

Routledge Studies in the Sociology of Health and Illness

CHILDLESSNESS IN THE AGE OF COMMUNICATION

DECONSTRUCTING SILENCE

Cristina Archetti



A powerful text. Archetti skilfully blends a deeply personal story with robust enquiry into the meaning and experience of involuntary childlessness. Weaving together personal diaries, interviews, poetry and analysis of contemporary media *Childlessness in the age of communication: Deconstructing silence* offers an innovative format that is eminently readable. The book illuminates an otherwise hidden topic and as a result it will be of interest to researchers, practitioners and those experiencing involuntary childlessness alike.

Dr Esmée Hanna, Centre for Reproduction Research,
De Montfort University, Leicester, UK

Cristina Archetti's book melds together the personal and political to produce an academic tour-de-force which will put the study of involuntary childlessness firmly onto the radar of scholars and policymakers everywhere. Archetti has created a sustained piece of "sensuous scholarship", both passionate and erudite in its exploration of the cultural communication mechanisms that silence childlessness and reinforce an antiquated pronatalist ideology. She illuminates society's blind spots around involuntary childlessness, showing how these fuel daily microaggressions against adults without children. An important, humane and hopeful book, it outlines what we can all do to create a more diverse and tolerant culture that recognises the contributions individuals without children make to a healthy civil society.

Jody Day, psychotherapist, founder of Gateway Women (www.gateway-women.com), and author of *Living the life unexpected: 12 weeks to your Plan B for a meaningful and fulfilling future without children*

This book makes for interesting and engaging reading for researchers across the social sciences and humanities and also for healthcare practitioners. The creative autoethnographic story of the social, emotional and embodied experience of childlessness is powerful, enlightening and scholarly.

Professor Gayle Letherby, University of Plymouth, UK

This book is a perfect reading both for those who are experiencing problems in family-building and for researchers in the field. The author puts childlessness in social and cultural context, expressed via individual experiences, both of her own and many others. The combination of perspectives, her analyses and the creative writing style contribute to our understanding of childlessness in a way that I have never encountered before.

Anders Möller, Professor Emeritus, Ersta Sköndal Bräcke University College,
Stockholm, Sweden

This book captures the lived experience of people without children, revealing the political, social and personal chaos of involuntary childlessness. The threads of the analysis are pulled from a wide range of fields: demography, social sciences, philosophy, communication, and media studies. Woven through the multi-layered embroidery are the highs and lows of Cristina's experience—not only related to fertility treatment, but also to conducting research on a very sensitive subject. The final tapestry is an evocative, deeply moving, sincere, and thought-provoking tour de force.

Dr Robin Hadley, founding member of Ageing Without Children (AWOC), and independent researcher on male childlessness and ageing, UK

The intrinsic worth of a woman, in our society, is still rooted in her role as a mother. Archetti reveals how being childless is a battle of learning to accept a “life never imagined” against a daily onslaught of messages coming from the media and society, which suggest that not having children is “less than.” I hope that academics, reporters, politicians, and those who (most often without realizing it) dismiss, undervalue and misrepresent the childless read and take the time to understand not just the words of this book, but also those that remain unspoken.

Stephanie Phillips, founder, World Childless Week
(<https://worldchildlessweek.net/>)

A life without becoming a parent is being treated by society as a disaster, yet society tends to ignore and silence the deepest meanings of how childlessness might be experienced as an existential crisis from the point of view of those who are affected by it. Archetti’s book is a blessed and needed invitation to look at the world from her and their eyes, through a bright and thorough analysis of involuntary childlessness. In a highly sensitive manner, she unfolds the hidden sides of being unable to reach an agreed social hallmark. Her book is a window to the lives of “others” and, at the same time, a mirror to “ours.”

Dr. Orna Donath, Tel Aviv University, Ben Gurion University, and the Academic College of Tel Aviv-Yafo, Israel. Author of *Regretting motherhood*

Archetti has written an informed, inspiring and important book. Breaking the silence on the subject of childlessness in the modern world through the prism of her own personal story and academic study, it sheds a shining light on one of the most pressing subjects for women today.

Jessica Hepburn, founder of Fertility Fest (www.fertilityfest.com) and author of *The pursuit of motherhood* (2014) and *21 miles: Swimming in search of the meaning of motherhood* (2018)

Childlessness in the Age of Communication

Cristina Archetti started researching childlessness after being diagnosed with “unexplained infertility.” She soon discovered that, although involuntary childlessness affects an increasing number of women and men across the world, this topic is shrouded in taboo and shame. This book is both a first-person reflection about the existential questions posed by involuntary childlessness and a readable account of the way the silence surrounding this topic is socially and politically constructed.

Revealing the invisible mechanisms that, from the microscopic details of everyday life to policy, make up the structure of silence around childlessness, Archetti demonstrates what it means not to have children in a society that is organized around families. Through a prose that mixes analysis, excerpts of interviews, media fragments, and evocative writing, she develops a new language of feeling-in-the-body fit for the twenty-first century and exposes the devastating effects infertility has on relationships, identity, health and well-being, in societies that fetishize parenthood.

Childlessness in the Age of Communication draws upon a range of disciplines and fields including sociology, health, gender and sexuality studies, communication, politics and anthropology. It is a book for all those interested in childlessness and innovative qualitative research methodologies.

Cristina Archetti is Professor of Political Communication and Journalism at the University of Oslo, Norway.

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Childlessness in the Age of Communication

Deconstructing Silence

Cristina Archetti

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Childlessness in the Age of Communication

Deconstructing Silence

Cristina Archetti

First published 2020
by Routledge
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

and by Routledge
52 Vanderbilt Avenue, New York, NY 10017

Routledge is an imprint of the Taylor & Francis Group, an informa business

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British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library

Library of Congress Cataloging-in-Publication Data

A catalog record has been requested for this book

ISBN: 978-0-367-40994-4 (hbk)

ISBN: 978-0-367-81039-9 (ebk)

Typeset in Times New Roman
By Werset Ltd, Boldon, Tyne and Wear

To all the people I have encountered on my journey; all places I have ever travelled through and inhabited; all the detours, deviations, and turns-of-the-plot that have unfolded over the years; all words, small gestures, and ideas I have come across. Thanks for making this the most fulfilling life I could live, for becoming part of who I am today and, ultimately, for contributing to this book.



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<http://taylorandfrancis.com>

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Author biography

Cristina Archetti is Professor of Political Communication and Journalism at the University of Oslo, Norway. She is the author of three books: *Explaining news: National politics and journalistic cultures in global context* (Palgrave, 2010); *Understanding terrorism in the age of global media: A communication approach* (Palgrave, 2012); and *Politicians, personal image and the construction of political identity: A comparative study of the UK and Italy* (Palgrave, 2014). She won the 2008 Denis McQuail Award for innovating communication theory.

Although the topics Cristina works on at any single time might appear completely different—they are, in many respects, accidents of life and circumstances—she is, in reality, always addressing the multifaceted intersection between communication, politics, and society, particularly questions of theory and method: How do we explain the mediated reality we live in? How and why do we know what we know? She has written about: the relationship between political actors and journalists; international news and foreign correspondence; public diplomacy; strategic communication; and terrorism, the media, and radicalization. She is currently exploring the role of creative practices, including evocative writing, poetry, and performance, in research.

Cristina has founded in 2019 the first Norwegian organization for the permanently childless: *Andre Veier-Foreningen for permanent barnløse* [Other ways – Association for the permanently childless].

Preface

28 May 2016, Stockholm. A woman out of place

She is a strange mixture of aggressiveness and shyness. She wears a tight red jacket, black trousers and low-heel black boots, minimal jewellery—two sparkly dots on her earlobes, barely visible under her dark, long hair. She is slim, moves fast and energetically, springing up from her seat when the presenter announces she is going to talk next, keeping her eyes to the ground while she moves to the front of the room, towards a high table with a laptop. Her presentation is already on the screen. She looks at the small audience in front of her, mainly women, some couples sitting at the back, guarded by empty seats on either side. She smiles at them while clutching tightly her papers and a pencil, the other hand holding her forearm. Maybe she is a bit nervous. So is the audience, slightly shifting in their chairs. She turns to the side to quickly say ‘thank you for the kind introduction’ to the presenter. She puts the papers and pencil on the table. If they were notes it’s not clear why she brought them, since she is not even looking at them. She takes a deep breath, then begins to talk.

‘I feel a bit like an intruder today because I am not a fertility expert. I have no medical background,’ she says almost apologetically. ‘Just the other day I was at a conference talking about social media and extremism. It is slightly disorienting now being at this event.’ She makes another pause to inhale with her mouth, as if, despite the microphone on her lapel, she had been shouting at the top of her lungs and the few words she said had absorbed all oxygen in the room.

‘At the same time I am delighted to contribute to this event because this is a topic very close to my heart,’ she looks down, then her eyes seem to search for somebody in the small crowd. They stop when they find Anita Malmros. Anita is a therapist and spoke earlier about what happens in a woman’s mind when her expectations about motherhood are not fulfilled. Anita is now sitting with her listeners.

The speaker’s eyes seem to sparkle lightly, her shoulders relax, as if reassured, when Anita’s gaze meets hers. ‘A topic I felt I wanted to talk about, indeed I *needed* to talk about,’ she continues. ‘I even recently started doing research about it. This is my way to deal with problems: if they become an object of research maybe I can manage to create some distance from them.’ Her

voice trembles slightly, as if her completely still appearance was hiding a struggle the audience senses, but is not able to see. ‘I felt I really needed this because this issue was overwhelming me,’ she holds in her palm her other closed hand, gently, as if cradling a heart that has fallen out of place. The audience has stopped moving. They know what is happening: the speaker is fighting against a throat that wants her to stop talking and start crying. Anita smiles imperceptibly and nods in approval, not letting the speaker’s eyes go, encouraging her to continue, as if she was visually leading her by the hand. The speaker nods back, her lips sealed, slowly exhaling, as if this required an effort. This inconspicuous, barely perceptible movement has the power to contain and send back into her depths a dark tide that had begun to surge and threatened to flood out. ‘I thought “I need to face this in the open.”’ Her voice is firm again, her eyes determined. ‘It is painful, but I know that something good is going to come out of it.’

This talking woman is me. It is Saturday, 28 May 2016, the day before Mother’s Day in Sweden. I am guest speaker at a Childless Day event arranged by the organization *Barnlängtan*, a Swedish association for the involuntary childless in Stockholm. I have been asked to talk about my experience. ‘But what shall I say?’ I remember asking, incredulous at the invitation I had just received. ‘Just tell your story,’ said Linda Malm with her eternally smiling voice. This is the fourth such arrangement *Barnlängtan* has organized. We are at a hotel in the hip area of Södermalm. From here, this morning, while having breakfast in a cloud of cinnamon scent, I could see the dome of the venue where just a couple of weeks ago the country hosted the Eurovision song contest. My academic expertise is in politics and media. I never decided not to have children. I am not infertile either. How did I get here?

Acknowledgements

Words are often inadequate to fully express what we experience. Communicating gratitude is no exception. “Lingering angora sleeves”: that warmth and ever-so-slight pressure of a caress around the shoulders that turns into strength, reassurance that you are being loved and appreciated, encouragement. This is what I feel when I think of Robin, my husband. He is the most solid person I have ever encountered. We are survivors and veterans of the same war. He fought by my side. We shared both the pain and the adventure of the conflict. He watched my back, took care of me, always found the time to discuss this book, read its multiple drafts, even when it was painful, and provide honest feedback. I still have his words printed out on a sheet on my wall: ‘Of course you will make it!’ (24 July 2017). Wherever our paths will lead us in the future—even if they parted—the bond between us will remain unshakeable.

I did not really talk about my book with my family—my parents, my sister Sonia, and my brothers Marco and Emanuele—until late in the process, when the first draft was complete. They made a difference, though, for simply being that safety net which, I knew without a doubt, would catch me without fail.

The community gathered around the online event World Childless Week, particularly the Childless Champions, supported me by becoming “my tribe” and helping me realize that the issues raised by involuntary childlessness matter to a growing amount of men and women globally: Stephanie Joy Phillips, Berenice Smith, Jody Day, Vicky Page, Michael Hughes, Lesley Pyne. Among them special thanks go to friends Linda Malm—your invitation to Stockholm in 2016 started it all!—and Robin Hadley—for invariably appearing during my darkest hour with humour and a positive message.

Among the “Oslo home-crowd,” *tusen hjertelig takk* to Hilde Haug for her friendship; Camilla Eeg-Tverbakk for the artistic inspiration; Mette Kaaby for giving me the opportunity to experiment with performance at the *Fortellerfestivalen*/The Norwegian Storytelling Festival; all my colleagues at IMK (*Institutt for medier og kommunikasjon*/Institute of media and communication) at the University of Oslo.

From further afield, thanks to Amanda Brouwers (University of Groningen, The Netherlands) for reading the manuscript (at a stage when it was much longer) and providing helpful comments; and to the “creative family”—

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particularly Johana Kotišová (Masaryk University, Czechia) and Ana Serrano Tellería (University of Castilla La Mancha, Spain)—for being dreamers like me, for saying “yes” to trying anything new, and sharing the belief that creativity plays an essential role in research.

Many more are mentioned in the manuscript and will recognize themselves in the story. Thanks to all for sharing my journey—or, as the Norwegians would say, *takk for turen!*

Introduction

Breaking the silence

COLLEAGUE: What are you working on at the moment?

ME: I am doing research on media and involuntary childlessness.

COLLEAGUE: [hesitant] Child-what?

ME: I am doing interviews with people who do not have children to see, for example, what media they consume and whether they try and connect online with individuals in similar circumstances.

COLLEAGUE: I see, people who don't want to have children. Why ...

ME: [interrupting] No, I said "*involuntary* childlessness": it involves people who do not have children, but they have not chosen that.

COLLEAGUE: [looks puzzled]

How do you introduce a book about a condition most people do not even know exists?

Untold stories

I started researching about involuntary childlessness because I have a direct experience of it. My husband and I were, a few years ago, diagnosed with "unexplained infertility." This means that, according to our medical tests, there appear to be no physical or biological obstacles to conceiving with either of us, yet we do not get pregnant and medicine cannot explain why.

I started researching about involuntary childlessness also because, as a communication scholar, I was intrigued. As I found out, on average, one adult woman in five and one adult man in four in the Western world do not have children, mostly as a result of infertility (Kreyenfeld and Konietzka 2016b). Infertility is broadly defined as 'the inability to conceive after one year of regular unprotected intercourse' (Quaas and Dokras 2008: 70; see also Larsen 2005). Despite being convinced, at that time, that we had to be an extremely rare case, I learned that 15 per cent of all couples suffer from this condition (Agarwal *et al.* 2015: 1), 15 to 30 per cent of them affected, precisely like us, by an unexplained form of it (Quaas and Dokras 2008: 69).

What was most surprising for me was the number of individuals affected by involuntary childlessness, either as a result of medical issues or myriad reasons

2 Introduction

often referred to as “social infertility” (Berrington 2016: 58): being single, the death of a partner, having been ill during fertile years, not being able to afford fertility treatments, among many other possibilities. To make some concrete examples, in Germany, between 1.2 and 1.5 million couples are unable to conceive (Diedrich 2008, cited in Trappe 2016: 281)—we are thus talking about between 2.4 and 3 million adults in that country alone. In the UK, the National Health Service (NHS) reports ‘approximately 3.5 million people’ having difficulties getting pregnant (NHS 2017). Worldwide, this extends to an estimated 144.8 million people (Boivin *et al.* 2007: 1509).¹ By contrast, individuals who identify as transgender account for about 0.6 per cent of the population (Flores *et al.* 2016: 2). In the US (my range of examples from here onward is limited by the availability of the data), a country of over 328 million—four times the population size of Germany and five times the inhabitants of the UK (United States Census 2018)—this means about 1.4 million people (Flores *et al.* 2016: 2). Why was I aware (rightly so) of the struggle and needs of transgender people, but had never heard about, not even about their very existence, of the involuntary childless?

Although “1 in 5” (Non-Moms 2016; Day, cited in Marsh 2017) is a catchy expression to give an immediate sense of the scope of the phenomenon, a closer look at the statistics reveals an even broader, yet hidden, reality. According to a report by the French Institute for Demographic Studies (INED) (Beaujouan *et al.* 2017: 4), up to a quarter of women born in the 1970s in Southern Europe are expected to remain childless. The proportion of women aged 45 to 49 who, in 2013, lived without children was 37.15 per cent in Germany, 23.57 per cent in Italy, and 32.33 per cent in the UK (OECD 2015: 5). In the US, the share of childless women aged 40 to 44 settled at around 15 per cent during the period 2006 to 2010 (Frejka 2016: 167). In Finland, 20 per cent of women aged 40 to 45 do not have a child of their own (Rotkirch and Miettinen 2016: 140). In The Netherlands ‘one in every five individuals’ remains childless (Keizer 2010: 19). In Japan, the childless rate for women born in the 1970s is 27 per cent (The Economist 2017). According to a report by the Australian Institute for Health and Welfare, based on current fertility rates, 26 per cent of Australian women are expected to remain childless by the end of their reproductive life (Ford *et al.* 2002: 29). When it comes to men, 24 per cent of Norwegian males born in the 1970s will never become fathers (Bye 2018: 7). This is in stark contrast to the rate of childless women born in that country during the same period: 13 per cent (Bye 2018: 6). In Finland, the proportion of childless men (aged 40 to 45) is 25 per cent (Rotkirch and Miettinen 2016: 140). The rate is above 23 per cent also in Italy, Germany, the UK, and the Czech Republic (Präg *et al.* 2017: 8).

