, nurses, and other health professions; and 2) support group facilitators who are in contact with new mothers.

The two groups were identified since they include individuals who are familiar with and sensitive to women's issues of transitioning to motherhood. To locate referral sources, two purposeful sampling methods were used:

- 1) The primary group of referral sources consisted of practitioners, faculty, and graduate students in the creative arts therapies, nursing and other healthcare professions who were known to the researcher and could potentially refer new mothers. A list was compiled that included Healthcare professionals in the domains of Creative Arts Therapies, Nursing, Family Therapy, and Nutritional Science in the College of Nursing and Health Professions of Drexel University. In New York, Creative Arts Therapists at the Department of Art Therapy in School of Visual Arts, were identified and included in the list as well. Members of the Department of Art Therapy at School of Visual Arts (SVA) were included because the researcher is an alumna of SVA. The faculty and other creative arts therapists at SVA have access to potential referral sources and participants in the New York geographical area.
- 2) If recruitment using referral sources in the first group did not lead to recruitment of 10 participants within 2 weeks, the second list that contained referral sources who were facilitators of new mothers' support groups, was be created. An online search was conducted to locate new mothers' support groups within the 5 boroughs of New York, and the Metropolitan Philadelphia area. New mothers' support groups typically provide parenting education and advice on such issues as nutrition and infant care to new mothers.

Step 2: Contact with referral sources.

- 1) First, the researcher contacted the lists of referral sources in group 1 indicated above, and since recruitment using referral sources in the first group did not lead to recruitment of 10 participants within 2 weeks, the lists of referral sources in group 2, indicated above, was also contacted.

- 2) The researcher contacted each referral source individually either by telephone, word-of-mouth, or e-mail. The purpose of this initial contact was to inform the individuals on the list about the title and purpose of the study as well as a summary of the criteria for potential participant in the study and to ask them if they would be willing to serve as a referral source. The individuals were asked if the researcher has their permission to e-mail them more information about the study.
- 3) After the initial contact, if the referral source agreed, an e-mail announcement and an attached flyer (Appendix A) was sent to the referral source explaining the study and outlining the eligibility criteria. The referral sources were asked to forward the flyer to potential participants by e-mail or print the flyer and deliver it to the potential participants in person. Referral sources were also asked if they would be willing to send the email announcement to additional potential referral sources.

The e-mail announcement contained the following text:

Dear (name of the referral source),

My name is Victoria Scotti, I am an art therapist and Doctoral Candidate in the PhD Program in Creative Arts Therapies at Drexel University in Philadelphia, PA. As a partial fulfillment of my doctoral degree, I, under the supervision of Dr. Nancy Gerber, the Principal Investigator and my Dissertation Advisor, am conducting a research study about first-time mothers' experience of transitioning to motherhood. The title of the study is *Beyond_words: Making meaning of transitioning to motherhood using montage portraiture*. The purpose of this arts-based research study is to explore how first time mothers express and make meaning of the phenomena that they encounter that are *beyond_words* in their transition to motherhood *Beyond-words* phenomena include sensations in the body, daydreams or fantasies about motherhood, and relational experiences with the infant. The study is particularly focused during the period called transitioning to motherhood, that is, in the first year after giving birth to the first child.

I am contacting you because I am beginning to recruit participants for the study and you are someone who might have contact with new mothers who meet the inclusion criteria for the study. The inclusion and exclusion criteria are listed below:

Inclusion criteria:

- Participant is an adult (over 21 years of age) first-time mother.
- Participant has given birth to a singleton infant within 12 months prior to the research.
- Participants gave birth to the infant at 37 or more weeks of gestation, and the infant was admitted to a newborn nursery
- Participant resides within the 5 boroughs of New York City, or in Metropolitan Philadelphia area.
- Participant can read and speak English.

Exclusion criteria

- Individuals cannot participate if they have more than 1 child, or are currently pregnant.
- Individuals cannot participate if they have been diagnosed with a severe mental illness such as schizophrenia, bipolar disorder, major depressive disorder, or post-partum depression

I am attaching the recruitment flyer with more information about the study. If you know of a first-time mother who has had a baby within the last 12 months, meets the additional criteria listed above, and might be interested in participating in this study, may I ask you to please forward the attached flyer to her and ask her if she would like to know more about the study. If she does, she may either contact the researcher Victoria Scotti at vs393@drexel.edu, or provide her e-mail so that I can contact her directly. If you do not know of a first-time mother but can think of another healthcare professional or support group facilitator who is in contact with first-time mothers and might refer participants, may I ask you to forward this e-mail to this individual and ask that individual if I might have their email to contact them? Please let me know if you have any questions. My email address is vs393@drexel.edu Thank you in advance for your help!

Step 3: Contacting potential participants by e-mail. The e-mail announcement and the attached flyer from the researcher asked the referral sources to forward the flyer, or print the flyer and deliver it, to the potential participants that they know. Within this process the referral source will also be asked to request the email addresses of those individuals who express interest in participating in the study so that the researcher could follow up with those interested individuals directly.

Step 4: Selection procedures. The selection procedure included a conversation with the potential participant by telephone, a self-identification process, recruitment record keeping, the scheduling of the first informed consent and data collection meeting, and the final selection of the study participants.

Telephone Conversation

There were two ways for the participant to respond to the e-mail recruitment announcement.

- 1) The potential participants (mothers) who received the recruitment flyer from the referral sources, and were interested in volunteering, could contact the researcher by e-mail and provide their phone number with the best time to reach them. The researcher then called the potential participant and asked if she had read the e-mail announcement and the inclusion and exclusion criteria (Please see Appendix C for the telephone script).
- 2) If the potential participant provided her e-mail through the referral source, then the researcher would follow up one week after the email announcement had been distributed by the referral source and contact the potential participant directly by e-mail (See Appendix B for the e-mail script). If the potential participant responded to this e-mail and provided her telephone number, the researcher telephoned the participant.

Self-Identification Process and Scheduling Meeting

The procedure for selection of participants was one of self-identification. The self-identification occurred when the potential participant spoke with the researcher by telephone. During that telephone conversation the researcher specifically asked if the potential participant had read the recruitment announcement and determined that she meets all of the inclusion criteria and did not present with any of the exclusion criteria. If the potential participant self-identified that she did not meet all of the inclusion or presented with exclusion criteria, she would be informed that she was not eligible to participate, and would be thanked for her time. If the potential participant self-identified as meeting all inclusion criteria (and no exclusion criteria) and thus eligible to participate in the study, the researcher asked: “Do you think you might want to participate in this study?” If the potential participant answered “no”, she would be thanked for her time. If the potential participant answered “yes”, she was informed that she could meet with the researcher to learn more about the study and potentially enroll. A time was scheduled to meet at the participant’s home to go over the informed consent and if the participant signed the informed consent and agreed to enroll, collect the data for the study.

Recruitment Record Keeping

A log with the potential participants’ and enrolled participants’ names, telephone numbers, email addresses, home addresses and dates of the scheduled data collection session (See Appendix D) was created and kept in a locked secure location or stored in a password protected file on the encrypted server. The purpose of this log was to retain contact information for those individuals who volunteered to meet for the informed consent meeting so she might be contacted in the event of any change in the scheduled meeting time and so that she might be contacted to schedule follow up meetings for member checking. Once the informed consent was signed each participant was assigned a Participant Identification Number (PIN) to be used on all study documents instead of the participant’s name in order to protect confidentiality. The PIN was also

added to the log. The names of those individuals who did not enroll in the study were removed from the log unless they agreed to remain on the waiting list as described below.

Final Selection of Participants

The study permitted recruitment of 10 participants. The first ten (10) participants who expressed interest in enrolling in the study had their contact information recorded in the research log. Of these 10 the first five eligible individuals who agreed to participate, reviewed and signed the consent form, were enrolled in the study. The remaining (5) participants were invited to remain on a waiting list. In case one of the enrolled participants withdrew from the study, the next eligible participant on the waiting list who reviewed and signed the consent form, would be able to enroll in the study.

At the conclusion of data collection, the names of those individuals who were not enrolled in the study were removed from the log. The log was stored in a password protected computer file on an encrypted server.

Instrumentation: Montage Portraiture

Montage portraiture is the data generation and analysis method that was specifically designed for this arts-based research study. This method builds on the data generation procedures that have used portraiture in related interdisciplinary fields of the fine arts (Brilliant, 2002; Freeland, 2010; West, 2004), qualitative research (Bagnoli, 2009; Lawrence-Lightfoot 1983, 2004; Lawrence-Lightfoot and Davis, 1997; Zartler & Richter, 2014), arts-based research (Gerstenblatt, 2013; Jongeward, 2009; Rippin, 2012), and art therapy practice (Alter-Muri, 2007; Costello-Du Bois 1989; Davis Halifax, 2003; Fish, 1989, 2012; Franklin, 2010; Hanes, 2007; Kielo, 1990; McGann, 2006). Montage portraiture also includes the principles of arts-based research practices in which the researcher is actively engaged in iterative artistic process during all phases of the research study (McNiff, 2011). In the phases of data generation, analysis, and representation, this method includes artistic and textual components. The method is called Montage Portraiture because it employs elements of montage and portraiture in exploration and

communication of the participants' *beyond_words* experiences. The term montage has been used slightly differently in the literature of the fine arts as well as ABR, and thus carries multiple connotations. In this study, I build upon these different meanings. Montage in this study was used not to eradicate but to expose the layers of experiences. The process of the creation of the portrait was as important as the final result itself and thus, montage portraiture in this study, in its combination of images and narratives, unfolds like a sequence of snapshots. During data generation with the participants, personal photographs were used to elicit self-expression (Zartler & Richter, 2014; Vivienne & Burgess, 2013). The participants traced several of their photographs, and later added illustrations of metaphors, and thus, this montage of images allowed for multiple dimensions of the participants' experience to co-exist and be communicated (Denzin, 2001; Vaughan, 2009).

Montage portraiture has 6 phases across data generation and analysis that include artistic and textual components:

1. Artistic and Oral Open Ended Responsive Interview
2. Artistic and Written Researcher Reflexivity
3. Content Analysis
4. Portrait Synthesis resulting in artistic portraits and textual narratives
5. Credibility measures (member checking)
6. Final Synthesis and representation of findings.

Each of these phases is described in more detail below.

Artistic and Oral Open Ended Responsive Interview

In the initial stages of the study data were generated by each participant individually using Artistic and Oral Open Ended Responsive Interview. The purpose of the Artistic and Oral Open Ended Responsive Interview was to obtain an in depth description from the participant about her *beyond_words* experiences in transitioning to motherhood through the use of *portrait*

drawings and oral narratives. Because it has been suggested that these experiences of transitioning to motherhood are difficult to articulate verbally (Crossley, 2009; DeVault, 1991; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991), this study used an artistic method of self-portraiture to assist the participant in expressing and reflecting on her experience both artistically and verbally (Bagnoli, 2009).

Artistic and Oral Open Ended Responsive Interview was an iterative process that had artistic and oral components. The artistic component of this instrument builds on qualitative research procedures using self-portraiture to elicit interview data (Bagnoli, 2009; Zartler & Richter, 2014) and self-portraiture as an intervention used in art therapy practice (Alter-Muri, 2007; Davis Halifax, 2007; McGann, 2006). In qualitative research, Bagnoli (2009) used self-portraits to elicit oral interview data. This instrument was found to be “a creative way of interviewing that is responsive to participants’ own meanings and associations” (p.547). Qualitative researchers Zartler & Richter (2014) found that photographic portraits of family members served as a powerful data elicitation method with children about sensitive family issues that may be difficult to put into words (Zartler & Richter, 2014). In art therapy, self-portraiture and verbal follow-up has been used to promote self-awareness and reflexivity (Alter-Muri, 2007; Davis Halifax, 2007; McGann, 2006).

Artistic and Oral Open Ended Responsive Interview is initiated by the participant being asked to trace a photograph/photographs that she has selected, based upon the instructions she was given, which represents a portrait of herself and her infant. Tracing from photographs as a means of creating a self-portrait was chosen because creating a self-portrait by drawing, for the majority of individuals unfamiliar with drawing, provokes anxiety. This conclusion was based both on the adaptive theory and practice in art therapy, as well as a pilot study that the researcher conducted using this instrument. The montage of images was chosen because this technique allows for multiple dimensions of the participants’ experience to emerge and co-exist (Denzin,

2001), thus facilitating a more in-depth and comprehensive depiction of the various and simultaneous *beyond_words* experiences that exist during transitioning to motherhood.

The Artistic and Oral Open Ended Responsive Interview includes the following components:

1. A **self portrait** that the participant created by tracing photographs of herself and her infant. The participant selected the photographs prior to the meeting.
2. **Open Ended Responsive Interview** includes open ended and probative questions that require reflexivity from the participant in order to generate in depth descriptions of the lived experience of transitioning to motherhood.
3. **Oral and artistic responses to the questions.** As the participant responded to the questions, she was encouraged to elaborate on both the oral narrative and the arts based portrait by adding to the montage of images.
4. **Demographic and background questions** about the participant's age, race, mode of delivery, and mode of feeding the infant (breast feeding or bottle feeding).

Artistic and Written Researcher Reflexivity

Artistic and Written Researcher Reflexivity included artistic and written reflexive data generation from the researcher. The purpose of this phase was to generate in depth artistic and written reflections from the researcher's observations and experiences in response to the data and data generation process, and to record any immediate impressions and insights.

The response art segment of this instrument builds on portraiture in the fine arts practice (Brilliant, 2002; Freeland, 2010; West, 2004) and art therapists post-session imagery (Costello-Du Bois 1989; Fish, 1989, 2012; Franklin, 2010; Kielo, 1990; Wadeson, 2003). In the fine arts, the artist creates the portrait rendering the sitter's physical appearance but also reflects on the sitter's inner life (Brilliant, 2002; Freeland, 2010). Art therapists have used portraiture as post-session imagery to reflect on their clinical work, clarify confusing feelings, explore their counter

transference issues about their clients, and communicate their work to others (Costello-Du Bois 1989; Fish, 1989, 2012; Franklin, 2010; Kielo, 1990; Wadeson, 2003). In arts based research the use of the researcher's artistic reflections are central to the investigative process (Leavy, 2009; McNiff, 2011).

The written segment of this instrument builds on memoing as a reflexive practice in qualitative research that assists the researcher in reflexivity (Moustakas, 1991; Lawrence-Lightfoot & Davis, 1997; Birks, Chapman, and Francis, 2008).

In this study, the Artistic and Written Researcher Reflexivity is an instrument wherein the artistic process and memos were used to assist the researcher in reflecting on the participant's data. Artistic and Written Researcher Reflexivity started with the researcher's contemplation of the participant's self-portrait and listening to the interview. Then, in response to these data, the researcher iteratively created her own artistic response using the montage portraiture method inspired by the participant's work and written memos. To guide herself in this process, the researcher posed initial guiding questions to herself, and was open to additional questions that might evolve during the reflexive process. This iterative artistic and written process continued until saturation was reached. The specific procedures Artistic and Written Researcher Reflexivity will be described in the procedures section of this chapter.

Following the data generation phases, the researcher engaged in data analysis that had three phases: 1) content analysis, 2) portrait synthesis, and 3) final synthesis. This concept of multiple phases of data analysis process builds on the two-phase qualitative research data analysis of portraiture (Lawrence-Lightfoot and Davis, 1997). The first phase of data analysis was dedicated to organizing the data, and the second and third phases were dedicated to the creative synthesis of the data.

Content Analysis

Content analysis involved organization of all individual data that were generated by the participant and the researcher during data generation by using a data analysis matrix (See the procedures section of this chapter). The purpose of content analysis was to organize, categorize, and code all data identifying predominant themes and metaphors that were later synthesized during Portrait Synthesis in artistic and written form. Both textual and visual data were analyzed using content analysis (Schreier, 2012). The textual aspect of content analysis involved listening to audio taped interviews, transcribing the interviews verbatim, coding using open coding, and identifying predominant themes (Schreier, 2012). Following Lawrence-Lightfoot and Davis (1997), special attention is given to identifying metaphors that “are not only expressive of the central themes and values of human experience, they are also generative. They embody values and perspectives and they give the shape and meaning” (p.198). The organization of artistic data included organizing all of the images obtained from the phases of the creation of the artistic montage portraiture by both participant and the researcher, inserting the images in the matrix, coding, and identifying salient themes and metaphors.

Portrait Synthesis

Portrait Synthesis, that has an artistic and a textual component, was conducted by the researcher following content analysis.

The textual component of portrait synthesis builds on the text-based qualitative method of portraiture developed by Lawrence-Lightfoot and Davis (1997), and heuristic method of creative synthesis using portraiture by Moustakas (1990). Moustakas (1990) used portraiture as a phase in data analysis to synthesize the participants’ experiences about the phenomenon under study where “The individual portraits should be presented in such a way that both the phenomenon

investigated and the individual persons emerge in a vital and unified manner” (Moustakas, 1990, p.52). That is, the portrait emerges not just to depict the phenomenon under study but should reflect the person as a whole in relation to the phenomenon. Lawrence-Lightfoot and Davis (1997) developed their method of portraiture that combines the philosophy of phenomenology with ethnographic techniques that is set in the context of the narrative. Based on Moustakas’ (1990) heuristic perspective and Lightfoot and Davis’ (1997) narrative perspective, the voices of the participants were combined with the voice of the researcher to produce a story in this study.

The artistic part of Portrait Synthesis builds on visual portraiture as an artistic method of data analysis and representation proposed by Jongeward (2009) and Rippin (2012). Relying on artistic practice, Jongeward (2009) used visual portraiture and collage in an artistic inquiry to “convey the integrity and diversity” of her participants (p.240). Based on the research data, Jongeward (2009) created a whole picture of the participant using mixed materials on construction paper. According to Jongeward (2009), this process enabled her to “discover and represent meaningful patterns within complex phenomena” (p.250). Rippin (2012), in the discipline of organizational studies, used portraiture as a fine arts method to analyze and represent her research findings. Rippin (2012) found that using the visual methods of collage and montage helped analyze and represent the multiple facets of the identity of her participant.

The Portrait Synthesis in this study resulted in 5 artistic portraits as a response to each individual participant that were accompanied by textual narratives. Specific procedures of Portrait Synthesis are described in the procedures section of this chapter.

Final Synthesis and Representation

To create the Final Synthesis of the study, the researcher included the participant feedback into the final synthesis and representation of findings which is a play in four acts that integrated the artistic and the narrative components and represented the five mothers’ *beyond_words* experiences in transitioning to motherhood.

Credibility and Authenticity Procedures

Arts based research has emerging procedures for ensuring credibility and authenticity. In ABR the presentation of the results often is in the form of exhibitions of the artistic results in a public forum as a method for further assessing the authenticity and credibility of the results. For this study, specific ABR credibility and authenticity criteria were used, which were: question/method fit, usefulness, and aesthetic power. These procedures are explained in detail in the Investigational Methods and Procedures section of this chapter. Two primary credibility and authenticity procedures used in this study included receiving feedback from participants as a member checking as well as a wider expert audience at strategic points in the data analysis process as to the aesthetic impact of the arts based results.

The first phase of the credibility and authenticity procedures included collecting feedback from the participants using a member checking procedure. After each Portrait Synthesis, the researcher contacted the participant by e-mail to schedule member checking during which the Portrait Synthesis that the researcher created, was shared with the participant. The participant provided feedback (Appendix F) on whether and how Portrait Synthesis reflected her experiences, or if not, how and what could be changed to more closely represent her experiences.

After Portrait Synthesis of the 5 cases, member checking, and the Final Synthesis, these arts-based results that were created by the researcher were exhibited in an art show at the premises of Drexel University. In ABR, the presentation of the results often is in the form of exhibitions of the artistic results in a public forum as a method for further assessing the authenticity and credibility of the results. To further assess these credibility criteria, an art exhibit and art opening was organized the purpose of which was to obtain anonymous written feedback from professionals at Drexel University who are articulate in maternal-infant issues and arts-based research. 20 individuals including mother-infant nursing faculty and practitioners, faculty and students in Creative Arts Therapies who are literate in arts based research and the arts therapies were invited to attend the art exhibit opening and they were asked to provide

anonymous written feedback (See Appendix D). The feedback obtained from the audience was anonymous, and it was incorporated into the results section of this study. The description of the procedure of collecting the anonymous feedback is described in the investigational methods and procedures section of this chapter.

Investigational Methods and Procedures

The following section describes specific investigational methods and procedures for the informed consent, data generation, and data analysis phases of this study.

Informed Consent-(30 minutes).

The informed consent procedure was conducted at the time of the scheduled data collection session and prior to any actual collection of data. As part of the informed consent procedure, the researcher presented the informed consent document to the potential participant and first orally explained the purpose, procedures, risks/benefits, confidentiality and the rights of the research participant to the potential participant. The oral explanation is included below and the full informed consent is available in Appendix I.

Description of the Study

“You are being asked to participate in a research study titled *Beyond_words: Making meaning of transitioning to motherhood using montage portraiture*. The research study is being conducted as partial fulfillment of my doctoral degree. The purpose of this study is to investigate new mothers’ experiences that I call *beyond_words* because the experiences being studied in this research include sensations, feelings, relationships, and daydreams or fantasies. These experiences may be difficult to put into words, therefore, this research study involves art making and verbal reflections to help you express and make meaning of these experiences.

First I would like to explain the overall method used to study these experiences and then I will review the procedures with you. I am conducting this study to learn about *beyond_words* experiences in transitioning to motherhood so that we can better understand what women go through when they become mothers. For example, I would like to know what sensations you

have, when you touch or hold your child, what you think about or the emotions you feel in your transition to motherhood. You may even have dreams, memories, and fantasies about adjusting to motherhood. These experiences are sometimes difficult to put into words, and so I call them *beyond_words*. This is an arts-based study which means that I am collecting the information using images that you create in drawings and an interview in which you will discuss your experiences and images. Today, I will ask you to create a self-portrait by tracing a photograph of yourself and your baby, and later add drawings onto this portrait. Arts-based study also means that I as the researcher will be creating art as part of this study. Based on your artwork and what you tell me, I will create artwork and write a story that I will share with you by e-mail and you can provide feedback about it by telephone, Skype or e-mail. The artwork that I create will be exhibited at an art exhibit, and when people look at the art and read the story, they can learn about first-time mothers' *beyond_words* experiences. At the conclusion of the study I will create one final artistic and textual piece that reflects the 5 mothers' *beyond word* experiences.

Procedures

I will now explain to you what you will be doing in this study, what I will be doing, and how what you do will be used to create the results and how the results will be shared. The total allotted time for the study is 2.5 hours. Our meeting today is 2 hours. 30 minutes of this meeting will be used to review the informed consent, and 1.5 hours will be devoted to an Interview that includes art making and orally answering questions. After I analyze the data and create artwork and write a story about your experiences, I will share the artwork and the story with you by e-mail, and you can provide feedback about it by phone, Skype, or e-mail. This will take about 30 minutes.

The procedure for our meeting today is as follows:

I will bring art materials and I will ask you to review the photographs that you have selected of yourself and your baby. I will ask you to trace from these photographs to create a self-portrait. I will then ask you questions about the artwork and your experiences of transitioning to

motherhood that are *beyond_words*. After you answer the question, I will ask you to create artwork in response, and then in turn will ask more questions. You may also just tell me about your thoughts and ideas that come to mind as you create art or reflect on your art. It is an open process, and there is no right or wrong way of answering the questions, and also you do not need to have any previous art making experience. You may also decline to answer any question or if it makes you too uncomfortable. The art making and interview process will take 1.5 hours.

After our meeting today, I will create an artistic portrait and a story that will depict my impression of your *beyond_words* experiences of transitioning to motherhood from what you have told me through your art and answers to the questions. I will share this artwork and the story with you by e-mail so that you can provide feedback by telephone, Skype, or e-mail. This should take about 30 minutes, and you have up to 1 week to provide feedback. After you provide feedback, you will be compensated with \$50 for your time and contribution (you will receive a check in the mail). I will create artistic portraits of the 5 research participants in this study. I will be showing the portraits with accompanied stories that I create in an art exhibit, and publications and presentations about the research. The artwork that you create today will not be included in the exhibition, but you will have an option to have your artwork included in the publications and presentations and future exhibits about this research. There is a place on this form for you to select your preference for the inclusion of your artwork in the publications and presentations, and/or future exhibits. In any publication or presentation your name will not be used. At the conclusion of the research, I will create one final artistic piece that has visual and textual components and that incorporates the 5 research participants' *beyond_words* experiences in transitioning to motherhood, my artistic and written responses, and comments from the art show.

Audio Recordings and Digital Photography.

During our meeting today, I will audio record the interview, which I will later make into a written document, and take digital photographs of the artwork as you are working on it. The

reason for audio recording and photography is to document the process of creating the art and your words with the utmost accuracy. This audio recordings and the digital photographs, along with the art, are the research data from which the results about your *beyond_words* experiences of transitioning to motherhood will emerge. The interviews will be transcribed to written form and analyzed. Portions of the transcribed interview will be published as part of the results. The digital photography will also be published as the results. The audio recording, digital photography, and transcribed text will be securely stored in a locked location in the researcher's office during the course of the research. The data (audio recordings, digital photography, and transcribed interview text) will be retained for three years after conclusion of the study. After three years, the audio recordings will be destroyed. If you give permission to use the photographs, the interview text, and the artwork for future exhibitions and presentations, these data will be retained beyond the three years after the study closure. Your name will never appear or be connected with the interview or artistic data or in the results. In order to comply with the regulations of the Institutional Review Board, one de-identified copy of the research data which includes audio recordings, transcripts and digital photographs of the artwork will be saved digitally on a CD or flashdrive and remain in a locked secure location at the Department of Creative Arts Therapies, Drexel University.

Artwork

We need to determine what happens to the physical artwork that you will be creating today at the end of the study. You have the option to have your artwork returned to you at the conclusion of the research study, or allow me to keep your artwork for potential future educational art exhibits. If you choose to let me keep your artwork, it will be de-identified and kept in a locked secure location in my office. Please select if you would like to

- ☐ The artwork to be returned to you
- ☐ The artwork to be saved for possible future exhibits

With regard to the digitally photographed artwork, you can give voluntary permission for me to publish, present or exhibit it for any or all of the purposes listed below (please check your preferred option(s):

- ☐ Publication in academic journals
- ☐ Professional or educational presentations
- ☐ Future educational exhibits

The physical artwork will be stored for 3 years, after which it will be destroyed. The digital artwork will be stored indefinitely.

Confidentiality

Your name and personal information will be kept confidential in any results, publication, presentation or exhibition that results from this research study.

You should be aware that there are two potential risks to your confidentiality. First, if you give voluntary permission to use your artwork, because the artwork contains self-portraiture, it is possible that you may be recognized by others. To minimize this risk, I will digitally obscure the facial features of your portrait to make it unrecognizable. Second, as the result of this study, I will also create a montage portrait that illustrates my impression of your *beyond_words* experiences of transitioning to motherhood. You should know that the purpose of this portrait is not to convey your physical likeness but to depict your experiences. I may be inspired by the self-portrait that you created and your overall physical presence, but I will create different facial features (hair, eyes, nose, shape of the face) so that you will be unrecognizable.

All research data that will include your name (and pseudonym, if desired), address, phone numbers and email, will be securely stored in a locked location in the researcher's office during the course of the research, and all copies destroyed at the conclusion of the research. You will be assigned a Participant Identification Number (PIN) which will be used on all research documents

and files. The only connection between the PIN and your name will be on a Log on which your name and contact information are stored for the purposes of contacting you at different phases of the study. That contact sheet will be stored in a locked secure location during the study and destroyed at the completion of the study. One de-identified copy of the research data, which includes audio data, transcripts and digital photographs of the artwork, will remain in a locked secure location at the Department of Creative Arts Therapies, Drexel University for auditing purposes. Some authorized individuals such as representatives of the Office for Human Research Protection (OHRP), the institutional review board (IRB), or employees conducting peer review activities may need to have access to your records. You agree to such inspections and to the copying of excerpts of your records, if such inspections require it. Additionally, you should know that I am bound by legal reporting requirement in case of the existence of reportable events, such as harm to yourself or others.

Risks, Discomforts, and Benefits

In addition to the risks already outlined under confidentiality, the risks and discomforts from participating in this study are minimal. There are no physical risks. Participation in the study requires minimal physical exertion and interaction with art materials. The art materials used in this study are paper, basic drawing materials and water color which are non toxic and do not include any sharps. Because art making is a part of this study, it is expected that you may feel mild anxiety if you do not have experience with art making. To make you more comfortable, I will offer support and demonstrate how to use the art materials. Also the study is carefully designed to minimize the emphasis on artistic talent and maximize the emphasis on telling your story by beginning with photographs that you select.

It is possible that you feel mild anxiety if separated from your baby during the meeting, therefore, if you would like, your baby may be present. It is possible that you will feel tired

during the meeting. We will take a 10 minute break half way through the meeting but if you feel tired or need to attend to your baby, we can take additional breaks as well.

Special precautions. To minimize risks, the following precautions will be taken:

- 1) Mothers of infants may feel uncomfortable or anxious when they are separated from their infants. Therefore, your baby may be present throughout the data collection procedure if you wish so.
- 2) There is a possibility that you may feel tired or need to take care of your baby at some point during the 1.5 hour artistic and interview process. We will take a 10 minute break after the first 45 minutes, and if you need additional breaks to rest or to attend to your baby, you can take breaks any time.
- 3) The art materials that you will be using are safe, clean, non-toxic and not sharp. They are easy to use and do not cause any spilling and are not damaging to your clothes or home environment.
- 4) To adhere to confidentiality, I will take special precautions to make the artwork unrecognizable. In the process of this research study, you will create a self-portrait. If you agree to publish or exhibit your self-portrait, I will (digitally) obscure the facial features of the portrait to make it unrecognizable. In addition to the self-portraits created by the participants, I will also create artistic montage portraits of the participants as part of the data analysis and representation findings of the research. To minimize the risk to confidentiality, I will use artistic practice to change the facial features so that the participant will be rendered unrecognizable.
- 5) In the unlikely event that you experience psychological stress or distress that prevents your continuing in the study, you can withdraw from the study. In addition, please let me know if you have a psychotherapist with whom you can process psychological issues.

Telephone numbers for crisis intervention services are available: 919-231-4525 *or* 1-877-235-4525 In the event of an emergency, the research activities will be stopped.

Benefits: We cannot promise any direct benefits to you from your taking part in this research.

However, it is our hope that your participation in this research may help other mothers to tell their *beyond_words* transitioning to motherhood stories.

Step 5: Signing the Informed Consent

The potential participant was asked to read the written informed consent document and then repeat in her own words the purpose, procedure, risks, benefits, and confidentiality measures.

She was encouraged to ask any additional questions. To assist with any questions that the potential participant might have, the researcher posed some general questions to determine whether the participant understood what was involved in participating in the study. The researcher asked the participant the following questions:

- In your own words, can you describe what you will be doing in this research study?
- Can you describe your understanding of how your confidentiality and privacy will be ensured?
- Can you state in your own words any potential risks to you and any potential benefits from participating in this study?
- Do you have any questions?

If the researcher was confident that the potential participant understood all aspects of the study and was competent to enroll, the potential participant was asked if she still would like to participate in the study. If she answered “yes”, she was asked to sign two consent forms. The participant kept one copy for her records and the other copy was stored in a locked secure cabinet in the offices of the Department of Creative Arts Therapies at Drexel University. After signing the informed consent, data generation activities commenced.

Data Generation

This arts-based research study included data generation by the participant that was followed by responsive data generation by the researcher. Data generation in arts based research is an iterative process that includes both artistic and oral/written components and in some phases of the research intersects and overlaps with the data analysis. The Data Generation included two major phases: I. –Artistic and Oral Open Ended Responsive Interview with the Participant, and II. Artistic and Written Researcher Reflexivity. Additional phases during which data generation and data analysis intersected and overlapped are: Member checking, Exhibit, Portrait Synthesis and Final Synthesis. Detailed descriptions of data generation procedures are provided below.

Data generation I-Artistic and Oral Open Ended Responsive Interview (1.5 hours).

Data generation I involved an Artistic and Oral Open Ended Responsive Interview with the participant. Specific procedures of the Artistic and Oral Open Ended Responsive Interview are described below:

1. **Portrait:** Data Generation I began with a portrait that the participant created by tracing photographs of herself and her infant that the participant selected prior to meeting with the researcher. The researcher provided the following introduction and instructions:
I am interested in the experiences of first time mothers adjusting to being mothers. Some of these experiences are those that are felt in your body, sensed, or even imagined. For example, what sensations you have, when you touch or hold your baby, what you think about or the emotions your feel during your transition to motherhood. You may even have dreams, memories, and fantasies about adjusting to motherhood. These experiences are sometimes difficult to put into words, and so I call them beyond _words. Therefore, I would like you to use art, which is a more nonverbal way, to try to express these beyond _words experiences, and then I will ask you some questions. I will show you how to trace a self-portrait from photographs, and you will build on the self portrait as we proceed with the interview. You don't need to have any artistic talent to create the

images. The arts are used only because this is a nonverbal way to access and give meaning to the beyond_words experiences. Here are the directions: Please choose among several photographs of yourself and your baby. Then, I will ask you create a self portrait of yourself as a mother by tracing the photographs of your self and your baby. You may choose to trace from several photographs, and they may overlap. This will serve as basic sketch for your portrait. Then we will talk about it, and you will then add to your drawing. Please ask me if you have any questions.

2. Materials:

The researcher introduced the participant to the materials: *Here are the materials that you can use to create your portrait. You can use the graphite pencils and tracing paper to trace from the photographs that you brought with you today. As you keep working on the portrait, you can add color using the watercolor pencils. If you prefer, you can also use the watercolor pencils as watercolor by adding water with the brush.*

The materials that were used for the execution of the montage portraits were graphite pencils and watercolor pencils because of their ease of use yet diversity of application: pencils can be used to trace from photographs, and water color pencils can be used both as a dry and a wet material, thus offering a range of expression. Additionally, these materials were selected for safety reasons. These materials are clean, easy to use and do not cause any spilling and are not damaging to the participant's clothes or environment. This was a precaution because data generation took place in the participant's home. The materials were non-toxic and not sharp that was a safety precaution with mothers who might be breast feeding, and specifically if the infant was present during data generation.

The materials used for the artistic task were the following:

For tracing: several pre-existing photographs of the participant and her infant

Tracing paper

White drawing paper (9x12", and 12x18"), and white watercolor paper (9x12" and 12x18")

A set of graphite pencils (HB, 2B, 4B)

A set of watercolor pencils (24 colors)

A set of brushes

Water

3. Interview:

After the participant created the initial self portrait, the researcher conducted an open-ended responsive interview that asked the participant to verbally reflect and iteratively artistically respond. The oral interview was audio taped and the evolution of the montage portrait was documented at intervals with digital photography. Every time the participant added to the self portrait, this step was digitally photographed to preserve the process of the creation of the self-portrait. A diagram depicting the process of Artistic and Oral Open Ended Responsive Interview is provided below.

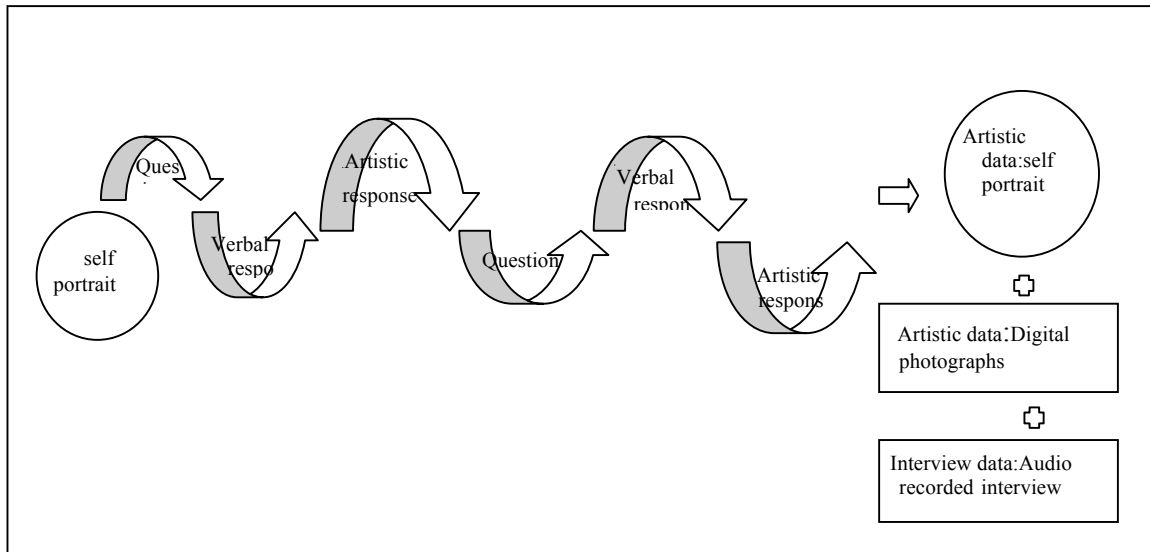


Figure 19. Artistic and Oral Open Ended Responsive Interview

Due to the nature of the open ended responsive interview, the questions were not pre-determined except for a few initial broad questions, and the following demographic and childbirth and breastfeeding related questions: race, mother's, age, and infant's age, mode of delivery, and whether they breastfed and if yes, how long they breastfed. Based on the artistic and verbal responses, subsequent probative questions as well as artistic and verbal responses related to the research objectives were posed in order to explore the phenomenon under investigation in more depth. The interview was audio taped. The researcher remained present and attentive, and offered assistance with materials, took notes and posed probative questions as necessary during Artistic and Oral Open Ended Responsive Interview.

In order to guide the inquiry and maintain focus on the research objectives, an Interview Guide that included initial objectives and corresponding open-ended interview questions with examples of probative questions is presented in the table below and in Appendix E . Due to the nature of a responsive interview, the probative questions could not necessarily be pre-determined. Therefore, the probative questions listed in this matrix are only examples and do not represent the full scope of the interview questions.

Table 2. *Artistic and Oral Open Ended Responsive Interview Guide*

Objective	1.Question (to be answered orally by the participant)	2. Artistic response (to be depicted artistically by the participant)
Objective 1: To learn about the participant's choice of photographs. This will give the participant an opportunity to tell the researcher about herself and her experience of transitioning to motherhood as an introduction to the interview.	Question: Please tell me what made you choose these photographs. Probe: Is there anything specific about these photographs that you would like to tell me about?	
Objective 2: To learn about the participant's experience of creating the artwork in her own words as an introduction to the interview.	Question: In your own words, please describe this self-portrait. Probe: Can you say more about what you were thinking or experiencing as you were creating the portrait?	
Objective 3: To learn about the participant's general <i>beyond_words</i> experiences of transitioning to motherhood.	Question: In your transition to motherhood, can you tell me about any experiences that were <i>beyond_words</i> ? Probe: Can you tell me more about these experiences?	Can you add some pictures, lines or color to your self-portrait that illustrates these experiences? (The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)
Objective 4: To learn about specific <i>beyond_words</i> experiences of transitioning to motherhood: the physical sensory embodied experiences of becoming a mother	Question: Can you tell me about the physiological sensations that you are experiencing since you became a mother? For example, physical closeness to the child, touching, holding the child. What kind of sensations does that bring up? Probe: Is there any particular sensation that stands out to you. Probe: Can you think of a metaphor (a word, an object that describes your	Can you add some pictures, lines or color to your self-portrait that might show those sensations that you experienced? You may choose to illustrate the metaphor that you used for the sensory-embodied experience. (The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)

Objective	1.Question (to be answered orally by the participant)	2. Artistic response (to be depicted artistically by the participant)
	experience) or a simile that describes your sensory and embodied experiences as a mother?	
Objective 5: To learn about the specific <i>beyond_words</i> experiences of transitioning to motherhood: the relational experiences with the infant.	Question: Can you describe how you are experiencing the relationship with your baby since you became a mother. Probe: How do you see yourself in the relationship with the baby? Probe: Can you think of a metaphor (a word, an object that describes your experience) or a simile that stands for the relational experiences with your child?	Can you artistically illustrate the relational experiences with your baby on this self-portrait? You may choose to illustrate the metaphor that you used to describe the relational experiences. (The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)
Objective 6: Learn about specific <i>beyond_words</i> experiences: the imaginal experiences of transitioning to motherhood.	Question: Can you describe any memories, fantasies, or daydreams that you have about yourself and/or your baby since you became a mother? Probe: Can you think of a simile or a metaphor(a word, an object) that describes you when you became a mother?	Can you please depict these imaginal experiences on this self-portrait? (The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)
Objective 7: To provide closing to the interview and obtain key points from the participant.	Contemplate final portrait and the digital photographs that were taken after each step of portrait creation Question: What was the experience like for you to create this image, and talk about it? Question: What aspects of your portrait stand out particularly strongly for you? Question: Could you please provide a title to this self-portrait?	
Objective 9: To obtain demographic data and	Question: Thank you, this concludes our research	

Objective	1.Question (to be answered orally by the participant)	2. Artistic response (to be depicted artistically by the participant)
information related to delivery and breastfeeding of infant	procedures for today. I would just like to ask you some brief demographic questions and some questions related to the mode of delivery and breastfeeding. Question: May I ask you the year of your birth? Question: When was your baby born? Question: Did you deliver vaginally or by c-section? Question: Did you breastfeed your baby, and if yes, how long did you breastfeed?	
Objective 10: Debriefing	To conclude, I would just like to check in with you: How are you feeling? Do you have any questions for me? Do you feel that you might need any emotional support?	