The great majority of these individuals are childless neither because they don’t want to have children nor because they are barren, but *by circumstance*. According to Renske Keizer, who conducted a study about the causes and consequences of childlessness in The Netherlands (Keizer 2010), the childless-by-circumstance amount to around 80 per cent of the whole childless cohort—about 10 per cent having deliberately chosen not to have children, another 10 per cent

being outright infertile (Keizer, in NWO 2010).² The proportion of childless-by-circumstance, however, depending on which figures we examine and gender, could be higher. According to Éva Beaujouan *et al.* (2017: 4) only 3 to 5 per cent of women in countries as diverse as France and the US ever decide not to have children.³ In Nordic countries the percentage is even lower: in Finland, for instance, it is 1 to 3 per cent (Ruokolainen and Notkola, in Tantturi *et al.* 2015: 33; Rotkirch and Miettinen 2016: 153). To make the point that the rise of childlessness is not the result of a preference for the ‘childfree lifestyle,’ Anna Rotkirch and Anneli Miettinen (2016: 152) even point out that, in the sample investigated by Eurobarometer 2011 (Testa 2011), ‘0% of the women aged 25–54 said their ideal number of children was to have none.’ Equally few are the individuals who cannot have children owing to physical impairments: again according to Beaujouan and her colleagues (2017: 4), 2 to 4 per cent of women are sterile. In this perspective, the rates of female childlessness-by-circumstance could gravitate more towards 90 per cent of all women without children.

Assisted Reproductive Technology (ART) cannot always help. To start with, its effectiveness varies considerably with age: ‘The likelihood of a pregnancy following ART is about 27% per cycle after age 35 and it declines to 15% per cycle at age 40’ (Beier *et al.* 2012, in Trappe 2016: 279).⁴ Patrick Präg and others (2017: 29), in examining ART across Europe, refer to a (lower) ‘chance of around ten per cent for a successful birth in some treatments such as IVF’ for women ‘40 and older.’ Georgina Chambers (2017: n.p.) summarizes the findings of an Australian study run by the National Perinatal Epidemiology and Statistics Unit at the University of New South Wales (Harris *et al.* 2016). She points out that ‘[o]verall, for women starting IVF, 33% have a baby as a result of their first cycle, increasing to 54–77% by the eighth cycle’ (Chambers 2017: n.p.). The flip side of her statement, which few notice, is that 67 per cent of women starting IVF will *not* have a baby as a result of their first cycle, and 46 to 23 per cent (note how wide this range is to account for outcomes becoming considerably poorer as the age of the patient increases) will *still not* have one by the time they have gone through their *eighth* cycle.

I realize that, for anyone who has not directly undergone IVF, these are just empty numbers that can be placed neither on any meaningful experiential frame nor time horizon. That is one of the problems with *understanding*: as I have realized when investigating this topic, I can communicate facts and figures, talk about them for hours, but until one can *relate* to them through a shared experience and actually *feel* something hearing them, then they just slide through the attention spans, like ads for products one does not need. Later I will examine in detail, through my own personal story, what it *means* and how it *feels* to go through ART, trying to create this experiential bridge with the reader, but for now, even for those who do manage to get pregnant, fertility treatments come at an extremely expensive emotional and physical price, beyond the financial one (when this is not supported, usually for a limited amount of attempts, by a national health service). Trying to get pregnant, from that joyous time filled with

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expectation it is imagined, even expected, to be, turns into despair, isolation, a sense that life is indefinitely on hold (Bassin 2001; for a couple of examples of life-stories that share the same suffering, despite ending differently, see Hepburn (2014) and Åkerman (2014)). Not surprisingly, there are also many individuals undergoing treatment—those who fall into that previously mentioned “23 to 46 per cent” crack of probability—who, even after years of attempts, will never see a successful outcome. Thirty to 40 per cent of couples undergoing treatment will leave without a child (Volgsten *et al.* 2010: 1291).

Presenting the figures from a slightly different perspective, according to a study carried out in The Netherlands, 4 per cent of all couples who want children, in the end, will remain childless (Lechner *et al.* 2007: 288). Most would expect them to adopt. For many this is not possible because they are too old, not in a relationship, or they might not qualify under a whole checklist of other requirements: because one has had cancer (as in the case of one of the interviewees in my study), or one’s body mass index is too high (Carter 2009; see also Barford 2016). According to a report by the U.S. Department of Health and Human Services (Jones 2008: 1), 26 per cent of American women aged 40 to 44 who underwent fertility treatment ended up adopting a child. This shows, by contrast, the considerable proportion of individuals who do *not* adopt. Adoption, surrogacy, or egg donation (whether this egg will “implant” and lead to a “live birth”—get a sense of the jargon—is a whole separate story), among some of the possible options, may not be solutions that are affordable, desirable, or ethically acceptable to everyone.

Forming a family and having children is a rite of passage and the tacitly agreed social hallmark of what it means to be a realized individual and have a fulfilling life. Anne Lise Ellingsæter and others (2013: 175) find, in a study of the social meaning of children across France, Denmark, Sweden, Norway, Germany, and Italy that ‘childbearing is strongly associated with the idea of adulthood, which [...] rests on the perceptions of economic risk and trust in taking responsibility for a child’ (see also Jensen 2016: 202–203). Even medical academic articles on fertility, to frame the importance of the subject, tend to start with a statement that reminds the reader of the uncontested social value of family. In one of the many examples I could provide, Jacky Boivin and her colleagues write (Boivin *et al.* 2007: 1506): ‘Parenthood is undeniably one of the most universally desired goals in adulthood, and most people have life plans that include children.’

What happens, then, when the “family dream” does not materialize at all? What do you do, how do you feel, when a life-project, which for many is also one’s life-purpose, cannot be realized?⁵ None of this, among the confetti-clouded baby achievements celebrated in the media, ever seeps into the public realm, but for isolated voices that quickly get forgotten, perhaps precisely because they raise scenarios that are so uncomfortable and painful to even think of. Effectively, there are millions of individuals across the world whose life-stories are never told. Who are they? Why do we never see them or hear about their experiences? And most importantly, what is life like from their perspective?

This book deals with this hidden side of involuntary childlessness. It makes the point that this is not just about “not having the baby”: that is “only” the starting point. There is far more that we need to talk about and that affects the involuntary childless in the long term: suffering, mental and physical health issues, social isolation, discrimination, invisibility, and, as a result of it, non-representation and lack of support.

A personal and a public issue

This book is both a diary and an analysis: a first-person reflection on a journey through the existential questions posed by involuntary childlessness, but also a readable account of the way the shame and silence that surround this topic are socially and politically constructed.

As an analysis it addresses the questions: How do we explain the silence about childlessness in the age of ubiquitous communication? It is not possible to answer this question unless we address a second one: What does it *mean* and how does it *feel* not to have children in a society that is organized around families? The book is also a writing experiment: How do we uncover the stories that are silenced? How to tell the stories that are written in our bodies? How to communicate what cannot be conveyed by words?

As a diary, this book is the story of how my life began to fall apart, despite having moved to Norway to get my dream job, having been promoted to Professor within six months of arriving in the country, being by all accounts a “successful” academic. It fell apart, piece by piece, like fragments of the arctic pack being hacked at by the sun and gradually released into the sea. A peculiar kind of tearing apart, as if reality was imploding, progressively drained of the meanings and reference points I used to know. A crumbling so slow, yet fundamental, like a shifting of life’s tectonic plates, that it escapes comprehension and makes it unfeasible to get a grip on. One can clear the rubble that follows an explosion, but what do you do when there is no more solid ground, you feel you are in a free fall, and have lost your sense of direction?

Not having children has to do with this. But to what extent, how, and why are the questions I am trying to find an answer to. I have never really wanted a baby, so why am I upset at not being able to have one? Far from being a mere issue of frustrated (supposedly) maternal instincts, I realize that the progressive loss of gravity in my life has many roots—lines of enquiry I want to investigate more closely: taken-for-granted expectations, often smiling at me with white teeth from magazines and milk cartons, about what having a “fulfilled life” means; blurred images of myself as a mother in some undefined projected future that have been in the back of my mind since I was a little girl (who placed them there?); my ego’s refusal to admit its own mortality; the belief in my own perfection, cultivated through decades of training and a near-obsession for nutrition, contradicted by the evidence that I am an ageing and malfunctioning body; anger at the (Neoliberal? Feminist?) broken promise—exposed as a great lie—that I “could have it all”; the practical questions that make my chest shrink at night:

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Who shall I leave my wedding ring to when I die? What reason would I have to live if my husband, my job, or both were taken from me? Will artificial intelligence have progressed enough (more realistically, will my pension suffice) for me to have a robotic carer when I am old? What will be left of me after I am gone?

So, although I went through some form of ART treatment, this is not “another book about IVF.” It is about the experience of not having children. Yet, it is not primarily about the absence of children. It is rather about the *pervasiveness* of childlessness and how it affects every fibre of one’s being, thinking, behaviour, way of relating to others, and reading the world around. It is about what it means to be a woman—in fact whether one feels like one at all—in a world designed for mothers, fathers, and children. It is about how this experience has sparked an existential crisis that has grown, from the boundaries of my own individual experience, into much broader reflections: about history, the future, what keeps us together as a society, inclusion and alienation, who defines what is “normal” and what constitutes “happiness,” whether women can ever be equal to men, the purpose of life.

Aims of the book I: documenting childlessness

Most would think that being involuntarily childless, especially for a woman, is a heart-breaking experience. It is. And it is not. You might be surprised, but most of the time I am happy. My husband and I would have liked, after all, to have a child of our own and did not succeed. But my point is that “not having the baby” is neither the worst nor the most interesting aspect of this experience. It is the anger, the guilt, the incomprehensible—yet disconcertedly real in its tsunami-like solidity—grief that hits you without warning about the loss of a person who neither died nor lived. It is about being constantly confronted with the enormity of the *consequences* of not having a child. This book is about this *everything else*.

My aim is to offer a fly-on-the-wall view of what it is like to be childless *by circumstance*.⁶ I will return to this in the chapters to follow, but I just want to make clear here that I reject the rigid distinction between voluntary and involuntary childlessness. I agree with Gayle Letherby (2002: 8) on the fact that we should rather be talking of a ‘continuum of childlessness.’ I have to use these terms here, reluctantly, because this is part of the way the dominant discourse in our society categorizes the world of a (growing) minority it does not really know much about.

The “childlessness” territory is, in fact, a definitional minefield. To begin with, figures are difficult to interpret and compare due to the fact that fertility does not have a definite cut-off point. As an OECD report (2015: 1) underlines, ‘[d]efinitive childlessness can only be assessed at the end of the reproductive period, which for women is usually between ages 45 and 49.’ This biological window, in turn, leads to uncertainties around categories and their boundaries—who is “childless” and when? Dudley Poston and Cristina Elizabeth Cruz (2016: 84) poignantly capture the nature of the problem:

The temporarily childless [practically all of us at some point in our lives] are [...] enigmatic. They will eventually join the ranks of the voluntary childless, the involuntary childless, or the childed [...] no one knows for certain which group they will join, irrespective of their childbearing intentions.

Ultimately, as the same authors point out, it is impossible to place anyone into the appropriate category unless a researcher knows in detail about an individual's health, motives, and aspirations—information that can only be accessed through in-depth personal questionnaires (Veevers (1972), in Poston and Cruz 2016: 84). Figures, which tend to be harvested through surveys of large populations, tend thus inevitably to reflect to a lesser or greater extent estimates, projections, approximations. And on top of that they are difficult to read, interpret, and compare across national contexts because not all countries collect the same information, according to the same criteria, to the same standards (Tanturri *et al.* 2015: 13).

There are of course (few) individuals who have decided that they will never have children and they will stay true to their word and be content with it—they are often referred to in research, among the 'voluntarily childless,' as 'early articulators' (Poston and Cruz 2016: 77). They often refer to themselves, to emphasize the positive and desirable aspects of not having children, as "child-free" (see e.g. The Childfree Choice n.d.). But mapping the landscape of the remaining "childless," those who did not want to be without children, is challenging. A quick look at the range of terms used by researchers reveals the ambivalence in between the two extremes of "wanting" and "not wanting." Präg and others (2017: 17), for example, talk about 'persistent childless' (individuals who want to remain childless) and 'unconvinced childless' (childless intending to have children in the future). Maria Letizia Tanturri *et al.* (2015: 35) refer to 'permanent postponers,' who are not against having a child but who keep on delaying the transition to parenthood, and 'relinquished parents,' people who would have liked to have children, but no longer intend to have any. These last terms underline how, what were initially intended behaviours—like delaying giving birth as part of family planning—might turn into involuntary outcomes—not being able to conceive because, among many other possible reasons, it might be too late or becoming a parent is no longer either viable or desirable.⁷ 'Prescribed childlessness' also refers to yet an alternative scenario: 'the case of non-heterosexual people who are excluded from artificial insemination and joint adoption possibilities' (Tanturri *et al.* 2015: 40–41). In addition to this, even being childfree does not mean not being involved in the care, upbringing, and mentoring of others' children (Letherby 2002; Notkin 2014; MacNicol 2018). The status of parent is not necessarily incompatible with being childless either: 'empty nest parents' are those whose children no longer live at home (Keizer 2010: 31); 'estranged parents' have no contact with their adult children for many possible reasons, such as family dispute (Hadley 2018a: 76); 'childless parents' are people whose children have died or live far away (*ibid.*).

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The experience of the childless appears, overall, to escape the categories used by researchers. In recruiting ‘childless’ interviewees, for instance, I was contacted by a woman who was *bonus mamma* of four children her husband had with a previous partner. Despite living with them and taking care of them, she still regarded herself as ‘childless.’ In the course of my research I have also learned that those who become parents through adoption are often not considered like “real” mothers and fathers by those who gave birth to their biological children.

What the collection of these terms suggests is, ultimately, that life is full of twists, turns, and stories that do not fit a linear script: renegotiations, compromises, fateful encounters, accidents—a person may have decided to be childfree but still end up with a baby, as much as somebody may have worked hard towards the ideal conditions to have a family, only to discover that s/he was infertile. And yet most research wants to explain infertility either through individual choice (this includes, for instance, lifestyle preference, rational choice, risk-aversion theory about the way individuals manage anticipated future costs and benefits of their decisions, the embracing of post-material values like independence and self-realization) or structural factors (demographic and family change, family-friendly policies, women’s growing educational level, the “reproductive revolution” and women’s increased ability to manage their own fertility through the Pill and abortion, changing gender relations, employment, the economic context, to name the most recurrently cited) (for reviews of existing theories see Simpson 2006, 2007; Tanturri *et al.* 2015).

The notions of voluntary and involuntary childlessness, in other words, in their absolute black-and-whiteness, overestimate the extent to which an individual can decide his or her own’s life trajectory (Hagestad and Vaughn 2007; Keizer 2010; Hadley 2018b), or the degree to which broader factors can steer it in specific directions. They reflect neither the nature of life, its unpredictability, its outcomes shaped by a constant negotiation with events and circumstances outside our control, nor that of human beings, particularly their endless ability to change their minds over time, adapt, fight back. In between the extremes of childlessness and childfreedom there are, in fact, multifaceted, often contradictory, feelings (Wilson 2014). These do change, as I see in my own experience and as I will expand upon later, at different stages in life, not least evolving in parallel with the body’s reproductive ability (Letherby 2002). Often a tool of survival is the ability to rewrite the account of one’s many pasts and turn them into a narrative that sees us in charge, not as victims. Maria Letizia Tanturri and Letizia Mercarini (2008: 70), in examining the paths to childlessness in Italy, find in this respect some level ‘ex-post rationalization’ for voluntary childlessness.

To counter the quantitative, large-scale medical, and demographic perspectives that dominate research on childlessness, I want to provide a personal, first-hand and honest view, with the microscopic details of daily life, its more or less planned meanderings, questions, fears, inevitable bias. It is the view of both a researcher and a human being. As an academic I have an informed perspective

on some issues. I have conducted research on this topic, mostly focusing on where communication, either face-to-face or mediated by technologies and the mainstream media, figure in it: How do individuals without children connect with each other? How is childlessness represented in the news media and popular culture (mostly film, in my study's case)? How do the messages we are exposed to contribute to the way we craft our personal stories? How do we create new life trajectories in the face of overwhelming and dissonant public narratives? This focus also led me to investigate the lack of communication and outright silence that surrounds involuntary childlessness.

A full understanding of the phenomenon, I am well aware, goes way beyond my competence. I might refer to other scholars' studies about childlessness and my own research. The data I myself collected includes: interviews with 18 women and men from Italy, Norway, Sweden, the UK, China, and Denmark; an analysis of 50 films from Italy, Norway, and the US; an ethnography that has been ongoing for six years and involved participant observation on internet discussion fora dedicated to trying to conceive (2013–2015) and Facebook groups for the involuntary childless (2015–); organization, participation, and contribution to events dedicated to (in)fertility in Sweden, Norway, the UK, and online; and numerous informal conversations with childless individuals. You can read more about these and additional sources in the Methodology appendix.

In this book I want to show both how my personal experience affects the way I approach research and how my knowledge and findings are processed in the light of everyday experience. And my daily life, as everyone else's, includes floating images from social media, emotions, bodily fluids, places, scraps of news reports, dreams, fragments of conversations, memories, imagined scenarios, chaos, and irrationality. All in all, I want to demonstrate that even the scientific knowledge we claim to have about the problem of infertility is in itself constructed—and maybe infertility is not even a “problem.”

The story I present is largely mine. It is in many respects unique. I do not claim to speak for other people. Yet, on the basis of the research I have conducted, I have evidence that my experience strongly resonates with that of the many others, both women and men, who are in similar circumstances. To make an example, when I write that I tend to avoid places with toddlers or that I am uncomfortable in the presence of babies, I am aware that I am not at all an exception. I feel unease at children's photos shared by parents on Facebook, just like many others in my situation I have talked to. Some might react to these pictures with irritation, others with sadness; they might scroll down the page with feigned indifference or slam the laptop shut. Sometimes emotions are mixed, sometimes it just depends on the day. The point is, although responses might vary and changing situations might lead to different feelings and actions at specific moments depending on which stage of the “journey” through the land of childlessness we are at, what I describe here are issues that are relevant for many, not just for myself. As Arthur Frank (2013: xiii–xiv) points out in this respect, ‘people's sense of their own originality is overrated’ because ‘people's ability to have experiences depends on shared cultural resources that provide

words, meanings, and boundaries that segment the flow of time [of one's life] into episodes.' This means, as he continues, that '[e]xperiences are very much our own, but we don't make these experiences up ourselves' (ibid.). Further to this, when I find that a Chinese woman I interviewed in 2017, a group of childless North American women in the 1990s (Whiteford and Gonzalez 1995), an activist and author from the UK (Day 2013), a podcaster from Texas (Morgan 2017), a male researcher from Manchester (Hadley 2018c), a counsellor from Australia (Roberts 2017), countless international contributors on Facebook childless groups—"Childless Path to Acceptance (No TTC [trying to conceive] Talk)" (n.d.) to name one—describe the experience and meaning of *being* childless with virtually the same words I use, this tells me that what we have in common is not only an accident of life, but a whole perspective on the world. This means, in alternative terms, that *being childless* is not just one behaviour—not having a child. It is such a vast set of practices—the entire lifestyle that results from not being able to reproduce—and such a distinctive, yet shared through individual difference, mode of relating to existential questions (life, death, the future, society), that makes them—"us"—an *identity*.⁸

I have also learned, from the feedback I received as I wrote this book, in the often whispered conversations that followed the presentations of my evolving work, that those who have conceived along the way can also recognize themselves in the experiences I share. So do those who, even for a second, have feared they might end up in my place. Childfree individuals, too, have told me that they find familiar features in my story, since, like them, I have never really felt the desire to have a child (I will explain how the source of my pain for not having children is related to the sense of duty towards my family).

Aims of the book II: reclaiming childlessness

This book is written for everyone, but especially for "the others." I want it to be an opportunity for the reader who has never even thought about infertility and its consequences to step into "our" shoes and *feel*—for me that means *understand* in its deepest sense—what it is like to live without children in a society that is pronatalist by default (Brown and Ferree 2005; Moore 2014: 162–163; Rosner 2012: 13), and that, although you might not realize it because it looks "normal" to you, effectively both worships and idealizes parenthood. This, for me, is also research and, in the spirit of the feminist enquiry for which "the personal is political," it is about exposing what is invisible from the perspective of the majority. This book thus offers a minority view that aims to provide at least some counterpoints to a dominant discourse that, amplified by the media and popular culture—news, movies, novels, TV programmes—permeates the reality we live in. It ranges from the assumption driving the Norwegian policy that provides free IVF to childless couples—the state needs to provide for 'marital happiness,' and therefore needs to "correct" the lack of children (Bjørvik 2017)—to the pronatalist slant of Skype's emoticons. I will return to this later. This discourse regards childlessness as deviant, as either a deliberate choice or a purely medical,

(in)fertility-related issue. Against this, I want to reclaim the power to define childlessness the way *I* see it. This involves three steps.

First, I aim to show that people who have not planned to live without children exist. A regular stream of “miracle-baby” stories in the media contributes to the widespread idea that infertility is a solvable and temporary issue: given that IVF technology, a range of medical treatment options, adoption, and fostering opportunities appear (often wrongly) to be widely available, it is not surprising that the general assumption is that, if one does not have children, it must be because of a deliberate choice.

All of these individuals are virtually invisible. So much so, as I have realized from joining online groups, attending two yearly Childless Day events in Stockholm (2016, 2017) and a Fertility Fest in London (2018), that they are not even aware of each other’s existence until they step into contexts—either on- or offline—where they feel “safe” enough to reveal their stories. As a scholar of communication, this is for me a mystery that deserves attention: How is it possible, in the age of communication at-all-places at-all-times, that there is so much silence around so many people in so many countries? Why are they not telling their stories?

One reason for the silence, which I aim to further document, is the awareness by the childless that their stories are not regarded by the majority as worth listening to. The objective of most childless authors, bloggers, and podcasters is explicitly to “make our voices heard” and “get our story out.” The title of one of the books by Pamela Tsigdinos, award-winning writer and blogger, about the limitations of reproductive medicine and the personal and social repercussions of fertility, for instance, is *Finally heard: A silent sorority finds its voice* (2015). In *Life Without Baby* (2018), a website set up by author Lisa Manterfield to direct readers to the books she has written on living as involuntarily childless and her blog, the graphics at the top of the page suggest that these resources are about ‘filling the silence in the motherhood discussion.’ As Manterfield expands on this point in the “about” section of the website: ‘As more women joined in the conversation [through her blog] about making peace with a life without children, I began to see that there was a shocking lack of resources on this topic.’ The symbol of World Childless Week (n.d.), a yearly online event dedicated to involuntary childlessness, further to this, is a forget-me-not flower. It stands, in the words of founder Stephanie Phillips (2018), for ‘we do not forget [the children we would have liked to have], we will not be forgotten.’ The shared perception of not being listened to and, as a result, not being valued is reflected in the childless community at large by a range of visual memes. The text of one of them, for example, reads: ‘I am childless but I am not less than anyone else.’ To further stress how central the aspect of invisibility and unworthiness is to the perceptions and daily reality of the childless, the same meme is used, with a different image, as the cover photo of the Facebook page “Childless Not By Choice-Support” (2018). An entire online event that took place in 2018 (22–28 April) was entitled *We Are Worthy Summit* (2018). A day during World Childless Week is also themed “We Are Worthy” (e.g. World Childless Week 2017, 2018).

Not only are the infertility stories shrouded in silence but, when they emerge, they seem to be overlooked on the ground that they are either incomprehensible or uninteresting from the start. It is acceptable to feel sorrow over the death of a person, but who can envisage grieving an imagined child? Can you grieve the loss of a future you had assumed you would have and which has not materialized? The general assumption by those who have not experienced infertility seems to be that being childless merely means having more spare time and disposable income. The reality, instead, is an extended process that is comparable to bereavement (Thorn 2009; Volgsten *et al.* 2010; Rosner 2012; Day 2016a, esp. ch. 4, “Working through the grief of childlessness”; Day 2018; Farncombe 2018; Hooper 2018). The very reason associations, Facebook pages, and blogs run by childless individuals exist is largely and precisely to provide support in coping with a process that, from the point of view of an external observer, is not only invisible, but also not expected to exist at all.

Author and commentator Rachel Cusk (2016) provides a clear demonstration of the extent to which this side of the infertility story is being ignored and even actively dismissed. Reviewing *Avalanche: A love story* (2016), a book by novelist and film-maker Julia Leigh (2016) about the devastating experience of going through six unsuccessful IVF cycles, Cusk (who is a mother, yet is being asked to comment, presumably, on the ground that she “understands” the topic for the very fact of being a woman) writes in a column of the *New York Times*: ‘One problem with the discourse of infertility is that it has at its core a nonevent. How can a woman talk about or learn from that hasn’t happened to her?’

This entire book is my answer to this question. I want the reader to realize that the ‘nonevent’ is in fact a process that has its own substance and a name—many names, in fact: grief, disorientation, despair, but also self-development, discovery, struggle for survival, acceptance, growth—and which deserves validation, acknowledgement and, fundamentally, respect. This brings me to my second point.

I aim to break the silence that surrounds this topic and that is both supported by and further contributes to the taboo and shame that surround it (Pfeffer and Woollett 1983: 82; Thorn 2009: 48). Many women I spoke to told me they are not able to talk openly about what they are going through, their circumstances, and the many emotions and suffering that these stir. To my puzzlement, I have been thanked for my ‘courage’ in taking my experience to the open. And no wonder: going back to the example I have just presented, think of what might be the shaming effects of being publicly invalidated on the pages of the *New York Times*. Another reviewer of *Avalanche*, this time on the *Guardian* (Feigel 2016), describes it as ‘one of the first intelligent, personal accounts of the daily business of IVF.’ Good for Leigh, of course, but an implicit blanketing of all other accounts as “non-intelligent.” One is left wondering as to what that might mean: “Silly”? “Petty”? “Emotional”? This is part of what Jody Day, activist and founder of Gateway Women, a platform for women ‘united by and beyond childlessness’ (Gateway Women n.d.), calls the systematic ‘trivialisation of our personal tragedy’ (Day 2016b: n.p.). A bit like the Londoner who told me he was

disappointed by the north of Norway because there was ‘nothing’ there—what about the wild, majestic, and unspoiled nature? It is as if society had already decided what “our” problem is: not being able to have the baby—“Yes, we get you are distressed. It is all very sad. There is nothing else interesting to hear or see here.” Gayle Letherby (2002: 7) talks, in this respect, about the ‘caricatur[ing]’—effectively a flattening into a one-dimensional stereotype—of childless women as either ‘bereft’ and ‘desperate’ or ‘selfish.’ I will further discuss this in Part I of the book, together with what I call the “natalist glance.”

To counter this view, I want to show that, although currently entirely overlooked, the “no child zone” is an extremely nuanced and broad landscape to explore and unpack. Individuals without children, besides, are nothing like the damaging and extreme clichés you see in the movies of either the career-obsessed or the broken souls whose-life-has-no-meaning. These images, as I will explain, do contribute to the sense of stigma attached to being without children: the assumptions that one is cold, self-centred, uncaring, possibly a danger to society because one has no stakes in its future, or is envious of other people’s happiness because of his/her own misery (these perceptions are brought to the extreme in film, as I will show, but are all well documented by research: Jamison *et al.* 1979; Calhoun and Selby 1980; Miall 1985; Mueller and Yoder 1997; Letherby 2002; Kemkes 2008; Koropecj-Cox *et al.* 2015). If the childless do resemble some traits of those characters, it is perhaps because of a self-fulfilling prophecy: they might become that way because that is what society expects them to do (Möller 2017). This, in turn, connects me to the third reason that led me to write this book.

The health and well-being of individuals without children, both women and men, need to be taken more seriously. While studying how involuntary childlessness is represented in popular culture, particularly film, watching depiction after depiction of desperate, neurotic, crazy characters who are out to ruin other people’s existence, I could not stop wondering what kind of impact this could have. Of course movies are produced to entertain; they have no obligation to reflect reality accurately. Besides, childless individuals tend to be secondary characters. Very few movies directly tackle the topic of infertility or not being able to conceive. But what does it do to how society perceives, perhaps unconsciously, the childless when nobody ever hears their true voices and all one sees are negative stereotypes? What does it do to the childless themselves, who never find, anywhere, their lives and experiences represented? And, more specifically, what are the implications of never seeing the possibility of a life without children portrayed as a viable option? As an anticipation of what I will discuss in more detail, at the end of practically all the stories I watched, the childless either kill themselves, are killed, or miraculously acquire a baby against all odds.

In addition to this, it has long been known that the inability to conceive, well beyond its medical dimension, has the potential to be incapacitating. It impacts deeply upon the sense of identity of those affected by it, as well as their ability to function socially (Greil 1991; Hirsch and Hirsch 1995; Thorn 2009; Leon 2010). Yet, what kind of structures exist to deal with its scope,

nature, and to provide support to those who struggle? Childlessness is widely seen in both public discourse and policy as a temporary condition until one “gets the baby.” Technology, we are being continuously told, from IVF to egg freezing, will solve it. Most help, mainly in the form of counselling, is available in the aftermath of IVF and is largely (if not exclusively) directed at women. The reality—and my story is just a glimpse of the vast picture that is being missed here—is that childlessness “does not stop when you stop trying”; the focus on the medical solutions reflects our (Western) eternal fascination with technology, not the reality of fertility treatment (un)success rates; if childless women are under-represented in public debate and the media, men’s voices are even harder to come across (Culley *et al.* 2013), despite the existence of research which shows that they feel as strongly about being childless as their female counterparts (Hadley 2009, 2015, n.d.; Hadley and Hanley 2011; Hanna and Gough 2015, 2016, 2017, 2018) and that men do remain childless more often than women (Präg *et al.* 2017: 4). So much silence, considering how many people are being failed and how thoroughly, is in fact both deafening and incomprehensible.

Reaching out

Being childless has brought me into a world that works according to different logics, a reality that, just like an extremist’s worldview, can endlessly be divided into “us” and “them.” If we reflect more closely about this, we might not experience it as sharply and exclusively, but we all do it, to some extent, all the time. Think, for example, about the distinctions right/left, Democrat/Republican, “Brexitteer”/“remainer” (in the context of the UK referendum to leave the EU), national/foreigner. The fact that I see people with children as “them,” does not mean that I hate them. I do not think I am better than them. They are my caring colleagues, they are the family of strangers who, 17 years ago, saw me in tears at an emergency dentist and drove me back, to make sure I was OK, to my newly rented bedsit the first night I arrived, alone, in a foreign country. Yet “they” are not my ‘tribe,’ to use a term often circulating on online childless groups. I tend to avoid women with children (there are lots of exceptions and a whole range of back-of-the-mind criteria I discovered I use to decide whether to stay or flee—I will discuss them in the chapters to follow), but I do not hate mothers—not at the time of writing, at least. In fact I do not think they are served well by the “cult of parenthood” either. They are suffering, too, under the weight of performance anxiety created by social expectations (Blackwood 2018; Gonçalves 2018; Lanza 2018). There are plenty of accounts of the challenges that accompany parenthood.⁹ On top of this, postnatal depression is not at all uncommon and, depending on which source one consults, it affects between 10 and 20 per cent of women who have given birth (NHS 2016; Postpartum Depression 2018; PSI 2018). Mothers whose children have been removed by court orders are also stigmatized (Morriss 2018). There are women who regret becoming mothers (Donath 2015, 2017, 2018). All of these voices are muzzled too.

The childfree are similarly dismissed and infantilized, on the ground that they “do not know what they are talking about” and that they will anyway “change their minds” or sorely regret their decisions (Gillespie 2000; Donath 2015, 2018). As Gayle Letherby and Catherine Williams point out (1999: 723): ‘The word “childfree” also has an association with the word “carefree,” which in turn implies a childlike state. Thus, women who have no children are considered to have no responsibilities and thus to be like children themselves.’ Canadian philosopher Christine Overall (2012: n.p.) addresses an even more fundamental issue:

People are still expected to provide reasons not to have children, but no reasons are required to have them. It’s assumed that if individuals do not have children it is because they are infertile, too selfish or have just not yet gotten around to it. In any case, they owe their interlocutor an explanation. On the other hand, no one says to the proud parents of a newborn, Why did you choose to have that child? What are your reasons? The choice to procreate is not regarded as needing any thought or justification.

By the way, in case this piece of information can change your assessment of what Overall writes (note how it will make her sound more or less competent, depending on where you stand on the issue—an early taster of how the parent status might affect perceptions of credibility, reliability, even wisdom, and mere willingness to listen), after having carefully weighted the decision with her spouse, she had two children (*ibid.*).

The assumptions behind “the others”’s thinking are, incidentally, the same for whoever is without children, regardless of whether they have chosen it or have landed there by chance. When people hear that I do not have children, they tend to assume it is because I do not want them anyway. Childless and childfree are, in this respect, and despite the myriad walls they might build between themselves, in the same public boat.