Documentation

During the interview process, three types of documentation were used to preserve the integrity and authenticity of the data as well as to record the sequence of the artistic and oral data.

Digital photographic documentation. Digital photographs were used to document the evolution of the montage portrait process during the initial and iterative interview process. Every time that the participant added to the self-portrait, the self-portrait was digitally photographed, thus preserving the evolutionary process of its creation. The digital photographs were shown to the participant during the conclusion state of the interview to assist her in reflection on her process. The researcher also contemplated on the digital photographs during her Artistic and Written Researcher Reflexivity. Finally, in the data analysis phase, the digital photographs were used in content analysis.

Audio recorded documentation. The oral part of the interview was audio recorded in order to preserve the authenticity and integrity of the participant's responses. The audio recording

also included notations from the researcher at the intervals as to when the digital photographic documentation was taken. The audio interview was ultimately transcribed and the oral interview data was used to narrate the digital photographic data.

Written documentation: The researcher also took written notes as necessary to document the interview process and to formulate probative questions.

At the conclusion of the Artistic and Oral Open Ended Responsive Interview, the data included:

- an artistic montage portrait
- digital photographs recording the process of portrait creation
- written notes
- oral audio recorded data from the participant
- demographic data

Data generation II. Artistic and Written Researcher Reflexivity. *Artistic and Written Researcher Reflexivity* was an iterative process that started with the researcher's contemplation of the participant's artwork and digital photographs, and listening to the audio taped interview. In ABR, the iterative reflexive process of the researcher is considered a central aspect of the investigation and data generation.

Within 48 hours after leaving the data generation site, the researcher completed the *Artistic and Written Researcher Reflexivity* procedure. The purpose of *Artistic and Written Researcher Reflexivity* was to obtain artistic and written reflections from the researcher's observations and experiences in response to the data and data collection process to record any immediate impressions and insights.

First, the researcher listened to the audio recordings, examined the digital documentation and original self-portrait that the participant had created. Then, the researcher asked herself a question to guide her to respond in written form. The initial predetermined questions served as a

guide, and the researcher was open to subsequent probative questions to emerge as the researcher engaged in reflexivity. If any such questions arose, the researcher answered them in written and artistic form, and then moved on to the next question.

Based on the written response, the researcher created an artistic response to answer the question. The artistic response was a montage portrait of drawn, painted, or collage images that the researcher continued to elaborate on as she artistically responded to the questions that she posed to herself as part of Artistic And Written Researcher Reflexivity. Artistic and Written Researcher Reflexivity resulted in written memos and a montage portrait that the researcher created based on her reflections about the data generated by the participant. The procedure of the Artistic And Written Researcher Reflexivity is presented in the diagram below:

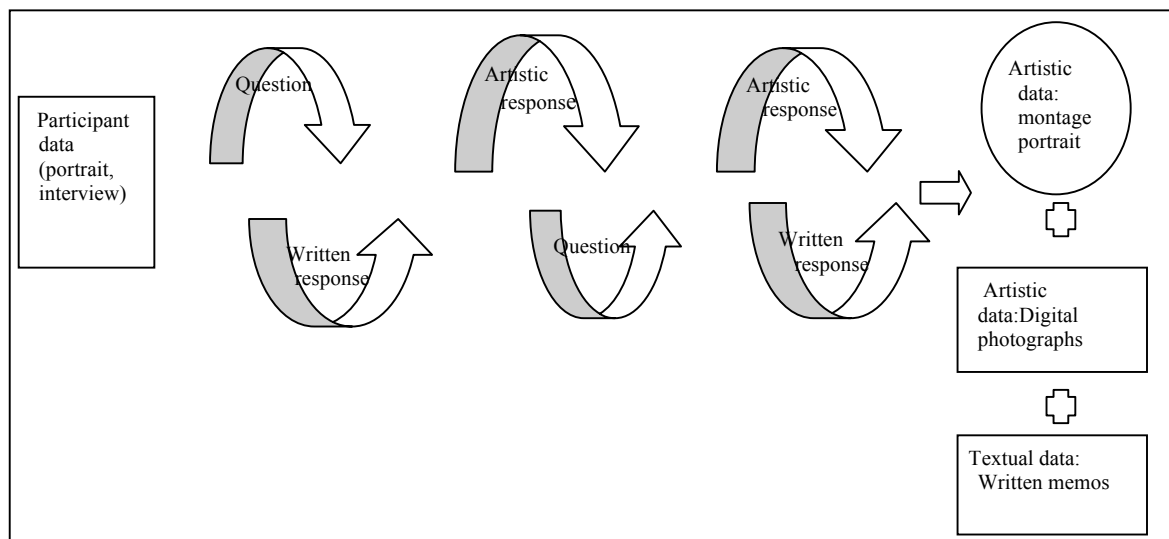


Figure 20. Artistic and Written Researcher Reflexivity

The artistic and written reflexivity was recorded in the research journal. Each phase of the portrait creation was digitally photographed to preserve the process of creation. Because this was an iterative process, the questions were open-ended, however, the objectives and initial questions of the artistic and verbal reflexivity are presented in the table below and in Appendix G:

Table 3. *Artistic and Written Researcher Reflexivity Guide*

Objective	Question to be answered in written form	Artistic response
To record the researcher's observation and emotional response to the participant.	What is my overall impression of the interview? What feelings did this interview elicit in me?	The researcher will create an initial portrait sketch of the participant depicting her initial impression of the participant. This phase includes positioning the participant and her infant spatially (center of paper, in one corner, etc) and in relation to each other (the infant inside or outside, close to mother or distant). The size of the portrait, the broad posture (e.g. sitting, standing, lying down), activity (e.g. sleeping, holding the infant, playing with infant, etc)
To identify, record and depict the specific details about the participant.	Which specific details (in appearance as well as her inner world) did I observe about the participant?	Add the specific details to the portrait. The details about appearance might include how the participant was groomed, her body type and shape, etc. The inner world such as emotional state, mood, etc might be portrayed by depicting the facial expression, the posture of the body etc., and by adding color emphasize emotional state and mood.
To identify, record, and depict the <i>beyond_words</i> of the participant's experience.	Which <i>beyond_words</i> aspects of transitioning to motherhood <ul style="list-style-type: none"> • Sensory-embodied • Relational • Imaginal stood out in this interview?	The researcher will artistically add the <i>beyond_words</i> aspects to the portrait. This may be done more abstractly by adding color, line, and abstract shapes to the portrait or more figuratively by illustrating the metaphors that the participant brought up using drawing, painting, or collage.

Data Analysis

In ABR, due to the iterative nature of data generation and data analysis these two procedures may overlap during strategic phases of the research. Data analysis in this study had three phases: 1) content analysis, 2) Portrait Synthesis, and 3) Final Synthesis. The procedure of these phases will be described below.

Content analysis. The purpose of content analysis was to systematically organize the data and identify predominant themes and metaphors from the data. Each case was analyzed separately. Artistic and textual data from both participant and researcher were analyzed. These data were organized and categorized by using the matrix. The procedure of content analysis is presented in the diagram below:

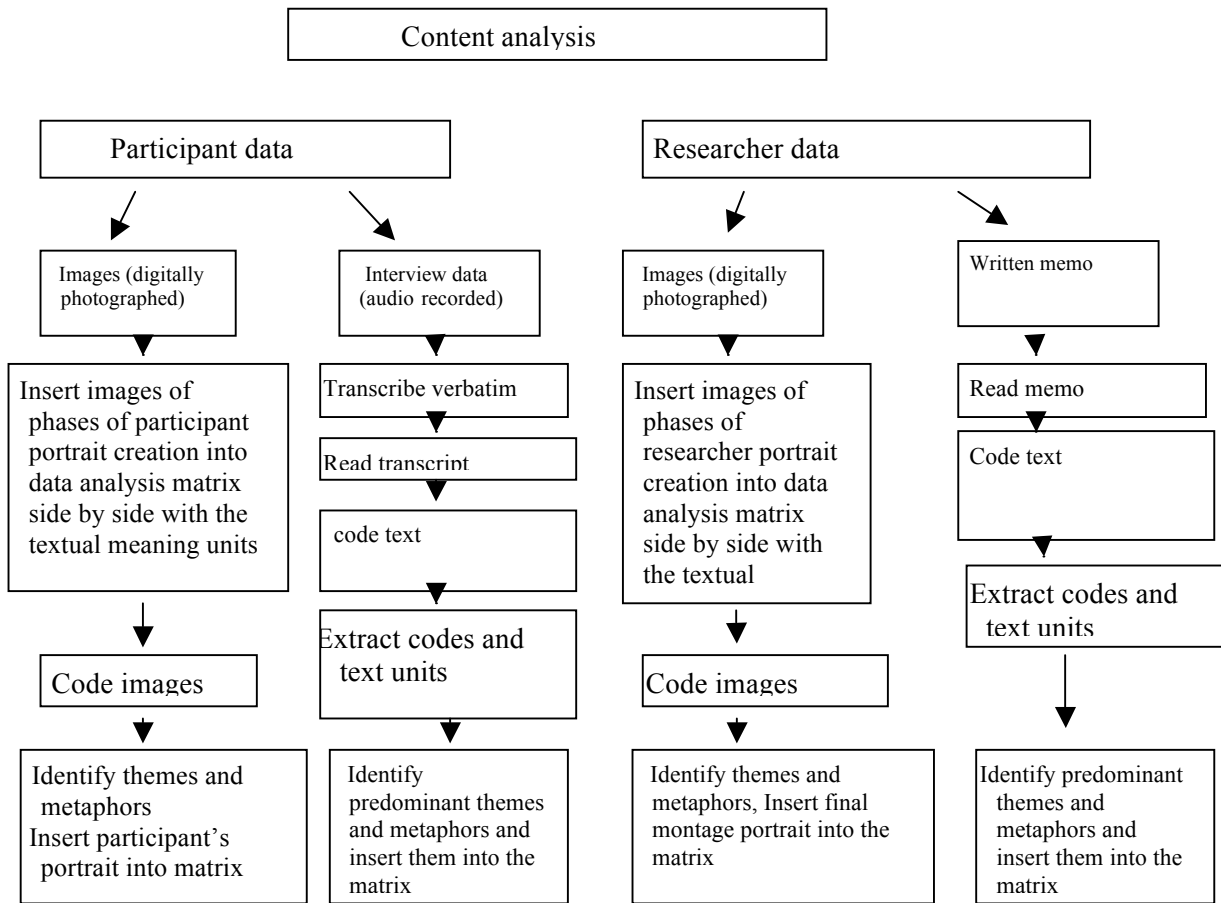


Figure 21. Content analysis

Examples of the data analysis matrices are provided below:

Table 4. *Data Analysis Matrix I*

Participant data			
Artistic data	Code	Textual data	Code
Image: Initial self-portrait sketch	codes	Text units and metaphors	codes
Image: self-portrait with added component	codes	Text units and metaphors	codes
Image: self-portrait with added components	codes	Text units and metaphors	codes
Final montage portrait	Predominant themes and metaphors		Predominant themes and metaphors

Table 5. *Data Analysis Matrix II*

Researcher data			
Artistic data	Code	Written memo	Code
Image: Initial portrait sketch	codes	Text units and metaphors+	codes
Image: portrait with added components	codes	Text units and metaphors+	codes
Image: portrait with added components	codes	Text units and metaphors+	codes
Final montage portrait+	Predeominant themes and metaphors		Predominant themes and metaphors

Portrait synthesis. Based on the images, themes and metaphors that emerged from content analysis, the researcher engaged in an iterative artistic and textual synthesis of the data to create artistic portraits and textual narratives that reflected the individual participants' *beyond_words* experiences. This was an iterative process where the artistic and narrative components informed each other. A portrait synthesis was created for each participant separately based on the participant and reflexive researcher data that was generated previously. Portrait synthesis began with the researcher's contemplation of all artistic and written data that was previously generated by the participant and the researcher. The participant and the researcher artistic data (montage portraits) were grouped together, and the written data (themes and metaphors from interview data and researcher's memos) were grouped together. Then, based on the artistic data, the researcher drafted an initial artistic synthesis that was a montage portrait that synthesized the participant's and researcher's previous montage portraits. The researcher also drafted the initial narrative synthesis that was a narrative that synthesized the themes and metaphors from participant and the researcher. Following the initial syntheses, the researcher iteratively continued to synthesize the artistic and written parts of the Portrait synthesis until saturation was reached. Finally, the portrait synthesis was created that has the artistic component (montage portrait) and the textual component (narrative). The procedure of portrait synthesis is visually represented in the diagram below.

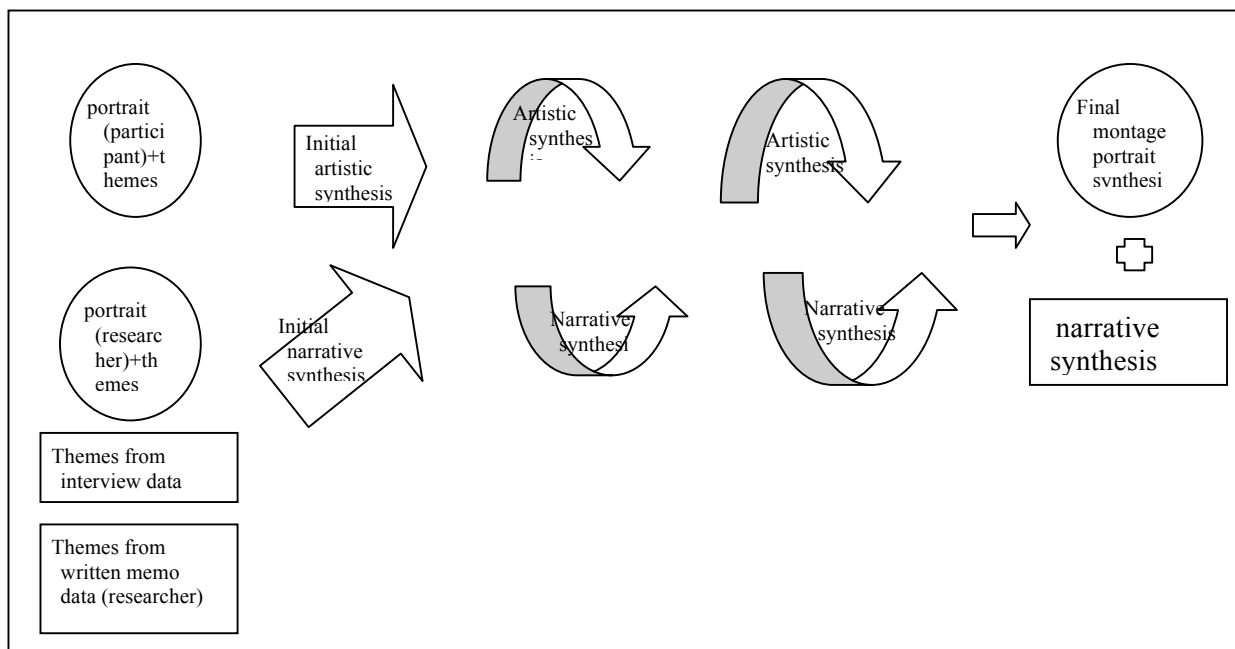


Figure 22. Portrait Synthesis

Final synthesis. In the final synthesis of findings, the researcher integrated the five montage portraits and narratives, results from member checking and audience feedback into one final representation that contained visual and textual components and reflected each of the participant's experiences as well as the researcher's reflexivity and feedback from the participants. The findings of this study are also be incorporated in written and visual forms into the results section of this dissertation.

Credibility and authenticity procedures. Experts (Barone& Eisner, 2012; Chilton & Leavy, 2014; Finley, 2003; Leavy,2014; Knowles& Cole, 2008) agree that ABR should be evaluated based upon the philosophical assumptions and theory specific to ABR and not in terms of traditional research methods. Specific evaluation criteria vary across authors and are an ongoing topic of discussion among arts-based scholars (Barone & Eisner, 2012).

The most recent and commonly addressed methodological credibility measures to be included as validation measures for this study are:

1. **Question/method fit** (Barone & Eisner, 2012; Chilton & Leavy, 2014),

2. **Usefulness** (Barone & Eisner, 2012; Chilton & Leavy, 2014; Leavy, 2009), and
3. **Aesthetic power** (Barone & Eisner, 2012; Chilton & Leavy, 2014; Leavy, 2009). Each of these criteria is outlined below

- 1) **Question/method fit** refers to the compatibility of the methodology used in the study with the research question being addressed (Chilton & Leavy, 2014). This is a factor that will be evaluated by the dissertation committee who have expertise in evaluating arts-based work.
- 2) **Usefulness of arts-based research** refers to the contribution that representation of research findings might generate for the audience (Chilton & Leavy, 2014). This criterion will be evaluated by the research participants and the audience by filling out respective feedback forms.
- 3) **Aesthetic power**. This is a unique factor to ABR (Chilton & Leavy, 2014) that has the evocative, provocative, and stimulating power that has a potential to connect with the audience (Barone & Eisner, 2012). Aesthetic power can be assessed by the participants and the audience of the artwork, by conducting interviews, researcher reflections and filling out respective feedback forms.

The following table outlines the roles that different parties play in the validation process

Table 6. *Credibility Measures*

	Committee	Participants	Audience
Question/method fit	X		
Aesthetic power	X	X	X
Usefulness		X	X

In order to collect feedback from the participants and the audience, evaluation procedures were implemented before and within the project presentation. After the completion of each Portrait Synthesis, each participant was contacted individually for member checking. The results of Portrait Synthesis (montage portrait and narrative) were presented to the participant via e-mail

to check whether the results accurately represent her experiences. She was invited to provide feedback via telephone, Skype, or e-mail. Table 7 states the objectives and questions that will be asked from the participant. The participant feedback form is provided in Appendix F

Table 7. *Participant Feedback Objectives and Questions*

Objective	Questions
To provide an opening and an opportunity for the participant to reflect on the portrait, and to obtain initial broad reflections	Can you describe what you see in this portrait?
To determine whether the representation of research accurately reflects the participant's experiences.	<ol style="list-style-type: none"> 1. Do the artistic and written representations of this research accurately reflect your <i>beyond words</i> experiences in transitioning to motherhood? 2. If yes, how and why? 3. If no, why not? 4. If you could change anything that you think does not accurately represent what you expressed during the interview, what would you change?
To obtain feedback about usefulness of the research	<ol style="list-style-type: none"> 5. What did you learn about your own <i>beyond words</i> experiences in your transition to motherhood? 6. Did you find that this research was useful to you? If yes, why? If not, why not? 7. In what way might accessing the results from this research be useful to first-time mothers, mothers-to be and/or other groups of people?
To obtain feedback about the aesthetic power of the research	<ol style="list-style-type: none"> 8. When you look at the artistic representations and read the narratives, do you have an emotional response? Probe: Do you have any sensations? Probe: What feelings does the artistic and written representation of your experience evoke in you?
To obtain any further reflections or suggestions	<ol style="list-style-type: none"> 9. Please share any other thoughts or suggestions that you might have about the research.

Exhibition of Results

For the presentation of findings, an exhibition was created that included the visual artwork and textual narratives. The Portrait Syntheses and the Final Synthesis were presented as an art exhibit in the premises of Drexel University after Data analysis stages and before the write-up of the results.

An art opening was organized the purpose of which was to obtain anonymous written feedback from professionals at Drexel University who are articulate in maternal-infant issues and arts-based research. Approximately 20 individuals were invited to attend the art exhibit opening and they were asked to provide written feedback (See Appendix E). The purpose of the art opening and anonymous written feedback was to obtain external input from an impartial audience on the credibility of the study based upon the credibility factors outlined above. The feedback forms and pencils to fill them out, were placed on a table in the exhibition room where the invitees could pick them up and fill them out. There were instructions on the form that specifically asked not to write their names or other identifying information on the form to preserve anonymity. Once filled out, the individuals were asked to place the feedback form into another box with a slot. The individuals who were invited to the art opening were professionals at Drexel University who are articulate in either or both of the following areas: 1) maternal-health research and practice. Such individuals included Drexel University faculty and graduate students in the disciplines of Nursing, Couple and Family Therapy, Creative Arts Therapies, and Nutrition Science, and 2) arts-based research. Such individuals include Drexel University faculty members and graduate students from the Department of Creative Arts Therapies.

The objectives as well as specific feedback questions are provided in the table below. The audience feedback from is provided in Appendix E:

Table 8. *Audience Feedback Objectives and Questions*

Objective	Questions
To obtain feedback about usefulness of the research	<ol style="list-style-type: none"> 1. How would you describe, in a few words, what you witnessed in the exhibit? 2. What did you learn about the <i>beyond_words</i> that mothers experience in their transition to motherhood? 3. How has this research impacted your attitude and empathy towards first-time mothers? 4. In what way might accessing the results from this research be useful to first-time mothers, mothers-to be and/or art therapists or other clinicians who work with new mothers?
To obtain feedback about the aesthetic power of the research	<ol style="list-style-type: none"> 1. When you went through the exhibit did you experience any emotional responses? Were there any particular parts of the exhibit that evoked emotions or sensations? 2. Which feelings did this research evoke in you? What personal images or experiences did this research evoke in you? Please share any personal memories that came to mind.

CHAPTER IV: RESULTS

Introduction

In this chapter the major findings from this arts-based research study are presented. The results are presented relative to answering the twofold research question: 1) How do first-time mothers express and make meaning of their *beyond_words* experiences, and 2) how are these experiences represented using montage portraiture?

To answer the research question and to authentically represent the epistemological nature of *beyond_words* experiences, I used arts-based research as a design of this study. The arts were used throughout the study to systematically investigate the phenomena under study. First, five first time mothers who participated in this research expressed and made meaning of their *beyond_words* experiences through an iterative process of creating artwork and verbal reflections. As an arts-based researcher, I also created response art and reflexive written memos that I used as data. After data analysis, I created Portrait Syntheses and the Final Synthesis that formed the arts-based results and representation of this study. I invite the reader/viewer to experience a whole range of the participants' experiences through the art. The arts in ABR are used engage viewers or readers to experience these phenomena on multiple sensory and emotional levels (Barone & Eisner, 2012; Leavy, 2009, 2015). The arts-based results, thus, represent *beyond_words*, what could not be expressed in discursive language.

In the context of the Doctoral dissertation, the presentation of both artistic and the academic results can be challenging. Since ABR is still an emerging paradigm, and there are no uniformly established guidelines how results from ABR studies are to be presented, the challenge above needs further discussion. According to Leavy (2015), the methodological tools of ABR “adapt the tenets of the creative arts in order to address social research questions in holistic and engaged ways in which theory and practice are intertwined” (p.4). The purpose of this arts-based research study was to answer the research question with the results that are both artistically authentic and engaging. At the same time, the reader will also be interested in the methodological

rigor, that is, how these results reflect the actual data and data analysis process. And thus, the chapter is broadly divided into two parts. The academic part of the results describe the underlying methodological- theoretical piece of the results while the arts-based results answer the research question in holistic and engaging way. This organization is described below in more detail:

Part I: Procedural Results: The purpose of this part is to present the procedures by which the data were generated by the participants and the researcher, and analyzed by the researcher. The participant characteristics are presented here in order for the reader to understand the context of these first-time mothers' experiences. The actual visual and excerpted textual data from the participant interviews and the researcher reflexive responses are presented. Finally, the participants' and the researcher's images are juxtaposed so that the reader/viewer can quickly grasp how the original data is reflected in the final representations. This section also includes presentation of the credibility and authenticity procedures and data which includes the participant and audience feedback to the results of this research. After familiarizing the reader with the procedural results and the actual data, I invite the reader/viewer to experience the arts-based results that are presented in the second part of this chapter.

Part II: Arts-based Results: In this section the arts-based results are presented. The arts-based results of this study have two components: 1) Portrait Synthesis, and 2) Final Synthesis.

1) Portrait Synthesis. The first component of results features the five Portrait Syntheses which are the combined arts based visual and narrative representations that I created based upon the analysis of textual and arts based data that were generated both by the participants as well as by the researcher. The participants were five first-time mothers whose age ranged from 31 to 38 years. The transitions to motherhood had all occurred within the first year of giving birth and varied from 4 weeks to 11 months. The research was aimed at a normative sample, and the participants overall formed a homogenous group. Four of the participants were Caucasian, and one Latina, all of whom were

married or had stable heterosexual partners. All of the participants were breast feeding their infants at the time of the data generation. During the data generation, the participants explored their *beyond_words* experiences and expressed and meaning of them by creating artwork and verbally reflecting on it. Another source of data were researcher-generated responsive artwork and reflexive written memos. Following the data generation, I engaged in data analysis. From the content analysis of the textual and arts based data, categories and subcategories of each of the participant's experiences emerged. I also performed content analysis on the researcher generated data. The results of the two content analyses laid the groundwork upon which I built the Portrait Syntheses.

In Portrait Syntheses, I artistically represented and sequentially presented the participants' experiences in the form of a series montage portraits in order to represent these participants' evolving simultaneous, overlapping experiences. Accompanying the visual arts portraits are textual narratives that I created and presented in the form of a journal that might have been written by each of these women. The journal entries were based on the participant interview responses and subsequent content categories that emerged from content analysis. The hypothetical journal narratives include actual quotations from each participant which are indicated in the red text. These portraits and accompanying journal narratives were also presented to the participants for member checking.

2) Final Synthesis. The second aspect of the arts-based results that are presented in this chapter features the Final Synthesis which is based upon the data analysis across cases which resulted in the creation of a play in 4 acts with an embedded emerging group portrait. The Final Synthesis emerged from the intensive process of engaging in the portrait synthesis during which the participants' voices came to life both individually

and ultimately in a dialogue that became the play and group portrait. The Final Synthesis therefore, represented data analysis across cases. It presented the common themes and subthemes relative to the research topic that provided the structure of the play and its division into scenes. Within the common themes, the participants' statements revealed their own unique experiences, some of which resonated with other participants and some of which differed. During the data analysis and representation of the Final Synthesis, while examining the participants' statements side by side, it seemed to me as though they were having a discussion with each other, and thus choice of the genre of drama. In this dissertation, the play is presented in the form of a script with embedded visual aspects. The participants' quotes are highlighted in red in the script. The play was also read by the volunteer actors who were faculty and graduate students at the College of Nursing and Health Professions at Drexel University, and the reading was recorded on video. The aesthetic power and usefulness of the Final Synthesis was authenticated by the audience to whom it was presented.

Summarily, this chapter presents two kinds of results of this research. First, the procedural results are offered in order to systematically present the original data and the detailed description of data generation and analysis procedures. The categories that emerged from the data will be presented so that reader understands how these categories reflect the participants' *beyond_words* experiences in the context of transitioning to motherhood. However, due to the epistemological nature of the *beyond_words* phenomena, they cannot be reduced to categories and authentically described using discursive language. Therefore, remaining true to arts-based research, the second section of the chapter presents the arts based results. I invite the reader/viewer to experience the full impact of the arts based representations of first time mothers' *beyond_words* experiences in transitioning to motherhood. The Arts-based results are intended to

stand alone as a work of art and they can be exhibited and performed outside of the academic context.

Part I: Procedural Results

This arts-based research study included the generation of in depth artistic, oral and textual data from five women who identified themselves as transitioning to motherhood, and from the corresponding artistic and textual reflections from the researcher. In this section, the participants' characteristics, and the results of data generation and analysis will be presented. This section is divided into the following large subsections: recruitment, data generation, and data analysis. The subsection of data analysis in turn includes three phases: content analysis, Portrait Synthesis, and Final Synthesis. Arts based research has emerging procedures for ensuring credibility and authenticity. In this study, member checking was conducted after portrait synthesis, and audience feedback was collected after the final synthesis.

For clarity, this chapter will present the general description of findings in the sequential order: 1) recruitment, 2) data generation, 3) content analysis, 4) Portrait Synthesis, 5) member checking, 6) Final Synthesis, and 7) audience feedback.

Before describing the data generation, analysis, and representation processes, I would like to briefly remind the reader of the method that was developed for this study: Montage portraiture. Montage portraiture consisted of several stages across data generation and analysis. To remind the reader of the sequence of the data generation process, the different phases of data generation in the diagram are illustrated below. The procedure was described in depth in the Methods chapter.

Montage portraiture

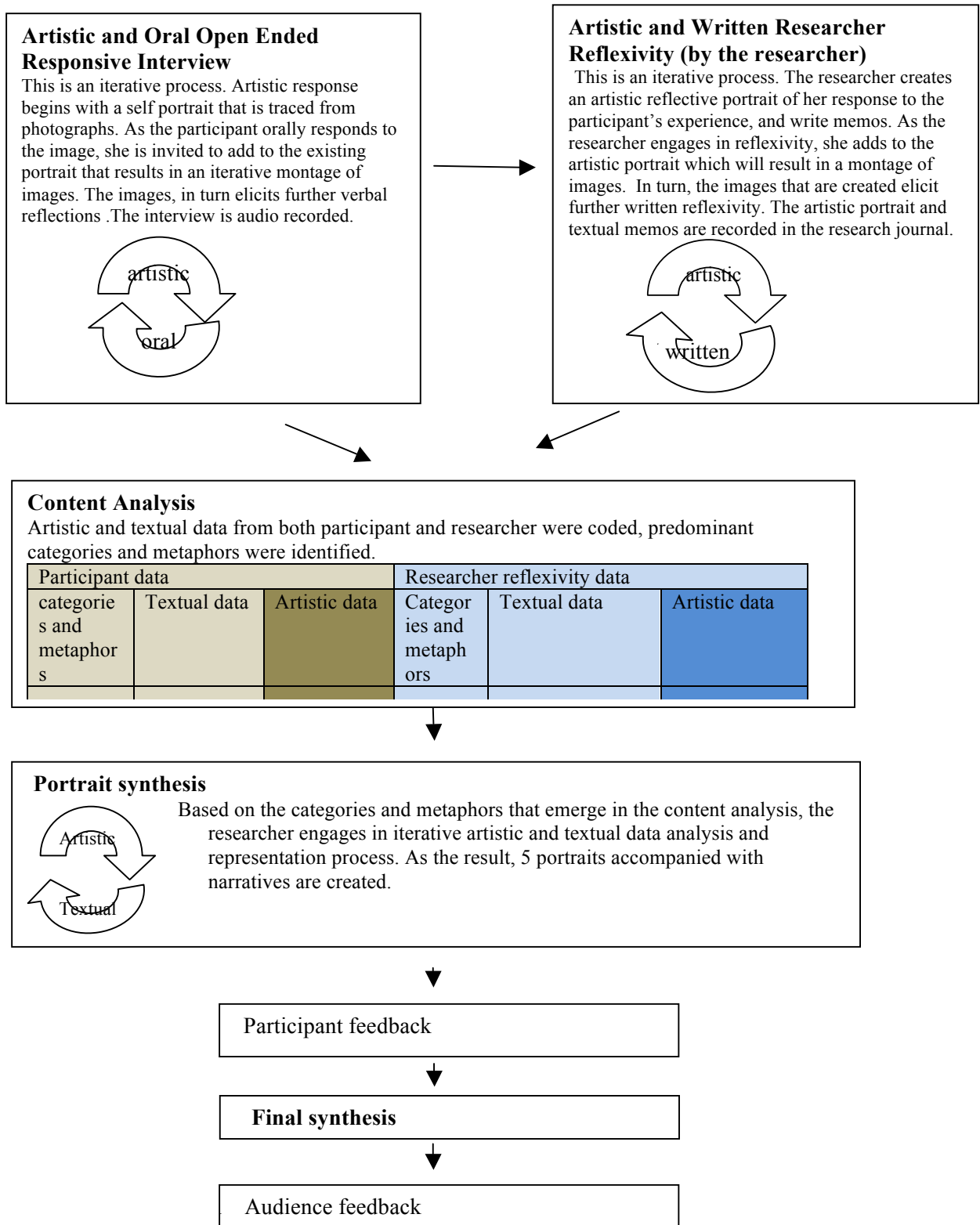


Figure 23. Montage portraiture

Participant Recruitment

Recruitment commenced after the approval from the Drexel University Institutional Review Board (IRB) on February 27th, 2015. Participants were identified through two groups of referral sources who had access to new mothers, and were sensitive to and familiar with women's issues of transitioning to motherhood. Purposeful and snowball sampling (Patton, 1990) were used to identify and contact referral sources who referred the potential participants to the researcher. The first referral source included Healthcare professionals in the domains of Creative Arts Therapies, Nursing, Family Therapy, and Nutritional Science in the College of Nursing and Health Professions of Drexel University, and Creative Arts Therapists at the Department of Art Therapy in School of Visual Arts, New York, NY.

The second referral source consisted of new mothers' support groups. New mothers' support groups typically provide parenting education and advice on such issues as nutrition and infant care to new mothers, and the facilitators are thus familiar with new mothers whom they might potentially refer. An online search was conducted to locate new mothers' support groups within the 5 boroughs of New York, and the Metropolitan Philadelphia area. The study design permitted recruitment of up to 10 participants, the first 5 of whom met the inclusion criteria could be enrolled in the study, and 5 to remain on a waiting list.

An email announcement about the research study (Appendix B) was first sent to the first group of referral sources. Over the first two weeks the referrals from this group did not generate the required number of referrals. The next step included contacting the list of referral sources in the second group, as well as extending the timeline for referrals from the first group. This extension was based upon the determination that referral sources from group 1 might need more time to refer additional participants.

With the extension of time, the referral sources in the first group were able to refer sufficient participants for the study. Five participants who were referred by the referral sources contacted the researcher by e-mail expressing interest in volunteering to participate. The first five

individuals who met the inclusion criteria and voluntarily agreed to participate in the study were selected. To determine whether individuals met the inclusion criteria and their willingness to participate, each individual participated in a conversation with the researcher by telephone using a telephone script a (Appendix C). A self-identification process regarding the inclusion criteria was used. A recruitment record keeping sheet was used to document all calls, the scheduling of the first informed consent and data collection meeting, and the final selection of the study participants. All 5 of the potential participants met the inclusion criteria and remained interested in participating, and thus all 5 participants were enrolled in the study. Recruitment was closed after the five participants were enrolled. Although the study allowed and was approved for ten participants, it was designed for five participants. The rationale for projecting for 10 participants was to compensate for any withdrawals from the study.

Data Generation

This study had two phases of data generation: 1) data generation by the participant that was followed by 2) reflective and responsive data generation by the researcher.

Data generation by the participants.

The Participants

This study was aimed at a normative sample, and the participants, based on their characteristics, were overall a homogenous group. All of the participants were first-time mothers in their 30s. Four of the participants identified as Caucasian, and one as Latina. Four of the participants delivered vaginally, and one by c-section. All participants were breast feeding at the time of data generation. Although the researcher did not ask them about their marital status, it transpired during the interview that they all were married or had stable heterosexual partners. It also transpired during the interviews that the participants were highly educated women who held college degrees or advanced graduate degrees. All of the participants also had stable housing and lived in major cities (New York and Philadelphia). And thus, the sample represents a middle

class, predominantly Caucasian, heterosexual, highly educated women who have stable partners and housing. The participant characteristics are presented in the table below.

Table 9. *Participant Characteristics*

Pseudonym	Age	Infant's age	Ethnicity	Mode of delivery	Breast feeding
Margaret	31	4 weeks	Caucasian	c-section	Yes
Gabriela	38	11 months	Latina	Vaginal	Yes
Liz	33	4 months	Caucasian	vaginal	Yes
Taylor	33	8 weeks	Caucasian	vaginal	Yes
Alex	35	8 months	Caucasian	vaginal	Yes

The Setting

The researcher met with each participant individually at the participant's home to collect the data. The decision to meet at the participant's home was based upon two considerations: 1) for the convenience and comfort of the new mother, and, 2) minimizing possible anxiety resulting from being separated from the baby. The intentional decision to meet in the participant's home provided the option for the new mothers to have their babies present during data generation.

The response to situating the data generation in the home and inviting the infants to be present seemed significant for research exploring new mothers' lived experiences. The meetings were flexible enough to allow for the mother to attend to the baby, breastfeed, put the baby to sleep or attend to other aspects of infant care. All of the participants chose this option and had the babies with them at the time of the data generation. The participants reported that because of the option of meeting at their home, they were more willing and able to participate. Two of the participants, Margaret and Taylor had very young infants, 4 weeks and 8 weeks of age, respectively, who required constant care and availability of baby care supplies. All participants seemed relaxed in the home environment where they were able to take care of the baby while engaging in data generation activities. Margaret and Liz also had their husbands at home at the

time. The husbands were not present during data generation, however, upon request they entered to pick up the baby or put the baby to sleep in a different room. The researcher was also available to offer assistance to the mother.

The domestic atmosphere helped create rapport between the participants and the researcher, which contributed to the ease with which the participants shared their stories. The researcher was also able to observe the participant in her natural environment and observe her interaction with the infant. These observations were recorded during the researcher's reflective and responsive data generation, during which an artistic response and a written memo were generated.

The Procedure

The tool that was created for data generation from the participant is called *Artistic and Oral Open Ended Responsive Interview* (Appendix E). The purpose of the *Artistic and Oral Open Ended Responsive Interview* was to obtain an in depth description from each participant about her *beyond_words* experiences in transitioning to motherhood through the use of portrait drawings and oral narratives. *Artistic and Oral Open Ended Responsive Interview* (Appendix E) was an iterative process that has artistic and oral components as described in the Methods Chapter and again below.

The Artistic and Oral Open Ended Responsive Interview included the following components:

- 1) **A self portrait** that the participants created by tracing photographs of themselves and their infants, and adding drawings to the portrait. Because the data generation was conducted in the participants' homes, the materials that were offered to the participants were non-toxic and not sharp, and easy to use. Drying time was another consideration: the participants generated the data in one session, and thus, the choice of the media permitted fast drying time. Paper, graphite pencils, and watercolor pencils were offered. These materials were selected to allow a range of expression: the pencils can be used to create people, objects and details while using the watercolor pencils with water creates

more blended, abstract results. In addition to the art materials, the participants were asked to select and bring 4-6 photographs to the meeting in order to use them for tracing.

Tracing from photographs was used as a method in order to minimize any emphasis on artistic skill or talent. Prior to drawing, the participants were encouraged to show the photographs to the researcher. Sharing the photographs with the researcher proved to be a practical method of opening the conversation about transitioning to motherhood. While showing the photographs to the researcher, the participants already started to reminisce about their memories and experiences, and sharing them with the researcher. The self portraits that the participants created will be presented at the end of this section.

- 2) **Open Ended Responsive Interview** included open ended and probative questions that required reflexivity from the participant in order to generate in depth descriptions of the lived experience of transitioning to motherhood. The participants easily engaged in answering the open-ended interview questions and shared their stories, often with minimal prompts. The questions were organized into four major pre-determined categories: 1) sensory-embodied experiences, 2) relational experiences; 3) imaginal experiences; and, 4) miscellaneous. As part of the interview, special attention was paid to metaphors to elicit oral data which in turn was depicted artistically. The participants were asked to share personal metaphors to reflect on and express their sensory-embodied, relational, and imaginal experiences in transitioning to motherhood. For instance, participants provided metaphors and similes such as “the baby is an ocean”, “the baby is like an entire ecosystem”, “I am in a beautiful underwater prison”, the relationship with the baby is like a “one-way love”, closeness to the baby is “like morphine”. For some participants, elicitation of metaphors facilitated artistic expression, and for other participants, artistic expression elicited articulation of metaphors.




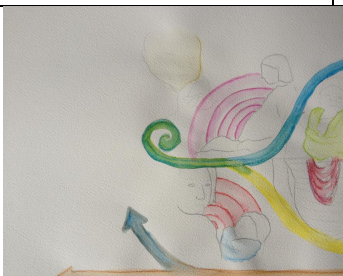
- 3) **Oral and artistic responses to the questions.** As the participants responded to the questions, they were encouraged to elaborate on both the oral narrative and the arts based portrait by adding to the montage of images using colored watercolor pencils
- 4) **Demographic and background questions.** At the conclusion of the interview, questions were posed to the participants about their age, baby's age, race, mode of delivery, and mode of feeding the infant (breast feeding or bottle feeding). The participants in this research overall were a homogenous group. All of the participants were women in their 30s. Four of the participants identified as Caucasian, and one as Latina. Four of the participants delivered vaginally, and one by c-section. All participants were breast feeding at the time.
- 5) **Documentation.** During the data generation process, the participants' artwork was digitally photographed, and oral data were audio recorded to preserve the integrity and authenticity of the data as well as to record the sequence of the artistic and oral data.
 - **Digital photographic documentation.** Digital photographs were used to document the evolution of the montage portrait process during the initial and iterative interview process. Every time that the participant added to the self-portrait, the self-portrait was digitally photographed, thus preserving the evolutionary process of its creation.
 - **Audio recorded documentation:** The oral part of the interview was audio recorded in order to preserve the authenticity and integrity of the participant's responses. The audio interview was ultimately transcribed verbatim.