That is why the childless could benefit from greater exchange with both those who have chosen not to have children and with parents. Comparing each other’s experiences would help us appreciate the positive aspects of what life turned out to be for each of us. To do this, however, we need more openness; we need more accounts of minority experiences and untold stories. Mine is only one voice, but I hope more will join in.

Structure of the book and a warning

This is ultimately the story of a journey with many experiential and analytical detours. Part I is the conceptual essence of the story that is going to be told in Part II—in other words, what I learned, in research terms, from the embodied experiences, reflections, and emotions described in the remainder of the book. You do not need to read Part I before Part II, although my recommendation is to follow that order because it can help you decipher, see more deeply, into what is hidden between the lines of my personal story. To reflect my double identity of

woman and researcher, Part I is mostly told from the perspective of the researcher. The woman, however, is never far away and makes her presence felt through the text. Part II is mostly narrated from the perspective of the woman, although she is, ultimately, a researcher to-the-bone and her experiences as a childless individual unfold in parallel with a research project she is conducting precisely on that topic.

Part I is divided into “sections” (some of them were too short to call them “chapters”) and develops a framework to explain the silence and invisibility that surround involuntary childlessness. In doing so, it brings together different strands of research: on fertility, stigma, political communication, but also on the nature of pain and suffering, the narrative dimension of identity, as well as health. These are both woven together and taken further into a comprehensive framework that, overcoming explanations of silence that currently exist in separate fields, aims to account for the way in which public communication and policy at the “higher” end are related to physical pain and suffering at the most intimate level within the individual, passing through media discourse and popular culture. I realize that there is much more to say about what I will describe as the “materiality” and “embodiment” of communication and how they intertwine with public discourse, politics, and the medical industry. Here I am just scratching the surface of issues so vast and complex that they will need to be further discussed elsewhere. So take this as a preliminary account of the conceptual place I have got to for the time being. As life, research is also a journey and a story that, never being really complete, does not quite end with a full stop. Part I also provides a rationale for the choices made in the narration of my personal story, particularly on how genuine understanding of pain and suffering requires a different kind of writing, a language of “feeling-in-the-body” that, by creating an experiential bridge, can support empathy.

Part II is divided into “folders”: each of them is a file of related materials, a little guided excursion, always making the reader take the perspective of a childless person, on a specific topic—like relationships, identity, the body, or politics. Eight folders emerge from the evolving personal narrative of the researcher’s diary. They are there, as in the office of a woman used to categorize systematically, for order’s sake—to appease the Cristina wearing her academic hat—and should be taken as *focusing* themes rather than sealed containers where a topic is going to be thoroughly discussed before moving on to a completely different issue. In other words, while distinct on the page, the folders overlap in content—as when I find that I have filed two copies of the same article under different headings. Just like in the practice of life they aim to present to the reader, they can never be fully disentangled.

Overall, the succession of the folders also draws an arc that follows the progressive reflection and learning about the topic by the researcher through both her own experience and the way in which she relates to the stories of the many others in her life—participants in her study, friends (and enemies and people categorized in the “suspect” category, as we will see), family members, work colleagues—as well as the data gathered from the analysis, scraps of dialogues from

TV series, morsels of information from the internet, conversations with strangers.

The book also includes a Methodology appendix that briefly tells the story behind the empirical research project. It provides details of the methods used and how they were combined, as well as the list of the films I analysed to find out about the representations of childless individuals in popular culture.

At various points you may notice inconsistencies in the text; the same scene could reappear or be referred to from a different angle, narrated perhaps by a later and, inevitably, different self—these are intentional features meant to underline how one’s life narrative is the result of continuous reassembling, revisiting, rewriting over time. Tone and register, too, might abruptly change to reflect a switch in between the multiple identities of the author. Sometimes, for instance, you might find that I refer to the person reading as “the reader” (the academic identity prevails), or I might address him/her as “you” (Cristina, the woman, having a conversation). I might just present diary entries and Facebook postings (for instance, in Folder 3) without an explicit narrative, as if they were a forensic file of collected evidence the reader can leaf through and draw his/her own conclusions from. Sometimes, even in the personal narrative, I will insert references to research. Or I might provide references to media products I consumed, so you can perhaps watch/listen/read them and compare your reaction to mine. The woman can never be neatly separated from the researcher. The story is mostly, but not always, chronological. There are some intrusions from the Cristina that edited the work after the first draft was completed (keep an eye on the dates). These are all deliberate devices to reflect the messiness of life and the imagined/spatial/temporal entanglements of daily experience behind the clean façade of the research project.

Notes

- 1 The source states: ‘There are 72.4 million women aged 20–44 and living in married or consensual relationships who have infertility defined as currently experiencing 12-month delay in conception while not using contraception’ (Boivin *et al.* 2007: 1509). In the figure I present, I am including the men in these couples. Note that this data does not include individuals who are experiencing infertility as singles. Estimates about the prevalence of infertility vary considerably depending on definitions of infertility, countries, gender, and age groups considered. Shea Rutstein and Iqbal Shah (2004: xiii) estimate that 186 million ever-married women in developing countries (excluding China) were infertile in 2002. Maya Mascarenhas and others (2012) calculated that 48.5 million couples (97 million individuals) are affected by infertility across the globe. I chose the figure by Jacky Boivin and her colleagues, as it represents a reasonable average between these two estimates.
- 2 A similar figure is reported by Anna Rotkirch and Anneli Miettinen (2016: 154): ‘Of the Finnish men and women studied [...] the share who had no children because they were suffering from primary infertility was around 10% [...]. This would represent around 5% of the whole adult population.’
- 3 A report by the U.S. Department of Health and Human Services (Martinez *et al.* 2012: 4) sets the rate of voluntarily childless American women (aged 15 to 44) at 6 per cent.
- 4 This data refers to Germany, Austria, and Switzerland.

- 5 These issues were explored at an event I organized and that brought researchers, NGO representatives, media practitioners, and members of the public together: “Untold stories: When the ‘family dream’ goes unrealized” (Litteraturhuset, Oslo, 8 February 2018). You can access the videos of the presentations on YouTube (Untold Stories 2018).
- 6 An alternative term is “childless not by choice” (CNBC) (Childless Not By Choice n.d.; The Childless Not By Choice Magazine 2018).
- 7 Michaela Kreyenfeld and Dirk Konietzka (2016a: 7) also write that ‘some scholars have claimed that childlessness can be best understood as an unintended series of fertility postponements.’
- 8 I was inspired here by a discussion about the invisibility of older lesbians (Fullmer *et al.* 1999), particularly the observation that ‘lesbian identity involves more than a sexual behavior and an argument can be made that there is something uniquely different in the worldview of women whose primary sexual and/or affectional relations are with other women’ (ibid.: 135).
- 9 A couple of Norwegian examples, among the numerous blogs about the daily struggles of being a parent, are “Casakaos [Casa chaos]” (n.d.) and “Pappahjerte [Father-heart]” (n.d.); for UK-based advice on parenting see Mumsnet (n.d.).

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Part I

Unravelling silence



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Of silence and invisibility

Silence does not really exist. If you listen carefully, there is always some small sound in the background (Lars Erlend Tubaas Øymo, photographer, checking the sounds settings before shooting a conversation between film director Hilde Haug and me for her documentary *Mammaen i meg* [The mum in me]. forthcoming).

This first part of the book is fundamentally about explaining the silence that surrounds the story of childlessness. Silence, understood as the absence of speech, is not necessarily an expression of powerlessness (Basso 1979; Sattel 1983; Gal 1989; Glenn 2004; Gardezi *et al.* 2009). Depending on the context, it can be a tool of domination—when a surgeon reaffirms his authority over a nurse by not replying to her questions, for instance (Gardezi *et al.* 2009: 1396)—or it can serve as a form of resistance—the tortured who refuses to deliver any secrets (Glenn 2004: 2).

For the purposes of public life, however, silence is undesirable. Not only, as Cheryl Glenn (2004: 5) writes, ‘[c]onversation remains our social glue, the coin of the realm, the way to win friends and influence people.’ Feminist scholar Susan Gal (1989: 1) also points out that ‘[t]hose who are denied speech cannot make their experiences known and thus cannot influence the course of their lives and of history.’ Silence is thus taken here as a synonym for “invisibility.” Although these terms belong to two different sensory domains, for all purposes of public life they overlap: not speaking out and not being seen, literally or figuratively, in the sense of not making the pages of a newspaper or TV screen, not having a recognized identity, or not getting one’s needs acknowledged, in fact, go hand in hand (Casper and Moore 2009). They both produce a form of non-existence—or a distorted one, when it is always “the others” who define the silent group—on the radar of public awareness.

Part I contains all I have learned from writing and analysing my own story, as well as all the stories I have encountered in my study: the life narratives of my interviewees, of the participants in online discussion groups and Facebook pages, the plots written between the lines of movies. Although it is placed at the beginning, it was in fact written at the end of the process. I present it now, though, because it will help the reader see deeper among the details of my personal story and to identify connections where, at first sight, it might look like there are only

fragments. Perhaps you even want to probe, by rummaging in my life's forensic file, whether I drew reasonable conclusions, even if I am a reliable narrator.

What I have understood through my journey is that silence/invisibility is not just the absence of sound, or writing, or images for that matter. It is not hollow, like vacuum. Silence is a hard outcome. It hurts and damages. It has a structure, even if it cannot be seen. It can crash you and erase you. It has a logic: there are conditions that support its existence and might even enable, when modified, its breaking down. It might be the result of not wanting to speak out—because, for example, we know that what we are going to say is not going to be understood, we expect it to be met by a hostile or indifferent reaction, or that it will lead to nothing changing anyway. Silence may also be rooted in the fact that we cannot talk in the first place: because the story we want to tell is so painful that it makes us physically ill—perhaps we feel short of breath, our mind goes blank (as I have myself experienced while conducting the interviews), and become conscious about the tears that have started welling up in our eyes; because there are no words to fully convey our emotions; because we have no available vocabulary we can draw from, especially if the experience we are going through has no name or it is not expected to exist at all by those we want to communicate with.

For all these reasons this part is going to cover a wide range of issues. It starts from where all human affairs begin and where all lives, identities, meaning, and politics ultimately reside: stories. I will also call them “narratives,” where by this term I understand a set of events tied together by a plot.¹ And this part is in itself organized like a story: of where I come from as a researcher and where I am going; the role of narratives in our lives as much as in science; the kind of new narrative I am trying to write about childlessness and about myself; and why ultimately some stories get told and others do not. Each section, more specifically, adds a new piece of the puzzle of why involuntary childlessness is, from a public perspective, invisible, unspoken, unheard of in the childless individuals' own terms.²

Section 1 sets the stage by making the point that stories are not all equal. The stories that exist about involuntary childlessness, in fact, even those told by individuals with first-hand experience of infertility, might be misleading. They reflect a person's viewpoint. As such, they should be honoured and deserve respect. Yet, for a researcher, they are only a starting point. There are deeper and broader stories that, as an investigator, I need to assemble and tell. They include a scientific explanation of why involuntary childlessness is hidden. Section 1 thus also provides a preliminary reason why the story of involuntary childlessness is not known: when it comes to studies of (in)fertility, there is a gap in research. The childless researcher, the only one who is able to identify what is in fact absent, realizes that her own experience and that of individuals in similar circumstances is not represented. The most direct way to redress the balance is to speak out about what she knows from the perspective of her personal story. This, however, is problematic in an academic context that tends to see the personal as antithetic to the “objectivity” to which science should aspire. This section further tells the story of how, as a political communication researcher, I

came to see the importance of the human body in explaining communication—or rather in the lack of communication. Given that bodies, and materiality in general, tend not to be regarded as relevant in communication studies, Section 2 takes up the challenge of demonstrating, on the one hand, that bodies matter in *how* we communicate and even *what* we say (the content of the narratives about who we are); on the other hand, communication (in the form of publicly available narratives about what it means to be “happy,” “fulfilled,” “realized”) affects our bodies, especially our well-being and health. I particularly explain how suffering is ultimately rooted in a “narrative mismatch”: between what is regarded as a valued self according to standards defined by the majority, and what our bodies and daily practices “tell” us we are. Section 3 presents a range of theories that could help explain silence around involuntary childlessness, highlighting their limitations. Section 4 both brings all the threads together and takes them further by revealing which conditions support silence and which circumstances can help break it. These are, effectively, the wheels and cogs of the plot behind mine and other childless individuals’ stories. Finally, Section 5 provides a rationale for the writing choices that have been made in telling my personal story. It underlines a last reason for silence: the problem, sometimes, is not the absence of stories, but the inability of the reader/listener/watcher to read/listen/watch them. This is because the story that the involuntarily childless wish to convey covers experiences, emotions, feelings that are so alien that it is not possible for “the others” to relate to them. Empathy, according to Fredrik Svenaeus (2016: 243), is ultimately ‘feeling alongside’ another person by being able to imagine and develop a rich understanding of their predicament. It is therefore important to create an experiential bridge through rhetorical devices that not only enable the readers to take the perspective of the childless person, but that also leave “spaces” for them to fill with their own feelings about the material presented, thereby encouraging interactivity and participation.

Notes

- 1 According to Dieter Teichert (2004: 181), a narrative is ‘a semiotic, mostly linguistic presentation of at least two successive states of affairs, events or actions.’ What distinguishes it from other linguistic presentations that might contain a temporal dimension is their ‘*explanatory function*’: ‘[w]hereas chronicles present a stock of brute information about putative facts of the past, narratives give explanations for certain states, events or actions’ (ibid.: 182, emphasis in original). This is the same reason why Stephanie Lawler (2002: 242) states that narratives do not simply ‘carry [...] a set of “facts,”’ but they are ‘interpretative devices through which people represent themselves, both to themselves and to others.’
- 2 The story of childlessness of course exists but, in the great majority of cases it figures publicly, it involves a “happy ending” and takes the form of the “miracle baby” narrative. This is a one-sided representation that does not reflect the much broader, complex and, in many respects, traumatic reality experienced by most of the involuntary childless. As Larry Gross (2001: 12) puts it in discussing the invisibility of gays in the media: ‘minorities share a common media fate of relative invisibility and demeaning stereotypes.’

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Section 1

T-word: the story behind my story

“Theory” is a scary word. Especially when English is not your mother tongue and, in the first few years of learning the language, you never know how to pronounce the “th” without it stiffening into a “t” or deflating it into a “f.” I do not want to mention it because I am afraid this will put off the reader as much as it scares my students when I lecture. ‘Theory,’ though—this is what I tell them—‘can take many forms.’ It can resemble an equation-like proposition, as in the case of Newton’s law of gravitation, or it can take the form of ‘a “story” about why and how events in the universe occur’ (Turner (1991), in Blaikie 2000: 141). Although the equation might look more authoritative—how many students have I met who think that just having numbers in their dissertation is going to make their work more “scientific”?—even a mathematical formula is still a tale about how different factors are related and why, when those factors change, the result also transforms. In the social world, however, stories are everywhere and it is important to understand that they are not all equal. This section is precisely about drawing lines between plot lines.

For sociologist Charles Tilly (2002), for whom the very fabric of social reality is made up of stories, the task of the researcher is to step back from the myriad narratives of ‘independent, conscious, and self-motivated’ individuals—which he calls ‘standard stories’ (ibid.: 26–27) and where we tend to be protagonists in charge of our destiny—in order to outline a ‘superior story’ (ibid.: xiii, 39–42). To explain this point and going back to the topic of childlessness, the ‘standard story’ is that of the woman who embarks upon multiple IVF cycles because she wants to fulfil her dream of becoming a mother, or the woman who feels ashamed because her body is not getting pregnant and there is something “wrong” with her. These stories, as all ‘standard stories,’ accomplish ‘essential work in social life’ (ibid.: 27). For instance, when they are spun by political activists or social movements (the subject Tilly is most interested in) they can consolidate people’s commitment to a common cause, spur them to action they would not otherwise take, or, as in the case of childless women, just help them ‘make sense of what is going on’ (ibid.: 27). The ‘superior story,’ though, contributes to deeper understanding by exposing explanatory layers that were not necessarily visible from the perspective of the single person (or organization, in the domain in which Tilly operates). From the perspective of a ‘superior story,’

the decision to subject oneself repeatedly to fertility treatment is also explained, beyond a desire for motherhood—which some might object is not as “natural” or “primordial” as many believe (Donath 2018; Almond 2010)—by interrelated additional factors: the inherent pronatalism of all societies that, *de facto*, even in open-minded, tolerant, and democratic contemporary Western societies, attach stigma-status both to infertility and the unwillingness to have children; a growing pressure towards parenthood (if science, as it promises, can always “fix” infertility, then how is it possible to be childless? Remaining without children must be either an impossibility or a deliberate choice, which brings us back to the stigma); having been fed by mainstream media, popular culture, and social media misleading information about the effectiveness of technology and how “easy” it is to get pregnant; not having been educated about fertility (therefore having unrealistic expectations about one’s chances of success); a medicalization of reproduction brought about by a fast-growing and lucrative fertility industry (Remennick 2000: 823). The list could continue.

I like the idea that, not only as a person, but also as a researcher, I am ultimately a storyteller. So, let’s say that this part of the book is about “the (superior) story behind my (standard) story.” Next, I am going to contextualize further the use of the researcher’s personal experience in scientific research and why it is important that I tell *my* story.

Finding a place for “me”

Undated, spring 2017, my diary

Childlessness is not something I want to think about. Yet, it simmers constantly under the surface of the conscious, it lurks in the back of the mind. It breaks up sharp and painful into realization at some points, in the most unexpected moments, while I have lowered my guard, reminding me how deeply it keeps me into its grip. Leaving me curled up on the floor, wondering whether I will ever be able to move on. I want to write a book about silence in the age of communication and use involuntary childlessness as a case study. But how can this book ever only be “academic”?

Research is a wondrous journey of discovery and self-growth. So what if, rather than writing just about the results of a study, the destination, we wrote also about the research process, the adventure? This would mean including the feelings, the storms, the life experiences, the moments when the emotions felt in the body gave us a subtle nudge in recognizing what should be investigated further, or they even opened our eyes to a world that looked different (what ethnographers call “epiphanies”),¹ the questions and little clues that helped our knowledge develop. What if there are some topics that are so hidden and unknown that an audience cannot truly grasp them unless they *feel* a little of what the researcher feels and the participants of a study share (Svenaeus 2016)? What if to really *understand* “the others” you need to step into their shoes and walk a few miles

in them, watching with their eyes, thinking their thoughts, listening with their ears, holding your tongue when they remain silent?

Questioning “science”

This book embraces the many “turns” that have characterized the Humanities and the Social Sciences over the past decades: the calls to pay attention to narrative (Mitchell 1981; Sarbin 1986; Taylor 1989; Bruner 1991; Polkinghorne 1996), emotion (for instance, Davidson and Milligan 2004; Hutchison and Bleiker 2014), materiality (Hicks 2010) and practice (see e.g. Schatzki *et al.* 2001), embodiment (Damasio and Damasio 2006; Spatz 2015; Johnson 2017).

It also develops its arguments under the broad umbrella of postmodernism (Best and Kellner 1997) and the fundamental objection it poses to the ability of science to achieve knowledge that has the fixity and definitiveness of certainty. Although many researchers in the Social Sciences and Humanities have long been operating beyond the positivist paradigm inspired by natural science—“science” as ‘a structure built on [observable] facts’ (Davies (1968), in Chalmers 2013: 1) and that aspires to generalizability—feminism, LGBT studies, post-colonial theory, studies of minorities, to name a few, have been emphasizing over the last decades even more sharply the importance of research that documents and explains difference, as well as its consequences: oppression, discrimination, powerlessness, inequality, unfairness.

Admittedly, as an empirical scholar, despite agreeing with the premises of postmodernism, since the beginning of my Ph.D. I had never thought its approach could be helpful *in practice*: if we cannot know anything for sure and the whole of reality is in a constant state of flow, then how can we conduct research at all? I have also carefully avoided feminism on the ground that I did not want to be the female scholar who used this approach just because she was a woman: surely issues important to women could be studied beyond the feminist lens.

What brought me to the questioning of fact-based and positivist approaches to science, instead, was my engagement with Science and Technology Studies (Latour and Woolgar 1979), Actor-Network-Theory (Latour 2005), and the philosophy of science (Kuhn 1962). I was particularly intrigued by how these approaches demonstrated that scientific knowledge is in itself constructed through constellations of specific social networks, technologies, places, interests. These configurations were used to explain, for instance, as diverse phenomena as: why some theories (or scientific stories) become more acceptable than others (Latour and Woolgar 1979); why what is regarded as an inert substance in Justus von Liebig’s laboratory in 1852 is categorized, just six years later, as an active life form (a yeast) in Louis Pasteur’s research (Latour 1999: 116–117); how the attempt by three marine biologists to develop a conservation strategy for a dwindling scallop population in St Brieuc Bay (France) failed (Callon 1984); or why a French transport system 20 years in the making never saw the light of day (Latour 1996). All these studies, in practice, involved tracing connections

between things and people. This was something I could do as an empirical investigator: to follow, to track, to map.

I was fascinated by how the role of the researcher, in this different perspective that saw science as *constructed* and oriented towards difference rather than generalization, also changed. The investigator was not (or no longer) the supposedly neutral, rational processor of measurements and data (a doctor in a white coat comes to mind), either in a laboratory or in an ivory tower, but a (more ordinary-looking, maybe in jeans and a jumper, with ruffled hair) human being who contextualized his/her findings by disclosing his/her position in the world (McDowell 1992; Rose 1997). This researcher could minimize his/her own bias—that is what method is about: making observations, taking measurements, drawing interpretations in a systematic way, even in qualitative analysis—but was also deeply aware that they could never be entirely removed. As Stefanos Mantzoukas (2005: 284) expands upon this point: ‘All research starts not just from anywhere, but from somewhere specific, and that is the specific individual researcher.’ As he continues: ‘To suggest that the researcher can be the central figure of the research, responsible for every decision made regarding the study, and at the same time argue that those decisions did not bear the researcher’s personal input is [...] schizophrenic’ (ibid.: 290–291).

A more human research

Such differently conceived science-from-a-viewpoint also requires an alternative way of researching and writing that opens up to the whole range of lived human experience. This is reflected, for instance, in the proliferation of creative writing applications to research that has taken place over the past 20 years across the social sciences. Examples of a trend, which has recently been referred to with the umbrella term of ‘poetic enquiry’ (Prendergast *et al.* 2009), can be located across a range of disciplines, from nursing and social work, to anthropology, geography, and feminist studies, just to name a few (Prendergast 2009: xxi).²

Ivan Brady (2004), an anthropologist whose evocative writing has been widely published in academic journals and books, talks about research complemented by the use of poetry as ‘artful science.’ Paul Stoller, another well-known name within this investigative genre, writes of ‘sensuous scholarship’ (1997, 2004). Both authors refer to the opportunity offered by creative writing to account for the ‘plurality of meaning that we experience’ (Brady 2004: 632). They particularly emphasize that, because human beings, and with them the researcher, are both sensual and intellectual creatures (Brady 2004: 624; Stoller 1997: xi–xv), academic enquiry alone is able neither to capture nor to convey the full complexity of reality. In this sense sensuous scholarship, as ‘a mixing of head and heart’ (Stoller 1997: xviii), is a more comprehensive research practice.

As I have explained elsewhere (Archetti 2015a, 2015b) in experimenting with the application of poetry to research on journalism, creative writing can be a supplementary tool (to interviews, in my case) with many functions: from bringing the vividness of the environment where the subjects of our research operate

(foreign correspondents in my investigation) back into the study; to re-situating the practice of everyday experience—what Paul Stoller (1992: 508) calls the ‘choppiness of everyday life’ and Sarah Pink (2012: 23) describes as the ‘fluidity [...], or the irregularity, messiness and inconsistency that ethnographers often encounter’; to greater intellectual transparency. This last point is achieved through the possibility of tracking the evolving thinking of the researcher. The evocative writing helps, in this respect, to make apparent those gut feelings and impressions that, inevitably, guide the researcher in the interpretation of the results. As Ivan Brady explains, objectivity is ‘fictional’: ‘because all research necessarily starts with an observer moving through the world as personally-situated sensuous and intellectual being’ (Brady 2009: xi). Creative writing becomes then one of the possible ways to document the thinking processes and perhaps even the emotional aspects of research that would otherwise be hidden. The poems, in my work and as I wrote (Archetti 2015b: 1116), were ‘the equivalent of stating who funded the research at the end of an article to make more transparent the processes through which conclusions were drawn from the data.’ The poems in my academic article, as I put it, were ‘the glass through which the reader can see the hidden mechanisms of the research machine’ (ibid.).

Situating myself into the research also made me more consistent with the theoretical framework I was using and which, as I realized, up to that point I thought could be applied to explain everybody else’s behaviour, but not mine—as if, as a researcher, I was somehow above reality and beyond its laws and logics. As I concluded in my piece (Archetti 2015b: 1123): ‘Just like my interviewees—foreign journalists working in the UK, Norway and the African continent—were the product of unique constellation of relationships that involved people, technologies and material infrastructure and this affected their practices—[...] so was I.’

The connection between the role science is expected to fulfil, the identity of the researcher, and the tools s/he uses is captured by Carolyn Ellis and colleagues (2011: n.p.):

For the most part, those who advocate and insist on canonical forms of doing and writing research [those who lean towards the “positivist” version of science] are advocating a White, masculine, heterosexual, middle/upper class, Christian, able-bodied [I might add: Western, pronatalist] perspective. Following these conventions, a researcher not only disregards other ways of knowing but also implies that other ways necessarily are unsatisfactory and invalid.

This book follows on the non-canonical research, further taking the distance from the Cartesian separation between mind and body that has characterized most of modern science. Not only are mind and body not approached as separate—I was inspired here by Lambros Malafouris (2013) and his arguments on the mind, body, and material–reality connection—but emotions are also not dismissed as trivial irrationality (for treating emotions with respect in political

analysis see e.g. Cramer 2016; Hochschild 2016). In so doing, I am trying to pursue research that is also honest in so far as it does not claim that human beings—with all of their bias regardless of methodological training—can achieve an objective, uncontroversial, final truth.

Researching the researcher

While I am both a human being and a researcher at all times, this text is deliberately written from the perspective of both Cristina Archetti, a woman who has been diagnosed with unexplained infertility, and Cristina Archetti, a university professor. The first is on a journey to find a new role for herself in a world designed for “the others”; the second wants to solve the mystery of silence surrounding childlessness in the age of ubiquitous communication. Yet, how could I get the researcher out of the woman? It was simply unfeasible to extract the human being and the existential issues that relentlessly occupied her mind from the process of research either. Cristina here does not pretend she does not have a body, that she does not feel emotions, or does not have a personal history. To the contrary, she uses them as research material, an additional source to understanding, a stepping stone to see a bit further than researchers who are not affected by infertility. Effectively, beyond about 25 hours of recordings of interviews with childless informants (the informal conversations amount to many more hours), I have, at the time of writing, 43 years of additional interview material with myself stored in my mind, recorded as lived experience, embodied. Why would I want to ignore that?

In this perspective the book adds to a growing line of autoethnographies (for a comprehensive review of the literature see Ellis *et al.* 2011). Autoethnographers advocate the use of personal experience that resonates, illuminating it, the experience of a broader group (Lancaster 2011: 46).³ As Carolyn Ellis (in Ellis and Bochner 2000: 737), a leading figure on the subject, puts it in explaining to a student what autoethnography ultimately consists in:

I start with my personal life. I pay attention to my physical feelings, thoughts, emotions. I use what I call systematic sociological introspection and emotional recall to try and understand an experience I’ve lived through. Then I write my experience as a story. By exploring a particular life, I hope to understand a way of life.

This is especially valuable when the way of life in question is hidden, it belongs to a group whose voice is distorted or silenced altogether. I am particularly inspired here by the work of Tessa Muncey (2010) on teenage pregnancy and Carol Rambo Ronai (1995) on child sexual abuse. Muncey makes a compelling case on why, as a researcher who has directly experienced teenage pregnancy as the result of abuse, she should use her personal story to counter the wrong assumptions that pervade both public and academic discourse. As she writes (Muncey 2010: 3):

The public narratives about teenage pregnancy focus on moral decline, inadequate knowledge of contraception and sexual relationships, failing to mention the possible link with child abuse [...]. These public narratives are often contained within research and the missing stories trapped in the “empty space” are deemed too subjective or too self indulgent to report.

This happens, she underlines, in a context in which there is evidence that as many as 75 per cent of young women who become pregnant have been sexually abused (Muncey 2010: 6). The stories of these women, not least because teenage mothers are regarded as a threat to social order, are buried in silence (ibid.: 115):

To think how just one small, powerless, moneyless individual can bring society into a decline is laughable, but the risk that is discussed [in research, in public discourse] is not to the young woman or to the baby, but to the state of society.

This is not dissimilar from what Ronai describes in relation to the sexual abuse of children: ‘Children and adults everywhere are shamed into staying silent about their abuse because our culture does not have a way to comfortably frame the experience’ (Ronai 1995: 412). Not only could I strongly identify with Ronai’s and Muncey’s frustration, which motivated their research, at realizing there were discursive and scientific blind spots as a result of stories that remain untold. I also felt their same sense of obligation to my voiceless peers to speak out. As Muncey puts it (2010: xi, emphasis added): ‘[I]f we consider that the dominant voice of the research world is not representing our experience, then we *have to* find ways of redressing the balance.’ Ronai (1995: 423) goes as far as comparing the ‘spoken and unspoken rules’ about what constitutes an ‘acceptable’ topic or a legitimate way of writing that are currently dominant in the Social Sciences to an abusive father who demands silence from his (scholarly) children.

Filling the gaps, redressing the balance

These are, more specifically, five ways in which an involuntarily childless researcher investigating involuntary childlessness can help “redress the balance.” First, I can (re)define the problem the way I and the participants in my study see it, outline what is relevant to its investigation from “our” perspective: in this sense childlessness is neither “just” a temporary, medical matter related to infertility, nor an issue of personal choice only. It is frankly astonishing, from this point of view, how researchers of (in)fertility tend to neglect the existential dimension of childlessness or can “miss” the fact that most involuntarily childless are so *by circumstance*. The entire book *The social meaning of children and fertility change in Europe* (Ellingsatær *et al.* 2013), for instance, aims (and succeeds, in some respects) at being innovative in overcoming reductionist explanations of infertility. As the editors (ibid.: 7, emphasis added) phrase it:

‘Comprehending fertility change is [...] not about deciding whether economy or emotions are the key driving forces. Rather, the question is how economic and non-economic factors interact in people’s fertility *choices*.’ The problem, as I have highlighted and will further demonstrate with plenty of evidence, is that fertility is most often the result of very little deliberate choice at all.

By belonging to the cohort I study, I can also approach the subject in a more sensitive and perhaps even respectful manner. I am thinking here, for instance, about the title of a Norwegian study: *Å si nei til meningen med livet? En kulturvitenskapelig analyse av barnfrihet* [To say no to the meaning of life? A cultural study of childfreedom] (Fjell 2008). To be fair, as the author (who identifies herself as a mother) explains, the title is worded after a statement made by one of the women she interviewed while they were involuntarily childless, before either conceiving or adopting (ibid.: 11, my translation):

Many of the women said they could not actually understand how some could choose not to have children in their lives. ‘I could have never lived without children,’ was a reaction I heard several times. I did not take this kind of statements at face value, but they told me something about what is at stake when we deal with children. Even if I have children, this kind of statement suggested something that was escaping me. Were the childfree saying no to the meaning of life?

I am absolutely sure Tove Ingebjørg Fjell did not mean any harm in choosing this title. That is precisely the point: she cannot grasp that the selection of terms might be problematic because she starts from the perspective of what is “normal” (i.e. most common and/or agreed-upon by the majority as desirable and appropriate). It captures what, for her, was the most interesting aspect of the phenomenon she set off to study. Yet, the phrasing, from the perspective of voluntary and involuntary childless alike, is offensive—I know because I mentioned the title to a few of my interviewees during conversations and it led to the same reaction of disbelief. It suggests that the purpose of life is indeed having children, thus implicitly denying that either me or a childfree individual are leading a meaningful existence. What I am trying to say is of course not that she should not have investigated the phenomenon or that, because she is a mother, what she concludes is necessarily invalid, but that a childless researcher would go about her same study in a completely different manner and there is value in combining these two perspective in a research landscape that, at the moment, reflects only the former viewpoint.

Second, I can show the true extent of the impact of infertility upon a person’s life: by having access to 43 years of evidence related to my case, in particular, I can precisely follow the evolving connections between thoughts, personal and family history, social expectations, the way media and public discourse become part of one’s life narrative and understanding of the world, and are even embodied. My experience is then related, to show that it matters to a broader group, to evidence from my study and broader research.

Third, the analysis also uniquely benefits from me having reflected upon my experience, as well as upon how childlessness is constructed through communication. One challenge with issues shrouded in silence is that, by not being talked about, there never is the opportunity to develop a vocabulary about them or even to challenge prevailing definitions imposed by others. This applies to involuntary childlessness as much as to child sex abuse, being gay, and what Betty Friedan (1963: 15) called ‘the problem that has no name’: ‘a strange stirring, a sense of dissatisfaction, a yearning that women suffered in the middle of the twentieth century in the United States’ and that was rooted in the frustration for not being able to access self-development opportunities outside the house. Although many women experienced this last condition, because they were told it could not exist (‘[o]ver and over women heard in voices of tradition and of Freudian sophistication that they could desire no greater destiny than to glory in their own femininity’ (ibid.: 15)), they were so ashamed of it (‘What kind of woman was she if she did not feel this mysterious fulfillment waxing the kitchen floor?’ (ibid.: 19)) that they never spoke about it, thereby contributing to the wrong belief that they had to be the only one dealing with it (ibid.: 19):

If she tried to tell her husband, he did not know what she was talking about. She did not really understand it herself. For over fifteen years women found it harder to talk about this problem than about sex. Even the psychoanalysts had no name for it.