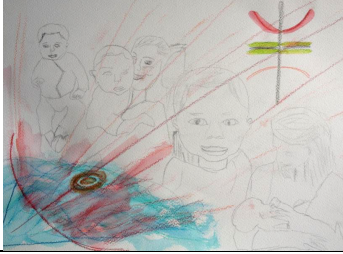
Participant Data

In order to provide a detailed description of the data generation procedures, an example of the matrix used to organize visual and textual data from the participants is provided in this section. The data generation by the participants included arts-based montage self-portraits and

textually based oral interviews. Sample excerpts from the transcribed arts based and textual interview data are provided in the table below:

Table 10. *Examples of Participant-generated Data*

Participant	Participant generated self portrait	Excerpts from transcribed interview
Margaret		<p>"I sort of want to make the whole inside of my eyes pink. This is the kind of intoxication that I feel . that feeling of warmth, I feel like it should be one big wash of warm, pink, content"</p> <p>"Maybe she's kind of like the entire ecosystem... And I'm just one person who has one task: within this ecosystem. So she's sort of driving things and she's complicated and I am sort of living within her world where my sort of sole function is to just feed and nurture".</p> <p>"Its' sort of like being in this underwater messy prison or some kind of forest. But it's also just beautiful also"</p>
Gabriela		<p>"For a while this is what we called her, she's a cluster of cells"</p> <p>"So very quickly you realize that you're just a feeding machine"</p> <p>"She is developing more into someone who recognizes me as a person more than a source of food... so that's finally there's a connection to her heart. .. There's a second connection here to mom. Otherwise the connection I feel that it's always there. So this one goes to mom. This finally connects brain to brain, I guess"</p>
Liz		<p>"Eventually I would feel it like move, and move through by blood stream and I would feel it hit my brain it was like ooohhh! It felt soooo good! So that's what it feels like. It feels very distinctly chemical"</p> <p>"I guess if I could come with a metaphor it would be weaving some sort of a gorgeous wrap or something that is just made out of everything beautiful in the entire world and just draping him in case he felt like wrapping himself in it."</p> <p>"There are just certain flowers that are just the right shape and color so that when a hummingbird sees a flower and goes like uuuuhh! That's the flower I want"</p>
Taylor		<p>"I was going to initially start to draw is kind of like a waterdrop. When it hits the water it just kind of emanates and just kind of grows And from there, kind of the ripple effect it's kind of feeling like just it kind of like grows and grows... just emanates from within"</p> <p>"it's almost like the opposite than what I did before , two colors coming together, we are now... on the same path now and eventually it will diverge and he will take his own life and then.. And you know, I will stay on my own path"</p>

Participant	Participant generated self portrait	Excerpts from transcribed interview
Alex		<p>"I envisioned like a nutshell and a nut inside. I would be the shell and he's the nut inside and I imagine that's in an ocean floating like going from the shore and floating in the ocean and surviving the ride"</p> <p>"A flood of emotions, a flood of so many new experiences at once. A flood of blood and tissue that came out of me but that manifested in this whole new being."</p> <p>"I see through different eyes now"</p>

Data Generation by the researcher. The researcher's use of critical and creative reflection using her own art as the primary investigative process is an essential aspect of the arts based research process. Based upon this arts based research process, within 48 hours following data generation by the participant, the researcher generated artistic and written reflexive and responsive data using Artistic and Written Researcher Reflexivity guide (Appendix G). The purpose of this phase was first to generate in depth artistic and written reflections based on her observations and experiences in response to the data and data generation process, and, second to record any immediate impressions and insights.

Artistic and Written Researcher Reflexivity included the following components:

1. **Review and Contemplation:** First, the researcher listened to the audio recordings, examined the digital documentation and original self-portrait that the participant had created.
2. **Artistic Response and Written Memos:** Following the first step, the researcher created reflexive artistic response sand written memos. As a guide in this process, initial broad based questions were posed to by the researcher to initiate the responsive process and were outlined in *Artistic and Written Researcher Reflexivity Guide* (Appendix G). The Artistic And Written Researcher Reflexivity process resulted in 5 individual portraits and written memos that were recorded in the research journal. The artistic portraits were

created using watercolor pencils, graphite pencils, and collage materials that permitted a range of artistic expression.



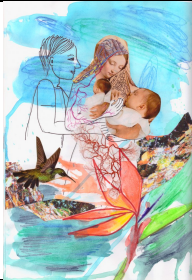


The artistic portraits were created taking into consideration the positioning of mother and her infant, the facial and emotional expression, and illustration of the *beyond_words* aspects that emerged from the interview. It should be noted that these portraits are not the same as the Portrait Synthesis but the arts based and textual data from this process were used in the data analysis resulting in the Portrait and Final Synthesis .

The written memos included overall impressions of the participant, specific observations of the participant, and reflections of the *beyond_words* experiences that were prevalent in the interview. Specific questions and steps of this process were outlined in *Artistic and Written Researcher Reflexivity* (Appendix G).

Researcher Generated Data

The images from researcher data generation and excerpts from the memos are provided Table 11 below.

Table 11. *Examples of Researcher-generated Data*

Participant	Researcher's artistic response	Excerpts from researcher's written memos
Margaret		<p>“At this point, she is overlapping with the baby. I got a sense that she was still connected to the baby physically, as though the baby were still a part of her”</p> <p>“I guess this brought me back very strongly to my own experience when I first became a mom... I remember that the first post partum weeks had been an emotional turmoil for me, topped with physical and mental exhaustion”</p>
Gabriela		<p>“Sensory-embodied and relational aspects were the strongest parts that stood out in the interview. She talked about the biological aspects of “making a baby” and how that amazed and intrigued her. The imagery was very embodied: brains, cells. I was intrigued by this imagery because she was talking about a very deep level of experience”</p>
Liz		<p>“My overall impression of this meeting was a sense of serenity, it was almost like a religious experience”</p> <p>“She presented with such devotional, content affect that it was almost idealized.”</p>
Taylor		<p>“In this interview, the relational aspect of mother-child relationship stood out to me. The two paths coming together and one path becoming two. ... Brings to mind some kind of a circular path, perhaps that then might evolve into a separateness. Unity and separation.”</p>
Alex		<p>“In this interview, all of the aspects of <i>beyond_words</i> stood out: the embodied aspect, perhaps most strongly, and the relational aspect where she overlapped herself with the child verbally when she described that she saw the world through his eyes and how that made her more present, more attentive. It was so powerful! Also the embodied aspect when she described the flood, the emotional and physical flood, the significance of the fluids that came out of her body. And the imaginal aspect was very strong as well. it was connected with the embodied aspect”</p>

Data Analysis

Following all data generation – during which the participant data and researcher responses and memos were elicited, transcribed, and organized – the data analysis was initiated. The data analysis was first conducted for each individual case/participant using the two primary data types: 1) participant-generated data (transcribed interview and artwork), and 2) researcher generated data (written memos and artwork). Data analysis included Content analysis, Portrait Synthesis and Final Synthesis. During Content analysis and Portrait Synthesis, each case was analyzed separately. Following the analyses by case a Final Synthesis was performed that integrated the data across cases. Each of these procedures is described in detail below.

Content analysis. The purpose of content analysis was to organize, categorize, and code all data identifying predominant categories and metaphors that were later synthesized during Portrait Synthesis, and ultimately during Final Synthesis, in artistic and written forms. Each participant's data were analyzed separately and in the order that the researcher met with the participants for each data generation session. First, the data generated by a participant were analyzed, followed by the analysis of reflexive and responsive data that were created by the researcher based on that participant's data. Schreier's (2012) guide for qualitative content analysis was adapted to facilitate the process. Following Schreier (2012), the phases of the content analysis process included: 1) contemplating and reading the participants' data. 2) creating a coding frame for each of the participant's data and coding the data 3) presentation of categories.

This sequential process will be described using examples from the data.

- 1) **Review and Contemplation:** Before initiating the analysis process, all interview data were transcribed verbatim. I read the transcript at least twice and contemplated the artistic data.
- 2) **Coding Frame and Coding:** The next step involved creating a coding frame and simultaneously coding each participant's data. In this arts-based research, content analysis was used as the first step of analysis to assist the researcher in categorizing

and organizing the data that at a later stage would be synthesized into individual Portrait Synthesis. Each participant's data were used as a separate "case", that is, the data at this stage were analyzed in a case by case basis. Therefore, creating the coding frame and coding overlapped to some degree. Creating the coding frame assisted me in systematically reviewing the data, and describing and naming the categories. A combination of concept-driven and data-driven strategies was used (Schreier, 2012). Drawing on the interview guide, the main categories were created deductively based on the topics in the interview. The subcategories were created inductively, that is, they emerged from the data. While building and naming the data-driven subcategories, Mayring's (2010) strategy as quoted in Schreier (2012) was used. This builds on progressively summarizing the material. This strategy starts by selecting the relevant parts of the research material, and deleting the irrelevant material. Each relevant part was divided into segments that were numbered. The next step involved paraphrasing these individual segments. Then, the individual paraphrases were compared, and based on what they had in common, were paraphrased again to reach a level of abstraction that described the material. The final step in this process was "to generate a category name and definition" (Schreier, 2012, p.107)

In addition to transcribed interview data, participant generated artistic data were also coded and assigned categories. During different phases of the data generation process, the participant artwork was digitally photographed. This allowed for the preservation of the process of creation of artwork. That is, the preliminary layers of the self-portrait were preserved in case those layers would at a later stage be painted over. Since the generation of interview and artistic data was an iterative process, the images and text were related and illustrative of each other. During the coding process, the researcher digitally cut and pasted a segment of the artwork into the data

analysis matrix and assigned it to a subcategory that described it. The images and the textual segments were inserted into a data analysis matrix.

At the conclusion of creating the coding frame and the coding process, each coding frame contained main categories and subcategories with their descriptions. To exemplify this process, an example is provided below. The following provides an example coding frame that was constructed for one of the participants, Gabriela. This is provided as an illustrative example. However, as explained above, coding frames were created for each of the participants separately.

Participant 2. GABRIELA: CELLS CAN LOVE. CODING FRAME

MAIN CATEGORY 1: SENSORY-EMBODIED EXPERIENCES

This category applies when the participant refers to the sensory and embodied experiences such as holding, breast feeding, touching or being close to the baby.

SUBCATEGORY 1: Life revolves around feeding the baby

This category applies when the participant emphasizes the central place that breastfeeding occupies in her life.

SUBCATEGORY 2: Coping with adversity

This category applies when the participant describes difficulties in transition to motherhood, and at the same time also describes coping strategies. Exclude if participant only describes adversity, such as difficulties in breastfeeding. Refer to appropriate category

SUBCATEGORY 3: Obligation to breastfeed despite adversity

This category applies if the participant refers to difficulties in breastfeeding but also an obligation to continue. Includes rewards and challenges.

SUBCATEGORY 4: Breastfeeding is hard

Applies when the participant describes how difficult breastfeeding is. Exclude if refers also to the rewards. Then refer to subcategory 2 or 3

SUBCATEGORY 5: Responsibility for the baby. Baby is fragile.

Applies when participant refers fragility of newborn, and responsibility to sustain the baby. Includes the metaphor of an egg.

SUBCATEGORY 6: Fetal development is fascinating

Refers to the fascination with the biological processes behind fetal development

SUBCATEGORY 7: Metaphor: a cluster of cells

Apply when words or images of cluster of cells are used.

SUBCATEGORY 8: MISCELLANEOUS

MAIN CATEGORY 2: RELATIONAL EXPERIENCES. This category applies when the participant refers to her relationship with the baby. This category also applies when the participant refers to herself in the relationship with the baby.

SUBCATEGORY 1: Happiness despite adversity

Apply this category if the participant describes being happy in the relationship. Exclude if also refers to adversity, refer to subcategory 2.

SUBCATEGORY 2: Happiness in the relationship

This category applies if the participant refers to happiness in the relationship. Exclude if also refers to adversity, refer to subcategory 1

SUBCATEGORY 3: Relationship tied in with breastfeeding

Apply this category if participant describes breastfeeding in the context of the relationship.

SUBCATEGORY 4: Relationship evolves

Apply if participant describes how the relationship develops from giving to also receiving.

SUBCATEGORY 5: Metaphor: one-way relationship

Apply when participant refers to the relationship as giving from mother to the child but not reciprocated.

SUBCATEGORY 6: Relationship physiological and emotional

Apply this category when the participant ties in biology with emotion, such as “cells can love”

SUBCATEGORY 7: Miscellaneous.

MAIN CATEGORY 3: IMAGINAL EXPERIENCES

Apply this category if the participant refers to her imaginal experiences, fantasies, and dreams.




SUBCATEGORY 1: Miscellaneous




SUBCATEGORY 2: SUB 2 Fantasy of detachment




Apply this category if participant describes a fantasy of leaving the current life and role as a mother and going back to her previous lifestyle.



- 3) **Presentation of categories.** The categories that emerged from the coding analysis of the data were organized, entered and presented in the form of a matrix. For clarity, each main category with its subcategories was color coded, and inserted it into a matrix together with textual excerpts and image segments. The numbers that appear in the text refer to the segments that were marked during the coding process. An example below is presented for illustrative purposes based on one participant's (Gabriela) case. The example included here of the matrix only features one main category: the sensory-embodied experiences, and is thus not inclusive of all categories and subcategories that were represented in the matrix.

Table 12. *An Illustrative Excerpt of Data Analysis Matrix: Participant Data*

Main category 1: sensory-embodied experiences		
Category	Example from interview	A segment of artwork
SUB1: Life revolves around feeding the baby	[2 So very quickly you realize that you're just a feeding machine.]	
	[4 And you're just feeding them constantly. And that's why you're just feeding and feeding and feeding and you can't really go out	
	[27 I think that you really become like.. you're used to having a life that's about you and ...about you know feeding yourself and I'd go to the gym and whatever, my life isn't very complicated. But then...it really becomes all, it's not even all about the baby, it's all about feeding the baby.]	
SUB2: Coping with adversity	[5 so so I think that this other one I chose here is I'm just laughing and she's crying and you know you might as well laugh because you can't ummm because it's fun. I mean, it's a new thing and... and everyone's learning. You realize that they are learning in as much as you are learning. Poor things Just trying to survive...]	
	[11 I think one is the exhaustion. There's no way to describe how tired you are. Saying how tired I am does not begin to describe how and at some point you don't complain about it either because ... it's just a part of it. so that's really hard to put into words. And for others to understand that, especially the family who wants to visit and want to be there and everyone wants to tell you their opinion and what to do and what not to do. So... it's really hard to explain to them how you feel and thank you for the advice and no thank you. So it's like, it's like I said it's all a learning process. So, I think that was really hard to put into words. Umm]	
	[31 And to remember that you also have to take care of yourself, and you are	

Main category 1: sensory-embodied experiences		
	not sleeping...	
SUB 3: Obligation to breastfeed despite adversity	[7 so it think this one is just ... I like it because I look tired but she looks so chubby that it is ... so most like, at some point you think it's worth it, it's working. I'm just feeding and feeding but she's thriving. Which is what matters. At the end.]	 
	[8 Ummm...but ...but you know, it's also happy, right. So...so in the middle of all that, of all of that you know you're tired and like I said feeding and feeding]	
	[29 And you can quit, there's a reason why there's formula, but then you feel that you should do it. so even if it's painful, you have to push yourself to do it. and I guess, it might be just my nature, my so, I'm stubborn, and I've decided to this is what you have to deal with, deal with it. but... but your body can only take so much.]	
	[29 So I feel like, emotionally although it's very hard, umm just the ... feeling the obligation of feeding, you know. I think that's what it is. And that you... you you love them, and you wanted this, I wanted this. I waited, waited umm yeah, so you don't really, it's not like I said, why, why do I want to deal with this? I wanted to. And I could have given her formula, but it's just my own stubbornness]	
	[32 when that's a funny story. so when she was first born, she never lost weight at the hospital, so she always had this great appetite. We used to call her a sharp needle because she was just ...[unclear]. But the doctor said you have to keep feeding them every 2 hours so she doesn't lose weight. But she did not tell me when to stop. Well when you are a first time mother you don't know. I was just trying to follow what they said to me. And for the first 2 or 3 weeks we were feeding her every two hours. And when I went to the doctor, I can't remember when, for the first appointment since her birth, may have been the first month appointment. I told them: when do I stop? because I can't take this anymore. Because I wasn't sleeping at all. And she said, well oh you could have stopped that a week after she was born or something]	
SUB 4: Breastfeeding is hard	[12 And..and I think that breast feeding. Your body tells you how hard it will be]	
	[13 But once you have the baby breastfeeding is really hard to convey to people. One, because some people don't have babies. And second because you are so exhausted. I think that that initial period was very hard.]	
	[23 I think it would be a little red and black]	
	[24 So I would say it's red and black. Red because it's so emotional, theres a	

Main category 1: sensory-embodied experiences		
	lot of ... I think I'm not a very emotional person, I'm very you have to deal with what you have to deal with, that's my attitude. When you face adversity, that's what ... if you have to do something, just plow through it and get it done.]	
	[25 So, I think that emotionally probably breast feeding is one of the hardest things I've ever done.]	
	[28 And it's physically, it's painful. I mean everyone tells you that breastfeeding will be so painful and hard, just physically. And on top of that you are tired and...there is this...psychological pressure to breast feed your baby.]	
	[33 But it was very hard, youknow, because I was tired and I was struggling with breast feeding and then I always say that babies are like,she's not harmless but just when you are about to tell them, they start smiling (laughing). It's a defense mechanism (laughing).]	
	[30 And... hoping it gets better but... it is ... well it gets better, eventually it gets better but... I think it was hard.]	
	[26 And I, you know, it's not like I have't done hard things before. I mean, I feel like ive done other things that are, maybe, that are physically demanding. When I was pregnant with her, I decided to do a 100 mile ride. I was five weeks pregnant]	
SUB5: Responsibility for the baby. Baby is fragile	[16 Overall, when you, this first time when you meet the baby and they are so tiny and so fragile and it's a it's nice to hold them but you also feel like you're gonna break them. Like it's really scary. And they're all floppy, their heads are just... and... it's also fort of amazing to ..you touch them and that's it's tangible...]	
	[19 Right... I guess I could say that it's like an egg that you are afraid... maybe like the turtle? You know how they're so squishy, and you know they're alive but...that you know it's alive but it might break, it is just... and you're responsible for it. im so afraid that when you hold her, that when you hold her she might just break.]	
	[20 Maybe she's like I don't know,.. she's like a little egg... it's not very creative but...so this is just like, I don't know it's not really a name but you are holding it...]	
	[20 So this is my hand...or maybe even you know like a flower or something. You know She's so delicate but then she's not that delicate either. That's why I think of an egg because you think they are fragile but they are not as fragile.]	
SUB 6: Fetal development is fascinating	[17 Like, so I look back and I'm a scientist, a biology scientist, and it is just amazing how how you can make a baby. You know like, it's just scientifically I just find it amazing]	
	[18 It's really intersteing. To think that she started from something that was so little that when you are pregnant you don't ... is it there? Like it doesn't become as real as when it's actually really, you can't see the baby when you	

Main category 1: sensory-embodied experiences		
	have this big belly. So when it's born you have this really you can definitely tell , it's kinda hard to put into words, but all of a sudden it's there, it's palpable, it's tangible, it's human being that you made. From food and who knows, you know, all the biological processes that go behind it]	
SUB7: Metaphor: a cluster of cells	[21 It came from a cluster of cells. This is certainly hard to draw...a cluster of cells.]	
	[22 For a while this is what we called her, she's a cluster of cells]	
	[57 I think... hmmm...my mom used to get mad at me when I called her the cluster of cells. She kept saying the baby, and I said no mom, it's not a baby, it's a cluster of cells.]	
SUB 8: Miscellaneous	[15 I think it's happiness.]	
	[34 I like green, green to me is happiness.]	
	[1 it's not what I was saying like it's not all great]	
	[3 Babies are cute but...then they're just little animals ...they're just trying to survive].	

Researcher Generated Data

After conducting content analysis of the participant's data, a similar process was applied to analyze the researcher generated data. This process included the following components: 1) contemplating artwork and reading the memos, 2) coding, and 3) presentation of categories. Similarly to participant's data, the researcher data also included text and images.

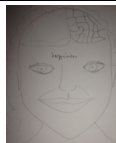


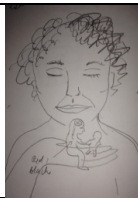
- 1) **Review and Contemplation:** As a first step, I contemplated the artwork and read the memo at least twice.

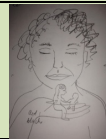
Coding: Following the review and contemplation of the data, I proceeded to coding the data. During data generation, Artistic and Written Researcher Reflexivity Guide (Appendix G) had been used as a guiding set of questions. As with analyzing the participant data, the guide was used to create the main categories deductively, and

subcategories emerged inductively from the data. While building and naming the data-driven subcategories, Mayring's (2010) strategy as quoted in Schreier (2012) was used. As described above in the process of participant data analysis, this strategy builds on progressively summarizing the data. This strategy starts by selecting the relevant parts of the research material, and deleting the irrelevant material. Each relevant part was divided into segments that were numbered. The next step involved paraphrasing these individual segments. Then, the individual paraphrases are compared, and based on what they have in common, are paraphrased again to reach a level of abstraction that describes the material. Finally, subcategories were named and presented in the data analysis matrix. The images were also assigned categories. I digitally cut segments of images that pertained to a particular subcategory, and inserted them into the data analysis matrix.

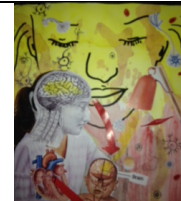
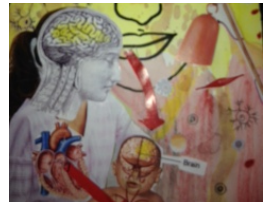
- 2) **Presentation of categories.** Following content analysis of the researcher's data, the categories and subcategories were presented in the data analysis matrix. For clarity, each main category with its subcategories was color coded, and inserted into the matrix with examples from transcribed textual portions and the image segments. An example of the matrix is presented below.

Table 13. *An Illustrative Example of Data Analysis Matrix: Researcher-generated Data*

Main category1: Researcher's impression of and emotional response to the participant		
SUB 1 Brain imagery	[1My overall impression of the interview was a more cerebral account of her experience. The first image that comes to mind is an anatomical drawing of the brain. She repeatedly told me that she was a scientist and also emphasized the rational part of her.	 
	[2 However, she was open to this new experience and I am glad that she came up with the metaphor about the cells and the brain because these are really embodied experiences.]	
SUB 2 Observing from distance	[4 She was able to look back at her experience, and feels deep love and connectedness to her daughter. It was almost like she was looking into someone else's experience, as though looking through a window of someone else's house]	
	[5I still have a little bit of a hunch, though, that she was guarded to her own experience, perhaps did not allow herself to be vulnerable. So that ties in with being more distant, looking at someone else, observing the experience from afar, not necessarily being too personal. But then again, her daughter is almost a year old and she is quite confident where she is now.]	

Main category 2: Observations about participant's appearance and inner world		
	[7 She is very skinny and athletic. Dark, curly hair. Wore simple clothes and no make-up. Had a wide smile, joked a lot. Came across as calm and confident. An image that comes to mind is a rock, something steady and static. Solid and not fluid. Quite stable.]	
SUB 1 Guarded from experience	[8 On the other hand, and it's really my own perception, there was something in her that she did not reveal, I have a sense that she did not entirely open up again her experience, perhaps was not aware of or denial in the whole scope, the more ambivalent part of her experience.]	
	.[17 But overall, I felt a bit detached from her, I felt that she kept me at a safe distance from her and perhaps from her own painful or difficult experiences	
][11 There was a bit of a paradox there, though, because her way of talking about it was a bit dispassionate, detached.	

Main category3: Beyond_ words experiences

SUB 1 Embodied imagery	[9 Sensory-embodied and relational aspects were the strongest parts that stood out in the interview. She talked about the biological aspects of “making a baby” and how that amazed and intrigued her.][
	.][10 The imagery was very much to do with the body: brains, cells, heart. I was intrigued by this imagery because she was talking about a very deep level of experience. This reminded me of a wallpaper featuring cells because the cellular aspect seemed so strong in her experience, as though a background to everything else]	
	[16 I think it’s interesting to have this scientific perspective that seems dispassionate but actually runs really deep	
SUB 2 Metaphor: one-way relationship	.][12 One aspect that stood out in her story was a one-way relationship that she had with the baby. How the baby was just seeing her as a source of food and how she is giving and giving.]	
	.][14 She became guarded every time I tried to probe her about emotions. In response, every time she stated that It makes her happy, to see the baby thrive. In my reflexive piece I conveyed this one-way relationship as not making eye contact. Her eyes are closed, and the baby’s eyes are not visible because the anatomical, more instinctual aspect is taking over	
SUB 3 Breastfeeding	[13The feeding, breastfeeding aspect of her experience was really repeated several times throughout but was not represented as strongly in the artwork. It’s a very emotional aspect and I think that emotion was something that she did not reveal more about.]	

At the conclusion of content analysis phase, for each case, the content analysis of participant and researcher data resulted in two matrices that contained the main categories, sub categories, examples of text and examples of images. Samples of these matrices have been presented and described in detail in the preceding pages of this chapter. For each case, the two matrices were printed out and placed side by side for the purpose of the next step of analysis. These matrices served as systematic organization and categorization tools that assisted me in creating the Portrait Synthesis, which was the second phase of data analysis that will be described in detail below.

Portrait Synthesis. The previous section described the process of content analysis, which was the first phase of data analysis of this study. Based on the images, categories and metaphors that emerged from content analysis, I engaged in an iterative artistic and textual synthesis of the data to create artistic portraits and textual narratives that is referred to as Portrait Synthesis. The purpose of Portrait Synthesis was to represent the individual participants' *beyond_words* experiences in artistic and narrative forms by synthesizing the categories that emerged from the analysis of participant data and researcher reflections. This was an iterative process where the artistic and narrative components informed each other. Each Portrait Synthesis was created separately for each participant. Creation of Portrait Synthesis included the following sequence: 1) portrait sketch and draft narrative, 2) creating the artistic protagonist, and 3) Elaboration on the Portrait Synthesis.

1) **Portrait sketch and draft narrative.** In preparation for the portrait synthesis, I contemplated the two matrices that resulted from content analysis described in the previous section. The purpose of the portrait sketch and draft narrative was to establish a sequence of the categories that would form the story, and to outline the artistic portrait. I then consulted the main categories and subcategories to inform the portrait sketch and draft narrative. The portrait sketch was a pencil or ink sketch that featured the participant and her baby and sometimes significant others if they were presented in the data. The draft portraits based on Margaret and Gabriela's experiences serve as examples and are presented below:



Figure 24. Draft portrait: Margaret



Figure 25. Draft portrait: Gabriela

The draft narrative was initially a draft that had the basic setting of the story, sequencing of categories and key quotes from the participant. The narratives were written in first person, as though the participants had written their thoughts in a journal. The setting of each story was fictional, and it was created based on the phase where the participant found herself. For instance, Gabriela's baby was nearing her first birthday, so the setting was created as her planning her daughter's birthday.

2) **Creating the protagonist.** After outlining the portrait sketch and draft narrative, I proceeded to creating the protagonist. This process included creating the physical appearance as well as the overall mood and temperament that were rooted in the participant's experiences. This was based on the categories that emerged from both participant as well as researcher data as it was recorded in the matrix during the previous stages of data analysis. While creating the protagonist, I stayed true to some basic characteristics of the actual participant such as ethnicity, overall body build, and approximate hair color. At the same time, I was very careful to maintain the participants' confidentiality. And thus, I created a character who embodied the participant's experience but was not physically identifiable as her. To achieve this, I

changed the participants' facial features, eyes, and hair style. For inspiration for my portraits, I looked at reproductions of artworks, old photographs, and magazine images featuring women and babies. An example of the protagonist that I created based on Liz's experiences is provided below.



Figure 26. Example of the protagonist: Liz

3) **Elaboration on the Portrait Synthesis.** Following the steps outlined above, I proceeded to elaborating on the Portrait Synthesis. Grounded in the categories that emerged from the data, this process included building on the existing draft portrait and narrative by adding the participant quotes, revising the sequence if necessary, and adding details to the story and the image. This was an iterative process where the image was influenced by the text, which in turn inspired further textual descriptions. This process included two components: **the narrative**, and the **artistic image**.

- **The narrative.** The fictional format for all of the narratives was the journal. This choice was based on the fact that the participants shared their stories with me in an open and honest manner, and they generated in-depth oral data that was rich in metaphors. During the interview, the participants also reflected on the artwork that they created and thus overall, the oral data was rich and reflexive. Presenting the narrative in the format of a journal entry allowed for the preservation of its openness

and honesty. Within the format of the journal entry, I also paid attention to the structure of the narrative in order to evoke the experiences of the specific first-time mothers in the reader. For instance, Margaret delivered only 4 weeks prior to participation in this research. She indicated that her life post partum was very busy and thus, her narrative is composed of 3 short journal entries that highlight the fact that the busy and exhausted mother might not have time to sit down for an expanded journal entry. In contrast, Gabriela's baby was 11 months old when she participated in research, her baby was sleeping better, and she had more time to reflect. Therefore, her narrative consisted of one longer journal entry. The richness of the participants' data also prompted me to include verbatim quotes from the transcribed text because the participants' descriptions and metaphors were unique, rich and vivid. For instance, one participant, Gabriela used metaphors such as "a cluster of cells", and "a feeding machine". Another participant, Margaret, used metaphors such as "the baby is an entire ecosystem", "I feel in pieces", "I feel like a prisoner". In order to highlight the participant quotes in the text, they were marked in red. Another consideration pertaining to the story was the sequence of the story. While the story reflects categories that emerged from the data, the sequence of presentation of these categories was chosen based on the setting of the story and the flow of the narrative.

- **The artistic image.** The artistic images were created based on the categories that emerged from the data. While creating the artistic image, I faced the challenge to maintain the multifaceted, evolving nature of the participants' experiences. The method of montage, as used in this study, provided me with a method to engage with and attempt to preserve these evolving, overlapping, and multifaceted experiences. The term montage has been used slightly differently in the literature of the fine arts as well as ABR, and thus carries both filmic and collagist connotations. In this study, I build upon both the filmic as well as collagist meanings. Montage in this study was

meant to be used not to eradicate but to expose the layers of experiences. The process of the creation of the portrait was as important as the final result itself and thus, montage portraiture in this study, in its combination of images and narratives, unfolds like a sequence of snapshots. The portraits are presented as evolving series of images, maintaining the phases of the portrait creation. To do so, I carefully constructed the portrait representing each category that emerged during the content analysis as a separate phase of the portrait construction. Each phase was scanned and the image was digitally saved before moving on the next phase. This allowed maintain each phase of the portrait's creation. Ultimately, the sequential phases of the portrait were presented together with parts of the narrative.

Another aspect that needed to be considered while creating the artistic image was the choice of the art materials. The materials needed to permit the expression of a range of categories and metaphors that emerged from the data. In addition, the materials needed to allow for some transparency in order to achieve the effect of montage and superimposition to express the multiplicity of experiences. Therefore, I searched for the materials that permitted precision and specificity on the one hand, and transparency and fluidity on the other. It became apparent that several different materials had to be used in order to achieve these goals. I used black illustration ink, colored ink, watercolor pencils, and collage materials to create the images. The combination of these materials allowed for precision of illustration and at the same time, fluidity and transparency that was necessary to convey the evolving and multiple experiences in order for the image to open up the possibility of multiple perspectives for the viewer. The paper that I used was 200g Bristol board, generally used for illustration, in size A4. This paper is smooth and facilitates precision drawing using ink, and is also sturdy enough to facilitate working with fluid ink and watercolor. The size A4 was chosen for practical reasons in order to be able to

scan the different phases of portrait creation using a home scanner. The color scheme for each individual portrait reflected the participant's original artwork as well as the metaphors that they expressed during the data generation phase.

Summarily, in order for the reader to quickly grasp how the artistic images in Portrait Synthesis emerged from the original data, it is useful to juxtapose the images that the participants and the researcher created during data generation, and the final image of the Portrait Synthesis.

Margaret:



Figure 27. The creation of Margaret's Portrait Synthesis

Gabriela:

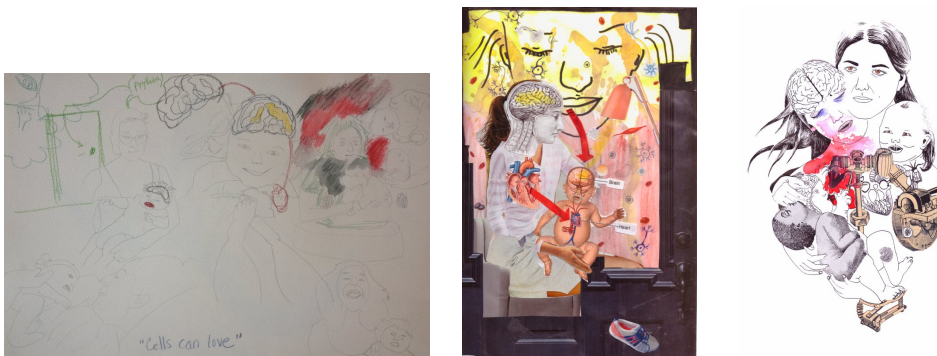


Figure 28. The creation of Gabriela's Portrait Synthesis

Liz:



Figure 29. Creation of Liz' Portrait Synthesis

Taylor:

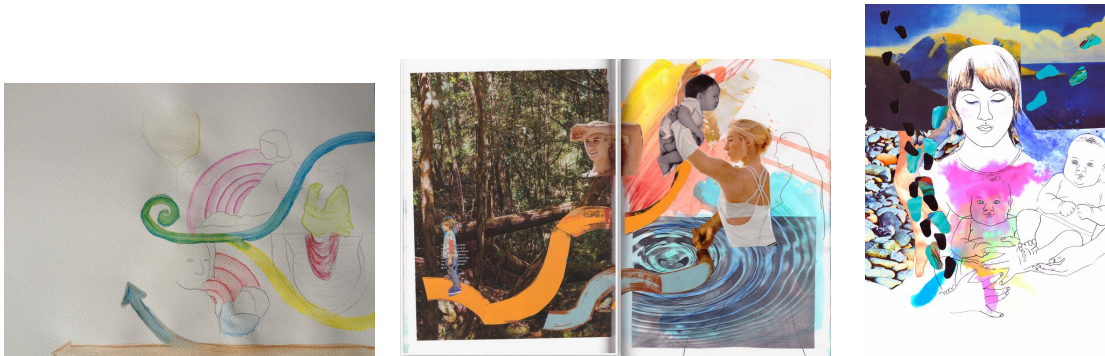


Figure 30. Creation of Taylor's Portrait Synthesis

Alex:



Figure 31. Creation of Alex' Portrait Synthesis

Participant feedback. Participant feedback was an important component of this research. During the research, there were two occasions at which participant feedback was requested: 1) **Debriefing**. As part of the data generation interview protocol *Artistic and Oral Open Ended Responsive Interview* (Appendix E), and 2) **Participant feedback questionnaire**. After viewing the Portrait Synthesis, the participants were asked to fill out a questionnaire (See Appendix F).

- 1) **Debriefing.** At the end of data generation, the participants were asked what it was like for them to participate in this research, how they were feeling, whether they needed any emotional support, and whether they had any questions for the researcher. The purpose of these questions was debriefing in order to determine how participants were feeling at the end of the procedure, to make sure they were psychologically safe and to give the participants an opportunity to reflect on their experiences in participating in this research. The participants' statements in responses to debriefing questions are provided below:

Table 14. *Debriefing*

Participant	Comments
Margaret	<p>“ One thing I’ll say that I feel so tired (laughs) that I feel that thinking through it happened kind of , like, well, I mean it’s ... maybe even my logical part of my brain, even when you asked about metaphors. I think that typically I would be a lot snappier. But I feel that the part of my brain that is about words and descriptions is kind of shut down”.</p> <p>“And so maybe this was really kind of natural space for me to umm explore even if I didn’t completely understand why I was making these decisions that just...I think it felt like a natural sort of place to express myself and it was kind of liberating, to, you know...And I feel like I remembered moments when you would ask me a metaphor coming up or something and I would just sort of continue working on the artwork to see if that somehow brought the answer to me.”</p> <p>“And also ...maybe just an over my head, you know, I just I still like, I still continue to feel sort of subsumed in sort of like... I don’t know what’s going on.”</p> <p>“ I’m really glad that I did this, I’m so glad I participated”</p>
Gabriela	<p>“I think it’s it’s really a time to reflect on it. it all happens so fast from the time you deliver to now, which now is like 10-11 months, it’s non stop. You go from delivering and now you have to feed this baby, you didn’t sleep at all, you have to keep going. So it’s been a time to reflect and think of wow, you know that was hard, and I’m glad it’s done, and now we’re in a different phase, so...”</p> <p>“Yeah, it’s fun. It is good to look back and to see even if there were hard things the underlying sentiment has always been happiness. Because that’s what they are, at least that’s what she is for me.”</p>
Liz	<p>“The layering technique is so cool. The tracing and then the watercolor. It’s really awesome.”</p> <p>“Clarifying, I guess, is some ways. Definitely great fun! And ...I don’t know maybe I wish I’d do more watercoloring things.”</p> <p>“Because the watercoloring is so fun!”</p> <p>“ I haven’t actually been reflecting on like this. I’ve just been taking care of the baby. So it’s nice to pause and think about questions like, well how do I envision myself? Well, I have no idea!”</p> <p>“Awesome! That was fun!”</p>
Taylor	<p>“ It is kind of like... reflecting over these 8 weeks and thinking about my relationship with Carter and how it has evolved and thinking about how it is going to evolve even more. It was nice, kind of like introspection , I think”</p> <p>“ Thinking about little bit broader than the day to day (laughs) like eating,sleeping, pooping Right, yes, ! so I was like about our relationship and how it’s going to change and evolve, so...</p> <p>It’s been nice”</p> <p>“ It was nice, it was very reflective. It was interactive. It was nice to do something for him but for me at the same time. To be able to sit down and have some passive time and not do anything. Getting back into my own artwork.”</p>

Participant	Comments
Alex	<p>“Yeah, it was LOVELY. It’s so nice to get a moment to focus on it.”</p> <p>“ I feel like that there’s so much attention to prep and primacy. And mom gets a lot of attention to care for the unborn child. And then rightfully so, and understandably so, attention is given to the child. And I wanted it to be so. I didn’t want attention for me but I wanted attention to self reflect.”</p> <p>“And umm just take a moment to yeah, create some metaphors. Not just talk about it but metaphors allow me to get closer to the embodied experiences that’s so... I think . the metaphor is what allows the experience of <i>beyond words</i> to be relived.”</p> <p>“And for you to have so much interest. It’s not just , I think people say, how’s it going, how are you? But I feel that they don’t really have time to listen or you know when I was really experiencing pain, early on, people say that they are empathetic to it but people really don’t have much tolerance to hear that. So it’s nice that you are really wanting to hear and understand. That makes me has made me more willing to get closer to my truths about tit and just having space to explore it.”</p> <p>“Im feeling good. I m feeling sentimental but also just nourished. A little more embraced and ... trying not to cry. A little fueled in a positive way. I feel grounded and I’m ok”</p>

2) **Participant feedback questionnaire.** After creating each of the portrait synthesis, I shared them with the participants and asked them to provide feedback by filling out a questionnaire (See Appendix F). The questionnaire asked the participants to comment on particular aspects of their Portrait Synthesis for the purpose of judging credibility and authenticity. Credibility and authenticity are evaluated in part in ABR by exploring the aesthetic and evocative power of the results as well as the usefulness of the research. The questionnaire included questions relative to these factors as well as additional points about the representation of the participant’s experience. The objectives of the questionnaire were the following:

1. To provide an opening and an opportunity for the participant to reflect on the portrait, and to obtain initial broad reflections.
2. To determine whether the representation of research accurately reflects the participant’s experiences.
3. To obtain feedback about usefulness of the research.
4. To obtain feedback about the aesthetic power of the research, and

5. To obtain any further reflections or suggestions.

The participants provided thoughtful feedback, in some instances elaborating further on their experiences and sharing their emotional responses to the work. The responses to the questionnaire that pertained to authenticity, usefulness, and aesthetic power of the research are provided below in full and unabridged:

Table 15. *Participant Questionnaire Feedback Responses*

	Question 2: Do the artistic and written representations of this research accurately reflect your <i>beyond_words</i> experiences in transitioning to motherhood? If yes, how and why? If no, why not?
Margaret	The most fascinating aspect of this portrait's representation of motherhood may lie in seeing its progress, the constant unfolding of the experience. I would say that the unfolding of an artwork seems like an accurate way to represent the unfolding of the experience itself.
Gabriela	Yes, both the artistic and written representations narrate my experience as conveyed during the interview. I think this is a great graphic representation of my transition to motherhood and in a way is a stronger representation of my experience than the written portion. The written portion is accurate of my overall sentiment however the context added gives it a "twist" and a sense that it was written by a different person.
Liz	I think both the written and artistic representations capture my experiences with new motherhood. The artistic portion is swirling and chaotic in a way that I found difficult to express, and the written portion captures many facets of what I was experiencing, especially early on.
Taylor	Yes. Victoria did a wonderful job integrating my personal quotes and stories into her representation of me, with the visuals of the teardrop and footsteps and background visuals. It's all a journey and takes time to walk that path, and every day is different, presented with new challenges.
Alex	It upsets me that my eyes look sad, distraught and distanced. That is not how I imagined myself looking as I was talking to you during the interview. But I can't say that it's not reflective of my " <i>beyond_words</i> " experiences. I don't want it to be, but it may be true. I, at least, like that my eyes are deep with reflection and story; it's clear I went through something. I don't feel absent. The other thing that may not accurately reflect my experience is that I felt more cuddly and embracive than this painting makes me look, although again, there's no denying that I underscored our deep level of connection. Otherwise, it does feel reflective. I appreciate that the direction and form of the shapes help the experience not seem to overwhelming. And the anatomy speaks to how in touch I am with my body.