This dynamic has commonalities, as we will see, with the feelings of shame and grief that accompany involuntary childlessness and the silence that surrounds it.

This example also well illustrates the problem of ‘infiltrated consciousness’ (Nelson 2001: xii, 28–34)—‘when a person internalizes, as part of their self-understanding, other people’s oppressive, dismissive or exploitative understandings of them, and then lose or fail to acquire a sense of themselves as worthy of full moral self-respect’ (Smith and Sparkes 2008: 227). An example is offered by childless women who have so much internalized the notion that to be a realized woman one needs to have children that infertility becomes a threat to their very identity and self-esteem (see e.g. Leon 2010: 51–53). Or women who, having always lived in an extremely pronatalist country, assume that the centrality of children in everyday life is “normal” all over the world. As Larissa Remenick (2000: 827) writes in relation to her investigation of involuntary childlessness in Israel, a fiercely pronatalist country: ‘When asked why is it that Israelis are so centered on children, some women were taken aback by the very question because they always took it for granted.’

As a fourth point, I can show the cost of investigating, deconstructing, and challenging a taboo topic—the self-doubt, having to deal with being dismissed and embarrassment, experiencing emotional burn-out, shame, vulnerability—a range of mechanisms that help explain why there is so much silence around involuntary childlessness and why it is so hard to break it.

Finally, I have access to a cohort that does not easily open up to individuals who are not in the same situation. In this respect there are strong limitations to what a non-childless researcher can do. Most of my interviewees talked to me because, since I was like them, I was “safe” and able to understand them. There are also closed and even secret groups online (the subject is so raw that many do not want their friends to even realize they are members of such groups) a non-childless researcher would not be able to access unless s/he was lying in order to be admitted to them.⁴ This would raise a range of serious ethical issues which, in practice, would mean that no researcher who is not actually involuntarily childless, in any university I know of, would be able to conduct a similar investigation.

From my own experience and the interviews I conducted with childless individuals I understood that the body—particularly its inability to reproduce and the physical suffering that the impossibility to realize one’s goal of forming a family produces—plays a fundamental role in the processes that lead to silence. Before getting to outlining those mechanisms, I therefore need to tell the story of how I came to include the body in my analysis, despite a tradition of research in my field of study that dismisses it and even regards it as irrelevant.

“Me” the researcher: where I come from and where I am going

Political communications [*sic*] is an interactive process concerning the transmission of information among politicians, the news media and the public. The process operates down-wards from governing institutions towards citizens, horizontally in linkages among political actors, and also upwards from public opinion towards authorities. The literature in political communications can be sub-divided into three major categories [...] to distinguish between the production, contents and effects.

(Norris 2001: 11631–11632)⁵

Although I identify myself as an academic in the field of Political Communication, I do not quite recognize the definition above in what I research about. I deal with “politics” and with “communication” but, over the years, I have become more and more fascinated by the politics embedded in the small gestures and interactions of everyday life. This is not the high-times capital-p “Politics” of heads of state, prime ministers, elections, and international summits or crises, but the small-p “politics,” made by a wider range of actors, perhaps through deeds that might seem, at first sight, not to have an obvious “political” content at all or the greatest significance in terms of impact: local councillors dealing with pot-holes and rubbish collection schedules; foreign journalists who might not even have a contract, but who report, day after day, one news story at a time, about what happens in the far-away countries they are stationed in; ordinary people who struggle just to have their voices heard in order to feel less invisible. Yet, these are precisely the micro components of what, collectively and innumerable steps later, respectively constitute policy, become an influence on foreign

audiences' perceptions of foreign countries (which is what Public Diplomacy and International Relations are interested in), greater inclusion and a fairer share of resources (what democracy should essentially be about). I also spend an inordinate amount of time thinking about my relationship to objects, what they enable me to *do* and, as a result, what they allow me to *think* and *be*. I am not the only person interested in these aspects. Here I am particularly inspired by the way Michel De Certeau (1984) scrutinizes the minutiae of everyday life. Both my academic approach and personal interests are also strongly influenced by Bruno Latour's (2005) understanding of the world as an entanglement of humans, ideas and meanings, objects, places, technologies.

The focus on everyday practice and human-object assemblages has further led me to appreciate that communication is much more material than the mere 'transmission of information' (or its production or sharing), as in the definition I presented earlier. According to John Durham Peters (2015) in *The marvelous clouds*, another work that has inspired my thinking, media should be conceived of as far more than 'the audiovisual and print institutions that strive to fill our empty seconds with programming and advertising stimulus' (ibid.: 52), rather as 'elemental' or, as he puts it alternatively, as 'infrastructure[s] of being' (ibid.:10). For Peters (ibid.: 2) material reality, even nature, 'the background to all possible meaning,' is a medium of communication. His provocative argument, which aims to radically challenge our existing assumptions about communication, might sound abstract but, both simplifying it and making it more concrete for the purpose of this discussion: communication is not always intentional and happens constantly between us and the environment—which we might call "all that happens around us," policy, or context—through our senses, even if there is no one out there who wants to send us any message. Stephan Fuchs (1988: 122, emphasis in original), drawing upon Niklas Luhmann, writes on this point: 'All participants in interaction systems know that they are being perceived, know that others know this [...]. In interaction systems, it is impossible *not* to communicate, and even the refusal to communicate is itself a communication of conflict.' In other words, we (or objects, like barbed wire on a fence, for example) can communicate through mere presence. Which relative gets invited (or not) to a wedding or whose country's diplomat is being shunned at an official ceremony also "speak." The material infrastructure (whether manmade or natural) also affects, by having an impact upon where our bodies can be located, what they can do and perceive, the creation and sharing of meaning.

Dealing with childlessness has additionally brought sharply to my attention the role of the body, as a sentient object, but also as a key component of my/our identity—that is "who we are"—and the interface through which all *communication* in fact happens. Wanting to point out that people have bodies or that women's bodies, in the case of my personal story, are key to their identities and social selves might seem equally redundant to ethnographers and feminists alike, for whom this is entirely obvious. Yet, as Mark Johnson (2017: 2) writes, 'in the mid-1970s, people did not have bodies.' As he explains (ibid.):

Well, perhaps I exaggerate a bit. What I mean is that a good deal of mainstream philosophy, both in Anglo-American and European traditions, acted as if our bodies aren't really that important for the structure of the mind, and that our bodies don't play any significant role in anything that mattered to philosophers. What mattered to them [...] was language, concepts, logic, reason, knowledge, and truth.

Johnson is specifically referring to Philosophy a few decades ago, but the situation has not changed considerably to this day, neither in his field nor in other research contexts. Monica Casper and Lisa Jean Moore (2009: 4–5), for instance, in discussing the place of bodies in Sociology, write:

If one conceives of the intellectual history of sociology as different strands of thought, one tendency is to treat the individual as a rational, disembodied, decision-making agent, a kind of talking head with no recognizable body. In many ways, this line of enquiry against the biologically determined notions of social order meant that corporeality—or the flesh, bone, functions, physiology, sensations, and materiality of the body—was for over a century ignored or merely taken for granted.

The body, as they explain, only began figuring in theory and research since about the 1980s, mostly as a result of feminist enquiry.

In Political Communication, and Communication at large, bodies are *still* not taken seriously. My argument, though, is that they are extremely relevant to understanding communication in a variety of ways. This matters for truly making sense of why there is so much silence around childlessness.

Silence, as I will illustrate, cannot be explained, in a society where there are so many platforms to communicate and where freedom of expression is acknowledged both as a key civic right and a fundamental democratic value, with a lack of opportunities to speak out. The “spiral of silence” (Noelle-Neumann 1993) does not help either: this theory explains the formation of public opinion by providing an account of why people tend to be silent about issues and positions they perceive as unpopular and that, they fear, would make them socially isolated. While it is true that nobody wants to publicize their infertile status—research shows there is considerable stigma (Goffman 1963) attached to it (see e.g. Miall 1985; Whiteford and Gonzalez 1995; Remennick 2000; Riessman 2000; Donkor and Sandall 2007; Nahar and van der Geest 2014; Fu *et al.* 2015; Yeshua-Katz 2019), there are aspects that this theory does not cover and that my analysis brings, instead, to the fore. I will return later to both stigma and the “spiral of silence,” together with additional explanations for not expressing oneself. As an anticipation of the argument I am going to illustrate: the body has an important role in remaining silent. Not only is the inability to conceive a source of stigma, a discredited condition most affected individuals wish to hide. The body is also experiencing psychological suffering and physical pain that prevent a person from both reflecting on one's condition and talking about it. The suffering, a

feeling that might well materially affect the body by turning into physical pain, is rooted in two narrative mismatches. The first is not fitting into one's own self-narrative: the imagined story of me as a mother I have cultivated since I was a child, denied by my inability to reproduce, for instance. The second is related to struggling to find a meaningful role for oneself in established narratives: if, in society, the truly realized woman is a mother, then a childless person cannot be realized—perhaps it cannot be a woman at all. What is processed by the brain—the messages that bombard us through social interactions, social media, or popular culture about what it means to be “happy” or “successful”—in other words, do affect the body. They, in turn, have an impact upon the identity, well-being, and behaviour of the childless individual, ultimately reflecting on his/her perception of and communication (or lack of it) with the world around. This is important for the study of society and politics because it has implications for both public debate and policy-making: Who speaks out and who remains silent? Whose voices get heard and shape the debate? Whose interests are ultimately represented?

But let us start, in Section 2, by outlining in more detail why the body should matter to communication researchers.

Notes

- 1 “Epiphanies” are ‘remembered moments perceived to have significantly impacted the trajectory of a person’s life’ (Ellis *et al.* 2011: n.p.).
- 2 Monica Prendergast (2009), in compiling a detailed annotated bibliography of existing academic research incorporating elements of creative writing, finds not only that “Poet’s Corner” sections figure regularly on the pages of a range of peer-reviewed journals (e.g. *Social Work*, *American Anthropologist*, or the *Journal of Interdisciplinary Studies* (ibid.: xx)). She also identifies a sheer variety of terms and practices: among 40 different labels she lists are ‘data poetry,’ ‘field poetry,’ ‘research-generated poetry,’ ‘poetic analysis,’ ‘investigative poetry,’ and so on (ibid. xx–xxi).
- 3 Autoethnography overlaps with what is referred to in Sociology as ‘auto/biographical practices’ (Morgan 1998: 648) and ‘interpretive biography’ (Denzin 2004). Norman Denzin (2004: 13) further distinguishes between ‘autobiography’ (‘[w]hen written in the first person’) and ‘biography’ (‘[w]hen written by another person’). Autoethnography, autobiography, as well as biography used in research, start from the analysis of an individual’s life to highlight a broader and socially shared experience. Wolff-Michael Roth (2005: 4) writes, on this point, that ‘auto/biography and auto/ethnography are genres that blend ethnographic interests with life writing’ and tell about ‘a culture’ at the same time as they tell ‘about a life.’ Both auto/biography and auto/ethnography, as he further explains, are also ‘otobiography’ and ‘otoethnography’: ‘*Oto*, that which pertains to the ear, plays an important role because it is for the other that we write and speak’ (ibid.: 11, emphasis in original).
- 4 The description of the closed group “Childless Support (No Longer TTC [trying to conceive])” (n.d.) contains the following conditions, among others, for joining: ‘This is a group for women who cannot have children. If you are TTC’ing, are pregnant, already have a child (or children), but have “secondary infertility”, or have adopted children, this is not the place for you. Step-parents, foster parents, and those raising their nieces/nephews/siblings/cousins will be reviewed on a case by case basis. Nor is this a “Childfree By Choice” group. Anyone who falls into ANY of those categories will be removed. NO EXCEPTIONS!’
- 5 Pippa Norris is one of the most prominent scholars in Political Communication. Through her work, she has contributed to defining the field as it is today.

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Section 2

The body and communication

The body is not just inert matter “piloted” by the brain. Communication is not only related to our ability to speak or to use communication technologies—be they a pencil on paper or a mobile phone—or the job done by communication professionals—whether they are journalists, lobbyists, or spin doctors hired by politicians. The body and communication, against expectations and beyond “body language,” are inextricably connected in at least five ways.

First, the body can be approached as a communication medium *in itself*. John Durham Peters (2015: 6) describes the human body as ‘the most basic of all media.’ According to his radical approach, it is also ‘the richest in meaning, but its meanings are not principally those of language or signs, reaching into deep wells stocked with vague limbic fluids’ (ibid.). As he explains, ‘[t]he body is not one with itself: it is a network. Sharing the same time and space with another is already pregnant with meaning before a single word is uttered’ (ibid.). It is worth quoting at length an example where he illustrates the far-reaching effects of the mediation of bodies and their capabilities on the very way we interact with others, our behaviour, and even value systems. He juxtaposes the human senses to dolphins’ ability to scan the environment through a ‘three-dimensional sonar’ (ibid.: 68):

What would a social world of see-through bodies be like? How would interaction change if we could see sympathetically into each other? With our X-ray vision we could detect illness, pregnancy, hunger, and injury, or perhaps even moods and emotions. Transparent flesh would open a new realm of loveliness, the coils and symmetries of the insides of the body. Beauty would no longer be skin-deep. We’d be like the visible men and women of anatomical museums. Seeing with sound would not be equivalent to seeing with light: the topology of inside and outside would be different, and colors would matter less. Bodies without opacity: an oxymoron for us, but perhaps mundane for dolphins.

(Peters 2015: 69)

Second, not only do bodies communicate through mere presence and the affordances of their physicality fundamentally shape how we communicate and produce meaning, but the cognitive and linguistic dimensions normally associated with communication cannot be separated from their bodily dimensions

either. And communication, in addition to this, does not reside exclusively inside the brain. As Ben Spatz (2015: 11) explains by drawing upon the latest trends on cognitive studies, '[t]hought and language are fully embodied processes.' The body and mind, as he continues, are 'holistically intertwined' to the point that 'the mind is an emergent property of the body, just as body is the material basis for mind' (ibid.). Spatz is a pioneer in researching 'embodiment,' which he broadly defines as: '[E]verything that bodies can do. In addition to the physical, this *space of possibility* includes much that we might categorize as mental, emotional, spiritual, vocal, somatic, interpersonal, expressive, and more' (ibid., emphasis added). This means that bodies make a difference. In practice this translates, in the words of the participants to two events Spatz organized on the topic of exploring embodiment, into the following 'enactments' (ibid.: 2):

A body can do the Charleston
A body can undo
A body can bend your perspective
A body can resonate
A body can mind
A body can invite you to listen
A body can respond to questions
A body can manipulate sound
A body can become perfect through imperfection
A body can imagine itself a rock
A body can time travel
A body can pulse
A body can interpret
A body can warm up
A body can stagnate
A body can conform
A body can tell a story.

Spatz's list goes on. I could add, for the purpose of this book:

A body can fail to reproduce
A body can make you feel worthless
A body can create (or not) new life
A body can hurt
A body can be read as defective
A body can feel like a trap
A body can take care of itself
A body can resist
A body can do other things
A body can heal
A body can survive
A body can be re-imagined.

These lists, particularly the references to story and imagination, bring me to a third way in which bodies are related to communication: the narrative nature of the self and, with it, of psychological and physical well-being. As Michael Murray (1999: 47), who specifically addresses the ‘storied nature of health and illness,’ explains: ‘we are all storytellers and we live in a storied world. Narratives or stories permeate our everyday life such that we interpret the world and define ourselves through stories.’ Narrative is so pervasive because it is ‘the process by which we organize our experience of time’ (ibid.: 48): it gives meaning and an order to a world that is in continuous transformation, as well as to events and interpretations that might be contradictory (ibid.: 58). Identity is thus “who we say we are” within these stories: ‘Human identity is not something which is fixed but something which is created and recreated through the very process of narration. The sense of identity which defines the individual is derived from the very process of story-telling’ (ibid.). It is in this perspective that an illness or a life crisis—the latter term captures accurately the way in which childlessness is lived by those affected by it in my own experience and that of virtually all the involuntarily childless individuals I have talked to—becomes one of those moments when ‘we begin to reassess who we are and where we are going’ (ibid.: 58).

Communication is relevant here in several respects: the narratives we can tell (i.e. communicate) are not chosen freely or just made up, but are always drawn from a limited range of possible stories that already exist in the public domain. The latter is the broader discourse—some might call this “culture”—that is constructed through interaction, exchange, agreement, and contestation (i.e. again communication) among individuals, groups, institutions (for an introduction to these dynamics see Adoni and Mane 1984). The mainstream media (communication, yet again) have an important role in both reflecting and consolidating this repertoire of commonly shared and socially “acceptable” stories. These, over time, become the taken-for-granted standards of “normality” against which people’s identities, as well as the thinking and behaviour that reflect these identities, get measured. Identity, in this perspective, as a radical lesbian feminist who was a central figure of the early women’s movement put it, is ‘what you can say you are according to what *they* say you can be’ (Johnston (1973), cited in Fullmer *et al.* 1999: 134, emphasis added).