	Question 5: Did you find that this research was useful to you? If yes, why? If not, why not?
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Margaret	I think that it was a useful way to think through what I was feeling and give form to the general sense of being swallowed or consumed. It seems like when you draw something and turn it into something physical it doesn't feel as threatening or scary. It just is what it is. So perhaps I gained some acceptance in this exercise.
Gabriela	This research was useful to me in the sense that it gave me an opportunity to reflect on the immense effort that is motherhood and to appreciate the process despite its hardship.
Liz	Yes, this project was very useful for me. Being given the chance to talk about early motherhood and make some art helped me clarify a lot of my experiences.
Taylor	I found it helpful in reflecting upon the path I was on, what I could handle, and what I couldn't; about my new and developing relationship with my son, and where I saw that in the future
Alex	The experience of going through the study was very useful for reasons listed in #4. I'll be curious to see the synthesized results. (answer to question 4: I learned that I needed the space to describe my experience to a non-judgmental person who was happy and excited to hear about my honest experience. I learned that I did have some overwhelming, negative thoughts about the experience. It gave me a chance to help see my son as a reflection of me, reminding me that he reflects back to me all the behavior he witnesses in me. I learned that drawing and describing the birth and development of my son comes easy to me because the process is so connected to me. I was reminded that no one wants to hear your true birth story; especially not women who are pregnant, even if they ask. This is why it felt so good to tell my own

	Question 6: In what way might accessing the results from this research be useful to first-time mothers, mothers-to be and/or other groups of people?
Margaret	I think that what I typed in question 5 pretty much answers this question. Drawing a sensation or emotion might help a person accept that sensation or emotion.
Gabriela	My experience might help other first time mothers see that becoming a mother is not all a great happy experience all the time. New mothers are never told about the difficulties that lie ahead and the relationship with a newborn, at least in my experience, is far from blissful. My results might help new mothers appreciate that it is okay to experience feelings as they come in the transition to motherhood, even if those do not seem fitting of a mother.
Liz	I would highly recommend this kind of exercise to new mothers. I've actually been using some of the questions from this to help me clarify some other experiences in my life & it's been wonderfully helpful!
Taylor	I think it's helpful to hear the whole story from new mothers to mothers-to-be, and anyone really. There's a lot of horror and war stories people like to tell, but sometimes the good moments get overlooked, so it's good to share the whole story, because one woman's experience might differ vastly from the next woman. I think the primal nature of motherhood is still wildly underrepresented and misunderstood, so the more information about that out there for the public to discern, the better. And then maybe it will lead to better support for new moms across all spectrums.
Alex	It's hard to say without seeing the results. But, it could give mothers a perspective on several different accounts of birth and raising a child, which is very important since every birth, and mother-child dyad is the same.

	Question 7: When you look at the artistic representations and read the narratives, do you have an emotional response? Do you have any sensations? What feelings does the artistic and written representation of your experience evoke in you? Please describe!
Margaret	I feel a little bit of self-pity and also some self-love. When I read the narrative I want to tell myself that it will get better in just a short time and give myself a reassuring hug. Looking at the portrait makes me feel delighted! I like the complexity and vibrancy and plural feeling.
Gabriela	Yes, I had an emotional response as I saw the artistic representation, particularly the slideshow of how it evolved. After a year, the difficulties of breastfeeding and the marathon feeding sessions had been deeply stored away in some corner of my brain however the portrait reminded me of how painful and stressful this time was. The portrait however also made me re-experience the transition out of these hard times to calmer and happier times.
Liz	Warmth, I guess, and love. ☺
Taylor	I feel a sense of pride, warmth, happiness, contentment... All things I feel because I'm still on the same emotional path I described back then. That I don't (or try not to) let things get to me too much, I try not to get too overwhelmed, I pace myself, and I have this omnipresent feeling of love for this tiny human being who is now only 5 months old. I never knew such a feeling could exist, but I'm constantly reminded of how amazing it is that he's here and in my life, affecting it every moment. The artistic and written representations remind me of those feelings, and the journey we're on together, and how excited I am to help him on his path through life and see where that will take him.
Alex	The narrative is softer and sweeter than the painting, which allows me permission to offer myself loving kindness. I look sad in the picture, and I don't want to pass that on. I do have an emotional response to all the pictures as a whole set. I was struck at the progress we made through the process. It also evokes even more love for my son. In seeing the synthesis, initially I was very excited and touched, and had to share it with my husband immediately.

The third question on the feedback form asked of the participants whether they would like to make any changes in visual or textual representation. One of the participants, Alex, did not fully agree with the visual representation of her and suggested some changes to the portrait. This prompted me to re-visit the data. After revising the data, I agreed with the participant's comments and also realized that I could have conveyed her experience more accurately. After I revised the portrait, I shared it with Alex and she was in agreement with the changes. She stated: "It's definitely a "flood" of a lot of things going on! The changes are powerful, and I really like how it looks like the entire portrait now lives in a nutshell".

One issue that came up in regard to providing feedback was the turnaround time. I had expected that 1 week would be enough for the mothers to provide feedback, however, most

mothers had difficulty with this time frame and required between 2 and 4 weeks to provide feedback. The questions required additional in depth reflection and that demanded more time and thoughtful reflections than originally thought. Margaret particularly had difficulty finding time to provide feedback because of an extremely busy schedule and a loss in the family. She stated: “...this feedback portion felt daunting to me. I don’t know how other new mothers found the time, although admittedly, I’ve had a really insane past two months with barely any weekends in town, a funeral, a cold, a move, returning to work full time, etc.”

Despite some delay that the feedback took, all of the participants provided in-depth and thoughtful feedback that validated the findings of Portrait Synthesis, and provided additional data that was incorporated into the Final Synthesis.

Final Synthesis. In the Final Synthesis of findings, I integrated the five Portrait Synthesis, and the results from member checking into one final representation that contains visual and textual components and reflects each of the participant’s experiences as well as the researcher’s reflexivity, and feedback from the participants. During the preceding data analysis phases, each case was analyzed separately. During the Final Synthesis phase, the individual cases were systematically synthesized across cases, and represented artistically as a play in four acts. When this arts-based research study was initially designed, the options for specific medium and genre of Final Synthesis were left open in order to allow the data to drive the genre and to be open to what emerged from data analysis. The Final Synthesis took the form of a play in four acts that was accompanied by an artist group portrait of the five protagonists. What follows is the description of the process of creating the final synthesis.

1) **Revisiting data analysis matrices.** I compiled and reviewed all of the participants’ data analysis matrices that had resulted from content analysis. In addition, I re-read and contemplated all of the Portrait Syntheses. The compilation resulted in substantial amount of artistic and textual data. To make the subsequent synthesis more manageable and systematic, I decided to first focus

on the participant data. The synthesis of the participant data was followed by the synthesis on the researcher data, and participant feedback.

2) **Synthesis of the participant data.**

- To synthesize the participant data, I printed out all individual data analysis matrices.

Examples of these matrices were given earlier in this chapter. They included main categories and subcategories with verbatim quotes and images that were generated by each of the participants. All the participants' data analysis matrices shared the three main categories that had been constructed deductively during the content analysis phase. These were: sensory-embodied experiences, relational experiences, and imaginal experiences. Under these three main categories, each participant's matrix contained sub categories that had emerged inductively from the data.

- **Synthesizing the Data.** Next, I proceeded to synthesize the data across cases one main category at a time, that is, all the participants' sub categories relating to the sensory-embodied experiences were grouped together. The other two main categories were set aside. As I reviewed and began to synthesize the sub categories pertaining to sensory-embodied experiences, common themes began to emerge. To map the themes, I constructed a concept map (see Figure 27) that featured the main category, and the themes that emerged from the synthesis of subcategories. Around the themes, the initials of the participants who addressed the theme in their data were written. As a result, I had a concept map with the themes and clusters of participants around them. It was interesting to note that despite the common themes, sometimes the participants agreed and at other times differed in their opinion about the themes or their experiences. For instance, the concept map featured above contains a large theme entitled "3. Breastfeeding". Under this theme, there are three subthemes: "initially hard", "still hard", and "intensely pleasurable".

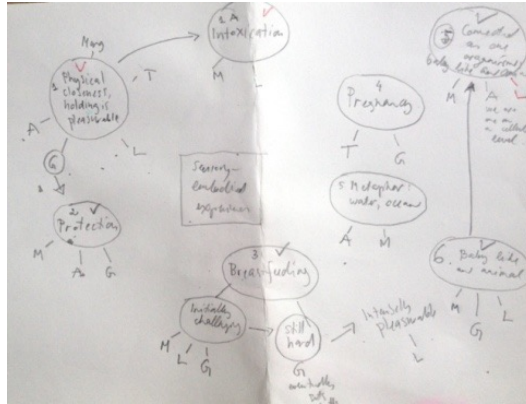


Figure 32. A concept map

Computer software was not used and the synthesis was conducted manually, using paper, pencils, scissors, and rearrangement to synthesize my data. The concept map assisted me in grouping together all of the categories of participant data that pertained to a theme that emerged. And thus, at the end of the synthesis of the first major category: sensory embodied experiences, a concept map with the themes that had emerged from the data was constructed. Based on the concept map, I clustered together all of the sub categories with their examples from all of the participants that pertained to each theme. Each of these subthemes feature the initials of the participants for whom this theme was present. For clarity, an example is provided below. The table below contains excerpts from three participants on the theme on breastfeeding that falls under the main category of sensory-embodied experiences.

Table 16. *Sub-category: Breastfeeding*

Breastfeeding is initially challenging	
Liz	[16 The first 2 weeks were murder trying to figure out how to breastfeed. It was SOOO hard]
	[19 when he was first born, he had a tongue tie so he couldn't latch on properly and so the first week or so it was just a nightmare. We couldn't figure out how to breastfeed him. I wanted to be able to breast feed him SOOO badly and I couldn't so I was pumping and feeding with a tube. I've never been more stressed in my entire life. And then we had a lactation consultant talk to us and eventually just figured out how to feed

	him]
Margaret	[15 but it's also painful. Breastfeeding is... it can... it just I feel like...you know, the amount that she nurses is just...makes me pretty sore]
Gabriela	[12 your body tells you how hard it will be]
	[13 but once once you have the baby breast feeding it really is hard to convey to people. One, because some people don't have babies. And second because you are so exhausted. I think that that initial period was very hard]
	[25 So I think emotionally probably breast feeding was one of the hardest things I've ever done]
	[28 And it's physically, it's painful. I mean everyone tells you that breastfeeding will be so painful and hard, just physically. And on top of that you are tired and...and there is this psychological pressure to breast feed]
	[33 But it was very hard, you know, because I was tired and I was struggling with breast feeding]

Breast feeding is still hard	
Gabriela	[2 So very quickly you realize that you're just a feeding machine]
	[4 and you're just feeding and feeding them constantly. And that's why you're just feeding and feeding and feeding and you can't really go out]
	[30 And hoping it gets better but... it is... well it gets better, eventually it gets better but... I think it was hard]

Breast feeding is intensely pleasurable	
Liz	[17 but now it's like...it's the best thing in the world]
	[20 Yeah, and how it's just wonderful now to breast feed him. His warm little body, and he just nestles into me. I usually breast feed him in my lap and he just curls into me and he just closes his eyes and falls asleep and takes a little nap. Yeah, that's pretty glorious!]

After I synthesized the first main category (sensory-embodied experiences), that category was set aside and I moved on to synthesizing the next category. This process described above was repeated for each main category. As the result of this synthesis, I created a concept map for each of the main categories that mapped the themes that had emerged from the synthesis.

Selecting the creative genre. During the design phases of this arts-based research study, the genre and media of the final synthesis was left open. The purpose of this was to allow the data to drive the genre and media in order to find a representation that best allows for this research to reach audiences. The themes that emerged from the initial stages of final synthesis allowed for the participants to fictionally talk to each other, although they had actually never met. One genre that is based on interaction between participants is drama. This genre was appropriate for the Final Synthesis to allow for the voices of the participants to interact with other and discuss the themes that had emerged. This genre also facilitated both text and images to be brought to the audience. And thus, the final synthesis became a play with a slide show to be projected during the performance/reading of the play.

Drafting the play. During the draft phase of the play, I outlined the structure and sequence of the play. The concept-driven main categories became the first three acts of the play: Act I sensory-embodied experiences, act II: relational experiences, and act III: imaginal experiences. Each act was divided into scenes that correspond to the themes that emerged during the final synthesis.

Below is the division of acts and scenes.

Act I: sensory-embodied experiences

scene 1: introduction

scene 2: holding

scene 3: breast feeding

scene 4: connected as one organism

scene 5: pregnancy

scene 6: the baby is an ocean

Act II: Relational experiences

Scene 1: introduction

Scene 2: breast feeding tied in with the relationship

Scene 3: one-way relationship vs reciprocated relationship

Scene 4: connection with the baby

Scene 5: relationship evolves over time

Scene 6: coping with stressors of adjustment

Scene 7: joy in the relationship

Act III: Imaginal experiences

Scene 1: Introduction

Scene 2: Fantasy of returning to a former life

Scene 3: Awareness of darker fantasies

Scene 4: Positive fantasies for the future

Participant Feedback. Another aspect of the research data that was included in the final synthesis was the participant feedback. As described earlier in this chapter, after creating each portrait synthesis, I shared it with the participants and asked them to fill out a feedback form (Appendix F). The participants provided in depth and insightful feedback that added to the existing data. The feedback was synthesized and added it to the play as the 4th act. The presentation of feedback was categorized based on the questions that were posed to the participants (Appendix F).

Visual component of the play. The Final Synthesis also included a visual component. As described earlier in this chapter, previously, 5 individual Portrait Syntheses had been created. The Portrait Syntheses had been shared with the participants, and they had provided their

feedback. From the multiphasic content analysis, Portrait Synthesis, and participant feedback it was becoming increasingly clear that Portrait Synthesis, which captured all of the data to that point, was a unique way to authentically represent of the experience of transitioning to motherhood. To synthesize the visual aspects of portrait syntheses across cases, I decided to synthesize the 5 portraits into an evolving group portrait. Based on the scenes in the draft play, I revisited the scanned images of the individual portrait syntheses in order to locate the visual representations that pertained to these scenes for each of the participants. In some instances, I manually copied and re-drew some of the stages of the individual portraits, and made some adjustments.

Setting of the play. After I had drafted the play and planned the sequence of the slideshow, the question of the setting of the play emerged. Because this is an arts-based research study, the findings are represented artistically. The participants, of course, never met in real life but in the play they appear to be talking to each other. This raised the need to create a setting in which these 5 women could come together, and several options were considered. At this point, I asked for and received valuable guidance from my dissertation advisor. After a fruitful discussion with her, I decided that the play be set in an artist's studio. The main argument in favor of this setting was the fact that the featured artwork was created by the researcher, not the actual participants. It then became apparent that the researcher, too, should be a participant in the play acting as the portraitist.

The portraitist's voice. Another question that arose was that of the portraitist's voice. As part of the data generation, I had created artistic responses and written memos and observations in response to the participants' data and data generation process. These artistic responses had helped me create each individual Portrait Synthesis. For the Final Synthesis, as the artistic components of the individual portraits were incorporated, it seemed inevitable that the researcher's voice should also be present in the Final Synthesis. Interacting with the research participants, and later creating artwork made me very personally present with the participants

and the research process. Although I am not acquainted with the research participants privately and only met them for the purpose of the research study, I felt as though I knew them in a sensitive and intimate way. The participants were very open with me and honestly shared their experiences. In my presence, the participants were exploring and making meaning of their experiences. At times, they showed their vulnerable side, exposing their doubts and insecurities. In response, those meetings evoked memories and personal associations in me. At times, I became aware of my counter transference reactions that were recorded in written memos. The Portrait Syntheses and the Final Synthesis that I created all were based both on the participant data and researcher reflexivity. And thus, it occurred to me that the Final Synthesis, I could not be just a quiet observer but that my voice should also be heard. Moreover, I did not want to come across as an “expert” or an “objective” researcher, who would hide her own responses. Therefore, I added myself as a character in the final synthesis and based on my reflexive memos, shared some of my own thoughts, reactions and observations.

Exhibition of the results. In arts-based research, the presentation of the results often is in the form of exhibitions of the artistic results in a public forum as a method for further assessing the authenticity and credibility of the results. Following the Final Synthesis, the results of this study were presented to an audience of 15 invited faculty members and graduate students at Drexel University. The audience members were presented with the exhibition of the results that consisted of 2 components: 1) exhibition of Portrait Syntheses, and 2) reading of the play (Final Synthesis). The total time allocation for the exhibition and the presentation was 2 hours.

- 1) **Portrait Synthesis:** The exhibition of **Portrait Syntheses** was installed at Drexel University. The Three Parkway building, 1601 Cherry Street, Philadelphia, PA, in the Department of Creative Arts Therapies on the 7th floor. The exhibition was installed at the hallway spaces of the department, and was accessible to the students and faculty of the college. To contextualize the art exhibit, a poster that briefly explained the art exhibit and the study was printed and exhibited at the premises. The audience members were also given a postcard with the printed program of the event. Some photographs of the exhibit are featured below

"Arts-based research is an effort to extend beyond the limited resources of language communication, in order to express meanings that otherwise would be ineffable" (Kaplan & Smith, 2010, p.10)

Beyond words: Making meaning of transitioning to motherhood using montage portraiture is an exhibition that features the findings of art therapist Victoria Scotti's arts-based dissertation research. Arts-based research practices are defined as "methodological tools that adapt the tenets of the creative arts in order to address social research questions in engaged ways. They can be used for data collection, generation, analysis and representation" (Leavy, 2015).

The purpose of this arts-based research study was to conduct a systematic in depth exploration of how first time mothers express and make meaning of what is *beyond words* in their experiences of transitioning to motherhood. Research on women's experiences of transitioning to motherhood is well documented. Researchers have identified the predictable or conscious physiological (Afekwah et al, 2013; Nelson, 2006; Williamson, Leeming, Lytle, & Johnson, 2009), psychological (Hogan, 2008; Mercer, 1986; Nelson, 2003; Prinds et al, 2014), social (Davill et al, 2011; Demers et al, 2011; McMahon, 1996; Nelson, 2003; Prinds et al, 2014), and spiritual (Callister, 2010, 2004; Prinds et al, 2014; Mahoney, 2009; Schneider, 2013) dimensions of transitioning to motherhood that include rewarding and challenging experiences. However, transitioning to motherhood also includes the less visible sensory-embodied, relational, and imaginal experiences that are more likely beyond conscious awareness and difficult to articulate (Crossley, 2009; DeVault, 1991; Linstott, 2011; Prinds et al, 2014; Sered, 1991; Schmidt & Barclay, 1991). These phenomena are conceptualized as *beyond words* for the purpose of this study.

Five first time mothers participated in this study to explore what lies *beyond words* in transitioning to motherhood. They individually created self portraits by tracing photographs of themselves and their infants and adding drawings to the portrait using montage. The drawing process was accompanied by a semi-structured interview. Following the self portrait and interview the researcher engaged in textual and artistic reflexivity, content analysis and portrait synthesis.

The work that is exhibited here features the researcher's portrait synthesis of each participant. The purpose of the portrait synthesis, that include both visual and textual representations, was to represent the multifaceted experiences of first-time mothers in their transition. The portraits are presented as sequences of images and textual excerpts. For confidentiality purposes, the portraits do not look like the actual participants. In the narratives, direct quotes from the participants are marked in red.

This work was created as the synthesis of arts-based research, however, it is also intended to stand alone as a work of art: "Arts-based research is less like a puzzle or a problem to solve and more like a work of art to be appreciated" (Kapitan, 2010, p.xviii)



Figure 33. The poster



Figure 34. The Postcard



Figure 35. The exhibition space



Figure 36. Exhibition of Portrait Synthesis

- 2) **Final Synthesis:** The **Final Synthesis** was presented to the audience in a classroom at Drexel University Three Parkway building. The classroom was equipped with a large screen where the group portrait that was part of the Final Synthesis, was projected. Five faculty members and graduate students were asked to read the play from the script that was provided to them.



Figure 37. The premises of Drexel University

Audience feedback. Audience feedback in this study was implemented as a credibility and authenticity measure. After witnessing the portrait synthesis and reading of the play, the audience members were asked to fill out anonymous feedback questionnaires.

The audience members consisted of individuals of different ages some of whom were mothers/parents, and others who were not. All of the audience members were faculty, students and/or staff at Drexel University and were invited based upon their areas of expertise or experiences with transitioning to motherhood and arts based research. The audience members were predominantly women but 3 men were also present. 15 audience members filled out anonymous written questionnaires that consisted of 8 questions (Appendix E).

The objectives of the questionnaire were to assess 1) usefulness of research, and 2) aesthetic power of the research which are among two most often used constructs used to evaluate the authenticity and credibility of arts based research (Barone & Eisner, 2012; Chilton & Leavy, 2014; Leavy, 2009).

To analyze and categorize audience feedback, content analysis was conducted. This was done using a 2 phase process: 1) to categorize the data deductively using main categories and subcategories that were previously established in the questionnaire, and 2) open coding to categorize the data. This second step was necessary because audience members shared valuable feedback, reflections, and personal associations under various questions. This feedback, despite not being provided as a direct answer to the question posed, was nevertheless valuable. The analysis of audience feedback yielded two main categories: 1) usefulness, and 2) aesthetic power. The main categories with their subcategories will be described below, followed by a presentation of these categories in a more detailed table.

1) **Usefulness.** This main category revealed overall how accessing the results of this research might be useful. This main category included 6 subcategories:

- **Multiple simultaneous experiences.** The answers that fell into this subcategory described that feedback providers understood that mothers experience multiple emotions

and experiences simultaneously. This also applied to the different dimensions of experiences such as the physiological, psychological, social, and spiritual dimensions of transitioning to motherhood. For instance, one audience member stated: “They are experiencing a wide range of very intense emotions – whole spectrum of emotions. Not just the warm fuzzy “feel good” emotions but also confusion, chaos, frustration, anxiety, etc”. Another person wrote: “I learned that while there are obvious physical experiences for the mother, the holistic experiences including the physical, emotional, psychological and spiritual is so interconnected for each.”

- **Usefulness to others.** This category included responses that described ways how this research might be useful to first-time mothers, mothers-to be and/or art therapists or other clinicians who work with new mothers. Overall, the responses that applied to this category outlined the usefulness that this research might have to the populations mentioned above. Within this category, subcategories indicated that this research might be useful in the following ways. *First*, the research was seen as useful to first-time mothers and mothers to be in **preparation, expression, and validation of motherhood experiences**. For instance, one person wrote: “This research may help first-time mothers express the full range of emotions that they might not be able to access on their own”. The *second* subcategory applied to the need of **building connection and support among new mothers**: “It brought out the need for, or the goodness of, being together with other 1st time moms just to share about themselves”. The *third* subcategory in this group related to the usefulness that this research might have for **clinicians who work with new mothers**. As an example, the following answer illustrates this category: “The results crystallize several key aspects of the psychological transition to motherhood in both traditional verbal/written ways as well as through the moving and representational artwork. I can imagine clinicians working with new mothers/families having access to a book with these results as a way to help prepare for their work.”

- **Promoting empathy.** In this category, the individuals who provided feedback described how this research had impacted their attitude and empathy for first time mothers. For instance, one response was the following: “I would say this increased my empathy and understanding that first time mothers may experience and show very different emotions.”
 - **A deeper understanding of first time mothers experiences.** In this category, the individuals who provided feedback indicated that this research had deepened their understanding of the first time mothers’ experiences. The following excerpt exemplifies this category: “I have a more detailed understanding of various experiences and emotions a new mother encounters.”
 - **Understanding the mothers’ need for support.** The answers that fell under this category stated that the person providing feedback understood the new mothers’ need for support. For instance, one person who provided feedback wrote: “These moms need a sounding board for their experiences, validation, support – this exhibition clearly emphasizes this.”
 - **Transitioning to motherhood is a life changing experience.** This statements that fell under this category acknowledged that transitioning to motherhood is a life changing experience as in the following statement: “It reminds me of how all encompassing the experience is and the enormity of the perspective shift that takes place.”
- 2) **Aesthetic power.** This main category referred to the ability of this research to engage the audience by evoking and eliciting sensations, memories and personal associations. This main category included 6 subcategories:
- **Evocation of emotions.** This category applied when the individuals providing feedback expressed emotions that this feedback evoked in her or him. This subcategory yielded expressions of different emotions, for instance: “Love and happiness, anticipation and

excitement, wonder at the strength of mothers, fear of some aspects of first time motherhood”, “Wistfulness, empathy and pain, pleasure “and “I became tearful”.

- **Identification with one’s own life and relationships.** The answers in this category described how the person providing feedback related to his or her own life and relationships through this research. For instance, one person wrote: “It contextualized what friends with infants are going through. How my mother views our relationship.”
- **Going back in time, elicitation of memories.** This category applied if the individuals providing feedback reminisced on their own experience as a first time mother. The following excerpt illustrates this category: “And for me, reading the mothers expressions and the art work took **me** back in time to my own earliest months as a mother when my first child was born.”
- **Visceral reactions.** This category described visceral reactions experienced by the individuals providing feedback while being exposed to the research results as in: “the sense of blending, overlapping of a myriad of emotions and sensations. I really felt that I was witnessing/experiencing the intersubjective relationship between mother, child, and father”, and “Very powerful. The artwork made me feel, at once, light and heavy at the same time.”
- **Research was engaging.** This category applies when the individuals providing feedback pointed out how they were engaged in this research. As an example, the following statement illustrates this category: “Intense, emotional, raw, honest experiences of motherhood – fascinating stories”.
- **Research was authentic.** This statements under this category commented on the authenticity and genuineness of the research as exemplified by the following statement: “Universality, empathy, support, and raw, honest experiences.”

The main categories and subcategories that were outlined above are presented in more detail in the table below.

Table 17. *Audience Feedback*

Main category1: usefulness	Description	Examples
SUB1: Multiple simultaneous experiences	This subcategory applies when the person providing feedback describes that s/he understood that mothers go through multiple experiences at the same time and on multiple dimensions	Transitioning can be exhausting yet fulfilling. Becoming a mom is a beautiful experience
		They are experiencing a wide range of very intense emotions – whole spectrum of emotions. Not just the warm fuzzy “feel good” emotions but also confusion, chaos, frustration, anxiety, etc
		Women experience motherhood as all-encompassing at a psychological and physiological level.
		Complex emotional journey of mothers post partum
		I learned that while there are obvious physical experiences for the mother, the holistic experiences including the physical, emotional, psychological and spiritual is so interconnected for each.
		There are so many feelings experienced in the transition – often all at once, cascading, even jumbled together and that can be challenging for new mother to parse out.
		The depth of connection that a mother has for her child and that this connection is experienced in the physical body, it is a visceral connection that is experienced both psychically and physically.
		Continued, evolving understanding of the multiple facets of motherhood and mother child bonding. I think the visual images themselves so powerfully convey this overlaying complexity
SUB 2: Usefulness to others	This category applies to descriptions how this research might be useful to first-time mothers, mothers-to be and/or art therapists or other	I think that all first time mothers should have an opportunity to document their experiences this way as a form of self-reflection and therapy

Main category1: usefulness	Description	Examples
	clinicians who work with new mothers.	
	SUB 2A Preparation, expression, and validation of a full range of experiences	What mothers can expect / how they can express themselves in ways other than words
		This research may help first-time mothers express the full range of emotions that they might not be able to access on their own.
		Help new moms experience all these confusing emotions, realize others go through the same thing
		Yes, yes, yes! Please share this with first time moms and mothers to be. This is extremely educational and paints a realistic picture of the experience. It will help mothers prepare for the experience and validate current mothers
		I think it would better prepare mothers to be to not feel so surprised by unique reactions to common themes of nascent motherhood
	SUB 2B Connectedness and support among new mothers	Having a sense of connectedness and belonging could be important for first time mothers, mothers to be and clinicians to be aware of.
		I think accessing these results would be very useful in helping to set up supportive communities of interaction for first time mothers.
		It may give a sense of shared experience and support.
		Group meetings can be very supportive for first time mothers/mothers to be
		It brought out the need for, or the goodness of, being together with other 1 st time moms just to share about themselves
	SUB 2C Usefulness to clinicians	There are many hospitals and OB GYN s that offer, provide (or refer) new moms to support groups, and screen for PPD. This would be an excellent resource and provide ATRs with another avenue of interdisciplinary clinical work.
		The results crystallize several key aspects of the psychological transition to motherhood in both traditional verbal/written ways as well as through the moving and representational artwork. I can imagine clinicians working with new mothers/families having access to a book with these results as a way to help prepare for their work.
SUB 3:	This category applies	Empathy, compassion for the mothers and respect

Main category1: usefulness	Description	Examples
Promoting empathy	when the person providing feedback describes how this research has impacted his or her attitude and empathy for first time mothers.	for how important and emotionally unsettling (vulnerable) it can be to experience motherhood for the first time.
		I feel closer to them.
		More compassion and wonder.
		I used to think becoming a first time mother was easier.
		I would say this increased my empathy and understanding that first time mothers may experience and show very different emotions.
		Great empathy for the mothers
SUB 4: A deeper understanding of first time mothers experiences	This category applies when the person providing feedback indicates that this research has deepened his or her understanding of the first time mothers experiences.	I have a more detailed understanding of various experiences and emotions a new mother encounters.
		Being a man, I am grateful to learn about the details of how women, of the journey they may unexpectedly take after childbirth. One thing that sticks out is the vulnerability they may experience.
		Everyone's experience is different and mother-child relationship is complex
		Definitely provided some insight that everyone's experience is different
		Experiences are all very unique but with similar themes.
SUB 5: Understanding the mothers' need for support	This category applies when the person providing feedback states that he or she understands the new mothers' need for support.	These moms need a sounding board for their experiences, validation, support – this exhibition clearly emphasizes this.
		Support for the experience
		Will be more supportive on the mom, focus more on her
		We can't do it alone
		It is helpful to share in a non-judgmental environment
SUB 6:	This category applies	It reminds me of how all encompassing the

Main category1: usefulness	Description	Examples
Transitioning to motherhood is a life changing experience	when the person providing feedback acknowledges that transitioning to motherhood is a life changing experience.	experience is and the enormity of the perspective shift that takes place.
		Transition to motherhood is difficult and launches a mother into an existential crisis
		Identification of this experience as life changing/altering.

MAIN CATEGORY 2: Aesthetic power	Description	EXAMPLES
SUB1: Evocation of emotions	This category applies when the person providing feedback expresses emotions that this feedback evoked in her or him.	It was delightful to see varying emotional responses from the words and portraits displayed. Overall, for me it was overwhelming
		Wonder and awe.
		What it might be like to hold our baby for the first time – how exciting and overwhelming that will be.
		Love and happiness, anticipation and excitement, wonder at the strength of mothers, fear of some aspects of first time motherhood
		Wistfulness, empathy and pain, pleasure
		Happiness, baby fever, inspiration, love, peace, tranquility, bonding (is that a feeling)
		The powerful sense of intersubjectivity. You made this phenomenon very tangible.
		Hope, fear, happiness, appreciation for all mothers, whether biological, foster, adoptive etc. Love and patience for myself, my husband, our baby.
		Joy, excitement, fear, pain, tiredness, connection/relation
		I became tearful
		I was surprised about how honest the new mothers were in their willingness to describe their full range of emotions
		I was thrilled by the way mothers feel about their new born babies.
		I became tearful. Although not a mother, I began to reflect on the meaning and associations I have

MAIN CATEGORY 2: Aesthetic power	Description	EXAMPLES
		personally assigned to parenthood/mother and that was both cognitive and emotional
		Angst from the 1 st year, i.e. my baby's survival was totally dependent on me – which was unrealistic as my spouse and family are very supportive however so much emphasis is placed on the baby.
		Longing to be with my children
SUB2: Identification with one's own life and relationships	This category applies if the person providing feedback relates to his or her own life and relationships through this research	It contextualized what friends with infants are going through. How my mother views our relationship.
		I did experience many transference responses based on connecting to my own experiences as a first time parent and supporting/ considering what my wife went through. Truly felt a range of emotions including joy, anxiety, pain, excitement and more...
		I thought about my mother – how appreciative I am of her. I remember her telling my brother and I ...how she loves us. I remember feeling her sacrifices in recent ... when she talks about these early motherhood days. I thought about my wife and imagined her going through/ participating in something like this research after we have our first child.
		Longing to be a mother. Love and tenderness for my own mother and father.
		My deep sadness and sense of loss at not having had the opportunity to be a mother.
		Remembrance of different stages of relationship with my mom/parents and how she/we evolved over time.
		Love for humans and their love for tiny humans and protecting the most vulnerable.
		I was surprised how much I thought about my mother – definitely going to call her after this.
		The feeling of anxiety described reminded me of my sister's experience with her sons.
		My mom. I see my mom's experiences in this research.
		I had many thoughts and feelings connected to my own experiences as a parent that were evoked by or reflected in the art and text.

MAIN CATEGORY 2: Aesthetic power	Description	EXAMPLES
		Remembering how much new mothers really don't like to be told what to do.
		It connected me to spiritual relationship with God as my parent and thoughts of connectedness and care. I wasn't expecting to reflect on the work in that way but it was powerful for me.
Sub3: Going back in time, identification, elicitation of memories	This category applies if the person providing feedback reminiscences on her own experience as a first time mother	Recalling the challenges of breast feeding and the entire angst of the first year
		So many of the experiences and depictions resonated with my experiences. I became quite emotional and also nostalgic.
		Takes you back to your own experiences
		It's validating my own experience and triggered my own ongoing issues surrounding identity, balance, and goals
		Remembering fear and anxiety and desire to protect. Remembering frustration.
		And for me, reading the mothers expressions and the art work took me back in time to my own earliest months as a mother when my first child was born. Going back in time.
		I am a mother of two children, the work brought me back to my experiences as a young mother. So kind of a wistful nostalgia and reflections. Some sadness for past times and my evolving self and children.
		How I would also get a drift, nice "buzz" when nursing
		The text and pictures related to breastfeeding. Intensely longing for that time, especially breast feeding.
		With my second child I had to return to work after 2 months. My job was 2.5 hours away. I was pumping constantly I felt like a cow being pumped. I was angry at being away from my baby but coming home at night and feeding her and feeding during the night and in the morning was so worth it. the intense connection – feeling completely one. So addictive!
		Nursing evoked many of my own experiences with it. this was a very positive experience for me and my children when they were infants, so I resonated with a lot of the experiences that the participants

MAIN CATEGORY 2: Aesthetic power	Description	EXAMPLES
		shared.
		I was really reflecting on my personal experiences with the birth of my first born.
		Lovely memories

SUB 4: Visceral reactions	This category applies when the person providing feedback describes visceral reactions that she or he experienced while being exposed to the research results	The sense of blending, overlapping of a myriad of emotions and sensations. I really felt that I was witnessing/experiencing the intersubjective relationship between mother, child, and father.
		Very powerful. The artwork made me feel, at once, light and heavy at the same time.
		The footsteps and colors used for this portrait was sensational. I felt like I moved with the steps as they moved upwards.
SUB5: Research was engaging	This category applies when the person providing feedback points out how he or she was engaged in this research	Intense, emotional, raw, honest experiences of motherhood – fascinating stories
		I experienced research in a way that I never imagined. I got caught up in reading at times that I neglected to look up at the pictures. I'm glad that they play provided an opportunity to further reflect on the portraits
SUB6: Research was authentic	This category applies when the person providing feedback comments on the authenticity and genuineness of the research	Moving. Important. Crystallizing
		Powerful, thought provoking, deeply personal yet also universal in many ways.
		Universality, empathy, support, and raw, honest experiences
		Unsure at first. Interesting, provocative, moving
		Evocative, empowering, emotional, visceral
		Honesty, raw emotion, hope, support, community, human making meaning of experiences

Part II: Arts-Based Results

Portrait Syntheses

Participant 1: Margaret.



April 3, 2015

Four weeks post partum. This is the first time since my daughter Iris was born that I finally get to sit down and write in my journal. As a writer, I miss this daily habit, something that I enjoyed doing in my own space. Writing used to be a part of who I was. **I've been a very independent sort of self sufficient person. I love exercising, going places. I've gone on road trips by myself, I've moved to places by myself. I was just like a person in the world, taking action.**



But now, I can't do this anymore. I am in the service of my baby and my family. I feel very stationary. Recovery from the delivery is taking its time, and I am exhausted from the lack of sleep. Did I brush my hair today? I don't remember, I don't even know what day of the week it is. I am stuck in this house that is a mess. Clutter everywhere: books and baby items, boxes, papers, dishes... On top of that, **the baby pooping and producing all these diapers.** My head is also full of clutter: I am trying organize my thoughts to make sense of what is happening within me and around me...
Oh, baby crying, got to go!!!



April 6, 2015

I am looking at a photo of Iris and me that was taken a few days after she was born, it's one of the few photos that I have of both of us together.

It brings back memories of when she was born, and the first time we met. She was brought to me and was put next to my cheek.



That feeling of the first time our skin made contact was intoxicating, I got such a buzz from having her on me. It felt as though a warm pink flush of content came over me, covering my face, the inside of my eyes. I still feel this way every time I touch her.



This is despite that fact that recovering from c-section has been difficult, and breastfeeding is pleasurable but also makes me sore because the baby nurses constantly. Even though Iris is a tiny newborn, she feels huge and heavy in my arms, and I am drained and exhausted. But I will never forget that first time that we touched. Since that first time I felt that I needed to be next to the baby, I love touching her and giving her kisses. We are very snuggly at this stage, and I feel as though we were overlapping. I feel plugged into something that I wasn't plugged in before.



It's weird how in a way she is still a part of me, as though we were connected as one organism.



Speaking of which, it's suprising to me me how much a newborn seems like a little animal. She goes by instinct to get what she needs in order to thrive: searches for the nipple, cries...

She reminds me of a little pig or a little bug, a little critter with feelers, something soft, like a little moth.



So you might think she is dependent and helpless but she is also resilient and powerful, like an ocean: she can be very tranquil but then she can become like crashing rolling waves that are pretty out of control. And she encroaches on me this kind of wild energy, like an ocean wave rolling over my head.



April 7th.
Last night, after writing about my daughter being like a little critter or an ocean, I had a dream that she was like the entire ecosystem.



I dreamed of this rich and complicated ecosystem with all kinds of birds and animals, and plants. I was existing within her and I had only one sole function: to feed and to nurture. The whole ecosystem depended on me. It felt hard to be supporting all of this...

Got to go, it's time to bathe the baby and get her ready for bed.

April 8th

Another quiet moment to write while Mark is putting the baby to sleep. The arrival of the baby has been a huge transition for him, too, and he is trying to adapt...

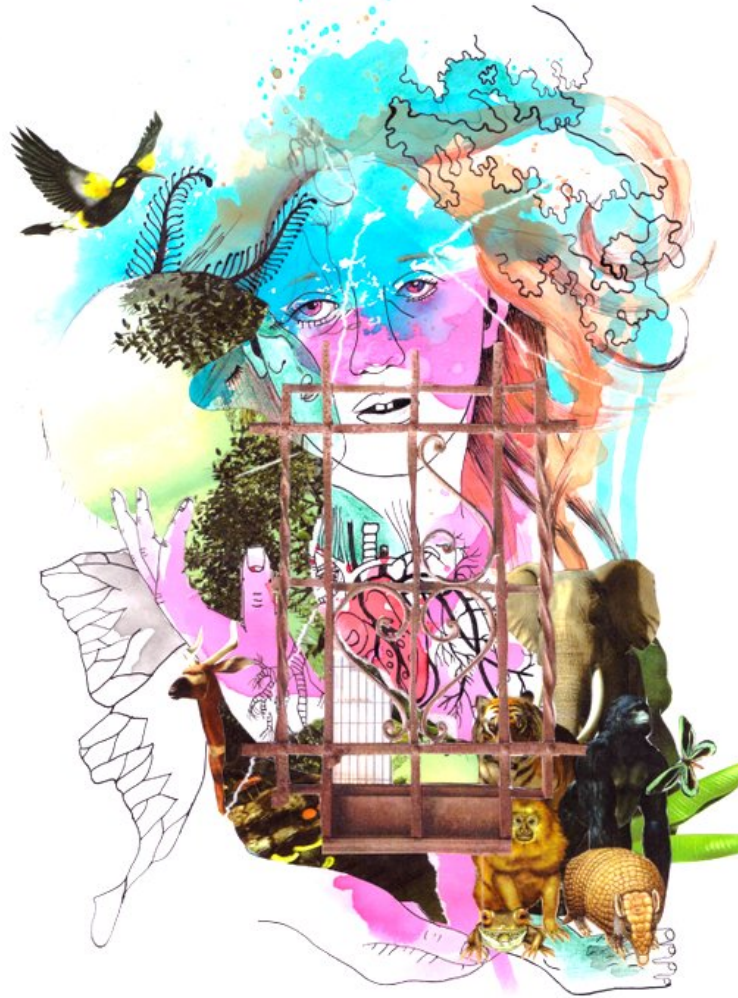
I am starting to feel restless. I haven't left the house in weeks, I feel a like a **prisoner** in my home, in my body. **I feel compressed as an individual**. Again, I am aware that in a way, I am no longer this self sufficient individual, free to do whatever I want. My body and mind are tied to another human being. It's a big change and I don't fully get a sense yet what is happening. I wonder: Who am I now? What is my role? How did I get here?



As I am trying to figure it all out, I feel in pieces: I am leaving my old self behind...



... and I am just trying to put together a sense of self again.



It's a new experience for me and although I feel a little bit like a prisoner, it's also a beautiful sensation. I am in this beautiful underwater prison. It's like being in a totally new place that's completely under water, and learning how to breathe again, learning how my body works here. I am learning to adjust to this new reality.

Participant 2: Gabriela.

August 2nd

Next month is Alison's first birthday. I can't believe it's been a year already! She's grown to be a **happy, chubby**, thriving baby. We are planning to celebrate at home with family and a few of her little friends. As we are getting closer to the date, I want our home to be neat and clean for the party so I'm clearing the house of newborn onesies and toys that she has outgrown. The bassinet has to go, too! I've been a bit sentimental about but rationally I understand that it's just taking up too much space and she won't fit in it any more. Wow, it feels like yesterday that she was sleeping in it, and now she's almost a year old. The first year is a milestone, and **it all happens so fast from the time you deliver to now**. I am glad that I can take this time to look back at my experience of becoming a mom.



Today at work, looking at some cell samples through the microscope, I realized that in the beginning Alison, too, was just a **cluster of cells**. How incredible is that!



It's really **fascinating** how tiny cells and biological processes can produce a living, breathing tangible human being ...



I remember the day she was born. When I held her for the first time, I held her gently like **an egg**, because I was **afraid she might just break**.



But then again, she **was fragile but not that fragile**. **Babies are like animals**, they are very resilient, **they are just trying to survive**. And I am responsible for her survival, for her to thrive.



And she thrived on being breastfed. Ever since she was a newborn, Alison had a great appetite, I always breast fed her and am still breast feeding.



In the beginning, my whole life revolved around breastfeeding. My body became a **feeding machine**, I can almost envision the wheels and bolts and little mechanical parts to make milk every couple of hours. **I was feeding and feeding and feeding...**



I usually cope pretty well with adversity but this was one of the hardest times in my life. I felt drained, truly. **Words cannot even begin to describe how tired I felt.**



Plus, I had no life any more: I could not go out, and do what I wanted to do any more. **I think that emotionally and physically probably breast feeding is one of the hardest things I've ever done.** This time for me was all **red and black.**



But then again, **at some point you don't complain about it either because ... it's just a part of it.**

I am a pretty rational person who keeps emotions at bay and does not fantasize too much but...



...I remember that sometimes after another sleepless night I had **this fantasy of opening the door and going back to the life that I had: I imagined I could do ANYTHING: go to the gym, go out, go for a run...but I knew that it was not possible. Now that she is sleeping better, things are becoming easier and easier but the beginning was hard.**



I really don't know how I would have gotten through this without my husband. I am so grateful to Eric who was so supportive and did everything he could to help. Just his arm around me at that time made feel supported and understood...



Now that Alison is almost a year old, I wonder if it's time to start weaning her. Breastfeeding has been so central in our relationship both physiologically and emotionally. At first, it definitely was a one-way relationship. I think I was **just a source of food** for her. Her brain was just wired for survival and the brain cells and instinctual processes were telling her what to do to get fed and get her needs met.

I'm holding this little baby that is just like a **little animal trying to survive** and I feel that I am exhausted but I have the **obligation** to feed her. **You give and you give and you don't know if you get anything back ... but at some point you think it's worth it, it's working. Im just feeding and feeding but she's thriving**



As she grows older, our relationship is evolving and getting more complex. Because **she is developing more into someone who recognizes me as a person more than a source of food**, I make a connection to her heart. **She has a brain, hopefully she'll develop more of an attachment to the person more than the physiological need. Which is what matters. At the end.**



As she is developing and becoming more of a person of her own, I feel that I, too, am developing and growing as a mother and a person. I am confident as a mother, I know what I want and how to get things done. Happiness is the key word to sum up my experience of becoming a mom. I am happy with my relationship to Alison, and I think that I have coped well with adversity. I am so pleased that she is a thriving, happy baby.

As I am reading what I just wrote, I realize that the first weeks and months of transitioning to motherhood feel more and more distant, almost like looking at someone else's experience. With Alison's first birthday, we are celebrating the closing of a very important chapter in our lives. Now, it's time to move on: **we're entering a different phase.**

Participant 3: Liz.**March 10th,**

As browsed through my photos the other day, I realized we don't have good photos of Blue. It's been 3 months since his birth! I'd like to update our home and replace old photos with new family photos. There is still a portrait of me, and some photos of my husband and me together, hanging in the living room. So we had a photo shoot a couple of days ago, and the photographer sent the photos today. So much fun!



As I look at the photos of myself before and after becoming a mom, I notice a big change although I can't figure out exactly how it is, I can't articulate what it is that has changed. The same features, the blue eyes, but then again... it feels like there was me before and me after and they're almost unrelated to each other. They're not unrelated, of course, me after was just of course me before but it feels entirely different.



I think that my perspective and direction to life and relationships have changed. Relationships, work, friendships, EVERYTHING! I used to be very independent and just live my life, and now I am completely , related to the baby. I think that my gaze is softer, more content, and it is now directed toward my son and my



I decided to take down the photo of myself and replace it with the new family photo. As I said, I am now so attached to baby. I love this photo where Mike, I and Blue look so happy together. Mike plays such an important role in our family, it's really wonderful! When we were planning the photo shoot, the photographer asked if I wanted my husband to be present as well. What a silly question! Of course! We've both been splitting caregiving. The photo shows that we are so happy as a family, and supportive of each other in our parenting roles.



But the protagonist is Blue, of course. We are both holding him, he clearly is just a held baby. We love him so much and very obviously he is attaching to us as well. He is so central in our lives.

March 11th

Sophie called today to ask if I'd like to meet her tomorrow for a coffee. She is due in 3 weeks and is getting nervous about the upcoming delivery and attaching to the baby. She had read in a parenting magazine **that for the first couple of months babies just take, they don't give anything back**. Her voice sounded anxious: "So, am I just supposed to **lug through the first months and only THEN I get to experience the actual relationship with the baby?**". I told her that for me, **it is TOTALLY NOT TRUE! Like totally! He loves us SOOO much and gives lots back**. I experience the contact with Blue emotionally and physically, and this relationship is so reciprocal, so satisfying, it's **magical**.



March 12th

It's Blue's afternoon nap time, he just fell asleep after I nursed him. Breastfeeding him **is just wonderful. His warm little body, and he just nestles into me. I usually breast feed him in my lap and he just curls into me and he just closes his eyes and falls asleep and takes a little nap. Yeah, that's pretty glorious!**



But it has not always been that great...

Met with Sophie for a coffee today, she was really nervous about the first postpartum weeks and breast feeding. I told her that figuring out how to breastfeed was **murder** for me. With tears in my eyes, I struggled with figuring out how to breastfeed. It was so frustrating!

I recommended that she should talk to a **lactation consultant** who can give great advice and help with breastfeeding because it's really worth it. After the initial difficulties, breastfeeding now is **the best thing in the world**. Breastfeeding is such a huge part in our relationship. So much so that I don't dwell too much on these difficult experiences, I'm even starting to forget them. But my body still remembers.



There's this intensity in the bodily contact with Blue. I always want to hold him, touch him, hold his little hand – it's totally addictive! The top of his head is so smooth and has a little bit of hair and it's so soft and I just want to rub my face all over it. When I pick him up and hold him, he feels SOOOO good! Just the weight of his body, and the size of it and how warm it is and how he's little, there's something about holding him just like this that s just SOOOO good.



I would say it's intoxicating, distinctly chemical, like morphine that moves up my spine ,...



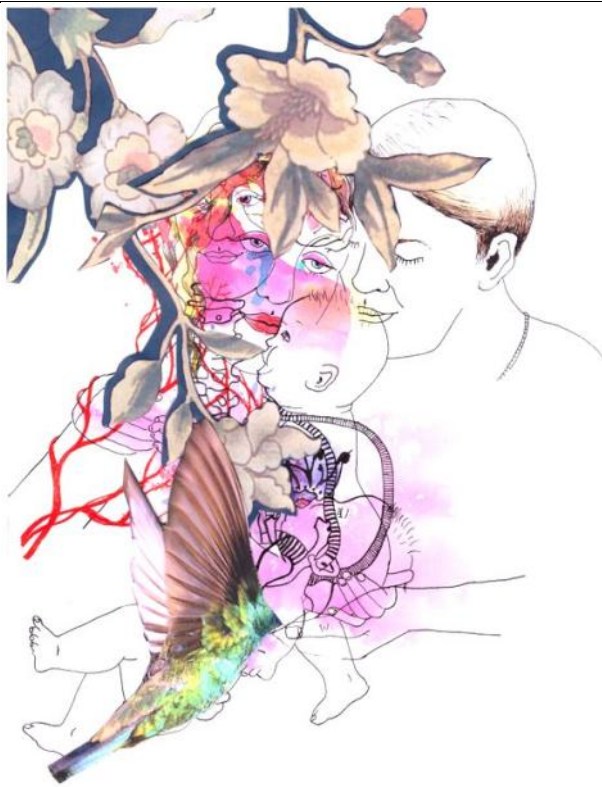
... and through my blood stream,...



... and finally it hits my brain. I's like ooohhh! It feels soooo good!

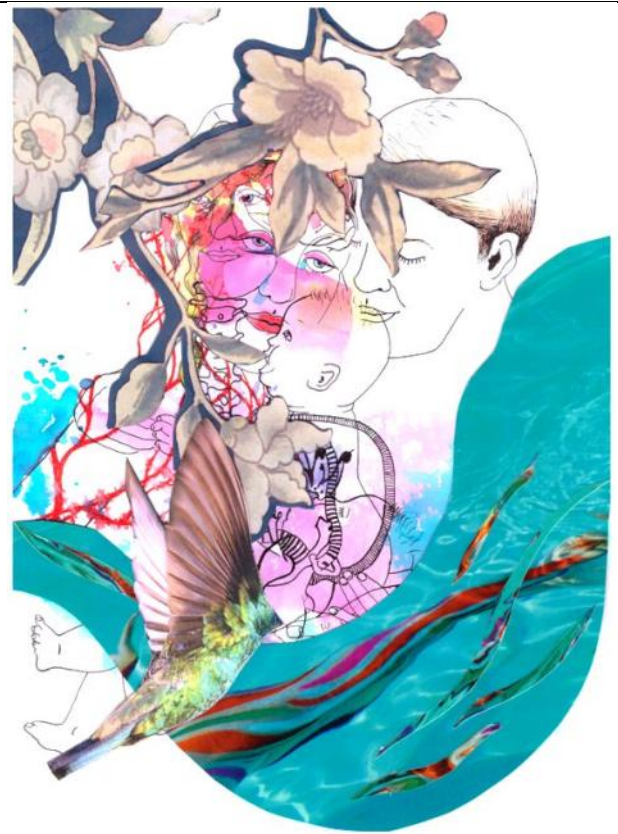


I am very much attached to him, in fact it feels like one of my internal organs escaped and is wandering around.



March 18th,

I love working on creative projects: drawing, painting, crafts. My mom is visiting with us this month so that I can take some time for my hobby. While she took Blue for a walk today, I worked on a watercolor painting of a hummingbird and a flower. I realize that all creative my projects these days somehow reflect my relationship with Blue. This painting features a hummingbird and a flower that provide what they need for each other, they are just perfect for each other. Yes, Blue, you are





After I finished the watercolor painting, I came up with another creative project. I want to make something for Blue, a knit or woven wrap that I can drape him in. I will make it blue like his name, and weave into it **everything beautiful in the entire world**. This gift will stand for our special relationship: right now, my life is all about him.

Participant 4: Taylor.

April 10th,
Last night I dreamed that I was still pregnant
with Carter. The dream began with a single
waterdrop falling inside of me.



The waterdrop **began in one source and kind of evolved, grew and grew... just emanated from within** and became two colorful streams that started emanating and radiating ...

 <p>until they eventually formed one color that became a fetus.</p>	 <p>And then, the fetus became a baby. I was holding the baby. And the emanating radiating colors were still there and kept growing.</p>
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The whole of notion of motherhood has kind of been kind of unreal... I still don't know what to make of this dream. Carter was born 8 weeks ago but I feel like the connection between us was formed in pregnancy. I was holding him and caring about him even before he was born, and now this connection continues to emanate, to radiate, to grow.

April 12 th

It's been 8 weeks since Carter was born and I'm adjusting to motherhood. I think I was well prepared for this: I know how to seek and receive help, and I've been quite positive in coping with the stressors of adjustment. I realize that motherhood hasn't changed me much as a person, I think of myself as a laid-back, relaxed person. And every day is different, so...I like to take it one day at a time.

Talked to my friend Carol on the phone today, her baby is the same age as Carter. She sounded exhausted and said that she was a mess and was wondering how I managed to adjust. I told her that I've become really good at multitasking: I do things as efficiently as possible.

I know that I'm only 8 weeks post partum and of course I'm exhausted, too, but it's not an excuse to let myself go. I like to look neat and organized, and keep the house tidy. Keeping things organized and contained is the key to successful coping! Like this morning when I wanted to straighten up the kitchen, and also shower and get myself ready, Carter started fussing. In order to get things done sometimes you need to tell the baby: "I need to take care of me so I can take care of you".

Carol and I agreed that what is most difficult to explain to people is that as a mom you also need some time for yourself. I am fortunate I have a supportive family and a husband who help out

with childcare. I advised Carol to also use all the support she can get. I feel that I definitely need a bit of a breather at the end of the day when my husband comes home.

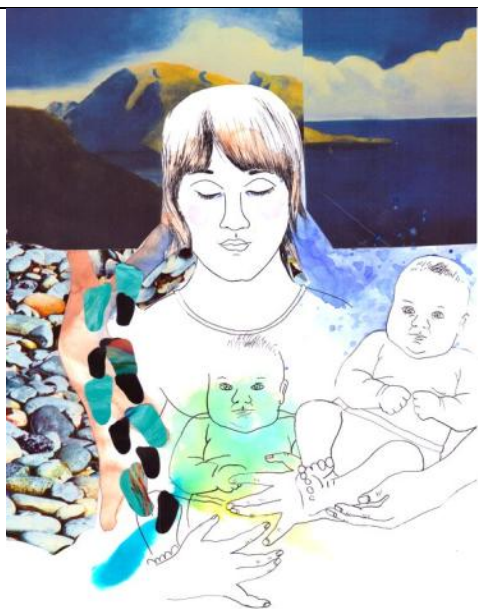


Last night when Jerry came home from work, I just handed Carter to him and he took over so that I could just do what I needed to do.



April 13th

I had another dream that was almost like a continuation to the one that I had the other night. How curious! Again, I dreamed of the emanating colors but now they had become a



and there were two pairs of footprints on the path that path initially walked side by side...



...and eventually began to diverge. Eventually, Carter will find his own path, and I will stay on mine.



It's been only 8 weeks but I already have visions of him getting older... and how our relationship has evolved and a how it is going to evolve even more.

I want to let him explore, not to be too controlling, and I imagine that even though eventually he will find his own path, the connection that began when I was pregnant with him will continue until the rest of our lives.

Participant 5: Alex.

May 3rd,
Driving home from work today, I envisioned Ethan's
bright, cheerful face.



I know that when he sees me, his face lights up and I just
feel his joy and then my joy as a mom. I'm so glad that I
can leave work early on Wednesdays and Fridays to
spend more time with Ethan, I like that work-family
balance.



Every time I come home, I immediately put him to the breast and I experience this physical connection with him that brings up sweet and gentle sensations in me that are so pleasurable. This connection **also trumps all pain**, physical and emotional. He is 8 months old and breastfeeding is **a significant component** of our relationship. It is **one of the primary connections that he and I have that no one else has with him**. Bodily closeness, breastfeeding and mutual gaze all create a profound trust that moves me to the core.

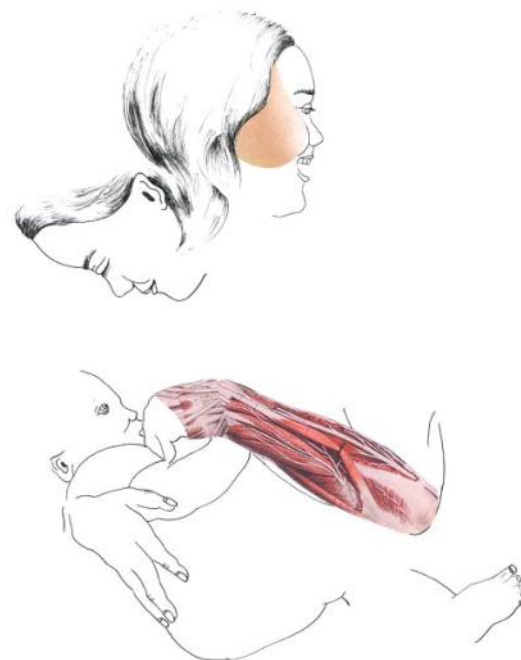


I remember from early on, when he was looking into my eyes, it felt like he was looking into my soul and that he was going to know me differently than anyone ever will. He came from inside me, and we are so deeply connected that he KNOWS a part of me or the depth of me. And when I look at him, I see myself in him, he reflects back to me **like a mirror**. I realize that **he smiles because I smile, and he's serious because I'm serious, so he serves as a check and balance for me.**

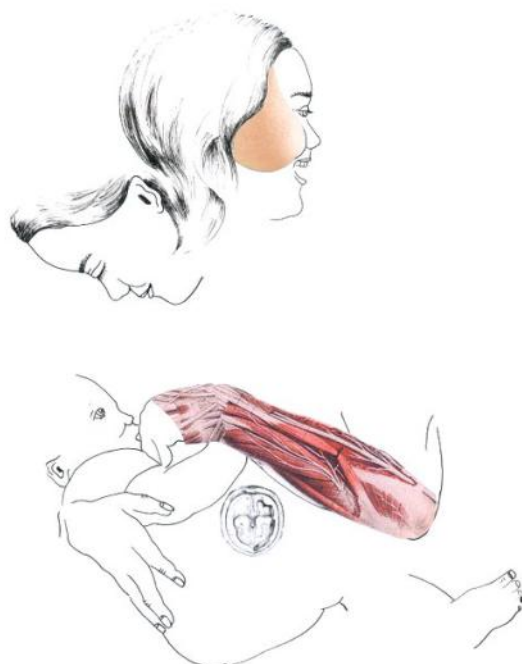


May 6th

As a dancer, I have always been confident, present and in tune with my body, as well as my emotions. I am not afraid to show my happiness, or my sadness... Becoming a mother has increased my presence with myself even more. This presence, however, also brings out my vulnerable side...

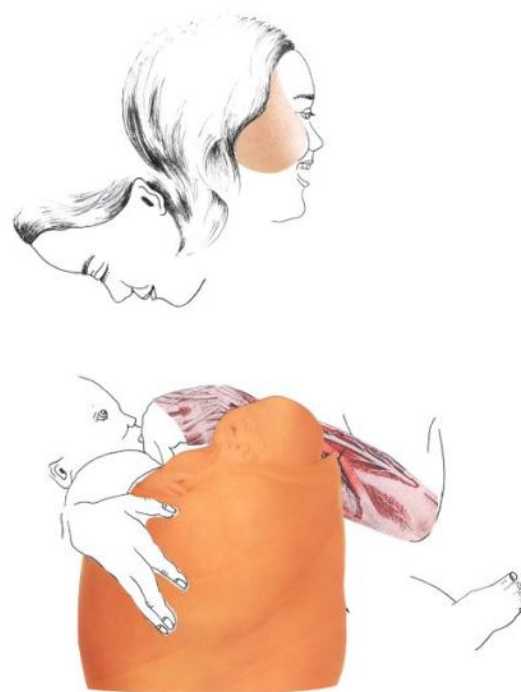


I generally tolerate stress pretty well, I have come to a point of mastering things. I have no problem handling feedback professionally but there's something way more personal when people comment about you and your child. I am so used to getting reassuring feedback and the positive ones fuel me but today, for the first time, I faced criticism when another mom questioned the way I allowed my son to play. On the surface I took it with calm: sure, that's something that I need to consider but inside it was unlike anything that I've experienced before. It cut really deep, and it felt like peeling back a layer of skin, revealing my



May 7th

While rehearsing in the dance studio this morning, I had this visceral, bodily experience. I was practicing this powerful movement, bearing down all my weight to express connectedness to the earth, to myself. And then, aaahh! a painful knot in my stomach followed by a vision of myself being a nutshell and Ethan being a nut inside of me. The nut was very **embryotic** and he felt so protected inside.



Suddenly, I experienced a strong desire to have him **inside of me again**.



And then, a flashback to a birth memory: a flood! A flood of pain, a flood of emotions, a flood of so many new experiences at once. A flood of blood and tissue that came out of me but that manifested in this whole new being. I continued my dance, moving swiftly from side to side, like a thrust of movement that was initially overwhelming and aggressive but dissipated over time.



As I led my body guide my movements, I imagined going from the shore and floating in the ocean...



....like a nutshell. Finally, I relaxed my body, I let go of that body experience and accepted that he's forever outside now. This was a cathartic experience that fueled me in a positive way. We survived the flood, we were through this together.



As I let my body guide my movements, I imagined going from the shore and floating in the ocean. Finally, I relaxed my body, I let go of that body experience and accepted that he's forever outside now. This was a cathartic experience that fueled me in a positive way. We survived the flood, we were through this together. There's this undeniable connection between the two of us. We are one; he is such a part of me. My cells forever embedded in him, and his presence forever embedded in me.

I see myself, I see the world through different eyes. In a way, his eyes have become my eyes. My eyes are so much more fresh to what he might be seeing. I'm so much more present because I know that he might be taking the world in for the first time. I know that when he wakes up tomorrow morning and looks into my eyes, it feels as though he were looking into my soul, and he will know me differently than anyone ever will.

Final Synthesis

BEYOND_WORDS: MAKING MEANING OF TRANSITIONING TO MOTHERHOOD
USING MONTAGE PORTRAITURE

A play in four acts

By

Victoria Scotti

Cast of CharactersSitters:

Margaret	A woman in her 30s
Gabriela	A woman in her 30s
Liz	A woman in her 30s
Taylor	A woman in her 30s
Alex	A woman in her 30s

Portraitist:

Victoria	A woman in her 30s
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Scene

The artist's studio

Time

The present

ACT I
Scene 1

SETTING: We are at an artist's studio. Warm, reduced lighting. A room with 5 chairs for the sitters. A chair for the portraitist. A table to work on for the portraitist. Art materials: pens, ink, pencils, brushes, water color, and collage materials on the artist's desk. A large screen behind the actresses where the artwork is being projected.

AT RISE The portraitist is moving around the studio, organizing the art materials.

VICTORIA

(organizing the studio, moving the materials around, looking at the watch. Pensive).
Ok, almost ready... this is the final synthesis of my arts-based dissertation research. 5 first-time mothers have agreed to come and sit for a group portrait. I have already met each of them individually. They have used self portraiture and oral reflections to express their *beyond_words* experiences about transitioning to motherhood. Based on these data, I created individual portraits of each of them that they saw and provided feedback on. Some of the mothers were really curious to meet the other participants, and so I think that this group portrait is a great opportunity for them to come together and for me to synthesize the results from this study.

(knock on the door).

VICTORIA

Come in!

(Enter MARGARET, LIZ, GABRIELA, TAYLOR, ALEX)

VICTORIA

Hi! Great to see you, thanks for coming. Take a seat, please. How are you?

(all sit down)

MARGARET, LIZ, GABRIELA, ALEX, AND TAYLOR
Great! Excited! I'm doing well. Good to see you again.

VICTORIA
I'm so glad that you all got to come and meet each other.

MARGARET, LIZ, GABRIELA, ALEX, AND TAYLOR
(Animated) Yeah! Me, too! This is exciting.

VICTORIA
Thank you so much for agreeing to sit for the group portrait. This is the first time that you all get to meet each other and I'm very glad to see you all. Let me explain the purpose of this group portrait.

As you know, I am an art therapist, artist and arts-based researcher, and I am using my skills to study first time mothers' experiences of becoming mothers. I am particularly interested in what I call *beyond_words* experiences. I would like to know what sensations you have when you touch or hold your baby, what you think about or the emotions you feel in your transition to motherhood. You may even have dreams, memories, and fantasies about adjusting to motherhood. I call these sensations and emotions *beyond_words*, and I know that they are difficult to put into words.

Sometimes similes and metaphors can help articulate what's *beyond_words*. Therefore, it would be great if while I'm working on the group portrait, you could informally talk amongst yourselves and use metaphors to describe your experiences, and I will try to capture what emerges.

Since you all have babies to attend to, I would like to ask you to sit for three short sessions instead of one long one, and you can provide feedback at the end. I wonder if you have any questions:

LIZ
I have a question. So, can you explain, is what we are going to be doing now art therapy?

VICTORIA
That's a great question! It may look like art therapy because you will be expressing and sharing your experiences,

however it is different from art therapy in that today you will not be creating art, and what you are sharing today is going to be part of the final synthesis of the arts-based research study. Last time we met you created artwork as data generation but today, I will be combining my skills of an artist and arts-based researcher to use what you all contribute to this group to create the final synthesis of results which is going to be a group portrait.

LIZ

Oh, ok, thanks, that clarifies my question!

ALEX

I wonder, if your purpose is to represent first time-mothers experience, and this is a research context, what happens if we disagree on something?

VICTORIA

Thanks for asking this question. This is an arts-based research study and so the purpose of this is not to generalize the results but communicate the multiplicity of experience to the audience. Based on what I've gathered in our previous meetings, I know that there are topics that you all have in common but it doesn't really matter if you agree with each other. Each of you has rich and unique experiences and I will try to represent them.

GABRIELA

What about confidentiality? I want to share my portrait and my story but I don't want people to recognize me.

VICTORIA

That's totally understandable! You will not be recognized because I will use my skills as an artist to change your facial features, hair, eyes, etc. I will create a character that represents your experience but does not look like you.

MARGARET

(Hesitant) I wonder if we could get started...?

VICTORIA

(laughing) Yes, of course. If there are no more questions for now, we can get started and please feel free to ask any questions during our work together. I really see this group portrait as a co-creation. I will be working on the final portrait but the material for the portrait emerges between all of us during our time together. I wonder if you could

start by briefly introducing yourselves to each other. Perhaps you could say your name, your baby's name and age, perhaps your own age...

LIZ

(Energetic) Ok, I can start. I am Liz, I'm 33 years old, and my baby boy Blue is 4 months old. Thanks for inviting me to sit for this portrait. This is just an **amazing** idea! [insert Liz]



TAYLOR

(Calm, contained) Hi! My name is Taylor, I am 33 years old, and I have a baby boy Carter who is 8 weeks old. **I have been adjusting to the daily challenges of motherhood.** This opportunity to come together with other moms for a group portrait is **quite fascinating and I'm interested in participating.**



ALEX

I'm Alex, I'm 35 years old, and my baby Ethan is 8 months old. I'm so curious about this project. **I've been really wanting to give attention to processing how mothering has**

affected me so far, but I haven't found the time or an appropriate channel for it.



MARGARET

Hi! I'm Margaret, 31 years old, and I had baby Iris 4 weeks ago, so I'm really new to motherhood (smiling). A colleague of mine recommended that I should meet other new moms so I'm glad to meet you all.



GABRIELA

Hi! I'm Gabriela, I'm 38 years old and my daughter Alison is 11 months old. It's great to meet all of you, and I look forward to our time together.



VICTORIA

Thank you all! To get started, please make yourselves comfortable, I am hoping to make it a really informal and friendly meeting. I will be sketching the portrait while you can chat, and let's see what we'll come up with. I wonder if we could get started by exploring the sensory-embodied experiences that you have experienced in transitioning to motherhood.

Scene 2: Holding



LIZ

(Softly, smiling) Yes, I definitely have these distinct experiences when I hold my baby. I always want to hold him, touch him, hold his little hand - it's totally addictive! The top of his head is so smooth and has a little bit of hair and it's so soft and I just want to rub my face all over it. When I pick him up and hold him, he feels SOOOO good! Just the weight of his body, and the size of it and

how warm it is and how he's little, there's something about holding him just like this that s just SOOOO good.

MARGARET

I love holding Iris, putting my face next to hers...it's completely intoxicating! I get such a buzz from having her on me. What this brings up is warmth, the color pink, I would like to paint my face , the insides of my eyes, pink.

LIZ

(Animated) Totally! It feels very distinctly chemical, I would also say it's intoxicating [insert her holding baby, pink]

TAYLOR

Holding Carter makes me feel overcome with love... even when I am stressed out or tired, it just melts a little bit. Because it can be really wearisome...

ALEX

I hear you. Sometimes I also have stressful days at work but when I get home and pick him up, I just want to cuddle him, and ...and it's curious that the pain in my body does not prevent me from being any closer to him. It's fascinating how that closeness trumps all pain. Being close to him brings up sweet, gentle sensations.

GABRIELA

Yes, it's so nice to hold her! I remember when she was a newborn, she was so tiny and fragile, like an egg that I was afraid to break.

Scene 3: Protection

ALEX

Yes, I just have a desire to protect him.

MARGARET

Me too! I keep her close to my body, even at night, and I feel that she's so safe, so protected next to me.

Scene 4 : Breastfeeding



MARGARET

Speaking of which (sighs), I love being close to her but this bodily connection can also be challenging. My biggest challenge right now is breastfeeding. She nurses a lot, and **it makes me pretty sore**. You know, it's quite **painful**. I want to breastfeed and I am trying to figure it out. Any suggestions?

LIZ

(Animated) Oh my god! You are not the only one. Figuring out how to breastfeed was **MURDER** for me. With tears in my eyes, I struggled with figuring out how to breastfeed. It was SOOO frustrating!

You should talk to a **lactation consultant** who can give great advice and help with breastfeeding because it's really worth it. After the initial difficulties, breastfeeding now is **the best thing in the world**. Like I said before, it's intoxicating, it's distinctly **chemical**, like **morphine that moves up my spine ,... .. and through my blood stream,... .. and finally it hits my brain. I's like ooohhh! It feels soooo good!** Now I don't dwell too much on these initial difficult experiences, I'm even starting to forget them. But my body still remembers, I guess...

GABRIELA

I went through the same thing. In the beginning, my whole life revolved around breastfeeding. My body became **a feeding machine**, I can almost envision the wheels and bolts and little mechanical parts to make milk every couple of hours. **I was feeding and feeding and feeding...** and I was exhausted but she thrived on being breastfed. Ever since she was a newborn, Alison had a great appetite, I always breast fed her and am still breast feeding.

LIZ

Yes, they really thrive on breastfeeding, and eventually once you figure it out, you'll see how wonderful it is. His warm little body, and he just nestles into me. I usually breast feed him in my lap and he just curls into me and he just closes his eyes and falls asleep and takes a little nap. Yeah, that's pretty glorious! But as I said, the beginning was hard.

GABRIELA

I agree with Liz, it definitely gets better with time. But for me, breastfeeding was one of the most difficult experiences. EVER. Now that I look back to the first months of breastfeeding, this time is all red and black for me. It's emotionally difficult and physically painful. But as I said, in the end it's worth it.

ALEX

(Looking over at the portrait). If I may interrupt, on a different note, Victoria, I was really struck by the portrait that you created of me. I just can't help sharing with you that I feel overwhelmed by it in a way. I am surprised that I had such a strong reaction to this but I feel that it is somehow preventing me from focusing and sharing my story further.

VICTORIA

I'd love to hear your thoughts. Go on!

ALEX

I simply can't wait to digest all of this but... there's something in the look and in the eyes. They look sad, distraught and distanced . I haven't even shared my story but...let's just say that of course, this experience of becoming a mother is really profound, full of all kinds of emotions: deep, powerful... But I have definitely been present, not absent as this portrait makes me feel.

VICTORIA

Hmhm... thanks for sharing this, Alex! I see this portrait as co-creation between you and me. I believe that thanks to your feedback and suggestion this really comes to life, and I'm very open, in fact, inspired, to revising the portrait. Is there anything in particular that you would like to change?

ALEX

I would change my eyes or mouth expression to reflect a bit more joy...

VICTORIA

Thanks for these suggestions. I will be happy to revise the portrait, and you can tell me what you think. Ok?

ALEX

Wow, thank you! I had no idea you'd be willing to revise...

VICTORIA

Of course! I will keep working on the updated version and you'll let me know later what you think. Meanwhile, let's continue... we were talking about holding the baby, breast feeding...

Scene 4: Connected as one organism



MARGARET

Yes, and related to that...The physical closeness also makes me feel connected to her, like one **organism**.

LIZ

Sometimes I also feel that **he's just one of my organs that has escaped and is wandering around.**

ALEX

And yes, **We are one; he is such a part of me. My cells forever embedded in him, and his presence forever embedded in me.**

MARGARET

Speaking of which, **it's surprising to me me how much a newborn seems like a little animal.** She goes by instinct to

get what she needs in order to thrive: searches for the nipple, cries...

She reminds me of a little pig or a little bug, a little critter with feelers, something soft, like a little moth.

GABRIELA

(Laughing) Yes, they are just little animals trying to survive...

LIZ

Blue just figured out how to grab onto things and .. he reminds me of a little monkey. So cute! We are all monkeys, it's wonderful.

Scene 5: Pregnancy

TAYLOR

I feel that this connection, this oneness began in pregnancy, so it's something really strong, this bodily connection. Like Alex said, we are one, my cells are embedded in him.

GABRIELA

Yes, that was beautifully said. As a scientist, I am just really fascinated how a baby develops from a cluster of cells. That's what Alison was in the beginning..

TAYLOR

It's weird, I've had sensations of still being pregnant with him...which brings up a dream related to pregnancy that I had recently, but I can't recall it now. Maybe it will come to me later...

ALEX

I've also had sensations related to pregnancy, the desire to be one with the baby. While practicing in the yoga studio this morning, I had this visceral, bodily experience. I was practicing a powerful movement, bearing down all my weight to express connectedness to the earth, to myself. And then, aaahh! a painful knot in my stomach followed by a vision of myself being a nutshell and Ethan being a nut inside of me. The nut was very embryotic and he felt so protected inside. Suddenly, I experienced a strong desire to have him inside of me again. And I envisioned us floating in the ocean...



Scene 6: The baby is an ocean

MARGARET

There's something about the ocean, water... The other day I envisioned that Iris was **like an ocean: she can be very tranquil but then she can become like crashing rolling waves that are pretty out of control.**

And she encroaches on me this kind of wild energy, like an ocean wave rolling over my head.

(Pensive) It's like being in **a totally new place that's completely under water, and learning how to breathe again, learning how my body works here.** I am learning to adjust to this new reality...

VICTORIA

Wow, thank you all so much for this inspiring time together. I feel privileged to hear your stories, and really inspired to work on the portrait. Let's meet again next week, and continue where we left off today.

ALEX, GABRIELA, MARGARET, LIZ, TAYLOR

(Participants exiting) Thank you! See you next week! Thank you all! It was great meeting everybody.

VICTORIA

(Sitting on the chair, sighs. then looks up at the portrait).

This is the first draft of the portrait. I am not trying to copy their looks but to convey their experiences. To do so, I feel that capturing the emotion in their facial expressions are so important. Margaret's large eyes were wide open and she seemed to be in a state of wonder, she also had a very poetic and rich way of speaking...

My overall impression of Liz was a sense of serenity, meeting her was almost like a religious experience, her appearance and demeanor reminded me of a Renaissance Madonna.

Gabriela is almost at the end of her first year as a mother and it seems to me that she is looking back to it from some distance now... and also looking forward...

Taylor seems so calm, contained, introspective...

Alex struck me as... someone who is confident with herself, It was easy to make an emotional contact with her. The biggest impression, though, to me was her incredible connection with herself and her own body. her honesty is really impressive, and also the way that she challenged my representation of her. Now that I look at the portrait, I see what she means. My intention was to portray her strength and connectedness to herself and her baby but by focusing on that, perhaps I overshadowed the gentle person that she is. I am going to revise the portrait now and will show it to her next time.

(exits)

END OF ACT I

ACT II: Relational experiences
Scene 1: introduction

SETTING: A week later at the artist's studio.

AT RISE: Portrait projected on the screen. Victoria is in the studio, working on the portrait.



(enters Margaret)

MARGARET

Hi! How are you?

VICTORIA:

Hi! I'm well. Good to see you. How's everything?

MARGARET

I just wanted to tell you that I'm so glad to meet the other moms last week. I have so much to tell, to ask today...

VICTORIA

That's great! Let's wait for the others, then.

(another knock on the door)

Oh, here they are! Come in!

(enters Alex)

ALEX

Hi!

VICTORIA

Hi, Alex! I'm so excited to share with you the revised portrait. Would you like to take a look?

ALEX

Sure. Wow! This is so different! The changes are powerful, and I really like how it looks. This is much more representative. Thank you so much for revising!

VICTORIA

You are most welcome, it's my pleasure. And thank you for your suggestions and observations.

(enter Taylor, Liz, Gabriela)

TAYLOR, LIZ, GABRIELA

Hi!

VICTORIA, MARGARET, ALEX

Hello! Hi! How are you?

VICTORIA

Shall we get started? Let's continue where we left off. Last time, we were talking about breastfeeding, physiological sensations... I wonder if today we could talk about relational experiences with the baby.

Scene 2: Breastfeeding tied in with the relationship



ALEX

Well, breastfeeding a huge topic that also carries over to speaking of relational experiences because for me, breastfeeding is such an important part of our relationship. It is one of the primary connections that he and I have that no one else has with him. So it is transformative for me as a mother, and it feels really special.

LIZ

I feel the same way, breastfeeding is such a huge part of our relationship, and I love it SOOO much!

Scene 3: One-way relationship vs reciprocated relationship

GABRIELA

Yes, definitely, breastfeeding is totally central in our relationship as well, both physiologically and emotionally. You know, my baby is almost a year old, and I'm still breastfeeding. But then again, breastfeeding is so central that I wonder is all she sees in me is a source of food? I think at first, yes, definitely, her brain was just wired for survival and the brain cells and instinctual processes were telling her what to do to get fed and get her needs met. Like we discussed yesterday, babies are just like little animals... but the relationship evolves and eventually she starts recognizing me as a person, not just a source of food. At first, it definitely was a one-way relationship. It's like a one way love, I think.

MARGARET

I'm new to this, so I have some mixed and confused emotions about our relationship at this point. Iris is only 4 weeks old and she's not smiling yet so it's hard to feel like she's a loving grateful being. She feels like a strange cuddly... alien and it's my job to ...take care of her and love her and adore how fun and weird and funny she is but it doesn't feel like it's reciprocated ... yet. We are definitely connected but it's not a reciprocated relationship.

LIZ

Wow, I have heard other women speak of this. For instance I have a friend who is due in 3 weeks and is getting nervous about the upcoming delivery and attaching to the baby. She had read in a parenting magazine that for the first couple of months babies just take, they don't give anything back. I told her that for me, it is TOTALLY NOT TRUE! Like totally! He loves us SOOO much and gives lots back. Even as a little newborn ...he wasn't smiling like an older baby would do but he was a ball of attachment! I experience the contact with Blue emotionally and physically, and this relationship is so reciprocal, so satisfying, it's magical.

Scene 4: Connection with the baby

ALEX

I agree that the emotional part of our relationship is very satisfying and profound. I experience a strong connection with Ethan when we look at each other. I remember from early on, when he was looking into my eyes, it felt like he

was looking into my SOUL and that he was going to know me differently than anyone ever will.

LIZ

Yes, when he started recognizing us, looking at us, oh my god, that was so magical! It's so nice!

ALEX

Yes, and when I look at him, I see myself in him, he reflects back to me like a mirror. I realize that he smiles because I smile, and he's serious because I'm serious, so he serves as a check and balance for me.

MARGARET

I can relate to that! I definitely feel this connection with Iris, I almost feel like I'm existing within her... we are intertwined like an ecosystem.

Scene 5: relationship evolves over time

GABRIELA

Well, and I think that the relationship also evolves over time. For me, at first it was a one-way love but as Alison got older, I felt more and more that there's this connection to her heart.

TAYLOR

Yes, definitely the relationship is constantly evolving. I can already see from the 8 weeks how it's changed, and can imagine how it's going to evolve even more. It's fascinating on the one hand, but on the other hand, it's also a challenge to constantly adjust and grow in this relationship...

Scene 6: Coping with stressors of adjustment



VICTORIA

Speaking of which, I wonder about adjustment to motherhood. You are all first-time mothers in different phases of your first year. How do you cope with the stressors of adjustment?