But the body matters for communication purposes out of a fourth reason, too. Not only does a malfunctioning of the body caused by illness, or a diagnosis of infertility, lead to a twist in the plot of our life’s narrative, but more fundamentally affects the *content* of the story we tell. Brett Smith and Andrew Sparkes (2008: 219, emphasis in original), drawing upon work by Arthur Frank (2013), point out that

making sense of our experiences, we not only tell stories *about* our bodies, but we also tell stories *out of* and *through* our bodies. Therefore the body is simultaneously cause, topic, and instrument of whatever story is told. In this sense, the kind of body that one *has* and *is* becomes crucial to the kind of story told.

In my story I show how the diagnosis of infertility, the inability to carry out a basic bodily function, has, in fact, repercussions on my identity: it shakes my very belief that I am a *capable* person, leading me, for instance, to not fully believing that I can organize my work productively (see, in Part II of this book, Folder 3). This echoes the experience of a childless interviewee in a landmark study by Arthur Greil (1991: 54):

It [infertility] affects your ego. It has an immense effect on self-concept, in all kinds of crazy ways. You ask “How can I be a real woman?” By affecting self-concept, it affects sexuality, and it affected work for me for a while. “How can I be good at this; I’m not a normal person.”

This narrative has further implications for both pain and suffering. As a fifth way in which the body matters to communication, pain and suffering affect the very manner we interact with others and even interpret the world around us. While pain is more “physical,” a ‘process resulting from a somatosensory perception, subsequently present in the brain as a mental image and followed by an unpleasant emotion as well as changes in the body’ (Bueno Gómez 2017: 2)—my skin being pierced by the needle while injecting hormones, for instance (see Folder 1)—suffering has a broader scope.

According to Eric Cassell (1983: 522, emphasis added), suffering occurs ‘when the illness or its symptoms threaten not only interference with some aspects of person [*sic*]—virtually any illness does that—but when it destroys or is perceived to destroy the *integrity* of the person through its effects.’ Cassell also calls the ‘integrity of the person’ his/her ‘intactness’ or ‘wholeness.’ Although he does not clarify what this ‘intactness’ exactly consists in, Fredrik Svenaeus (2014: 412) takes it to mean ‘the very holding together of the person,’ ‘the holding together of a series of states of consciousness making up the self’ (*ibid.*). We might hypothesize that this relatively stable configuration may change depending on the individual. Cassell, however, does explain what a ‘person’ is: ‘all the possible dimensions of an individual’ (Cassell 1983: 522). It is useful to quote the whole range of domains he lists, as my personal story shows precisely the extent to which infertility affects them all:

A simple topography of a person would include personality and character; the lived past; the family’s past; associations and relationships with family and others, culture, and society; the person’s work and social roles; body image; the unconscious mind; political affiliations; the secret life (which everyone has, whether in reality or in dreams); the perceived future; and the transcendent or spiritual dimension, lending to each person the sense of being greater and more lasting than an individual life.

While pain can certainly be a source of suffering, Noelia Bueno Gómez (2017: 2) underlines that there are alternative sources for it, like poverty, social exclusion, forced displacement and uprooting, forced inclusion (or peer pressure),

existential problems like grief. Svenaeus particularly emphasizes the existential dimension of suffering by pointing out that it strikes at the very core of an individual's values. Through a phrasing that can very well apply to infertility he defines suffering as related to 'frustrated life plans and broken life narratives': 'To not get what one wants [a baby, a family] or to get what one really does *not* want [a life without children], to not become who one wants to be or to become [a mother/father] who one really does *not* want to be [infertile, childless, stigmatized], for instance' (Svenaeus 2014: 411, emphasis added, my interpretation of his words in relation to childlessness).

Through my story I show that suffering is related to narrative discrepancies that exist on two levels. First, there is a mismatch between the narrative of my self before the infertility crisis—me as protagonist of a narrative in which I completed my education, got married to the man of my dreams, got a secure job, and was progressing towards forming a family—and the self afterwards—an individual who suddenly sees no future and has started considering all efforts to that point as having been made in vain. I talk, more specifically, about the profound shock I experience in finding out that my life has taken an unexpected turn, that the body I thought I had taken care of through training and attention to diet was in fact boycotting me. Irving Leon (2010: 55), writing about the psychological impact of infertility, observes on this point that

[m]any women of high achievement who have been raised in a postfeminist era believe that few goals are out of reach if they work hard enough. The experience of infertility may be their first significant disappointment, in marked contrast to their professional lives.

In my case, the break caused by infertility in my personal story denied deeply held values of independence, control, being able to determine my own life, and to achieve the goals I had set for myself. To make an example involving slightly different values, Smith and Sparkes (2008) examine the case of Jamie, a young white British man who becomes paralysed as a result of spinal cord injury while playing rugby. From an early age, as the authors explain, 'physical size, strength, sporting prowess, and bodily regimentation through training regimes were defining features of Jamie's sense of self.' As a result of the accident, as the authors document the devastating effects of the loss of the able body (*ibid.*: 224),

Jamie's previous narrative dissolves and his psycho-emotional wellbeing is battered. His world is unmade, reduced to nothing [...] his self and identities are fragmented as their narrative structures break apart to the point where life is deemed to be meaningless and devoid of purpose and hope.

The second narrative discrepancy is between, on the one hand, the story I tell about myself and which has been attached to me by both the body's inability to reproduce and doctors and, on the other hand, the public narrative of what it means to be a realized and worthy individual: a parent and family-maker. It is

interesting to note that the diagnosis of unexplained infertility simultaneously suggests that one's body is both functioning (there is nothing wrong according to the clinical tests) and defective, yet the whole set-up of the fertility industry strongly emphasizes the latter. According to Kathy Charmaz (1983: 170, emphasis in original), who examines the suffering caused by the 'loss of self' in the chronically ill, the self is an '*organization* of attributes that have become consistent over time.' The self, in other words, is arranged into a structure, which 'ultimately depends on the processes to sustain it' (ibid.). This, for most individuals, means 'empirical validation in daily life' (ibid.). To explain these points, Charmaz documents the way in which the sense of self of chronically ill patients is affected by not being able to perform daily tasks, like walking, interacting with friends and family members, getting out of the house, or driving a car. The ill patients cannot recognize themselves as their ordinary (now past) selves because they no longer act and perform like them. Individuals struggling with infertility, similarly, often cannot see themselves as "normal," since their bodies do not appear to function the way everyone else expects. When leading a normal life does not work out and, month after month, one is faced with failure to get pregnant, this affects the very scaffolding of the self, leading to its progressive "loss." This, in turn, leads to suffering. As Charmaz phrases this in a rhetorical question: 'What happens when the ill person's present self-images are wholly incompatible with that individual's criteria for possessing a valued self?' (ibid.).

Both pain and suffering are embodied. Even if suffering might not come from illness, it can produce pain, make us feel unwell, or actually lead us to become ill. As Bueno Gómez (2017: 2) points out,

[e]ven when suffering is not caused by biological or observable circumstance (like tissue damage), it is an embodied experience which we cannot but feel in the rhythm of our hearts, the clenching of our stomachs, the sweat on our hands, our (in)ability to sleep, or the position of our shoulders, just to provide a few examples.

In my story, I show how suffering in fact turns to physical pain, for instance, in the case of mental stress translating into painful tension in my muscles. I also illustrate the way in which the suffering related to infertility becomes intertwined, in my developing narrative of a malfunctioning body, with a hip pain that constantly both reminds me of my "defective" status and further consolidates it, deeply shaking my sense of self-worth.

This narrative of illness and the suffering it produces affects the whole reality around me. My experience, in this respect, is far from unique. Svenaeus (2014: 419) points out that 'suffering is in essence a feeling (a mood), but as such, it has implications for and involves the person's entire life: how she [*sic*] acts in the world, communicates with others, and understands and looks upon her priorities and goals in life.' This is because suffering acts like a lens that, effectively, "colours" everything darker. As he phrases it (ibid.: 409):

Think about the difference in seeing or smelling a delicious meal when you are very hungry in contrast to when you have been taken ill with nausea. Think about how a beam of sunlight will catch your attention when you are shivering in cold, in contrast to when you are having a migraine.

This translates, in my case, in: being overly sensitive to the presence of pregnant women, children, references to motherhood and fertility; feeling more mortal, in fact going through a similar experience as having been diagnosed with a terminal illness (this is not uncommon: see e.g. Leon 2010: 57; Karaca and Unsal 2015: 243); a loss of hope for the future—what is the point of my life if everything ends with me?—but also of my past—what was the meaning of everything my ancestors did then?; paying attention to (pronatalist, in my perspective) details that are not visible to others; even taking action that could be regarded as antisocial in my resentment against a reality that is organized around “the others” (what I will discuss, for instance, as the “battle for public spaces” in Folder 2).

The flip side of the narrative discrepancies leading to suffering and physical pain I have talked about is that assembling a new story, and telling it, can also contribute to alleviating suffering and its negative repercussions on physical health. According to Cassell (1983: 522), ‘suffering continues until the threat [to the wholeness of the person] is gone or the integrity of the person can be restored in some other fashion.’ Hilde Lindemann Nelson (2001) argues, in this respect, that, in the same way as narratives can produce ‘damaged identities,’ they can also lead to their ‘repair.’ Arthur Frank, author of *The wounded storyteller* (2013), similarly points out, in examining narratives of illness, that telling one’s story is important in repairing ‘narrative wreckage’ because it allows a gradual rebuilding of the self (ibid., ch. 6).

Illness, or infertility in our case, causes a breakdown of the life narrative, leading to what Frank calls a ‘chaos story’: this is a narrative ‘without sequence or discernable [*sic*] causality’ (ibid.: 97), fragmented and incoherent, both reflecting the rawness of suffering and further contributing to it. The ‘chaos story,’ however, through gradual recovery (or managing to conceive, in the case of infertility) might give way to a ‘restitution story’ (ibid., ch. 4): a narrative of a return to “normality.”

We have already seen that the self is defined through the narratives that we tell, but it is also structured through practices. This emphasizes that self/identity narratives are not just made by words. Jacquelyn Collinson and John Hockey (2007), for instance, examine the ‘identity work’ involved in overcoming long-term injury. Although their analysis is specifically about the way in which two long-distance runners respond to serious knee injuries that threaten their running careers, their arguments do apply more broadly. In the attempt to preserve their (athletic) identity during a two-year injury period, the runners engaged in practices along ‘materialistic,’ ‘associative,’ and ‘vocabularic’ dimensions. In the ‘materialistic’ domain, for example, they stuck to their training schedule, doing their rehabilitative walking in the same places they would have previously run,

wearing their running gear (ibid.: 389–391). From an ‘associative’ perspective, they kept contact with the running community via telephone, text, email, and letter, receiving back ‘encouragement, empathy and practical advice’ (ibid.: 392). In a ‘vocabularic’ dimension they used ‘exhortations and verbal challenges to each other’ rooted in the ‘subcultural phrases employed to describe the practice of enduring in running’ like, for instance, ‘digging in’ or ‘[c]ome on now [author’s name] dig in there! When the going gets tough, the tough... Don’t moan and groan. You don’t want to be an old ... out-of-condition jogger, do you now?!’ (ibid.).

Eventually the runners regain their fitness, even if, since the self continuously evolves, recovery does not mean a return to the exact same self as before. As the runners report, ‘we became more cautious, and careful; new caution evident in our substantially revised training practices, some of which now run counter to the usual “culture of risk” of the distance runner, particularly in relation to obdurate stoicism’ (ibid.: 394). Notice how even the dimensions that might appear “material” actually involve communicative aspects: beyond the more obvious exchanges with other runners (emails, phone calls, letters) and the use of the vocabulary of the long-distance running community, the very keeping on training allowed the injured participants to retain the same lean body shape that, when they looked at themselves in the mirror, *signalled* to them that they still *looked* like runners and *were* therefore still runners (ibid.: 390); wearing running gear also *communicated* to onlookers their identity as runners (ibid.: 391).

These ‘identity work’ practices apply, beyond the preservation of a past, soon-to-be-regained self, to the creation of an entirely new one, within a correspondingly novel life narrative. In fact, mine, as well as the story of the permanently childless, is not a narrative leading to any recovery. There is no turning back to either the self or the life before the fertility crisis began because that story involved a progression towards having a child and a family that are, in fact, not materializing. ‘Acceptance’ in online childless discussion fora refers precisely to coming to terms with the fact that they will not come into being in the future either. One needs to let go of that story because the mismatch between it and reality is a source of continued suffering. What happens then? My personal experience illustrates the descent into chaos resulting from the crumbling of that story (and the self attached to it)—note that the chaos of the story and the self are reflected in my experience by disordered and fragmented practices, like keeping on starting new research projects, serially beginning to read books that then get abandoned after a few pages and piled up in the living room, or having an untidy office. The account of my journey through infertility also outlines the search for a new story: a ‘quest narrative’ (Frank 2013, ch. 6) aimed at constructing a new “me.” I explicitly address, in sharing my experience, the question of how a new narrative is constructed in everyday life in Folder 8.

Quest narratives are for Frank (2013: 115, emphasis in original) stories that ‘meet suffering heads on; they accept illness and seek to *use* it.’ More specifically, their ‘quest’ aspect ‘is defined by the ill person’s belief that something is to be gained through the experience’ (ibid.). In my personal story this gain

translates precisely in what I describe in this book: pushing the boundaries of theory and method academically, growing and discovering my true self as an individual, lending my voice to those who are voiceless by campaigning for greater awareness of involuntary childlessness.

As Frank explains, overcoming the chaos story is not only about regaining one's voice. It is about rebuilding a whole perspective on the world (Frank 2013: 208): 'Parents of ill children have to find new ways of being parents, spinal-cord injured men have to find new ways of being men, and spouses have to find new ways of sustaining relationships and their loved ones' moral personhood [when these are suffering from dementia].' I and other involuntarily childless individuals need to find another way of being realized men and women in a world that is not designed for "us" and associates adulthood with having a family. This creative endeavour requires imagination—Frank writes on this point that 'illness communities must invent themselves' (ibid.: 206)—but this imagination is also ultimately 'grounded in the storyteller's particular material world and what that world allows bodies to do and persons to be' (ibid.: 209).

My quest narrative, just like the chaos narrative, is not only made by words and ideas, but by an assemblage of objects, situations, practices. It is the thread behind a constellation of new rhetorical expressions (set phrases I learnt to use to respond to questions about children, for instance), practices of the body (learning posture and how to "walk" in tango; experimenting with theatre), people (at the tango class and its practice sessions, for example; the members of the online childless community), objects (a new mountain bike with 21 gears), places (huts and lakes in the Oslo forest I can ride to with the new bike), as well as clothing and accessories (patent leather tango shoes from Italy, a new red lipstick, Frida Kahlo-inspired earrings with oversized bright flowers).¹

All of these aspects are at the same time an immediate reflection of my new self as they are tools for its continuous forging and consolidation. I can further illustrate this double-way relationship between identity and its practical components/manifestations by referring to the role of self-presentation (through clothing, accessories, managing one's image) in the experience of two childless women. Lesley Pyne (2017), author of *Finding joy beyond childlessness*, specifically mentions on her website 'bracelets, blue nails and leopard skin boots' as expressions of her new self:

Now, having done the work [of dealing with the grief of childlessness] I am a completely different person. Well maybe not completely different, I am now, eventually the true, authentic Lesley. The Lesley who wears bracelets and leopard skin boots and paints her nails blue. The old Lesley would never have considered any of these things, but the new me is happy to experiment and play with different looks and ideas.

On the other hand, managing one's image can help further shape the self in a desired direction. Childless Mexican artist Frida Kahlo used portrait painting as a way to regain ownership of a severely damaged body, thereby creating a freer

self. First, a bout of polio at the age of six had left her right leg permanently deformed (van der Wiel 2009: 140n5), then an accident while she was riding a bus when she was 19 smashed her leg, pelvis, and back: she had 32 operations in the course of her life, had to wear a steel corset to stand upright, and was unable to bear children (Winterson (2005), in van der Wiel 2009: 141). Yet, as Jeanette Winterson ((2005), in van der Wiel 2009: 143) writes:

Painting herself as obsessively as she did [the majority of her about 200 paintings are portraits (van der Wiel 2009: 141)] was a way of regaining control over a body that belonged to doctors. If she could create her body she could own it. The elaborate dressing up, the stylized hair and face, the ritual of posing: are formalized ways of breaking free. She could never free herself from her corset or from her injuries, but she could free herself into her own image, and that is what she did.