MARGARET

Thanks for bringing it up! I'm eager to hear about all of your experiences. It's been only 4 weeks since I delivered, and I feel that I need to organize myself. Right now, I feel that I'm surrounded by clutter, physically and metaphorically. Between the leaky breast, and the baby pooping and producing all these diapers. On top of that, I have all these tasks to do: submitting disability paperwork, and writing thanks you notes to people who have helped us out in some way...

LIZ

You know, it's a huge life change.

(everybody nodding)

LIZ

I kind of anticipated that everything would change but I didn't REALLY understand the magnitude of change...I can't pinpoint what exactly has changed, but EVERYTHING has changed! My experiences of everyday life, my friendships, attitudes, relationships, my work, everything! I used to be tidy and neat but now it's fine. I don't care. I could spend this time mopping the floor or play with the baby and I don't care about the floor, so...yeah!

MARGARET

This makes me feel better but still, there are things that have to be taken care of... and it feels like a lot.

TAYLOR

I hear you, it can get really overwhelming. Keeping things organized and contained is the key to successful coping! Like this morning when I wanted to straighten up the kitchen, and also shower and get myself ready, Carter started fussing. In order to get things done sometimes you need to tell the baby: "I need to take care of me so I can take care of you".

MARGARET

(Exhausted) I've had no time for myself, I am not getting any sleep...

TAYLOR

I think that what's most difficult to explain to people is that as a mom you also need some time for yourself.

GABRIELA

Yes, you need to take care of yourself but you are exhausted and not sleeping. I usually cope pretty well with adversity but this was one of the hardest times in my life. I felt drained, truly. Words cannot even begin to describe how tired I felt. But then again, at some point you don't complain about it either because ... it's just a part of it (sighs).

TAYLOR

I am fortunate I have a supportive family and a husband who help out with childcare. You should use all the support that you can get. I feel that I definitely need a bit of a breather at the end of the day when my husband comes home. Last night when Jerry came home from work, I just handed Carter to him and he took over so that I could just do what I needed to do.

GABRIELA

(laughing) But sometimes the family can also get a bit frustrating. Especially in the beginning when everyone wants to be there and tell you their opinion and what to do and what not to do. So it's really hard to explain to them that you are exhausted and trying to do your best... but yes, my husband has been a really big help and support.

LIZ

Mine, too! **We share caregiving** and he's been a tremendous help. By the way, Victoria, I know that my husband is not here but I wonder if you could somehow add him into this portrait...I really can't imagine my portrait without him.

GABRIELA

Yes, I feel the same way! My husband has been tremendously helpful and supportive. Maybe you could just add my husband's arm around me, I feel that he should be represented somehow.

VICTORIA

Yes, definitely, let's see what I can do.

MARGARET

You know, my husband is also really supportive and helps with the baby but I get really anxious when the baby cries..

LIZ

I know! I always find myself checking on the baby, like **where is he? Is he ok?**

TAYLOR

We try to keep the mood pretty light , and stressing out is not going to help anybody. And every day is different, so **try to take one day at a time.**

GABRIELA

I can tell you: it will get better! **But it's hard work,** and it's on you because **you are the one who has to do the feeding and.. the family might try to help and do what they can, but for you, it's emotional.** Looking back, **for me it's been a happy experience but I can realize how some mothers might just lose it.**

MARGARET

(sighs) Yeah...

ALEX

I think that becoming a mother has brought out my vulnerable side... because it's so personal and I feel very visible. As a yoga instructor, I have always been confident, present and in tune with my body, as well as my emotions. I am not afraid to show my happiness, or my

sadness... I generally tolerate stress pretty well, I have come to a point of mastering things. I have no problem handling feedback professionally but there's something WAY more personal when people comment about you and your child. I am so used to getting reassuring feedback and the positive ones fuel me but today, for the first time, I faced criticism when another mom questioned the way I allowed my son to play. On the surface I took it with calm: sure, that's something that I need to consider but inside it was unlike anything that I've experienced before. It cut really deep, and it felt like peeling back a layer of skin, revealing my veins and muscles. I can't help feeling very visible, and this feels vulnerable.

TAYLOR

Yeah... I think that the whole notion of motherhood has kind of been unreal, the notion of parenthood has been sinking in slowly. It's something that we do, taking care of this little person til the rest of our lives...

Scene 7: Joy in the relationship

GABRIELA

Yes, but in the end, it's happiness. It's easy to say that I'm really happy or I love my baby but words really don't begin to describe how I feel. Because there's much more than just happiness, it's a complex kind of happiness.

ALEX

yes, definitely. It's a profound, evolving, complex experience and it's mutual. I feel his joy and then my joy as a mom.

GABRIELA

I would say, for me, in the end, what matters is that the baby thrives, so I would say it's happiness despite adversity.

MARGARET

I hear that you all really have very personal experiences about becoming a mom, and I'm actually a bit surprised about that. I think that's what's confusing about the whole thing that everyone has a different story...

GABRIELA

Yes, and everyone tells you what to do...

MARGARET

Yes, so when you're a new mother, you don't really know...

TAYLOR

You are right. I'm so glad we are talking about this here.

VICTORIA

Yes, and I feel that it's important just to hear everyone's perspective so that we can begin to acknowledge that multiplicity of experiences. And begin to be more aware of our own experiences, gain confidence, eventually figure out what works for each of you without fear of judgment. Our time is up for today. The portrait is beginning to take shape, and I would like to add finishing touches to it next time when we meet.

MARGARET, TAYLOR, ALEX, GABRIELA, LIZ

Ok, great! Thank you! See you next week! (leaving)

VICTORIA

(Looking at the portrait) Yes, the portrait is really beginning to take shape. The women's stories are inspiring and also bring up memories from the time that i first became a mother.

I related so strongly to Margaret's experiences. I remember that the first post partum weeks had been an emotional turmoil for me, topped with physical and mental exhaustion. I remember it being overwhelming.

I wish I had had an experience like Liz, she seems so content and accepting. I realize that when I first became a mother I must have been much more nervous, anxious and discontent....

I see myself in all of the mothers, I can definitely relate to each of them separately and all of them as a group.

END OF ACT II

ACT III

SETTING: Artist's studio

AT RISE: Victoria working on the portrait, portrait projected.
(enter Taylor, Alex, Gabriela, Liz, Margaret)



Scene 1: Introduction

TAYLOR, ALEX, GABRIELA, LIZ, MARGARET, VICTORIA:
Hi! Hello! How are you? Good to see you!

VICTORIA

Welcome back! Today is our last meeting and I would like to thank you for all your input and inspiration. It's a living portrait and I've tried to incorporate your presence through your sensations, mood, feelings, and the experiences that you have described. I would like to invite you to devote today's session to imaginal experiences. I wonder if anyone would like to share daydreams, dreams or fantasies about yourself and/or your baby relative to becoming a mother...



Scene 2: Fantasy of returning to a former life

MARGARET

I would like to share something that's very present in my life right now. I've been a very independent sort of self sufficient person. I love exercising, going places. I've gone on road trips by myself, I've moved to places by myself. I was just like a person in the world, taking action. But now I can't do this any more. I feel in pieces: I am leaving my old self behind. I feel compressed as an individual. Again, I am aware that in a way, I am no longer this self sufficient individual, free to do whatever I want. My body and mind are tied to another human being. It's a big change and I don't fully get a sense yet what is happening. I wonder: Who am I now? What is my role? How did I get here? Like I told you last week, it's like being under water, I feel a little bit like a prisoner, but it's also a beautiful sensation. I am in this beautiful underwater prison.

GABRIELA

I can totally relate to that! Especially in the beginning, after feeding and feeding endlessly, I was like: I don't have a life. What's going on here? I remember that sometimes after another sleepless night I had this fantasy of opening the door and going back to the life that I had had before becoming a mother : I imagined I could do ANYTHING: go to the gym, go out, go for a run...but I knew that it was not possible. Now that she is sleeping better, things are becoming easier and easier but the beginning was hard.

MARGARET

Well, it's good to know that it gets better... thank you.
This eases my anxiety a bit.

GABRIELA

Yes, but you know, life is never going to be the same
again, *you can't go back to the life that you had.*

TAYLOR

And it's also about the perspective that you choose to
take. I, for instance, *don't see a change in myself* as a
person.

MARGARET

I know...,it's all about the perspective. And I'm just trying
to put together a new sense of self right now..

Scene 3: Awareness of darker fantasies

ALEX

As I hear you speak, I just want to add that I, too, can
relate to your experience, and particularly the early weeks
and how confusing and overwhelming it can be. Sometimes
I've had dreams that have affected me and that I still
remember. Last night I had a dream related to a birth
memory but I'm not sure if you would like to hear it...

TAYLOR, MARGARET, GABRIELA, AND LIZ

Of course, go ahead!

ALEX

I haven't told it to a many people because it's so personal
and I don't want to be self-centered....And I feel that
people really don't have the time or the interest to
listen, but I've felt supported in this group and I feel
safe to share it with you.

LIZ

Really, we'd love to hear.

ALEX

Thank you. Well, the other night I had this visceral,
bodily experience. A dream of a flood. A flood of pain, a
*flood of emotions, a flood of so many new experiences at
once. A flood of blood and tissue that came out of me but
that manifested in this whole new being.* It also brought
back the birth and all of the bodily and emotional
memories, it was so powerful. It's been 8 months since I

give birth and I wonder why these experiences are still coming back in dreams, maybe I'm keeping these emotions inside still?

VICTORIA

Thanks for sharing this, Alex. I think that it's always a good idea to explore our experiences, even if they seem very personal or frightening, even.

ALEX

Yes, I definitely think so, I already feel relieved. I just wonder if I'm the only one who's had dreams like that...?

MARGARET

I'm glad that you talked about that because people usually don't talk much about the more darker fantasies and dreams like that. For myself, I was surprised that becoming a mother brought the more existential questions of life and endlessness and death into my awareness. You start to think about life and death in a little bit of a bigger way... and it really can sometimes feel so terrifying and a little bit depressing and kind of empty. But it also could feel very rich, depending on what's going on. Sometimes the night time feels a little bit scary...

TAYLOR

Wow, Margaret, thanks for sharing that. And Alex, definitely you're not the only one. I've also had dreams and fantasies that I can't explain. Now I remember the dream that I wanted to share with you on the first day! The other night I dreamed that I was still pregnant with Carter. The dream began with a single waterdrop falling inside of me. The waterdrop began in one source and kind of evolved, grew and grew... just emanated from within and became two colorful streams that started emanating and radiating ... until they eventually formed one color that became a fetus. And then, the fetus became a baby. I was holding the baby. And the emanating radiating colors were still there and kept growing, radiating... The whole of notion of motherhood has kind of been kind of unreal... I still don't know what to make of this dream. Carter was born 8 weeks ago but I feel like the connection between us was formed in pregnancy. I was holding him and caring about him even before he was born, and now this connection continues to emanate, to radiate, to grow.

Scene 4: Positive fantasies for the future

GABRIELA

Which make me think of a fantasy that I have, that her life is going to be the best thing ever...and really that's a fantasy because you don't know...

TAYLOR

Yes, me, too! I have visions of him getting older, playing in the park on the swings... being really smart at school. And as a person, the personality that he'll develop. And how much that might be like his dad or I. That's kind of interesting.

LIZ

I also look forward to when he can go outside and play in the park and notice the flowers, and play with caterpillars and bugs and water... and I'd like to weave a gorgeous wrap that's made out of everything beautiful in the entire world and drape him in it.

TAYLOR

But then again, It's been only 8 weeks but I already have visions of him getting older... and how our relationship has evolved and a how it is going to evolve even more. And I wonder if I'm trying to already figure it all out for him. I want to let him explore, not to be too controlling. I imagine us starting out on a path: there are two pairs of footprints on the path that path initially walk side by side.....and then begin to diverge. Eventually, Carter will find his own path, and I will stay on mine.

And I imagine that even though eventually he will find his own path, the connection that began when I was pregnant with him will continue until the rest of our lives.

VICTORIA

Thank you all for your presence and sharing. This has been really inspirational. Our time is up today but next week, I'll show the finished portrait to you and you can provide feedback.

GABRIELA, TAYLOR, ALEX, LIZ, MARGARET

Yes! Great! Thank you! See you next week
(all exiting)

END OF ACT III

ACT IV

AT RISE



VICTORIA

The 5 moms have sat for the group portrait in three sessions. I have been working on the portrait for several weeks now, trying to capture their experiences. The portrait is finished and the sitters will be here any minute to take a look at it and give me feedback about the portrait. I'm really curious to hear their opinion but also a bit nervous. To me, this montage portrait captures a variety of experiences. I tried to convey their experiences as they spoke, so I kept adding to and layering the portrait. It was important for me to portray both the outer appearances as well as their inner lives, and to convey the richness of their experience, using the similes and metaphors that they came up with. I am also aware that it may be difficult for some moms to face their portrait. They were very open and honest about their experiences, and I included all of the themes and categories that emerged, both joyful and challenging. Moreover, this portrait is really a co-creation because it was born through my interaction with the sitters. I used what they conveyed to me, but also my own impressions and observations to create the portrait. I believe that this multiplicity enriches the portrait, and shows the sitters as evolving, living people with a variety of emotions and experiences.

(knock on the door)

VICTORIA

Oh, here they are!

(opens the door)

VICTORIA

Hi! How are you? Good to see you again.

LIZ, GABRIELA, MARGARET, ALEX, TAYLOR

Hi! Hello!

VICTORIA

Come on in, take a seat. First of all, thank you so much for taking the time to sit for this portrait. I know that you all have busy lives and you are all in your first year of motherhood, and this is a big transition. I really appreciate your time, thoughtfulness and contribution. I am was so inspired by all of you and your experiences. The portrait is now ready for your viewing and feedback.

(portrait being projected on the screen)

VICTORIA

So, what do you think?

ALEX

Wow, I'm so excited and touched.

MARGARET

I like the complexity and vibrancy and plural feeling.

TAYLOR

I feel a sense of pride, warmth, happiness, contentment...because I'm still on the same emotional path.

LIZ

I feel warmth and love.

GABRIELA

I think it's a great graphic representation of my transition to motherhood, I like the way it evolves and shows both the challenges and rewards.

MARGARET

I agree, the most fascinating aspect of this portrait's representation of motherhood is seeing its progress, the constant unfolding of the experience. I would say that the unfolding of an artwork seems like an accurate way to represent the unfolding of the experience itself.

TAYLOR

I also strongly relate to the evolving aspect of it. *it's all a journey and it takes time to walk the path, and every day is different, presented with new challenges.*

MARGARET

And it can be quite *complex*...

LIZ

...and *chaotic* even. I guess I found it hard to express but now I see it in the artwork.

VICTORIA

I wonder, what are your emotional reactions to seeing the portrait?

GABRIELA

I had an emotional response. After a year, the difficulties of breastfeeding and the marathon feeding sessions had been deeply stored away in some corner of my brain however the portrait reminded me of how painful and stressful this time was. The portrait however also made me re-experience the transition out of these hard times to calmer and happier times.

MARGARET

I feel a little bit of self-pity and also some self-love. I would like to thank you all for sharing your experiences with me. I felt supported in my journey and realized I'm not the only one in this transition. I want to tell myself that it will get better in just a short time and give myself a reassuring hug.

TAYLOR

I also feel reassured. I try not to get too overwhelmed, I pace myself, and I have this omnipresent feeling of love for this tiny human being. I never knew such a feeling could exist, but I'm constantly reminded of how amazing it is that he's here and in my life, affecting it every moment. The portrait reminds me of those feelings, and the journey we're on together, and how excited I am to help him on his path through life and see where that will take him.

ALEX

I also have an emotional response to all the pictures as a whole set. I was struck at the progress we made through the process. It also evokes even more love for my son. In seeing the synthesis, initially I was very excited and touched. It allows me permission to offer myself loving kindness.

VICTORIA

thank you for sharing these thoughts. I also wonder, was participation in this project useful for you in any way?

GABRIELA

Yes, it was useful to me in the sense that it gave me an opportunity to reflect on the immense effort that is motherhood and to appreciate the process despite its hardship.

TAYLOR

Yes, I agree, reflection on my emerging relationship with my son was really useful.

ALEX

Speaking of which, I must say that describing my experience to supportive, non-judgmental people was very useful. It felt good to tell my story. Thank you all!

GABRIELA

And it's hard to express what it feels like to become a mother, in using just words. So I think the artistic representation shows the experience.

LIZ

I agree. For me, seeing the artistic representation of the metaphor of weaving something beautiful to wrap around my baby was very powerful.

MARGARET

I think that it was a useful way to think through what I was feeling, discover the feelings and the artwork gives form to these feelings. It seems like when you draw something and turn it into something physical it doesn't

feel as threatening or scary. It just is what it is. So perhaps I gained some acceptance in this exercise.

VICTORIA

Do you think this project could be useful for others such as new mothers and mothers-to-be?

LIZ

As others pointed out, the reflective aspect stand out really strongly for me. I would highly recommend to new mothers to take some time and reflect on their experience. For me, it was useful.

GABRIELA

Yes, and I hope that in doing so, they realize that becoming a mother is not all a great happy experience all the time, and it's ok. Nobody told me about the difficulties that lie ahead and the relationship with a newborn, at least in my experience, is far from blissful. It was great to talk to other moms in this group and I hope that other new moms might also see that it is okay to experience feelings as they come in the transition to motherhood, even if those do not seem fitting of a mother.

TAYLOR

I think it's helpful to hear the whole story from new mothers to mothers-to-be, and anyone really. There's a lot of horror and war stories people like to tell, but sometimes the good moments get overlooked, so it's good to share the whole story, because one woman's experience might differ vastly from the next woman. I think the primal nature of motherhood is still wildly underrepresented and misunderstood, so the more information about that out there for the public to discern, the better. And then maybe it will lead to better support for new moms across all spectrums.

ALEX

But then again, although we have all have presented our stories, in the end, every birth, every mother-child dyad, is the same.

VICTORIA

Thank you for all of this feedback. Finally, to conclude, what was it like for you to participate in this project?

GABRIELA

I think it was really a time to reflect on transitioning to motherhood. It all happens so fast from the time you deliver to now, which now is like 11 months, it's non-stop. You go from delivering and now you have to feed this baby, you didn't sleep at all, you have to keep going. So it's been a time to reflect and think: wow, you know that was hard, and I'm glad it's done, and now we're in a different phase...

LIZ

I agree. For me, it's been clarifying, I guess, in some ways. I haven't actually been reflecting like this. I've just been taking care of the baby. So it's nice to pause and think about my experiences.

TAYLOR

Yes! To think little bit broader than the day to day (laughs) like eating, sleeping, pooping. It was nice to do something for him but for me at the same time. To be able to sit down and have some passive time and not do anything. It was nice, kind of like introspection, I think. But it was also interactive.

ALEX

Yeah, it was LOVELY. It's so nice to get a moment to focus on my own experiences.

I feel like that there's so much attention to prep and primacy. And mom gets a lot of attention to care for the unborn child. And then rightfully so, and understandably so, attention is given to the child. And I wanted it to be so. When I became a mom, I didn't want attention for me but I wanted attention to self reflect. So that's what I experienced by participating in this project.

And umm just take a moment to... yeah, create some metaphors. Not just talk about it but metaphors allow me to get closer to the embodied experiences that's so... I think... the metaphor is what allows the experience of *beyond_words* to be relived.

To conclude, I m feeling sentimental but also just
nourished. A little more embraced and ... a little fueled in
a positive way.

MARGARET

For me, it was liberating. I'm really glad that I did this,
I'm so glad I participated.

THE END

Summary

In the preceding pages the results of this arts-based research were presented. The research question that was posed was twofold: 1) How do first-time mothers express and make meaning of their *beyond_words* experiences, and 2) how are these experiences represented using montage portraiture? The *beyond_words* phenomena for the purpose of this study were conceptualized as the sensory-embodied, relational and imaginal experiences in transitioning to motherhood that are difficult to articulate by mothers.

To answer the twofold research question, the results included both procedural as well as arts-based results. The arts in this study were used during all phases of this research study. The arts-based methods of portrait drawing and elicitation of metaphors aspired to assist the participants to express and make meaning of their *beyond_words* experiences that have been found to be difficult to articulate. And thus, the participants began to gain awareness and make meaning of the experiences that were previously unexplored, partially due to the epistemic nature of the *beyond_words* phenomena. In turn, this facilitated the systematic investigation and representation of the *beyond_words* phenomena by the researcher.

The arts-based methods used in this study enabled me, after a systematic data analysis process, to represent the findings in holistic and engaging ways. First, 5 Portrait Syntheses were presented. The Portrait Syntheses that were presented in this chapter highlighted each participant's *beyond_words* sensory-embodied, relational, and imaginal experiences that the new mother experienced in their transition to motherhood. The method of montage portraiture allowed me to represent these multiple simultaneous experiences in interactive artistic and narrative forms. Montage portraiture as it was used in this study, evolved in a series of phases, thus mirroring the process of transition itself. Each of the portraits was unique, however, the results pointed to shared themes that were present across cases. To further analyze and represent the data across cases, Final Synthesis was conducted during which the data were analyzed across cases. The results of the Final Synthesis highlighted the themes that emerged from the analysis of data

across cases. The arts-based representation of the Final Synthesis enabled me to communicate the results to an audience in engaging ways. The credibility measures that were implemented authenticated the credibility and authenticity of this arts-based research. Following the data analysis, presentation of results, and credibility and authenticity procedures, this research has several applications and implications that will be discussed in the next chapter.

CHAPTER V: DISCUSSION

Overview

The purpose of this arts-based research study was to conduct a systematic in depth exploration of how first time mothers express and make meaning of what is *beyond_words* in their experiences of transitioning to motherhood. *Beyond_words* phenomena for the purpose of this study were operationally defined as the **sensory-embodied, relational, and imaginal experiences** that are inherent in the **physiological, psychological, social, and spiritual** dimensions of transitioning to motherhood but are difficult to articulate.

Because of the ontological and epistemological nature of the *beyond_words* phenomena, an investigation of these phenomena using the traditional qualitative and quantitative research approaches was not deemed compatible or relevant. As stated by McNiff (2011) all human phenomena cannot be investigated using more reductionistic approaches which result in certain distortions and misunderstandings of the human conditions.

In order to honor and capture the emergent, vital, and multi-dimensional nature of the *beyond_words* in transitioning to motherhood, ABR was used as a design of this study. ABR is an emergent research paradigm that combines the rigor of social research with the power of artistic representation of findings (Leavy, 2009, 2015). In this study, the arts-based results bring to life and invite the viewer to live the mothers' *beyond_words* experiences. At the same time, these results describe the wider context of transitioning to motherhood that has been investigated in the disciplines of medical and health sciences.

Within the literature relevant to transitioning to motherhood, the *beyond_words* phenomena have not been explicitly studied but, rather have been implicitly referenced in research studies addressing the physiological, psychological, social, and spiritual dimensions of transitioning to motherhood. It is important to note that these four dimensions relative to transitioning to motherhood represent very real interactive and inter-related phenomena.

Therefore in this chapter, the themes that emerged from the Final Synthesis of this study will be compared with those dimensions and interactive phenomena presented in medical and health sciences literature. Because of the non-discursive and subtle nature of the *beyond_words* phenomena, it should be noted that the phenomena that emerged from this study although similar to the phenomena identified in the literature, do not directly replicate them.

In this chapter, I bring together the discussion of two aspects of this study. One aspect is the discussion of the thematic results that are situated in and are comparable with the concepts described in the literature of medical and health sciences on transitioning to motherhood. The other aspect is the discussion of the arts-based results that are situated in the literature of ABR and art therapy. The thematic discussion describes the phenomenon of *beyond_words* within the wider literature on transitioning to motherhood in medical and health sciences literature. The arts-based results, on the other hand, bring to life these experiences across the categories and themes in the arts based representation. And thus, the arts-based results facilitate the communication the multidimensional nature of *beyond_words* phenomena that cannot be conveyed in discursive language.

In order to bring together the two aspects of the study that were outlined above, this chapter is organized into 3 broad sections: 1) a brief overview of the dimensions inherent in transitioning to motherhood in medical and health sciences literature, 2) thematic discussion and arts based representation of the results-- *beyond_words* phenomena in transitioning to motherhood, 3) applications and implications for further research based on the results of the study.

Medical and health sciences literature: The first section of this chapter will briefly outline the four dimensions – the physiological, the psychological, the social and the spiritual dimensions – of transitioning to motherhood in medical and health sciences literature. This is necessary in order to position the results relative to the current trends in the literature and systematically compare, contrast and integrate the literature and the study results on *beyond_words* phenomena.

***Beyond_words* phenomena:** In comparing and contrasting the *beyond_words* phenomena in the health sciences literature and those that emerged in this study it is essential to note the epistemological differences. The representation of the phenomena in this study are arts-based: visual and poetic, multi-dimensional, and spatial in contrast to more linear, textual and scientific descriptions in the health sciences literature. The arts in ABR are used for the investigation and representation of phenomena that are typically not describable in discursive language, and the arts-based representations of results invite viewers or readers to experience these phenomena on multiple sensory and emotional levels (Barone & Eisner, 2012; Leavy, 2009, 2015). The arts-based results, thus, represent “the ineffable”, what could not be expressed in discursive language (Barone & Eisner, 2012). Moreover, unlike the presentation of results in more traditional quantitative and qualitative research paradigms, the results of this ABR study cannot be reduced to categories because “reductionism...obscures complexity, connectedness, relationship, relativity and meaning making, the very stuff of the arts” (Learmonth & Huckvale, 2013, p.104). And thus, the portraits featured in this study do not represent just the isolated categories but are meant to be experienced holistically. Concurrent with the pluralistic ontology that is inherent in my worldview (Carolan, 2001; Dissanayake, 2000; Gerber, 2014; Chilton et al., 2015; Hagman, 2009; McNiff, 2011, 1998; Robbins, 1998), and the epistemological nature of *beyond_words* phenomena, the arts-based results are meant to convey the inner, embodied, and invisible experiences including the sensations, feelings, thoughts, and fantasies that the mothers encountered in their transition to motherhood. The holistic representations are necessary in order for the viewers to authentically engage with the arts-based representations, viscerally and emotionally.

Implications and Clinical Applications: Finally, in the third section of this chapter I will discuss clinical and educational applications of this study. The methods and results of this study have generated potential clinical applications for art therapy practice. Among other potential clinical applications, the method that was used in data generation and researcher reflexivity in this study

has multiple transferrable clinical applications to art therapy practice to explore *beyond_words* experiences with new mothers. From the feedback to the results of this study, it emerged that the arts-based results can be used for educational purposes with new mothers or mothers-to-be. Finally, the implications for further study based on the results of this study will be discussed.

Medical and health sciences literature

In this section, a brief overview of the four dimensions in transitioning to motherhood, the **physiological**, the **psychological**, the **social**, and the **spiritual** dimensions will be summarized here. This is necessary in order for the reader to understand the complexity of the multidimensional experiences that the new mother encounters in her transition. These dimensions were presented in greater detail in the literature review chapter.

The Physiological Dimension

The physiological dimension of transitioning to motherhood in the first year focuses on the physical recovery of pregnancy and childbirth in which every major physiological system of the human body must undergo significant changes and adaptations to a non-pregnant state. The three primary categories to the physiological dimension as outlined in the medical and health sciences literature are *breastfeeding*, *Postpartum Fatigue (PPF)* and *body image dissatisfaction*. Breastfeeding has been reported to be pleasurable (Bottroff, 1990; Hauch and Irurita, 2003; Nelson, 2006; Schmied & Lupton, 2001), but also physically uncomfortable or even painful experience (Afoakwah et al., 2013; Nelson, 2006; Williamson, Leeming, Little, & Johnson, 2009). Additionally, a challenging health condition that negatively affects the woman's physical and mental health is Post-Partum Fatigue (PPF) (McMahon, 1995; Mercer, 1986; Hochchild, 1989; Runquist, 2006; Troy, 2003). Despite the generally challenging nature of PPF, some mothers have been reported to persevere through PPF through the belief that children bring meaning to their lives (Runquist, 2006). Body image dissatisfaction is yet another factor that relates to the physiological transition to motherhood in that it tends to increase in the first postpartum year (Gjerdingen, Fontaine, Crow, McGovern, Center, & Miner 2009).

The Psychological Dimension

Issues related to the **psychological dimension** of transitioning to motherhood include both rewards and challenges. Rewards include *mother-child emotional connection* and

psychological bonds that mothers experienced from closeness and relationality with the infant (McKinlay, 2013; McMahon, 1995; Nelson, 2003), which results in personal psychological growth and transformation (Nelson, 2003; Prinds et al., 2014).

The challenges related to the psychological dimension of transitioning to motherhood include depressed mood that can manifest as Post-Partum Depression (PPD), and psychological loss and mourning of self (Nelson, 2003; Hill, 2011; Hogan, 2008; Mercer, 1986). In medical and health sciences, loss was an overarching category that includes loss of control over one's life, time, independence, and previous lifestyle (Barclay et al., 1997); or loss of personal time (Mercer, 1986).

The Social Dimension

The social dimension of transitioning to motherhood is another factor that includes a combination of rewards and challenges. The *relationship with the partner* was reported to be strengthened during the first year of the transition (Darvill et al., 2010; Nelson, 2003; Prinds et al., 2014). Conversely, challenges have been found in relationship with the partner such as *deterioration of the couple's sexual relationship* (Barrett et al., 2000; Nelson, 2003; Pacey, 2004), and *change in distribution of domestic labor* and demanding role of caring for a new infant (Barclay et al., 1997; Darvill et al., 2010; Nelson, 2003). Balancing work and family was generally identified as a challenge for new mothers (McMahon, 1995; Faulkner, 2013; Newborn, 2012; Nichols & Roux, 2002; O'Reilly, 2010).

Another category under the social dimension of transitioning to motherhood was *women's social relationships* with and support from other women (Darvill et al., 2011; Demecs et al., 2011; McMahon, 1995; Nelson, 2003; Prinds et al., 2014), including their own mothers (Darvill et al., 2011; Taubman-Ben-Ari et al., 2009) who were generally identified as an important source of support.

Finally, *unrealistic expectations of motherhood* were found to be challenging to new mothers. These idealized unrealistic expectations are often conveyed in the media, by peers, healthcare professionals, and parenting manuals (Cowdrey, 2011; Darvill et al., 2010; Heisler & Ellis, 2009; Hill, 2011; O’Faney and Shenassa 2013; Razurel, 2011), and the discrepancy that exists between the idealized expectations and the reality of motherhood, can be “disruptive to the individual and to relationships” (O’Faney and Shenassa 2013, p.616)

The Spiritual Dimension

The spiritual dimension of transitioning to motherhood is an emergent dimension in research literature that is beginning to appear in recent studies with a particular focus on childbirth experiences. These studies have identified the spiritual and existential dimension of meaning making in transitioning to motherhood, and found that childbirth was generally a rewarding spiritual experience (Callister, 2010. 2004; Prinds et al., 2014; Mahoney, 2009; Schneider, 2013).

***Beyond_words* Experiences in This Study**

In the previous section of this chapter, the dimensions inherent in transitioning to motherhood as outlined in medical and health sciences literature, were presented. This was necessary to provide a systematic and contextual overview of the complex phenomena that the new mother encounters in her transition. In this study, categories and themes relative to the dimensions in transitioning to motherhood emerged during the data analysis processes. To authentically and holistically represent the results, I created the Portrait Syntheses to represent each woman’s individual experiences, and the Final Synthesis, to represent the results of the data analysis across cases. The textual themes and arts based representations in the Portrait Syntheses and the Final Synthesis reflect some of the categories identified in the medical and health sciences literature, however, they do not directly replicate them. One critical reason that the results in this study do not replicate the categories in the literature is that they are *beyond_words*

phenomena that cannot be reduced to linear textual description. Typical textual linear description alone cannot do justice to the *beyond_words* phenomena that are non-discursive, multidimensional, and poetic. The arts-based representations require that the viewer experientially engages with the artwork that is essential comprehending the full impact of the *beyond_words* phenomena.

In this study, the arts were central in the investigation and representation of *beyond_words* phenomena. The data generation required engagement in the arts from both the participants as well as the researcher. During data generation, the mothers-participants were asked to create a montage self-portrait featuring themselves and their baby, and by adding to their drawing using a montage of images, were encouraged to visually represent and verbally reflect on multiple aspects of themselves and their experiences. This method of selecting, juxtaposing, and adding to their drawings that was inherent in creating the montage self-portraits provided an opportunity for the exploration of a range of complex and intertwined experiences that are inherent in transitioning to motherhood (Taubman-Ben-Ari et al., 2009; Prinds, et al., 2014) and also expression and discovery of different aspects of the self (Martin, 1996; Meskimmon, 1996).

Following data generation by the participant, researcher reflexivity, and a multi-phase data analysis, I created the Portrait Syntheses and the Final Synthesis to represent the participants' experiences. The portraits featured in this study are not realistic representations of just the outside appearance of the person but a representation of the complexity of the sensory-embodied, relational, and imaginal experiences inherent in transitioning to motherhood (Taubman-Ben-Ari et al., 2009; Prinds, et al., 2014). One of the purposes of ABR is to use the arts during the research process "in order to express meanings that otherwise would be ineffable" (Barone & Eisner, 2012, p.1). In this study, the mothers' beyond-words experiences are not fixed into categories but flow between and across them. And thus, linear textual description could not capture the complexity and multiplicity of what was *beyond_words*. To authentically convey these experiences, I represented the results in emergent Portrait Syntheses in which the

categories that surfaced from the data were represented in the form of a montage portraits and accompanying narratives. I used montage portraits to represent the participants' experiences because the format of the portrait provided me with an opportunity to represent the person holistically. In this study, the results cannot be separated from the essential living beingness of each of these mothers. By viewing the portrait, the viewer can relate to the holistic existential beingness and experience of the person, in contrast to a more abstract textual category or themes. In addition to visually representing each mother's experience, and who she was as a mother, I brought in her voice by using direct quotes from her in the narratives and the play. To represent her holistically, I created the protagonist of each story taking into account her emotional presence, mood, and demeanor. The results were visual and textual stories and a play within which each of the participant's experience unfolded. It is important for the reader of this dissertation to understand how the mother's *beyond_words* experiences were represented staying true to the data yet holistically and engagingly representing their experiences so that the viewer can LIVE the meaning of the *beyond_words* phenomena.

To discuss and interpret the results of this study, in this section, first, the themes that emerged will be compared with the four dimensions of transitioning to motherhood in the medical and health sciences literature that were outlined in the previous section. And second, embedded in this comparison, examples of participant artwork and actual quotes from the interviews will be presented to discuss how first-time mothers expressed and made meaning of their *beyond_words* experiences. In my discussion, I present the details of the participants' artwork and quotes from their interviews, as well as details from the emerging Portrait Syntheses to illustrate how individual categories that emerged from the data analysis were represented. The individual categories are juxtaposed with the final stages of the Portrait Syntheses in order to discuss how the individual categories must be seen and experienced holistically in order to fully appreciate the nature of *beyond_words* experiences.

Sensory-Embodied Experiences

The major textual and arts based *beyond_words* themes that emerged from the Final Synthesis of this study were **breastfeeding, holding and physical touch, and being connected as one organism**. These themes relate to the physiological and psychological dimensions referenced in the literature. Supporting categories also included **pregnancy** and the **baby is an ocean**. Below, I will provide examples from the participant data and my reflexive process that relate to these examples. I will discuss how sensory-embodied *beyond_words* experiences were represented in the Portrait Syntheses.

Breastfeeding was a central theme in this study. The literature in medical and health sciences outlines the existence of both pleasurable (Bottroff, 1990; Hauch and Irurita, 2003; Nelson, 2006; Schmied & Lupton, 2001) as well as physically painful (Afoakwah et al., 2013; Nelson, 2006; Williamson, Leeming, Little, & Johnson, 2009) experiences in breastfeeding. The results from this study describe the existence of both pleasurable and painful experiences. For instance, Liz found breast feeding to be “the best thing in the world” while Margaret stated: “But also it’s painful. The amount that she nurses...makes me pretty sore”. To express their breast feeding experiences, the participants used metaphors and similes, for instance, Gabriela stated: “So very quickly you realize that you’re just a feeding machine”. Liz used a simile in the following statement to describe her intensely pleasurable sensory-embodied experiences of breast feeding:

When I was 22 I was in a horrible car crash. And was in a lot of pain. But every time a nurse would come with the morphine and put the IV in, ...I would feel it move.... and move through by blood stream and I would feel it hit my brain it was like ooohhh! It felt soooo good! So that’s what it feels like! It feels distinctly chemical.

Liz illustrated her intensely pleasurable experiences by drawing the veins of her body onto the portrait (Figure 38, left). The visceral effect that this drawing produced was reinforced in the Portrait Synthesis and Final Synthesis (Figure 28, right).

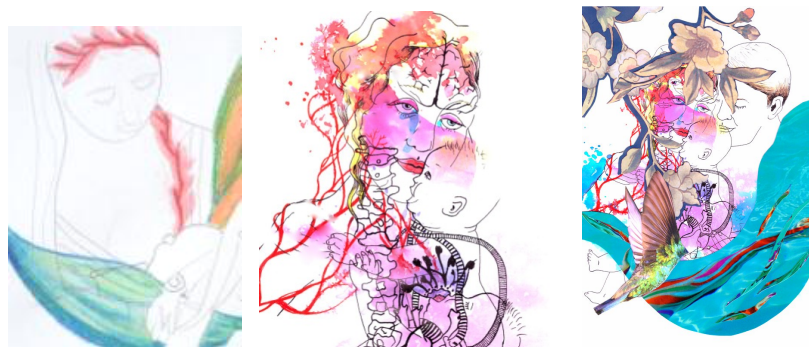


Figure 38. Breast feeding

In this arts-based research study, I used my skills and experience as an art therapist to attune to the participant's emotional communication in the interview and the arts process. For instance, when I saw Liz' artwork and listened to her talk, I felt her "high", I almost **sensed the warmth** running through my veins and hit my brain, too. Viscerally experiencing Liz's sensations helped me mediate her experiences into the artistic form. Based on her drawing and verbal reflections, and my own reactions, I drew her breast feeding and added the veins, the spine, and the brain that she had included in her self-portrait and verbal reflections. Figure 38 (middle) presents a detail of my emerging Portrait Synthesis of Liz. By juxtaposing the detail of Liz' self-portrait (Figure 38, left) and the detail of my Portrait Synthesis (Figure 38, middle), I illustrate how the participant's raw data was represented after data analysis. However, this was just one of the categories that was present in Liz' data. In the Portrait Synthesis (Figure 38, right), I holistically represented Liz' *beyond_words* experiences. While the embodied imagery that was discussed above to illustrate the theme of breastfeeding is still visible in the final phase of the Portrait Synthesis, other imagery is also added to the Portrait Synthesis. Such imagery includes the organs, the hummingbird and the flower, the husband, and the wrap – all of which separately

illustrate a particular category from the participant's data but holistically represent Liz' *beyond_words* experiences because these experiences are not linear but sensed, felt, and imagined simultaneous and interrelated experiences. Images have the ability to holistically communicate various layers of experience (Sousanis, 2015; Weber, 2008), and thus montage portraiture facilitated the **visceral and emotional communication** of these experiences. Moreover, when I created the portraits of each of these women, I wanted to emphasize the fact that she was not just a cluster of "categories of data" but a living person. And thus, beyond the illustration of categories I tried to convey for each participant's emotional presence, and who she is as a first-time mother. Again, I used the participant's own artwork and verbal reflections as well as my own reflexivity to convey this. For instance, when I met Liz, I experienced a **sense of serenity** about her. Her facial expression was almost devotional and she seemed very in tune with her baby, she was constantly physically touching the baby, and was thoroughly enjoying this. I represented these qualities in her by drawing the facial expression that reminds me of a Renaissance Madonna. The placement of the baby and the husband were chosen, and the blue wrap was used to unite the three in order to evoke the sense of connection between them. When the audience members witnessed the Portrait Synthesis, they related to Liz because they viscerally experienced her *beyond_words* experiences through the portrait. For instance, one audience member wrote: "...the sense of blending, overlapping of a myriad of emotions and sensations. I really felt that I was witnessing/experiencing the intersubjective relationship between mother, child, and father".

Two other major themes that emerged from this study and are related to each other in the sensory-embodied dimension were **holding and physical touch** and the related theme of **being connected as one organism**.

Holding and physical touch was a major theme that emerged from the final synthesis of the study. The participants found holding and touch to be a pleasurable experience in transitioning to motherhood. For instance, Alex stated: "it brings up very sweet, gentle, physical

sensations”. Taylor stated that touching the baby makes her feel “overcome with love”. The participant artwork featured the mothers in close physical proximity to their baby, touching, holding, or caressing the baby. The mothers used metaphors to convey how they felt while they held or touched their babies. Holding and physical touch was related to the theme of **being connected as one organism** was another major theme that emerged from the final synthesis of the study. Taken together, these two themes relate to the literature in medical and health sciences literature relative to the psychological dimension in transitioning to motherhood. Specifically, studies have found that mothers experience mother-child emotional connection and psychological bonds from closeness and relationality with the infant (McKinlay, 2013; McMahon, 1995; Nelson, 2003). The participants of this study felt a strong physiological and psychological connection to the baby that was, strengthened by the breast feeding experience. Under this theme, the participants used metaphors to convey their experiences of connection with the baby. For instance, Margaret stated: “It’s weird how in a way she is still a part of me, as though we were connected as one organism.” Margaret stated while commenting on the self portrait that she created: We are overlapping”. Another participant, Liz stated: “Yeah, it just feels like one of my internal organs has escaped and is wandering around”. All participants chose the photographs that feature themselves in close proximity to the baby, holding, caressing, or breast feeding. For instance, Alex created a drawing (Figure 39, left) and stated: “We are one; he is such a part of me. My cells forever embedded in him, and his presence forever embedded in me”. A detail of my emergent Portrait Synthesis of Alex’ experiences (Figure 39, middle) illustrates the sensory-embodied, biological connection by making visible the metaphor of embedded cells

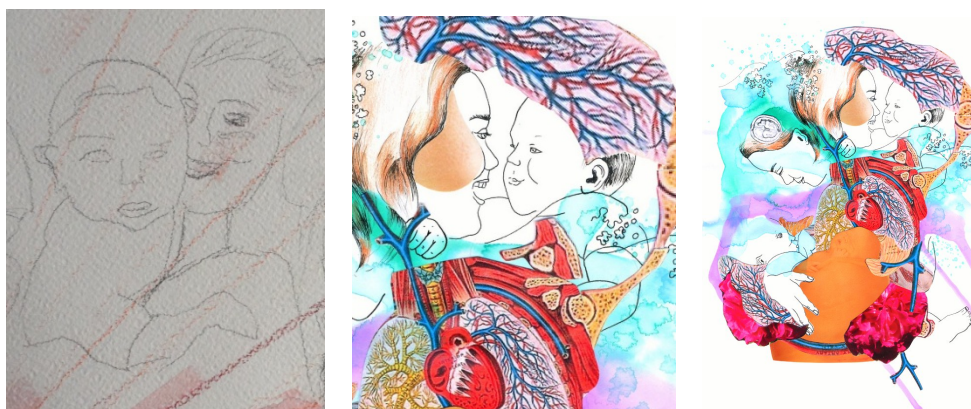


Figure 39. Being connected as one organism

that were poetically described by Alex.

The detail featured here (Figure 39, middle) represents the bodily oneness and illustrates that particular theme. However, the Portrait Synthesis (39, right) holistically represents the physiological and psychological oneness that she experienced with the baby. When I met with Alex, I was impressed by her attunement to her own body and her baby, and by her poetic metaphors such as the baby being a mirror and an extension of her, and the importance of the mother-child gaze in the relationship. Breaking the discussion of Alex's experience into categories presents a problem because of interconnectedness of these categories that are not concrete but flow between and across each other. And thus, I illustrated her physiological connection with the baby through the imagery of internal organs, cells, and pregnancy, and the psychological connection with the mother-child gaze. Her self-portrait was entitled "The flood", and she used imagery and metaphors of the ocean and the flood that will be discussed later in this chapter. My representation of her experience, based on the data analysis, include simultaneously the groundedness in the body as well as the fluid, watery imagery that surround the mother-child dyad. It was the purpose of the Portrait Syntheses to represent the multiple simultaneous experiences that the mothers sense in their bodies, feel in the relationship with the baby, and imagine about themselves or their babies. It would not have been possible for me to convey these

multiple experiences without representing them together in the emerging Portrait Syntheses. The audience members who saw the exhibition of the results related to and empathically understood the mothers' multiple experiences. For instance, one audience member wrote in his or her feedback: "I learned that while there are obvious physical experiences for the mother, the holistic experiences including the physical, emotional, psychological and spiritual is so interconnected for each".

Pregnancy was another theme in the sensory-embodied dimension that emerged from this study. The participants had visceral sensations, and memories of pregnancy. For instance, Alex stated: "I was laying on the bed and he was curling into me. And I had that moment when I just wanted him back inside me". To express her experiences, Taylor chose a picture of herself while pregnant.

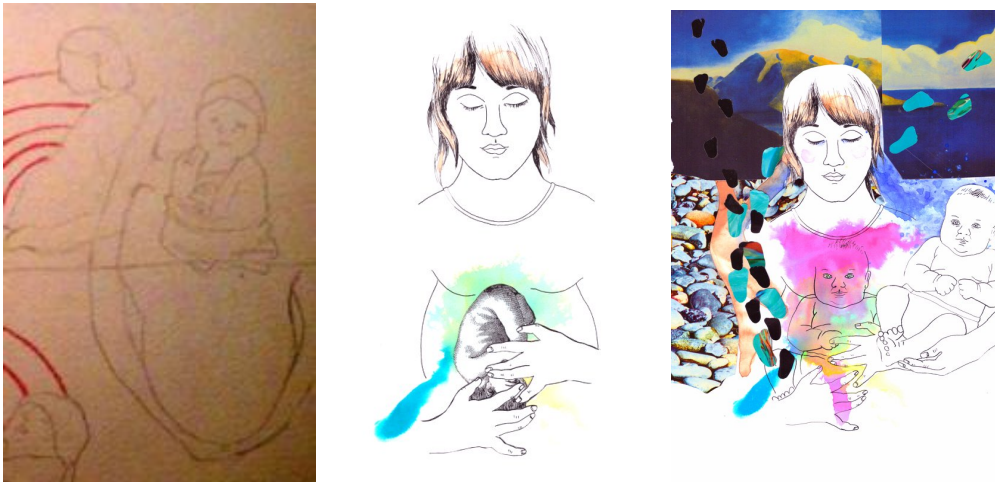


Figure 40. Pregnancy

She stated that the picture expressed her feelings of "holding him and caring about him even before he was born". One might wonder how she could have these sensations of being still

pregnant while she had actually already delivered. Looking at Taylor, it was clear that she was no longer pregnant, and had I portrayed her the way that she appeared, these sensations would not have been represented. For her, however, these embodied sensations were real and meaningful. To represent these sensory, *beyond_words* experiences to the viewer, I created her emerging Portrait Synthesis by drawing her with a pregnant waistline and by including a collage image of a fetus as though she was “holding him and caring for him even before he was born”. As the Portrait Synthesis of Taylor emerged and unfolded, the fetus was replaced by a baby but I retained the pregnant waistline in order to communicate this important category.

Regarding specific imagery or metaphors, water was a visual descriptor depicted in the participants artwork and expressed in words describing the sensory-embodied experiences. For instance, **the baby is an ocean** was a theme that emerged in this study. Two of the participants related to water and specifically the ocean as a metaphor describing their sensory-embodied experiences. The ocean was used as a metaphor for a powerful force that the participants experienced in relation to the baby. Specifically, both Margaret and Alex used this metaphor both in their artwork and verbally. The following images illustrate how the metaphor was first expressed by the participants and then represented by the researcher.



Figure 41. The ocean metaphor



Figure 42. The baby is an ocean

Alex used the metaphor of the ocean to describe a powerful visceral experience that she had about having the baby inside of her (Figure 41, left). Alex stated: “I envisioned a nutshell and a nut inside. I would be the shell and he is the nut inside and I imagine that’s in an ocean floating like going from the shore and floating in the ocean and surviving the ride”. To represent Alex’s metaphor, I used the blue similarly to the colors that appeared on her self-portrait, and added imagery of the ocean waves. As discussed earlier in this chapter, I created Alex’s Portrait Synthesis to holistically represent her experience. In her example, it was interesting to note the importance of the fluid media and the metaphors of the floor and the ocean. In the Portrait Synthesis, the flood is represented by pink and the ocean theme by blue, and they blend together in the holistic representation of Alex’s experiences.

Margaret used the metaphor of the ocean to describe the embodied oneness with the baby. She stated:

And then the metaphor of the ocean. I’m thinking about the colors of the ocean... and ocean is something like can be very tranquil but ... also just like wild and out of control. And I don’t know how these things kind of encroach on me this kind of wild energy.

Margaret predominantly used the turquoise blue color in her self-portrait (Figure 42, left) and verbally stated that the blue areas that overlapped with her baby and surrounded her face represented the metaphors of the ecosystem and the ocean. In my emerging Portrait Synthesis of Margaret (Figure 42, middle), I used the turquoise blue color to represent the metaphor of the ocean, and added the “crushing, rolling waves” that she had articulated. Margaret had entitled her self-portrait “The Ecosystem”. When I reflected on my meeting with Margaret and her artwork, her images and metaphors elicited strong sensory-embodied sensations in me. The face surrounded by water, and her descriptions of being surrounded by clutter and being “in this beautiful underwater prison” that is “a totally new place that’s completely under water, and learning how to breathe again” viscerally carried me to this metaphorical place that she had conveyed. In this place, the ocean, the plants, and the animals all comprise the ecosystem that Margaret now exists in. Looking at the Portrait Synthesis (Figure 42, right), it becomes apparent that the ocean cannot be viewed as an isolated category. To me, the newness and overwhelmingness of this mother’s experience, only four weeks post partum, of being connected to her baby as an ecosystem and being surrounded by the powerful forces of nature, was a *beyond_words* phenomena which could only be authentically expressed and represented through the arts. By creating this Portrait Synthesis, again, I created this portrait that is not a realistic representation of Margaret’s appearance but a representation of her experience that Margaret had so poetically and metaphorically conveyed.

Based on the examples of Alex and Margaret that were presented above, it is important to briefly discuss the use of the media in data generation and the creation of the Portrait Syntheses. During the data generation, in addition to the graphite pencils, the participants were invited to use watercolor pencils to add color to their self-portraits. The choice of these materials was based on their characteristics to produce both concrete, detailed results as well as more fluid, blended outcome. By adding color, it was possible to amplify the range of expression, and to add more personal emotional flavor to their self-portraits that would have been more difficult to convey

using the monochromatic graphite pencils alone. I offered a set of 24 colors to the participants in order to provide a wide range of hues to choose from. The use of the fluid medium relates to the fluidity of the metaphor of the ocean, and thus facilitated the expression of the ocean as in Margaret and Alex' artwork. In my representation of Alex and Margaret, I used colored ink to convey the fluidity of the ocean. Ink is a very fluid material that has intense colors but also transparent enough to work in layers. And thus, ink allowed me to represent these fluid metaphors in more vivid colors. However, it is important to note that while ink was suitable for my Portrait Synthesis, it was not suitable to be used with the participants in this study for several reasons. The inks are permanent hues that stain clothing and the environment. Moreover, their use requires at least some experience and skill and thus in the context of this study where data were generated in participants' homes, their use would not have been practical. However, the use of ink may be considered by an art therapist who is interested in applying this method to art therapy practice. These examples illustrate the importance of the careful choice of materials in this research and they have applications to art therapy practice that will be discussed later in this chapter under applications to art therapy practice.

Relational Experiences

The relational experiences in this study included the following closely related phenomena **breast feeding is tied in with the relationship, and one-way vs. reciprocated relationship, connection with the baby, and joy in the relationship.** In addition, **coping with stressors of adjustment** was a major theme. A sub- theme that was present in the data was **support of the husband.** Relational experiences mainly relate to the psychological dimension highlighted in the literature of medical and health sciences. In addition they are implicit in the physiological and social dimensions.

Breast feeding is tied in with the relationship. From this study, it emerged that for the participants, the physiological act of breast feeding was also tied in with the relationship. This is

descriptive of the literature in medical and health sciences literature about breast feeding.

According to the existing literature about breastfeeding, mothers' experiences were found to be "not just a physical activity, but an inextricable matter of the body, soul and mind" (Afoakwah, 2013, p.74). The results from this study describe how the physiological dimension of breastfeeding is tied to the psychological connection with the baby. The results indicated that breastfeeding was a central sensory-embodied and relational experience in transitioning to motherhood. For instance, Alex stated: "Breastfeeding ... feels transformative as a mother. And it feels like one of the primary connections that he and I have that no one else has with him [the infant]. So it's a significant component of mothering to me".

One-way vs. reciprocated relationship. Within this theme, the participants encountered different experiences. Gabriela and Margaret experienced the relationship as a "one-way relationship" while Liz experienced the relationship as reciprocal. She stated that "it is TOTALLY NOT TRUE! Like totally! He loves us SOOO much and gives lots back"

Related to the previous theme, **connection with the baby** was another theme that emerged from this study. This theme related to the literature in medical and health sciences that describes mother-child emotional and psychological connection that mothers experienced from closeness and relationality with the infant (McKinlay, 2013; McMahon, 1995; Nelson, 2003). To describe this connection, Liz used the metaphor and imagery of the hummingbird and the flower (Figure 43, left) to illustrate and describe her connection with the baby. She stated :

There are just certain flowers that are just the right shape and color so that when a hummingbird sees a flower and goes like uuuuhh! That's the flower I want.

And it must be just such a relief for the hummingbird to come upon such a flower. It is like, huh! At last! That's what I want.

The hummingbird and the flower were also incorporated into the Portrait Synthesis of Liz to illustrate her connection with the baby (Figure 43, right). In this portrait, she DID become the flower and the baby became the hummingbird. In this way, the montage portraiture allowed

me to represent her metaphors the way that she had described them. And thus, the Portrait Synthesis reflected the more realistic features montaged together with the metaphorical multilayered representation of Liz's *beyond_words* experiences.



Figure 43. The hummingbird

Alex used the metaphor of the mirror to describe her experiences: “I just can’t help thinking that he’s an extension of me and a mirror of me”. Another metaphor was used by Margaret: “I almost feel like I’m existing within her. Maybe she’s kind of like the entire ecosystem and I have one task within this ecosystem... to feed and to nurture”



Figure 44. The ecosystem

After creating the montage self-portrait and contemplating at the picture, Margaret realized that she is overlapping with the baby: “Not only are we touching, we are overlapping”. This example describes how creating a montage self-portrait allowed her to express and reflect on the perception of overlapping with the baby. The portrait that Margaret created was not a realistic representation of her but a representation of the overlapping sensory-embodied and relational experiences. This overlapping with the baby, and being surrounded by the connection evoked a sense of physical and psychological interconnectedness in me that was overwhelming. Using Margaret’s data as well as my own reflections and artwork, I created the Portrait Synthesis (Figure 54) that is not a realistic portrait. The Portrait Synthesis, like others in this study, on the one hand, are rigorously grounded in the categories that emerged from the data analysis, and on the other hand, rely on my skills as an art therapist and visual artist to reflect on the artwork and convey the experiences using the artistic media. When I asked Margaret to provide feedback about my Portrait Synthesis of her, she validated the sense of overwhelm that my representation had. She wrote:

I think that it was a useful way to think through what I was feeling and give form to the general sense of being swallowed or consumed. It seems like when you

draw something and turn it into something physical it doesn't feel as threatening or scary. It just is what it is. So perhaps I gained some acceptance in this exercise.

Related to connection with the baby, another theme was **joy in the relationship** that related to the emotional and psychological connection that mothers experienced from closeness and relationality with the infant in the literature of medical and health sciences (McKinlay, 2013; McMahon, 1995; Nelson, 2003). The participants in this study expressed that the relationship with the baby was an emotionally rewarding one. Gabriela stated: "in the end, it's happiness. It's easy to say that I'm really happy or I love my baby but words really don't begin to describe how I feel." Alex said: "I feel his joy and then my joy as a mom".

Coping with stressors of adjustment was a major theme under the relational dimension of *beyond_words* experiences. In the literature of medical and health sciences on transitioning to motherhood, this theme describes the social and physiological dimensions of transitioning to motherhood. Coping with stressors of adjustment presented with two trends in the data: being **tired**, and the **support from the husband**.

- Being **tired** was a thread that was present in the participant's data. Although this did not emerge as a separate theme in Final Synthesis, accounts of being tired were presented by the mothers and were synthesized under the theme of coping with adjustment in the Final Synthesis. In medical and health sciences literature, this relates to the literature about Post-Partum Fatigue (PPF) in the physiological dimension of transitioning to motherhood (McMahon, 1995; Mercer, 1986; Hochchild, 1989; Runquist, 2006; Troy, 2003). For instance, Gabriela stated: "There's no way to describe how tired you are. Saying how tired I am does not begin to describe how and at some point you don't complain about it either because ... it's just a part of it". In her self-portrait, Gabriela illustrated the experience of being tired by drawing shadows under her eyes (Figure 45, left). In the Portrait Synthesis, I

illustrated this in the facial expression of the mother, and by drawing dark circles around the mother's eyes (Figure 45, middle).

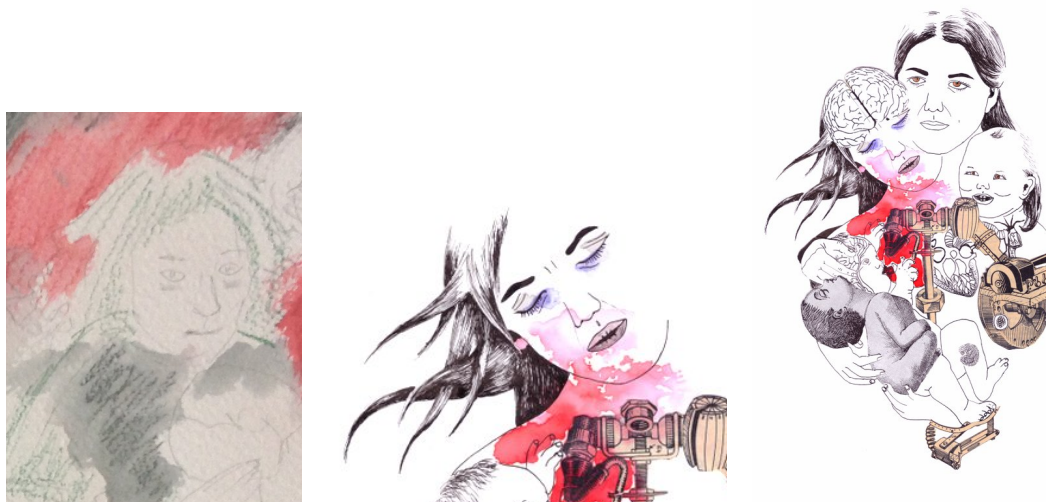


Figure 45. Being tired

In the literature, it was found that some mothers persevere through PPF because of the belief that children bring meaning to their lives (Runquist, 2006). In this study, Gabriela's accounts describe the existing literature. She stated:

In the literature, it was found that some mothers persevere through PPF because of the belief that children bring meaning to their lives (Runquist, 2006). In this study, Gabriela's accounts describe the existing literature. She stated:

I look tired but she looks so chubby that it is ... so most like, at some point you think it's worth it, it's working. I'm just feeding and feeding but she's thriving.

Which is what matters at the end.

The emerging Portrait Synthesis shows and tells Gabriela's story of persevering through the first year of transitioning to motherhood. The theme of being tired as a result of breast feeding was predominant in her data. In my reflections, I noted that at 11 months post partum, she was looking back to her experience of the first year from some distance. In my interpretation and

representation, I bring together the “feeding machine” and her happy, chubby baby. In the initial emerging stages of the Portrait Synthesis, I represented her as being tired but in the final stages of the Portrait Synthesis, I portrayed her looking back at her experiences with the sense of being happy, confident, and ready to move on. When I presented the Portrait Synthesis to Gabriela, she related to the emerging portrait. She wrote in her feedback:

Yes, I had an emotional response as I saw the artistic representation, particularly the slideshow of how it evolved. After a year, the difficulties of breastfeeding and the marathon feeding sessions had been deeply stored away in some corner of my brain however the portrait reminded me of how painful and stressful this time was. The portrait however also made me re-experience the transition out of these hard times to calmer and happier times.

This example demonstrates how montage portraits can allow the past and the future to co-exist simultaneously, thus transcending time and allowing the participant to reflect on her experiences over time. Moreover, the evolving nature of Portrait Synthesis mirrors the notion of transition to motherhood.

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The subtheme of being tired also relates to the demanding role with overwhelming 24/7 responsibilities caring for a new infant (Barclay et al., 1997; Darvill et al., 2010; Nelson, 2003) that was outlined in the social dimension of transitioning to motherhood in the literature of medical and health sciences. For instance, Margaret used the metaphor of clutter to express her experiences of being tired and overwhelmed:

one other thing I'm thinking about that's physically present but also kind of metaphorically present is clutter. I mean, I talked about the clutter and I feel that it's around me. But also life feels like it's just full of clutter. Between like the leaky breast and the baby pooping and producing all these diapers. But also having all these tasks to do.

- **Support of the husband.** In the literature of medical and health sciences, this theme relates to the social dimension in transitioning to motherhood. The relationship with the partner has been found to be strengthened during the first year of the transition (Darvill et al., 2010; Nelson, 2003; Prinds et al., 2014). In this study, the relationship with the husband, although not a separate theme, was a trend that was present in the data and was represented in the final synthesis under the relational *beyond_words* experiences. In this study, all participants acknowledged the husband/partner's presence and involvement in child care, and in supporting the mother. It is important to note that all mothers in this study had stable heterosexual partners/husbands and stable homes. Although I did not directly ask about the

partners, the participants volunteered this information. The importance of the husband was strongly expressed by Liz who chose to include her husband in the self-portrait as seen in the image below that features closeness between the mother, father, and child (Figure 46, left).



Figure 46. The husband's support: Liz

Gabriela also brought up the husband/partner, and acknowledged his support: “And I know that you didn’t ask about the father. But I think it’s important is the father. Because daddy is very supportive and helpful.” Gabriela expressed the presence of her husband/partner in a metaphorical way by adding his eye and hands to her montage self-portrait. (Figure 61). I represented the presence of the husband/partner in Liz’s and Gabriela’s emergent Portrait Synthesis (Figures 46, 47) by adding the husband’s arm around Gabriela and creating the husband next to Liz. The physical presence and closeness that is illustrated on the portraits points to and allows to represent the emotional presence of their husbands that the was important to the participants.

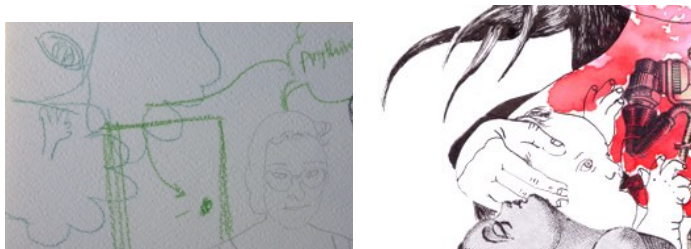


Figure 47. Gabriela: The husband's support

Imaginal Experiences

The phenomena that emerged under the imaginal experiences were the following:

fantasy of returning to a former life, awareness of darker fantasies, and positive fantasies for the future. These relate to the psychological and spiritual dimensions in the literature of medical and health professions.

The fantasy of returning to a former life was a theme that presented itself in the imaginal experiences, and related to the psychological dimension that was present in the medical and health sciences literature on transitioning to motherhood relating to **psychological loss of self** (Nelson, 2003; Hill, 2011; Hogan, 2008; Mercer, 1986). In medical and health sciences, loss was an overarching category that includes loss of control over one's life, time, independence, and previous lifestyle (Barclay et al., 1997); or loss of personal time (Mercer, 1986).

In this study, participants expressed a fantasy of returning to a former life in images and verbal reflections. Gabriela recounted how after becoming a mother her life revolved around feeding the baby: "And you're just feeding them constantly. And that's why you're just feeding and feeding and feeding and you can't really go out." She expressed her fantasy of returning to a former life by drawing a green door about which she stated: "A fantasy would be this big door and I can go out. I can think of anything, I can be anything! To go out the door." Gabriela further stated: "I think this is sort of this fantasy of going back to the life that you had but it's never going to be the same, the life that you had". In my interpretation, the green door is illustrated in the emergent Portrait Synthesis as an imaginal door that opens in Gabriela's head. Outside of the door, there is collage of a woman playing golf outdoors to emphasize Gabriela's desire to be able to work out. This example illustrates how the emergent Portrait Synthesis creates a story. Gabriela stated that she knew that she could not go back to the life that she had, and thus

the door was opened but then is closed in the final stage of the Portrait Synthesis. This also illustrates the fleeting nature of the fantasies inherent in *beyond_words* experiences that were captured



Figure 48. The metaphor of the door

using the emerging Portrait Synthesis.

Margaret expressed this sense of fantasy of returning to a former life through drawing of her former self disappearing. She stated:

I've been a very independent sort of self sufficient person. I've gone on road trips by myself, I've moved to places by myself, you know, basically on a whim, and I love to live sort of impulsively and...I can't do that.

Margaret expressed the disappearance of the former self in her montage self portrait (Figure 49, left) that depicts three faces: a faintly visible face on the left, a larger central face in middle, and the baby's face on the right.



Figure 49. Leaving the former self behind

The faintly visible face on the left is partially covered by the central face, thus leaving the face on the left “the former self”, on the background and partially invisible. She stated:

It’s almost like the part of me that’s disappearing or something because I feel kind of I feel compressed right now as an individual because ... It’s almost like I’m joining this person and leaving this person behind.

In the emerging Portrait Synthesis of Margaret, the fantasy of leaving her former self behind was expressed by superimposing a figure onto her face (Figure 49, right). My representation of this theme was the result of careful and sensitive data analysis. I drew the figure wearing a backpack to convey the part of Margaret that is leaving her. The figure is faintly visible that reflects Margaret’s rendering of her former self, yet in my interpretation, the full figure that is in motion more clearly represents the aspect of LEAVING, and the position of the figure as partially superimposed in Margaret’s head, suggests its placement in the imaginal realm.

Awareness of darker fantasies was another theme that emerged from this study. This relates to the existential meaning-making inherent in the spiritual dimension in medical and health sciences literature (Callister, 2010. 2004; Prinds et al., 2014; Mahoney, 2009; Schneider, 2013). Margaret stated that after becoming a mother, she became aware of her own mortality which was terrifying:

you start to think about life in a little bit of bigger way...And it can sometimes feel so terrifying and a little bit depressing and kind of empty. But also could feel very rich. I think just depending on what's going on.

In the medical and health sciences literature, it was noted that childbirth was regarded as a rewarding spiritual experiences. Childbirth was not the focus of this study, however, in one instance, Alex brought up her birth experience. Conversely to the literature, she expressed her visceral embodied experiences of giving birth during which she confronted difficult experiences and which she described using the metaphor of flood:

A flood of emotions, a flood of so many new experiences at once. A flood of blood and tissue that came out of me but that manifested in this whole new being
She expressed this experience in her artwork by using red and blue fluid colors and



Figure 50. The metaphor of the flood

strong, thrusting brush strokes. Alex was able to express herself through the artwork and then reflect on what she had created. She realized:

Yeah, wow, that's right! So not peaceful. So I was trying to, like, I was imagining a slingshot. A bow and an arrow came to mind. This pulling back

tension to release, you know the aggressive thrust here that radiates somehow here.

Positive fantasies for the future was the third theme relating to the imaginal experiences that emerged from this study. The participants expressed hope for a bright future for their babies, for instance, Gabriela hoped that “that her life is going to be the best thing ever...and really that’s a fantasy because you don’t know...”, and Liz said: “I’d like to weave a gorgeous wrap that’s made out of everything beautiful in the entire world and drape him in it”.

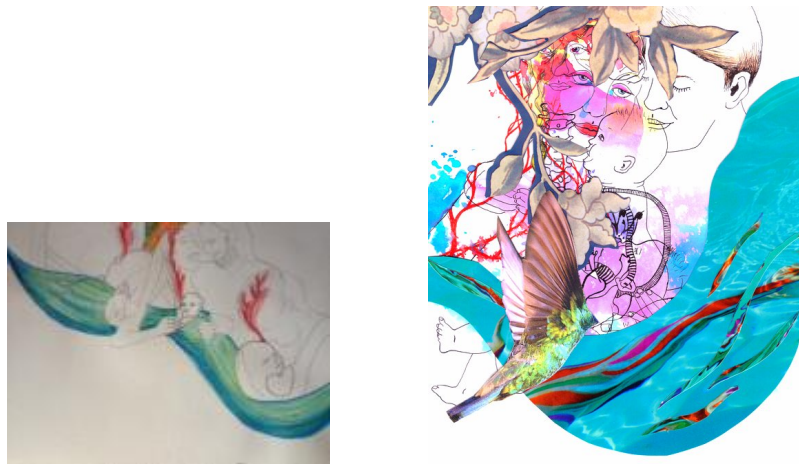


Figure 51. The metaphor of the wrap

This metaphor was illustrated by Liz in her artwork (Figure 51, left). To represent this theme, I created a blue wrap in the Portrait Synthesis of Liz (Figure 51, right). When I presented the Portrait Synthesis to Liz for her feedback, she stated “Articulating my desire to weave something beautiful to wrap around my baby was very powerful for me, and has continued to shape the way I interact with him”

Summarily, this section highlighted how this research brings together the rigor of social research and the power of representation through the arts to systematically investigate and represent the *beyond_words* phenomena that the participants experienced.

From the literature, it was known that transitioning to motherhood is a complex phenomenon including physiological, psychological, social, and spiritual dimensions that are intertwined (Taubman-Ben-Ari, Shlomo, Sivan, & Dolizki, 2009; Prinds, et al., 2014). And thus, by creating the montage self-portraits the participants were able to begin integrate these dimensions of transitioning to motherhood through artwork and metaphors. Margaret realized the importance of creating the self-portrait in her meaning-making process. Four weeks after delivering her baby, the artistic exploration provided her with access and insight to her new *beyond_words* experiences. Margaret stated:

But I feel that the part of my brain that is about words and descriptions is kind of shut down. And so maybe this [creating artwork] was really kind of natural space for me to explore even if I didn't completely understand why I was making these decisions ...and it was kind of liberating. I remembered moments when you would ask me a metaphor coming up or something and I would just sort of continue working on the artwork to see if that somehow brought the answer to me.

Another participant, Alex, also stated that creating artwork and metaphors allowed her to explore her *beyond_words* experiences by getting closer to the embodied experience itself:

And just take a moment to yeah, create some metaphors. Not just talk about it but metaphors allow me to get closer to the embodied experiences that's so... I think the metaphor is what allows the experience of *beyond_words* to be relived.

In this study, it would not have been possible to authentically represent and communicate the participants' experiences using discursive language, and thus these *beyond_words* experiences were communicated using the aesthetic power of montage images and metaphors. And thus, I

used my skills as a visual artist, art therapist, and arts-based researcher to create the Portrait Syntheses and the Final Synthesis in order to elicit visceral and emotional reactions in the viewers. In this study, the results owed their aesthetic power to the metaphors and the montage of images. Representing the results using the metaphors and visual artwork was different from discursive language. The richness of metaphors and visual images were more immediate, communicate the depth and detail and emotion. Images have the ability to holistically communicate various dimensions of experience (Sousanis, 2015; Weber, 2008). The montage portraits allowed these different dimensions of experience to co-exist. Moreover, the montage portraits allowed for the past and the present to exist simultaneously as in Gabriela's and Taylor's portraits, for instance.

Aesthetic power is also used to evaluate the authenticity of ABR (Barone & Eisner, 2012; Chilton & Leavy, 2014; Leavy, 2009). The audience members who experienced the presentation of the results related to the results as presented in detail in Chapter IV. The audience members experienced this research viscerally and emotionally. For instance, one person stated: "...the sense of blending, overlapping of a myriad of emotions and sensations. I really felt that I was witnessing/experiencing the intersubjective relationship between mother, child, and father". Another person wrote: "The powerful sense of intersubjectivity. You made this phenomenon very tangible".

The investigation and representation of the *beyond_words* phenomena in transitioning to motherhood in this study suggests applications to art therapy practice and education of new mothers, and implications for further research. These applications and implications will be discussed in the next sections.

Applications to Art Therapy Practice

Applications to art therapy practice include applying the method that in this study was used for data generation with participants (Artistic and Open Ended Responsive Interview,

Appendix E) to art therapy practice with new mothers (and their partners); using the research reflexivity (Artistic and Written Researcher Reflexivity Guide, Appendix G) in art therapist's post-session reflexivity; and the consideration of art materials in art therapy practice. In addition, applications to interdisciplinary clinical practice will be discussed.

Application of the Data Generation Method (Artistic and Open Ended Responsive

Interview to Art Therapy practice

Self-portraiture and iterative verbal follow-up in the researcher's presence were inherent in data generation from the participants in this study. This method of art making and verbal follow-up mirrors art therapy practice, and thus, art therapists can apply the method that was used in this study for data generation, into their practice with new mothers. Self-portraiture has been recognized as a genre that enables self-reflection on the part of the artist in the fine arts literature (Barbosa, 2011; Hall, 2014; Martin & Spence, 1985; West, 2014) as well as art therapy literature (Alter-Muri, 2007; Davis Halifax, 2003; McGann, 2006). In this study, montage self portraits were created by the participants by tracing photographs and adding and superimposing drawings onto the portrait. And thus, the results were not "realistic" self-portraits but a more complex illustration of the sensory-embodied, relational, and imaginal experiences that were made visible in the artwork. This permitted the expression of the participants' objective, subjective, and intersubjective realities (Chilton, Gerber & Scotti, 2015). In art therapy practice, the method might facilitate an in depth discovery, expression, and articulation of these multiple realities and experiences. Through the method of montage, the past and the present can co-exist and through the juxtaposition and embodiment, montage can facilitate exploration and insight. A goal in art therapy might be an acknowledgement and integration of these multiple experiences in order to gain greater awareness of the different aspects of the complex life changing experience that transitioning to motherhood is, and thus to be able to better understand, accept, and begin to integrate these different aspects of the experience.

Another clinical application would be to expand the method to include both the new mother as well as her husband/partner in a joint exploration of *beyond_words* phenomena. In this study, two participants, Liz and Gabriela, specifically represented their husbands in their self-portrait. In addition, the men in the audience who were present in the presentation of findings, related to the mother's experiences. For instance, one man stated:

I did experience many transference responses based on connecting to my own experiences as a first time parent and supporting/ considering what my wife went through. Truly felt a range of emotions including joy, anxiety, pain, excitement and more...

Based on the mother's inclusion of the husband and the men's/new father's feedback, I recommend to expand this method to working with couples who have recently become parents. For instance, the concept of the self-portrait might be expanded to a family portrait that both partners could work on together.

Applying Artistic and Written Researcher Reflexivity Guide to Art Therapist's Post-Session Reflexivity

Art therapists often use reflexivity in both artistic as well as written forms in order to emotionally relate to the client, understand their counter transference to the client, and gain greater insight into the client's experiences. In this study, Artistic and Written Researcher Reflexivity Guide (Appendix G) was used to promote reflexivity in the researcher. Creating response artwork and writing about my impressions about the participants, helped me emotionally and viscerally relate to the participant, and to record these reflections. When I met with the participants during the data generation, I experienced emotional attunement and had visceral sensory sensations as a reaction to the participants' artwork and stories. By engaging in responsive art making and written reflexivity, I was able translate my emotional attunement with the participants into artistic form. This in turn helped me critically reflect on both on the

participants' experiences as well as my countertransference to the participant. Art therapists can apply Artistic and Written Researcher Reflexivity Guide in order to promote reflexivity in their clinical practice.

Recommendations for the Use of the Art Materials

The data generation in this study was conducted in one meeting. In art therapy practice, the art therapist and the client might work over a period of time to explore the client's experiences in greater depth. This might also include elaborating on the details of the montage self-portrait in greater depth, working from sketches to a more formed expression. As a recommendation, if the art therapist works with the client in several sessions, the client might start with sketches using the graphite pencils and watercolor pencils, as it was done in this study. In subsequent sessions, these sketches might be elaborated using mixed materials and technique in order to further explore the *beyond_words* phenomena. At this stage, in addition to graphite and watercolor pencils, the client might be offered pens, liquid ink and collage materials to add further definition and details to her self-portrait. Before offering any unfamiliar materials to the client, the art therapist should demonstrate how to use the materials. Adding details and using various materials might offer the client a positive experience of artistic mastery and self-expression.

In this study, to create their montage self-portraits, the participants were asked to select photographs of themselves and their babies. The photographs were used for tracing purposes: the mothers-participants were asked to trace several photographs onto the paper to create a self portrait of themselves. The rationale for using the photographs for tracing purposes was based on their power to elicit data (Zartler & Richter, 2014; Vivienne & Burgess, 2013), and also based on the piloting phases of this study in which it appeared that drawing a self-portrait might be intimidating to the participants with limited prior artistic experience. The participants in this study were not required to have any prior artistic experience. Using the tracing technique proved to be a structured activity that minimized the emphasis on artistic talent. In art therapy literature, it has been pointed out that creating self-portraits may at times be intimidating and anxiety-provoking

for clients (Alter-Muri, 2007). In this study, the tracing technique was less anxiety-provoking and yielded realistic-looking results and based on the results of this study, I recommend this method to be applied to art therapy practice.

As a cautionary note, the art therapist should be aware that this is a powerful method because of the reflexive qualities of self-portraiture that, in combination with liquid materials, might elicit strong emotions and memories in the client. The new mothers might be surprised by and sensitive to such content and thus the art therapist is advised to use her clinical skills to build rapport, and to provide a supportive, holding therapeutic space in order for the client to feel safe to explore and experiment with the creative expression in the presence of the art therapist.

Applications to Interdisciplinary Clinical Practice

The participants of this study find creative self-expression and reflection useful and recommended it to other new mothers. In addition, the audience feedback suggested that there is a need for support among new mothers. New mothers are not a population that art therapists typically work with, however nurses, midwives and GYN-OBs who prepare women for delivery and follow up with them post-partum, have frequent contact with new mothers both before and after they deliver. An application of interdisciplinary collaboration might include a collaborative pre-and/or post partum group for women. While the nurse or midwife might provide more psychoeducational and health related information, the art therapist would engage women in a more experiential and creative exploration of their transitioning to motherhood where they can explore their *beyond_words* sensory-embodied, relational, and imaginal experiences. A collaboration between an art therapist and a nurse, social worker, or a GYN-OB might help prepare women for and assist them in their transition.

Educational Applications

One of the purposes of ABR is communication of findings to and engaging with wider audiences beyond the academia (Barone, 2008; Cahnmann-Taylor & Siegesmund, 2008; Leavy,

2015, 2009; Finley, 2008). Educational applications relative to this study include sharing the arts-based results of this study with new mothers and mothers-to-be. The purpose of this would be to prepare them for transitioning to motherhood, and validate the *beyond_words* experiences that they might encounter in this transition. Another educational application that arose from the study is using this study as an example to teach art therapists how to use and advance their clinical skills to conduct ABRs.

The educational applications for new mothers and mothers-to be arose from the audience feedback of the exhibition of results that included Portrait Syntheses and the Final Synthesis. Usefulness (Barone & Eisner, 2012; Chilton & Leavy, 2014; Leavy, 2009) and aesthetic power (Barone & Eisner, 2012; Chilton & Leavy, 2014; Leavy, 2009) were two authentication measures in ABR that were used in this study for authentication purposes. The audience members were asked to answer questions relative to usefulness and aesthetic power of the study (Appendix F).

Aesthetic power of the research was validated by audience members. Specifically, the audience members found the results were engaging by evoking and eliciting sensations, memories and personal associations. The experience of *beyond_words* phenomena is different than an explanation and thus might prepare the new mothers on a sensory-embodied, relational, and imaginal level through the phenomenological experience. Because of the aesthetic power that can be engaging to new mothers, mothers-to be, and their partners, presentation of the results might be useful to them. The audience members indicated in their feedback that the results might be useful to first-time mothers and mothers to be in **preparation, expression, and validation of motherhood experiences**; the need of **building connection and support among new mothers**; and usefulness to **clinicians who work with new mothers**.

Another education implication of this research is the advancement of skills for art therapists who wish to conduct ABR. Because of therapeutic emotional attunement with the participant, experience with facilitating art making with the client, art therapist's use of reflexivity, and the artistic representational skills, there are many similarities between how art therapists work with

clients, and how arts-based researchers conduct ABR. Because of these skills, some art therapists are uniquely equipped to perform ABR. Not only can an art therapist conduct research that can be potentially useful and therapeutic to the client, her ability to represent the research results can open up her clients' unique experiences and conditions to the wider public. Examples of ABR conducted by art therapists are beginning to emerge but are still relative few. ABR is not typically taught in Master's level art therapy training and many art therapists are not familiar with ABR and lack training in ABR methods. Art therapists who wish to conduct an ABR study are advised to take both introductory and advanced courses on ABR in order to develop their skills as art therapists into those of ABR researchers. Using this research study as an example in an ABR course can serve as a practical example for art therapists of how to design and conduct an ABR study.

Implications for Further Study

Based on the results of this study, there are several implications for further study:

1) Studying the *beyond_words* phenomena in art therapy practice

This exploratory study use the ABR methods that were informed by art therapy practice, however, the study was not intended as art therapy. The participants in this study, as stated in their feedback, found using creative methods and reflecting on their *beyond_words* experiences in transitioning to motherhood useful. And thus, an implication for further study includes studying *beyond_words* phenomena using this method in the context of art therapy practice with first-time mothers. Using the Artistic and Open Ended Responsive Interview (Appendix E), the art therapist might investigate how exploring *beyond_words* experiences might assist new mothers in expressing, articulating and gaining insight into their experiences in transitioning to motherhood.

2) Implications for studying mothers who experience post-partum mental health issues

This exploratory study was aimed at a normative sample. In addition to studying a healthy sample of mothers, it is recommended that this method can be used to study groups of mothers

with mental health conditions. For instance, Post Partum Depression is a common mental illness associated with post partum women. An implication for research includes studying how mothers with Post-Partum depression express and make meaning of their *beyond-words* experiences using montage portraiture. And thus, it might shed more light into understanding how women with Post-Partum depression experience transitioning to motherhood. Moreover, the arts-based representations might help the wider public better understand and empathize with mothers who struggle with Post-Partum depression.

When applied to art therapy practice, another implication would be to study whether the method of data generation (Artistic and Open Ended Responsive Interview, Appendix E) might help ameliorate the symptoms and increase the functioning of the new mothers with post-partum mental health conditions.

3) Implications for Studying Diverse Populations

The participants in this study were highly educated, predominantly Caucasian, middle class women with stable homes and heterosexual partners. An implication for further study is investigation of *beyond_words* phenomena with diverse racial and socioeconomic groups of women.

4) Breastfeeding as a central *beyond_words* phenomenon

Another implication for further research is the central theme of breastfeeding that emerged from this study. A major theme that emerged from this exploratory study was the importance of breastfeeding across the physiological and psychological dimension in transitioning to motherhood. The artistic and oral data that were generated and the arts-based representations in this study provoked the viewers to emotionally relate to and viscerally experience of the lived experience of breast feeding. Because of the centrality of this phenomenon in transitioning to motherhood, the implications for further study include using the method to study the metaphors of breastfeeding in greater depth and exposing the results to wider audiences.

Limitations

There are several limitations of this study that are based on the participant characteristics and methodology. A limitation of this study is that the participants were recruited in a circumscribed geographical area in two large cities in the United States and thus the results do not reflect other geographical areas. Four of the participants in this study were Caucasian, and one Latina and thus the results do not reflect the experiences of women with different ethnic and cultural backgrounds. All of the participants were college educated or held advanced graduate degrees, therefore, these participants may have been more creative and verbal in their expressions. All participants were middle class women who had stable homes and heterosexual partners. And thus, the results do not reflect the experiences of first-time mothers with less stable socioeconomic backgrounds.

A limitation of the method was that data generation was conducted in one session. Allocating several sessions for data generation might have provided the mothers with additional time to reflect on their experiences in greater depth.

Another limitation is the audience feedback. The audience members who were able to access the art exhibit and the play and provide feedback were invited guests who were faculty, staff, and graduate students at Drexel University's College of Nursing and Health Professions. Presenting the results to lay audiences for their feedback would shed light on how this research is received by the more general public.

CHAPTER VI: CONCLUSION

The purpose of this arts-based research study was to conduct a systematic in depth exploration of how first time mothers express and make meaning of what is *beyond_words* in their experiences of transitioning to motherhood. The wider context of transitioning to motherhood has been well researched in the disciplines of medical and health sciences. It has been found that transitioning to motherhood is a life changing experience that encompasses the physiological, the psychological, the social, and the spiritual dimensions. However, transitioning to motherhood also includes the less visible sensory-embodied, relational, and imaginal experiences that are more likely unconscious and thus beyond conscious awareness and difficult to articulate (Crossley, 2009; DeVault, 1991; Lintott, 2011; Prinds et al., 2014; Sered, 1991; Schmied and Barclay, 1991). These phenomena are conceptualized as *beyond_words* for the purpose of this study. The study aimed to answer the following twofold research question:

- 1) How do first-time mothers express and make meaning of their *beyond_words* experiences, and
- 2) how are these experiences represented using montage portraiture?

The participants in this study were five first-time mothers in their 30s who represent a homogenous sample of middle class, predominantly Caucasian, heterosexual, highly educated women who had stable partners and homes.

The literature review that was conducted for the purpose this study spanned the disciplines of medical and health sciences, philosophy, anthropology, psychoanalysis, art history, art therapy, and research methodologies. In order to present the complex multidimensional experiences that women encounter when they become mothers, the literature review provided a comprehensive overview of the physiological, psychological social, and spiritual dimensions of transitioning to motherhood. Relative to the method of this study, an overview of portraiture as used in the fine arts, qualitative and arts-based research, and art therapy, was presented. A brief history and current developments of ABR were also presented.

In order to honor and capture the emergent, vital, and multi-dimensional nature of *beyond_words* in transitioning to motherhood, ABR was used as a design of this study. ABR is an emergent research paradigm that combines the rigor of social research with the power of artistic representation of findings (Leavy, 2009, 2015). In this study, the arts-based results bring to life and invite the viewer to live the mothers' *beyond_words* experiences. At the same time, these results describe the wider context of transitioning to motherhood that has been investigated in the disciplines of medical and health sciences.

Montage portraiture is the data generation and analysis method that was specifically designed for this arts-based research study. This method builds on the data generation procedures that have used portraiture in related interdisciplinary fields of the fine arts (Brilliant, 2002; Freeland, 2010; West, 2004), qualitative research (Bagnoli, 2009; Lawrence-Lightfoot 1983, 2004; Lawrence-Lightfoot and Davis, 1997; Zartler & Richter, 2014), arts-based research (Gerstenblatt, 2013; Jongeward, 2009; Rippin, 2012), and art therapy practice (Alter-Muri, 2007; Costello-Du Bois 1989; Davis Halifax, 2003; Fish, 1989, 2012; Franklin, 2010; Hanes, 2007; Kielo, 1990; McGann, 2006). Montage portraiture also includes the principles of arts-based research practices in which the researcher is actively engaged in iterative artistic process during all phases of the research study (McNiff, 2011). In the phases of data generation, analysis, and representation, this method includes artistic and textual components. The method is called Montage Portraiture because it employs elements of montage and portraiture in exploration and communication of the participants' *beyond_words* experiences. Montage in this study was intended not to eradicate but to expose the layers of experiences. The process of the creation of the portrait was as important as the final result itself and thus, montage portraiture in this study, in its combination of images and narratives, unfolds like a sequence of snapshots. Moreover, the evolving and transitioning nature of the montage portraits mirrors the notion of transition to motherhood.

The arts were used throughout the study to systematically investigate the phenomena under study. First, the mothers-participants were asked to create a montage self-portrait featuring themselves and their baby, and by adding metaphors and illustrations to their drawings, were encouraged to visually represent and verbally reflect on multiple aspects of themselves and their experiences. This method of selecting, juxtaposing, and adding to their drawings that was inherent in creating the montage self-portraits provided an opportunity for the exploration of a range of complex and intertwined experiences that are inherent in transitioning to motherhood (Taubman-Ben-Ari et al., 2009; Prinds, et al., 2014) and also expression and discovery of different aspects of the self (Martin, 1996; Meskimmon, 1996). As an arts-based researcher, I also engaged in response art and reflexive memos that I used as data.

Following data generation by the participant, researcher reflexivity, and a multi-phase data analysis, I created the Portrait Syntheses and the Final Synthesis to represent the participants' experiences. The portraits featured in this study are not unidimensional representations of just the outside appearance of the person but aim at unfolding the complexity of the sensory-embodied, relational, and imaginal experiences that the participants lived through. It would not have been possible to authentically represent and communicate the participants' experiences using discursive language, and thus these *beyond_words* experiences were communicated using the aesthetic power of montage images and metaphors. And thus, I used my skills as a visual artist, art therapist, and arts-based researcher to create the Portrait Syntheses and the Final Synthesis in order to elicit visceral and emotional reactions in the viewers. In this study, the results owed their aesthetic power to the metaphors and the montage of images. Representing the results using the metaphors and visual artwork was different from discursive language. The richness of metaphors and visual images were more immediate, communicate the depth and detail and emotion. Images have the ability to holistically communicate various dimensions of experience (Sousanis, 2015; Weber, 2008). The montage portraits allowed these different dimensions of experience to co-exist.

This arts-based research study has several applications to art therapy practice, educational applications, and implications to further research. Elements of this study can be applied to art therapy practice. Applications to art therapy practice include applying the method that in this study was used for data generation with participants (Artistic and Open Ended Responsive Interview, Appendix E) to art therapy practice with new mothers (and their partners); using the research reflexivity (Artistic and Written Researcher Reflexivity Guide, Appendix G) in art therapist's post-session reflexivity; and the consideration of art materials in art therapy practice. In addition, an interdisciplinary collaboration in clinical practice with new mothers between an art therapist and a nurse, social worker, or a GYN-OB might help prepare women for and assist them in their transition.

Educational applications relative to this study include sharing the arts-based results of this study with new mothers and mothers-to-be. The purpose of this would be to prepare them for transitioning to motherhood, and validate the *beyond_words* experiences that they might encounter in this transition. Another educational application that arose from the study is using this study as an example to teach art therapists how to use and advance their clinical skills to conduct ABRs.

Based on the results of this study, there are several implications for further study that include studying *beyond_words* phenomena in art therapy practice, and exploring *beyond_words* phenomena with diverse populations of mothers and mothers who encounter mental health issues during transitioning to motherhood. Another implication for further study is based on the centrality of breastfeeding in this study, which warrants the exploration of this phenomenon in greater depth.

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APPENDICES

Appendix A: Recruitment Flyer



Drexel University
Recruiting Volunteers for a Research Study

APPROVED
 Human Research Protection
 Protocol # 1502003418
 Approval Date: 2/27/15
 Expiration Date: 2/26/16

HRP

Principal Investigator **Nancy Gerber, PhD, ATR-BC, LPC**, and Co-Investigator **Victoria Scotti (PhD Candidate)**, from the Ph.D. Program in Creative Arts Therapies at Drexel University invite volunteers to participate in a research study. The research study is being conducted as partial fulfillment of Ms. Scotti's doctoral degree.

Title of the Study: *Beyond words: Making meaning of transitioning to motherhood using montage portraiture. An arts-based research study*

Research Objectives
 The purpose of this arts-based research study is to explore how first time mothers express and make meaning of what is *beyond words* in their experiences of transitioning to motherhood. *Beyond words* is what is sensed, felt, and imagined in adjusting to motherhood but difficult to put into words. Self-portraiture and interview will be used to explore what lies *beyond words* in transitioning to motherhood. The participants will create self portraits by tracing photographs of themselves and their babies, and drawing onto the portraits. In addition, they will verbally reflect on their experiences of transitioning to motherhood. No artistic experience or talent is needed!!
 The total time allotted is 2.5 hours that includes informed consent (30 min) and art making and interview (1.5 hours), and member checking after the data analysis of the research (30min). No artistic talent or experience is needed to participate in this research. The research participants will be compensated with \$50 for their time.

Information for Research Subjects Eligibility
 Individuals of all racial, ethnic, religious and socio-economic backgrounds are eligible for the study.

Inclusion criteria:

- Participant is an adult (over 21 years of age) first-time mother.
- Participant has given birth to a singleton infant within 12 months prior to the research.
- The infant was born at 37 or more weeks of gestation and admitted to a newborn nursery
- Participant resides within the 5 boroughs of New York City (Brooklyn, Queens, Manhattan, the Bronx, Staten Island), or in the Philadelphia Metropolitan area including Montgomery, Bucks, Delaware, and Chester Counties.
- Participant can read and speak English.

Exclusion criteria

- Individuals cannot participate if they have more than 1 child, or are currently pregnant.
- Individuals cannot participate if they have been diagnosed with a severe mental illness such as schizophrenia, bipolar disorder, major depressive disorder, or post-partum depression

Location of the research and person to contact for further information
 The research will take place in the participant's home for her convenience, the baby may be present as well.

If you are interested in participating in the study, please contact Victoria Scotti, PhD Candidate, by e-mail vs391@drexel.edu, indicating your phone number and the best time to reach you. Thank you!

This research is conducted by a researcher who is a member of Drexel University

Appendix B: E-mail Script

Dear (name of the potential participant),

My name is Victoria Scotti, I am an art therapist and Doctoral Candidate in the PhD Program in Creative Arts Therapies at Drexel University in Philadelphia, PA. As a partial fulfillment of my doctoral degree, I am conducting a research study about first-time mothers' experience of transitioning to motherhood. The title of the study is *Beyond _words: Making meaning of transitioning to motherhood using montage portraiture. An arts-based research study.*

(Name of the referral source) gave me your e-mail address and said that you might be interested in participating in the study. (Name of the referral source) may have already forwarded the recruitment flyer to you. The flyer contains information about the study, and eligibility criteria, please find it again attached. If you consider participating and would like to know more about the study, please reply to this e-mail and provide your telephone number and the best time to contact you, and I will call you.

If you cannot participate at this time but know of another first-time mother who might be eligible and willing to participate, may I please ask you to forward the attached flyer to her?

Thank you in advance,
Victoria Scotti, PhD Candidate
Department of Creative Arts Therapies
Drexel University, Philadelphia, PA

Appendix C: Telephone Script

The researcher calls the potential participant (phone ringing)

-(The potential participant picks up). If she does not state her name when picking up the phone, the researcher will ask:

-Hello! Is this ...(potential participant's name)?

-(If indicates yes, the researcher will continue):

-Hello, my name is Victoria Scotti, I am a Doctoral Candidate at Drexel University. I received your email and I am calling about the research study about transitioning to motherhood. Is this a good time to talk?

-(If indicates, yes, the researcher will continue):

-I received your e-mail, thank you for your interest in participating in the study. I would like to ask you a couple of questions to see if this study is a good fit for you. Is that ok?

-(If indicates yes, the researcher will continue)

-In the flyer that you received, I listed the inclusion and exclusion criteria for this study. Have you read the inclusion and exclusion criteria?

-If yes, researcher will continue

-Thank you. Do you meet all of these criteria?

-If yes, the researcher will continue

-Thank you! You are eligible to participate in the study. Do you think you might want to participate in the study?

-If yes, the researcher will continue.

-Thank you! Do you have any questions about the study?

-If yes, the researcher will answer any questions. Then, the researcher will continue.

- The research activities will take place in your home. Is that ok with you?

-If yes, researcher will continue

-I would like to let you know that the total time that this research will take is approximately 2.5 hours. We will meet once in person for about 2 hours, and once I have analyzed the data, I would like to share the results with you by e-mail, and you can provide feedback by phone, Skype, or e-mail. This should take approximately 30 minutes. After you provide feedback, I will send you a check with \$50 in the mail. Is that ok with you?

If yes, the researcher will continue.

-Is there anything else that you would like to ask? (the researcher answers any questions)

-Thank you! I would like to schedule a time so that we can meet at your home and go over the informed consent. You are under no obligation to sign it but if you choose to sign it, we can proceed to the research activities during the meeting. The informed consent will take about 30 minutes, and the research activities will take about an hour and 30 minutes. The whole process should take about 2 hours.

- Do you have any questions? (researcher answers any questions)

- Thank you! Would you like to schedule a meeting time?

- If yes, the researcher continues. When would be a good time to meet?

- Indicates the time.

-Thank you, that will work! May I have your address please?

-Provides the address.

-Thank you! Also, I would like to let you know that the research activities will involve tracing from photographs of yourself and your baby. It would be convenient to have some photographs handy on the day that I arrive. The photographs can be printouts or photocopies, or actual photographs. If you could, please select up to 6 photographs of yourself separately or with your baby. You do not need to show them to me until you sign the consent form. Do you have any other questions?

-If yes, researcher answers any questions. Then continues. It was very nice to talk to you...(potential participant's name). Thank you for your time today! I look forward to meeting you in person on (date) at (time). If something comes up, please e-mail me or call me. My phone number is (...). Have a nice day and goodbye!

Appendix D: Research Log
Research log

Date	Name	PIN	Meet eligibility criteria Y/N	Interested in participating? yes/no	Date of scheduled meeting (informed consent, potential data collection)	Phone number, Address, e-mail

Appendix E. Artistic and Oral Open Ended Responsive Interview Guide

Objective	1.Question (to be answered orally by the participant)	2. Artistic response (to be depicted artistically by the participant)
<p>Objective 1: To learn about the participant's choice of photographs. This will give the participant an opportunity to tell the researcher about herself and her experience of transitioning to motherhood as an introduction to the interview.</p>	<p>Question: Please tell me why you chose these photographs.</p> <p>Probe: Is there anything specific about these photographs that you would like to tell me about?</p>	
<p>Objective 2: To learn about the participant's experience of creating the artwork in her own words as an introduction to the interview.</p>	<p>Question: In your own words, please describe this self-portrait.</p> <p>Probe: Can you say more about what you were thinking or experiencing as you were creating the portrait?</p>	
<p>Objective 3: To learn about the participant's general <i>beyond_words</i> experiences of transitioning to motherhood.</p>	<p>Question: In your transition to motherhood, can you tell me about any experiences that were <i>beyond_words</i>?</p> <p>Probe: Can you tell me more about these experiences?</p>	<p>Can you add some pictures, lines or color to your self-portrait that illustrates these experiences? (The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)</p>
<p>Objective 4: To learn about specific <i>beyond_words</i> experiences of transitioning to motherhood: the physical sensory embodied experiences of becoming a mother</p>	<p>Question: Can you tell me about the physiological sensations that you are experiencing since you became a mother? For example, physical closeness to the baby, touching, holding the baby. What kind of sensations does that bring up?</p> <p>Probe: Is there any particular sensation that stands out to you?</p> <p>Probe: Can you think of a metaphor (a word, an object that describes your experience) or a simile that</p>	<p>Can you add some pictures, lines or color to your self-portrait that might show those sensations that you experienced? You may choose to illustrate the metaphor that you used for the sensory-embodied experience. (The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)</p>

Objective	1.Question (to be answered orally by the participant)	2. Artistic response (to be depicted artistically by the participant)
	describes your sensory and embodied experiences as a mother?	
Objective 5: To learn about the specific <i>beyond_words</i> experiences of transitioning to motherhood: the relational experiences with the infant.	<p>Question: Can you describe how you are experiencing the relationship with your baby since you became a mother.</p> <p>Probe: How do you see yourself in the relationship with the baby?</p> <p>Probe: Can you think of a metaphor (a word, an object that describes your experience) or a simile that stands for the relational experiences with your child?</p>	<p>Can you artistically illustrate the relational experiences with your baby on this self-portrait? You may choose to illustrate the metaphor that you used to describe the relational experiences.</p> <p>(The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)</p>
Objective 6: Learn about specific <i>beyond_words</i> experiences: the imaginal experiences of transitioning to motherhood.	<p>Question: Can you describe any memories, fantasies, or daydreams that you have about yourself and/or your baby since you became a mother?</p> <p>Probe: Can you think of a simile or a metaphor (a word, an object) that describes you when you became a mother?</p>	<p>Can you please depict these imaginal experiences on this self-portrait?</p> <p>(The participant may choose to draw this on a separate piece of paper, and then trace it onto the self-portrait)</p>
Objective 7: To provide closing to the interview and obtain key points from the participant.	<p>(Contemplate final portrait and the digital photographs that were taken after each step of portrait creation)</p> <p>Question: What was the experience like for you to create this image, and talk about it?</p> <p>Question: What aspects of your portrait stand out particularly strongly for you?</p> <p>Question: Could you please provide a title to this self-portrait?</p>	
Objective 9: To obtain demographic data and	Question: Thank you, this concludes our research	

Objective	1.Question (to be answered orally by the participant)	2. Artistic response (to be depicted artistically by the participant)
information related to delivery and breastfeeding of infant	<p>procedures for today. May I ask you some brief demographic questions and some questions related to the mode of delivery and breastfeeding?</p> <p>Question: May I ask you the year of your birth?</p> <p>Question: When was your baby born?</p> <p>Question: Did you deliver vaginally or by c-section?</p> <p>Question: Did you breastfeed your baby, and if yes, how long did you breastfeed?</p>	
Objective 8: Debriefing	<p>To conclude, I would just like to check in with you: How are you feeling? Do you have any questions for me? Do you feel that you might need any emotional support?</p>	

Appendix F: Audience Feedback Form

Audience feedback form

Instructions: Thank you for attending the art exhibit. This art exhibit reflects the research findings of the arts-based research study entitled *Beyond words: Making meaning of transitioning to motherhood using montage portraiture*. This research is being conducted as partial fulfillment of Victoria Scotti's doctoral degree. The purpose of this exhibit is to share the research findings of the data that were collected from 5 first-time mothers. I appreciate your feedback about this art exhibit. Please fill out the feedback form and leave it in a box with the slot. I would like this feedback to be anonymous; please do not write your name on the form. Thank you!

1. How would you describe, in a few words, what you witnessed in the exhibit?
2. What did you learn about the *beyond_words* that mothers experience in their transition to motherhood?
3. How has this research impacted your attitude and empathy towards first-time mothers?
4. In what way might accessing the results from this research be useful to first-time mothers, mothers-to-be and/or art therapists or other clinicians who work with new mothers?

5. When you went through the exhibit did you experience any emotional responses?

6. Were there any particular parts of the exhibit that evoked emotions or sensations?

7. Which feelings did this research evoke in you?

8. What personal images or experiences did this research evoke in you? Please share any personal memories that came to mind.

Appendix G: Participant Feedback Form

1. In your own words, can you describe what you see in this portrait?
2. Do the artistic and written representations of this research accurately reflect your *beyond_words* experiences in transitioning to motherhood? If yes, how and why? If no, why not?
3. If you could change anything that you think does not accurately represent what you expressed during the interview, what would you change?
4. What did you learn about your own *beyond_words* experiences in your transition to motherhood?
5. Did you find that this research was useful to you? If yes, why? If not, why not?
6. In what way might accessing the results from this research be useful to first-time mothers, mothers-to be and/or other groups of people?
7. When you look at the artistic representations and read the narratives, do you have an emotional response? Do you have any sensations? What feelings does the artistic and written representation of your experience evoke in you? Please describe!
8. Please share any other thoughts or suggestions that you might have about the research.

Thank you!

Appendix H: Artistic and Written Researcher Reflexivity Guide

Objective	Question to be answered in written form	Artistic response
To record the researcher's observation and emotional response to the participant.	What is my overall impression of the interview? What feelings did this interview elicit in me?	The researcher will create an initial portrait sketch of the participant depicting her initial impression of the participant. This phase includes positioning the participant and her infant spatially (center of paper, in one corner, etc) and in relation to each other (the infant inside or outside, close to mother or distant). The size of the portrait, the broad posture (e.g. sitting, standing, lying down), activity (e.g. sleeping, holding the infant, playing with infant, etc)
To identify, record and depict the specific details about the participant.	Which specific details (in appearance as well as her inner world) did I observe about the participant?	Add the specific details to the portrait. The details about appearance might include how the participant was groomed, her body type and shape, etc. The inner world such as emotional state, mood, etc might be portrayed by depicting the facial expression, the posture of the body etc., and by adding color emphasize emotional state and mood.
To identify, record, and depict the <i>beyond_words</i> of the participant's experience.	Which <i>beyond_words</i> aspects of transitioning to motherhood <ul style="list-style-type: none"> • Sensory-embodied • Relational • Imaginal stood out in this interview? 	The researcher will artistically add the <i>beyond_words</i> aspects to the portrait. This may be done more abstractly by adding color, line, and abstract shapes to the portrait or more figuratively by illustrating the metaphors that the participant brought up using drawing, painting, or collage.

Appendix I. Informed Consent

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Drexel University Consent to Take Part In a Research Study

1. Title of research study: *Beyond words: Making meaning of transitioning to motherhood using montage portraiture. An arts-based research study.*

2. Researcher: *Nancy Gerber, PhD, ATR-BC; Victoria Scotti, co-investigator & PhD Candidate*

3. Why you are being invited to take part in a research study

We invite you to take part in a research study because you are an adult (over 21 years old) first-time mother who has given birth to a singleton child within the past 12 months. Your infant was born at 37 or more weeks of gestation and admitted to a newborn nursery. You reside within the 5 boroughs of New York City (Brooklyn, Manhattan, Queens, the Bronx, Staten Island), or in the Philadelphia Metropolitan Area that includes Montgomery, Bucks, Delaware, and Chester Counties. You can speak and read English.

4. What you should know about a research study

- Someone will explain this research study to you.
- Whether or not you take part is up to you.
- You can choose not to take part.
- You can agree to take part now and change your mind later.
- If you decide to not be a part of this research no one will hold it against you.
- Feel free to ask all the questions you want before you decide.

5. Who can you talk to about this research study?

If you have questions, concerns, or complaints, or think the research has hurt you, talk to the research team at **Nancy Gerber, PhD, ATR-BC**, Tel: [267-359-5502](tel:267-359-5502), e-mail ng27@drexel.edu

Victoria Scotti, Co- Investigator and PhD Candidate, e-mail vs393@drexel.edu

This research has been reviewed and approved by an Institutional Review Board (IRB). An IRB reviews research projects so that steps are taken to protect the rights and welfare of humans subjects taking part in the research. You may talk to them at (215) 255-7857 or email HRPP@drexel.edu for any of the following:

- Your questions, concerns, or complaints are not being answered by the research team.
- You cannot reach the research team.
- You want to talk to someone besides the research team.
- You have questions about your rights as a research subject.
- You want to get information or provide input about this research.

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6. Why is this research being done?

You are being asked to participate in a research study entitled *Beyond_words: Making meaning of transitioning to motherhood using montage portraiture*. The research study is being conducted as partial fulfillment of my, (Victoria Scotti, PhD Candidate), doctoral degree in the PhD Program in Creative Arts Therapies. I am conducting this study to learn about what women go through when they become mothers. For example, I would like to know what sensations you have, when you touch or hold your baby, what you think about or the emotions you feel in your transition to motherhood. You may even have dreams, memories, and fantasies about adjusting to motherhood. These experiences are sometimes difficult to put into words, and so I call them *beyond_words*. This is an arts-based research study which means that I am collecting the information using images that you create in drawings and an interview in which you will discuss your experiences and images. Today, I will ask you to create a self-portrait by tracing photographs of yourself and your baby that you selected, and later add drawings onto this portrait. Arts-based study also means that I as the researcher will be creating art as part of this study. Based on your artwork and what you tell me, I will create artwork and write a story that I will share with you by e-mail and you can provide feedback about it by telephone, Skype or e-mail. The artwork that I create will be exhibited at an art exhibit and also included in my dissertation and when people look at the art and read the story, they can learn about first-time mothers' *beyond_words* experiences. At the conclusion of the study I will create one final artistic and textual piece that depicts all of the participants' collective *beyond_words* experiences.

7. How long will the research last?

We expect that your participation will take a total of 2.5 hours which will occur over two meetings—one in home meeting and one meeting by telephone, email or Skype 1-3 months after your in home meeting. The research study will last approximately 1 year until all of the data have been collected and analyzed but your involvement will end after the second meeting in 1-3 months. That is, you will only be actively involved for the two meetings.

8. How many people will be studied?

We expect about 5 people here will be in this research study out of 10 people in the entire study. The first ten (10) participants who express interest in enrolling in the study will have their contact information recorded in the research log. Of this 10 the first five eligible individuals who agree to participate, review and sign the consent form, will be enrolled in the study. The remaining (5) participants will be invited to remain on a waiting list. In case one of the enrolled participants withdraws from the study, the next eligible participant on the waiting list who reviews and signs the consent form, will be invited to enroll in the study.

9. What happens if I say yes, I want to be in this research?

I (Victoria Scotti) will now explain to you what you will be doing in this study, what I will be doing, and how what you do will be used to create the results and how the results will be shared. I will be the person who will collect the arts based data and conduct the interview. We will meet two times for a total of 2.5 hours. There will be one home visit meeting and one member checking meeting via e-mail, Skype, or telephone. Our meeting today is a home visit and it lasts for 2 hours. 30 minutes

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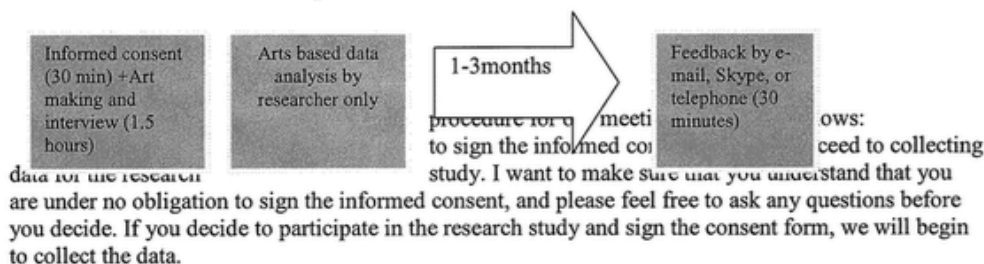


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of this meeting will be used to review the informed consent, and 1.5 hours will be devoted to an Interview that includes art making and orally answering questions. The informed consent and artistic and interview activities will take place here (at your home). I will analyze the data and create artwork and write a story about your experiences at my own office and after between 1-3 months, I will send the artwork and the story to you by e-mail, and you can provide feedback about it by phone, Skype, or e-mail within 1 week. This will take about 30 minutes.

Here is visual timeline of the steps involved:



- **The Art Materials:** I will bring art materials and I will ask you to review the photographs that you selected of yourself and your baby.
- **Art Making and Interview (1.5 Hours):** I will ask you to trace from these photographs to create a self-portrait. I will then ask you questions about the artwork and your experiences of transitioning to motherhood that are *beyond_words*. After you answer the question, I will ask you to create artwork in response, and then in turn will ask more questions. You may also just tell me about your thoughts and ideas that come to mind as you create art or reflect on your art. It is an open process, and there is no right or wrong way of answering the questions, and also you do not need to have any previous art making experience. You will also be asked some specific questions about your cultural and racial background, your age, the mode of childbirth, and questions about breastfeeding. You may also decline to answer any question or if it makes you too uncomfortable. You do not need to have any previous art experience or special talent. **The art making and interview process will take 1.5 hours.**
- **Feedback about research Art and Story (30 minutes):** After our meeting today, I will create an artistic portrait and a story that will depict my impression of your *beyond_words* experiences of transitioning to motherhood from what you have told me through your art and answers to the questions. I will share this artwork and the story with you by e-mail so that you can provide feedback by telephone, Skype, or e-mail. **This should take about 30 minutes and you have up to a week to provide feedback.**
- **Thank you:** You will be compensated with \$50 for your time and contribution after the completion of the second meeting (you will receive a check in the mail).
- **Findings-Exhibits presentations and publications:** I will create artistic portraits of the 5 research participants in this study. I will be showing the portraits with accompanied stories that I create in an art exhibit, and publications and presentations about the research. The artwork that you create today will not be included in the

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exhibition, but you will have an option to have your artwork included in the publications and presentations and future exhibits about this research. There is a place on this form for you to select your preference for the inclusion of your artwork in the publications and presentations, and/or future exhibits.

- **Keeping your art and stories private:** In any publication or presentation your name will not be used. At the conclusion of the research, I will create one final artistic piece that has visual and textual components and that incorporates the 5 research participants' *beyond_words* experiences in transitioning to motherhood, my artistic and written responses, and comments from the art show. I will also write about the findings in my dissertation and, with your permission, include photos of your artwork without your name. I will digitally obscure the facial features of your portrait so that people will not recognize you.

10. What are my responsibilities if I take part in this research?

If you take part in this research, it is very important that you:

- Follow my instructions.
- Tell me right away if you have a complication or injury.
- Ask me if you have any questions.
- Tell me if you feel really nervous
- Tell me about any concerns you might have during the research

11. What happens if I do not want to be in this research?

You may decide not to take part in the research and it will not be held against you.

12. What happens if I say yes, but I change my mind later?

If you agree to take part in the research now, you can stop at any time it will not be held against you.

13. Is there any way being in this study could be bad for me?

The risks and discomforts from participating in this study are considered to be minimal. However, there are some potential risks that you should know, which I would now like to explain to you.

Privacy risks: You should be aware that there are two potential risks to your confidentiality.

- 1) First, if you give voluntary permission to use your artwork and/or excerpts from your interview, in my dissertation, in future exhibits, educational presentations and scholarly publications special precautions to conceal your identity will be taken. Because the artwork contains self-portraiture, it is possible that you may be recognized by others. To minimize this risk, I will digitally obscure the facial features of your portrait to make it unrecognizable. Also your name will not be used in connection with the artwork or any excerpts from the interview.
- 2) Second, as the result of this study, I will also create a montage portrait that illustrates my impression of your *beyond_words* experiences of transitioning to motherhood. You should know that the purpose of this portrait is not to convey your physical likeness but to depict your experiences. I may be inspired by the self-portrait that you created and your overall physical

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presence, but I will create different facial features (hair, eyes, nose, shape of the face) so people seeing my portrait will not recognize you.

Physical risks. There are no physical risks. Participation in the study requires minimal physical exertion and interaction with art materials. The art materials used in this study are paper, basic drawing materials and water color which are non toxic and do not include any sharps.

Psychological/emotional risks. Because art making is a part of this study, it is expected that you may feel mild anxiety if you do not have experience with art making. To make you more comfortable, I will offer support and demonstrate how to use the art materials. Also the study is carefully designed to minimize the emphasis on artistic talent and maximize the emphasis on telling your story by beginning with photographs that you select.

It is possible that you feel mild anxiety if separated from your baby during the meeting, therefore, if you would like, your baby may be present. It is possible that you will feel tired during the meeting. We will take a 10 minute break half way through the meeting but if you feel tired or need to attend to your baby, we can take additional breaks as well.

There are no economic, social, or legal risks associated with participating in this study.

Special precautions

To minimize risks, the following precautions will be taken:

- 1) Mothers of infants may feel uncomfortable or anxious when they are separated from their infants. Therefore, your baby may be present throughout the data collection procedure if you wish so.
- 2) There is a possibility that you may feel tired or need to take care of your baby at some point during the 1.5 hour artistic and interview process. We will take a 10 minute break after the first 45 minutes, and if you need additional breaks to rest or to attend to your baby, you can take breaks any time.
- 3) The art materials that you will be using are safe, clean, non-toxic and not sharp. They are easy to use and do not cause any spilling and are not damaging to your clothes or home environment.
- 4) To adhere to confidentiality, I will take special precautions to make the artwork unrecognizable. In the process of this research study, you will create a self-portrait. If you agree to publish or exhibit your self-portrait, I will (digitally) obscure the facial features of the portrait to make it unrecognizable. Your name will not be used in connection with the artwork or any excerpts from the interview that might be reproduced. In addition to the self-portraits created by the participants, I will also create artistic montage portraits of the participants as part of the data analysis and representation findings of the research. To minimize the risk to confidentiality, I will use artistic practice to change the facial features so that the you will be rendered unrecognizable.
- 5) In the unlikely event that you experience psychological stress or distress that prevents your continuing in the study, you can withdraw from the study. In addition, if you feel you are in a distressed state that may require professional intervention please let me know if you have a psychotherapist with whom you can process psychological issues. Telephone numbers for crisis intervention services are available: 919-231-4525 or 1-877-235-4525. In the event of an emergency, the research activities will be stopped.

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14. Do I have to pay for anything while I am on this study?

There is no cost to you for participating in this study.

15. Will being in this study help me in any way?

We cannot promise any direct benefits to you from your taking part in this research. However, it is our hope that your participation in this research may help other mothers to tell their *beyond_words* transitioning to motherhood stories.

16. What happens to the information we collect?

Efforts will be made to limit access to your personal information including research study records, treatment or therapy records to people who have a need to review this information. We cannot promise complete secrecy. Organizations that may inspect and copy your information include the IRB and other representatives of this organization. I would now like to describe to you what happens to the data that I collect during this research.

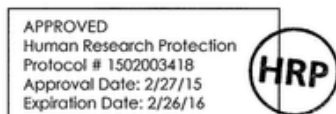
Audio Recordings and Digital Photography

During our meeting today, I will audio record the interview, which I will later make into a written document, and I will also take digital photographs of the artwork as you are working on it. The reason for audio recording and photography is to document the process of creating your story through the art and your words with the utmost accuracy. These audio recordings and the digital photographs, along with the art, are the research data from which the results about your *beyond_words* experiences of transitioning to motherhood will emerge. The interviews will be transcribed to written form and analyzed. Portions of the transcribed interview, without your name and any identifiers, will be published as part of the results. The digital photography will also be published, without your name and identifiers, as the results. The audio recording, digital photography, and transcribed text will be securely stored in a locked location in the researcher's office during the course of the research. The data (audio recordings, digital photography, and transcribed interview text) will be retained for three years after conclusion of the study. After three years, the audio recordings will be destroyed. If you give permission to use the photographs, the interview text, and the artwork for future exhibitions and presentations, these data will be retained beyond the three years after the study closure. Your name will never appear or be connected with the interview or artistic data or in the results. One de-identified copy of the research data which includes audio recordings, transcripts and digital photographs of the artwork will be saved digitally on a CD or flashdrive and remain in a locked secure location at the Department of Creative Arts Therapies, Drexel University.

Artwork

We need to determine what happens to the physical artwork that you will be creating today at the end of the study. You have the option to have your artwork returned to you at the conclusion of the research study, or allow me to keep your artwork for potential future educational art exhibits. If you choose to let me keep your artwork, it will be de-identified and kept in a locked secure location in my office. Please select if you would like to

☐ The artwork to be returned to you



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- ☐ The artwork to be saved for possible future exhibits

With regard to the digitally photographed artwork, you can give voluntary permission for me to publish, present or exhibit it for any or all of the purposes listed below (please check your preferred option(s)):

- ☐ Publication in academic journals
☐ Professional or educational presentations
☐ Future educational exhibits

The physical artwork will be stored for 3 years, after which it will be destroyed. The digital artwork will be stored indefinitely.

All research data that includes your name (and pseudonym, if desired), address, phone numbers and email, will be securely stored in a locked location in the researcher's office during the course of the research, and all copies destroyed at the conclusion of the research. You will be assigned a Participant Identification Number (PIN) which will be used on all research documents and files instead of your name. The only connection between the PIN and your name will be on a Research Log on which your name and contact information are stored for the purposes of contacting you at different phases of the study. That contact sheet will be stored in a locked secure location during the study and after the study in order to inform you of future exhibits, publications and presentations in which the results of the study will be presented. The contact sheet will be destroyed after 3 years. Digital photographs and excerpts from the interview *without your name and identifiers* will be included in the dissertation, and in any future educational exhibits and presentations, scholarly publications to which you agree. One de-identified copy of the research data, which includes audio data, transcripts and digital photographs of the artwork, will remain in a locked secure location at the Department of Creative Arts Therapies, Drexel University for auditing purposes. Some authorized individuals such as representatives of the Office for Human Research Protection (OHRP), the institutional review board (IRB), or employees conducting peer review activities may need to have access to your records. You agree to such inspections and to the copying of excerpts of your records, if such inspections require it. Additionally, you should know that I am bound by legal reporting requirement in case of the existence of reportable events, such as harm to yourself or others.

We may publish the results of this research. However, we will keep your name and other identifying information confidential.

17. Can I be removed from the research without my OK?

The person in charge of the research study can remove you from the research study without your approval. Possible reasons for removal include your not keeping agreed upon scheduled appointments or participating in all study meetings.

18. What else do I need to know?

Who is involved in conducting this study: This research study is being supervised by a faculty member and being conducted by a doctoral student at Drexel University.

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Compensation: If you agree to take part in this research study, we will pay you \$50 for your time and effort after you complete all phases of the research study. You will receive a check in the mail.

Sharing Results: After I create an artistic portrait and a story, I will share this with you by e-mail and I will ask you to provide feedback on whether and how this portrait and narrative reflects your experiences, or if not, why not and what could be changed to more closely represent your experiences. You can provide this feedback as you prefer via e-mail, Skype, or telephone. You will also be notified of future exhibits, presentations and publications in which the results of the study.

Signature Block for Capable Adult

Your signature documents your permission to take part in this research.

DO NOT SIGN THIS FORM AFTER THIS DATE →

Signature of subject

Date

Printed name of subject

Signature of person obtaining consent

Date

Printed name of person obtaining consent

Form Date

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Appendix J. Example of *Beyond_words* Matrix

Dimension	Rewards	Challenges	Methods	Beyond words experiences and examples
Biological/Physiological	Breastfeeding pleasurable (embodied)	<p>Breastfeeding challenging, painful, can lead to cessation</p> <p>PPF</p> <p>Body image dissatisfaction</p>	<p>Qualitative studies</p> <p>Quantitative studies</p>	<p>Sensory-embodied</p> <p>Breastfeeding also provides “connectedness, continuity, or oneness” with the baby (Schmied & Lupton, 2001, p.239)</p> <p>“... it just almost gives me goose bumps. They’ll be nursing and they’ll look up at you and give you that little smile and you’ll just connect. That’s the best.” (Nelson, 2006. p 66)</p> <p>Sources of physical discomfort are typically engorgement of the breasts and nipple soreness (Akwoahwah et al., 2013; McBride-Henry et al., 2009; Nelson, 2006), plugged ducts, and mastitis (Eglish et al., 2009)</p> <p>Post Partum Fatigue: On the physiological level, PPF manifested as “body soreness, body aches, and weakness. Pain was a component of each of these categories” (Runquist, 2006, p.31). The mental dimension manifested as “negative self perceptions, irritable, cranky mood, and a reduced ability to pay attention due to a slowing down of the mind, lack of focus, or unsteady or rambling thoughts (Runquist, 2006, p.31).</p> <p>Difficult to articulate</p> <p>Breastfeeding was identified as “... sensory and perceptual, it was a ‘nondiscursive,’ ‘embodied’ experience that was difficult to describe in words”(Schmied & Barclay, 1991, p 328).</p> <p>Crossley (2009) stated that she could not initially articulate the nature of the phenomenon of breastfeeding</p>

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Publications

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