It is important to understand, as already emphasized by the idea of “rebuilding” a new identity, that a new story requires active effort within the constraints of one’s body capabilities, social and material environment, and stock of



Figure 1.1.1 Johann Heinrich Füssli (1799–1801). *Das Schweigen* [The Silence] [oil on canvas]. Kunsthaus, Zürich. Silence is also a physical posture.

Source: Wikimedia Commons.

available narratives. It does not just emerge by itself. There are conditions in which its construction becomes (more) possible. I will return to this shortly when I discuss what it takes to challenge the stigma and break the silence that surrounds infertility.

For the time being, now that we know how communication and the body are mutually related, it is easier to understand the gaps that different fields of study present in dealing with the involuntary childless and their invisibility. This is what I discuss next.

Note

1 Not all items in this list explicitly appear in the narrative I present in Part II. Place those that are missing where you wish in the story.

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Section 3

What my story brings to the debate

Documenting what it means to live in a Western society as an involuntarily childless person and mapping the subtle and invisible mechanisms that silence “us” provide a contribution to our understanding in several respects, beyond helping the communities we live in become more inclusive. Here I outline what my story brings to studies of (in)fertility, stigma, as well as political communication (what I contribute to the field of political communication will be addressed in further depth in explaining silence later). More specifically, I have two aims: first, to locate my findings in current literature, by showing what aspects of existing research are confirmed by my study, but particularly by pointing out what I add that is new and that either questions or integrates current approaches; second, to introduce key concepts, like “stigma” and “spiral of silence” to name a couple of them, so that the reader is already familiar with them and their limitations when they are applied later.

Studies of (in)fertility and childlessness

When it comes to my contribution to studies of (in)fertility, it is useful to provide both a brief anticipation and a summary of my argument to underline how the discussion, despite focusing on matters that might appear “medical” or “demographic” in nature, is still connected to explaining the silence around involuntary childlessness. The qualitative study I present in this book, in fact, aims precisely at overcoming these medical and demographic accounts by revealing the hidden, existential dimensions of childlessness. My approach, as I am going to explain, helps expose the moral and ideological bias—what Andrew Abbott (2016: 174) would refer to as ‘the whiff of teleology’—in existing research. These aspects matter a great deal because they constitute, effectively, the assumptions underlying the judgement that “the others” make of the childless and even the childless make of themselves: infertile individuals (unless they are born barren) are taken as responsible for the way their life has turned out. This moral burden is a major contributor to silence, since it underpins the shame that the childless experience not only in talking about their own experiences, but also at merely disclosing their infertility. With this I do not aim to absolve individuals from any responsibility in how they lead their lives and what happens as a result of their

choices. I just want to point out that sometimes, as my story shows, even the most sensible and thought-through plans do not lead to achieving the desired goals.

My study was never about understanding (in)fertility per se (for instance, how/why individuals make the family planning choices they do or what are the outcomes of their childed or childless life paths). Yet, it contributes detail and nuance to how one becomes “childless by circumstance,” as well as what this means in the practice of the everyday. It also reveals the devastating effects of infertility upon all domains of one’s life. Not only are qualitative studies about the life experience of the childless (whether while trying to conceive or afterwards) rare in a context dominated by large-scale quantitative demographic and medical approaches (this is pointed out by several authors: Simpson 2006: 19–21; Hanna and Gough 2015: 1; Tanturri *et al.* 2015: 6–7, 25, 40–42). The qualitative studies also tend to focus on specific aspects of the experience of the infertile. For instance, a study by Linda Whiteford and Lois Gonzalez (1995: 27) aims to answer the question ‘Why do some women become consumed by the desire to give birth to a child, even to the detriment of their own health, marriage and financial status?’ Robin Hadley (2015, to mention one example) writes about how the desire for fatherhood affects childless older men. Judith Daniluk (2001: 439), through a phenomenological analysis, examines ‘how couples make sense of their infertility and reconstruct their lives when faced with the permanence of their biological childlessness.’ Some of these qualitative studies also incorporate the personal experience of the childless researcher (see e.g. Letherby and Williams 1999; Hadley 2018). No study I found, though, uses the experience of the researcher over her whole life-course to the extent I do here, mapping the interconnected consequences of infertility on identity, relationships, working life, one’s relationship to her own body among other aspects, behaviour in a range of situations, interpretation of media texts, and the way personal narratives evolve over time vis-à-vis public ones.

What I bring to the table is a confirmation that life-course approaches that focus on timing and sequence (Hagestad and Call 2007; Keizer 2010)—for instance, *when* a person gets married in life has more impact on whether one will have a child than simply getting married—are more appropriate to understanding childlessness than taking static snapshots of populations’ characteristics. I also show that the “no child” outcome is neither the result of individual choice, nor structural constraints alone. More specifically, while life is indeed a continuous series of individual decisions influenced by broader frameworks (the existence of maternity leave, childcare arrangements, the proximity of social networks that might help raising a child, to name a few), they might cumulatively and involuntarily lead to outcomes that might be far from what was initially intended. As Renske Keizer (2010: 124), in this respect, concludes in her study of childlessness in The Netherlands, ‘individuals are not the “captains” of their own biography.’

My approach, though, moves considerably beyond these perspectives by both reflecting upon and demonstrating at work a more radical *processual sociology*.

According to its developer Andrew Abbott (2016: xvii), the distinction between individual and structural factors is ‘fundamentally mistaken.’ I am simplifying a sophisticated argument here for the sake of brevity, but the essential points are the following. Not only should individuals be regarded as ‘social entities’ (ibid.: 1) in their own right in the same way as bureaucracies or social movements would be—in other words, individuals are never really “individual” in the sense of being units cut off from anything else. They are additionally, and as a consequence of this, ‘never purely free but must always make their futures in conditions shaped by others; and not only by those others that are socially nearby, but also by those further off’ (ibid.: 2). Abbott further criticizes the life-course approach for its strong focus on ‘outcomes’ (ibid.: 4). Against this, he provocatively argues that life does not progress towards any particular goal: ‘The social process doesn’t have outcomes. It just keeps on going’ (ibid.). He critically unpacks this notion (ibid., ch. 6, “The idea of outcome,” pp. 165–197), in fact, to show that, while the whole point of sociology is to explain “outcomes” (i.e. why things turned out one way or another—here we could interpret “outcomes” as “having a baby”), this is very much arbitrary and always the result of a value judgement. For instance, as he writes (ibid.: 186),

there is no particular reason—normative or empirical—why the economy has to grow. The belief that it does and that it must—implicit in the notion that growth is the paradigm within which the economy must be understood—is a normative position, an outcome ideology.

This applies particularly well to research on (in)fertility which, far from a neutral investigation of either demography or society, assumes that having a baby is not only desirable but indeed the *appropriate* outcome for an individual’s life-course. I can see why: after all, most do wish to have a child (myself included), and if there were no children there would be no society. Like Abbott, I am pointing out that we should become aware of these (inescapable, in his view, in any study) in-built slants because they do produce consequences. Not only is the assumption I have highlighted in research on infertility and childlessness an ideological (pronatalist) bias that is never questioned—could there not be other ultimate purposes in life than having a child?—but it also produces devastating effects in human terms. In our case they result, implicitly, in regarding all choices that, with hindsight, did not lead to the baby-outcome, as the “wrong” choices. The weight of this invisible moral burden does contribute among the childless to a sense of ‘shame’ and the feeling, as several of my interlocutors put it to me, of having ‘screwed up’ because they had been, within this perspective, unable to manage their lives as they *ought to have*.

In addition to this, the whole discourse of “choice” in fertility research reveals an assumption that everyone *can* have a baby, which is not at all the case, regardless of age. Individual choice (which we have seen does not really exist to start with) makes even less sense if we think that having a baby necessarily implies two human beings. So, even being a fertile individual does not guarantee

having a baby if there is no partner (using a sperm donor is not exactly like going shopping), a partner is infertile, does not want to have a child (among many other possible reasons), or the specific combination of the two individuals is not ideal for conceiving (Möller, in Heidal Landaasen 2013: n.p.). Despite the assumption that men can reproduce over a much broader window of opportunity than women, in fact, conceiving with older men is more difficult and carries a higher risk of miscarriage (Ford *et al.* 2002; de la Rochebrochard and Thonneau 2005; Jaleel and Khan 2013).

Beyond all of this is the fact that, whatever a country does in terms of policy to encourage citizens to make the “right choice,” there will always be, effectively, at least 10 per cent of the adult population who will not fit that desired end-state (Keizer, in NWO 2010).¹ Larissa Remennick (2000: 839–840), who examines the experience of 26 involuntarily childless women in pronatalist Israel, gets to the core of the issue:

[T]here will always be women with fertility problems, most of whom will turn to medical treatments but less than half will eventually succeed. The rest will have to get on with their lives without children—in a society that is geared for families with children and gives little social space and credit to the childless. What does the future hold for these women [and men]?

The bottom line is that infertility cannot be “solved.” In fact, as I will show, the consequences of infertility in terms of its experience tend to be more damaging for the childless—psychologically, physically, socially, politically—in the countries where policies are “best” (i.e. produce higher fertility rates) because the pressure towards having the baby-everyone-else-has results in such an obvious and deeply felt deviation from and expectation of compliance to the “norm.” Although Israel is an extreme case due to the ‘unique constellation of Jewish religious tradition, demographic competition with the Arab neighbors, fear of child loss in military conflict, and children-centred everyday culture’ (ibid.: 822; one could add the unlimited funding available for fertility treatment, ibid.: 823; Birenbaum-Carmeli 2016: 17), the situation is not so very different in other countries. The Norwegian welfare state might not be openly pronatalist, but its commitment to gender equality (Ellingsæter and Leira 2006), by revolving around the rights of women as *mothers*, generates, as my interviews showed me, a similar pressure towards parenthood.

I also provide an insight into the suffering that, paradoxically, is produced by medical procedures that are meant to cure the body. Noelia Bueno Gómez advances an argument as to why we need to better understand the nature of pain and suffering, particularly by taking the distance from medical definitions that see them attached to the materiality of the body only. Drawing upon Cassell’s critique, she points out that ‘[t]he naturalistic approach of classical evidence-based medicine incorporates a particular view of human beings based on the Cartesian mind/body dichotomy, in which the body is understood as a mechanism that works according to universalizeable, manipulateable processes’

(Bueno Gómez 2017: 9). This means that medicine, despite the development of a more holistic understanding of the human being (through the “humanistic turn,” for instance), ‘still depends on the idea that the different parts of the body can be treated independently’ (ibid.). For all practical purposes, this translates into a difficulty or even an ‘impossibility’ (ibid.) in recognizing suffering that is not necessarily visible or measurable via medical instruments. As she phrases it, ‘unrecognized pain and suffering are inflicted to further particular goals (healing, information gain, prevention), as well as the lack of consideration of concrete phenomena like chronic pain, non-somatic pain’ (ibid.). This can lead, as she concludes, to ‘moral injustices,’ including the ‘denial of the suffering of others’ (ibid.).

Such considerations are particularly relevant to the treatment of infertility. As childless organizations point out at the time of writing this text, the fortieth IVF anniversary (25 July 2018, the day when Louise Brown, the first IVF baby, turns 40) should not only be an occasion for celebrating the progresses of science—along the desired lines of pharmaceutical companies. While IVF has, for sure, given hope and a baby to many couples, they argue, we should be mindful of the far more numerous failures and suffering that have been generated along the way by the fertility industry and which have remained in the shadows (Chamberlin 2018; Day 2018; Smith 2018; *The Road Less Travelled* 2018; Tsigdinos 2018). As author and activist Lesley Pyne (2018) writes under the Twitter banner of “#unmaskingIVF”:

Latest figures suggest that at least 6 million babies have been born as a result of IVF or other reproductive techniques.

The average failure rate is 75% (or 79%, but who’s arguing about 4%)² and there have been 20 million failed cycles. Taking a guess here, I’m going to suggest that there are perhaps 8 million (most probably more) women who are childless as a result of unsuccessful IVF or other reproductive techniques. That’s not counting many others who arrived at this place via a different path.

How much physical and emotional damage was caused by medical procedures that were put in place, in principle, to help patients? Who is picking up the pieces of this human wreckage? These are important questions to ask, especially considering that medicine does not necessarily have to operate the way it does. Eric Cassell (1983: 523), for instance, suggested 25 years ago, among other recommendations aimed at preventing medical care from adding unnecessary suffering to patients’ illness, to reorient ‘diagnostic and therapeutic goals [...] in terms of the patient, not the disease.’ As Bueno Gómez (2017: 4) also underlines, ‘medical decisions are never strictly “scientific,” but also moral and/or political.’ Further to this, Amy Agigian (2004, in Walks 2007: 134) poses an even more fundamental and poignant question about the medicalization of women’s bodies: ‘Since when has childlessness been an illness?’³

Understanding stigma

This book also contributes to what we know about stigma. According to Erving Goffman's landmark study (you see, I am averse to using the term "seminal"), stigma, in practice, is 'the situation of the individual who is disqualified from full social acceptance' (preface, n.p.). It refers to 'an attribute that is deeply discrediting' (Goffman 1963: 3). This attribute can take different forms. In Goffman's words, they range from visible 'physical deformities', to 'tribal' features that can be 'transmitted through lineage,' like 'race, nation and religion'; to a characteristic of one's personality, ranging from 'weak will, domineering or unnatural passions,' 'addiction,' to 'radical political behaviour' (ibid.: 4). What constitutes a source of stigma, however, is not fixed, but rooted in a 'language of relationships' (ibid.: 3). This makes stigma extremely interesting for a communication researcher: How is stigma socially co-constructed? Where do communication technologies or media fit into this process?

Although Goffman never explicitly deals with infertility,⁴ his framework has been applied to childlessness before (Whiteford and Gonzalez 1995; Remennick 2000; Riessman 2000; Donkor and Sandall 2007; Slade et al. 2007; Nahar and van der Geest 2014; Fu *et al.* 2015; Morison *et al.* 2016; Yeshua-Katz 2019). The dynamics he describes explain a whole range of behaviours, from the length at which the childless, just like any bearer of stigma, are prepared to go to correct their "abnormality" (Goffman 1963: 9–10)—by having a baby in this case—to the management strategies they implement to avoid situations in which interactions with "normals" will make their stigma apparent (ibid.: 12)—staying away from Christmas parties where family members might ask "When are you going to have a baby, then?," for instance. Goffman's study also partly accounts for the silence of the childless. Stigmatized individuals are very aware of how they 'fall short' of the way they 'ought to be' (ibid.: 7) and are, as a result, ashamed of it. They are thus in a constant situation of vigilance in relation to the "normals," being particularly afraid of the way any disclosure about their stigma might affect the way in which they are treated and perceived. As Goffman puts it, the energy-consuming information management the stigmatized continuously engage with revolves around the dilemmas of: 'To display or not to display; to tell or not to tell; to let on or not to let on; to lie or not to lie; and in each case, to whom, how, when and where' (ibid.: 42).

Some studies have specifically investigated the micro-dynamics of this information management in relation to childlessness, from the comments and behaviours that constitute an informal sanctioning of the childless (Miall 1985)—like being 'publicly admonished or rebuked by other women' because one does not have children and can't therefore 'understand' (ibid.: 390)—to the navigation of stigma in everyday life in a pronatalist context (Remennick 2000; Donkor and Sandall 2007; Nahar and van der Geest 2014), to examining the function of online interaction hidden from the "normals" (Morison *et al.* 2016; Yeshua-Katz 2019).

As Imogen Tyler and Tom Slater (2018: 721) point out in a special issue dedicated to "Rethinking the sociology of stigma," however, Goffman and most of

those who have applied his framework tend not to engage with questions related to ‘where stigma is produced, by whom and for what purposes.’ In this sense, Tyler and Slater argue for “looking up” (ibid.: 731) (Kirsteen Paton (2018) calls this ‘gazing up’). They illustrate this by using the example of a UK campaign, supported by members of the British royal family, to dispel the stigma of mental illness: “Heads Together” (ibid.: 722). While raising awareness and talking about the taboo topic can indeed be helpful,⁵ this may do little to change the broader structures that support the very existence of the stigmatized condition. They point out, in fact, that the same campaign was funded by pharmaceutical companies who make a profit from mental health patients. The royal family can also be taken to represent the same establishment that creates, through its austerity and neoliberal policies, the very anxiety and precariousness that lead to the deterioration of mental health in the first place (ibid.: 727).

A parallel can be established with the fertility industry having an interest in women and men who are unable to conceive perceiving that they have a problem for not having a child. Regardless of the country, even the websites of organizations who should defend the interests of the childless invariably present a range of ads and logos of medical companies and private clinics.⁶ I am certainly not denying that individuals who would like to have a child perceive that they do have a problem. Yet, the desire to have a baby cannot be regarded as biologically determined (Donath 2018): there are individuals who do not want to have children (they refer to themselves as *childfree*: Gillespie 2003; Blackstone 2014; The Childfree Choice n.d.) and parents who regret having them (Donath 2017). So, to what extent is parenthood constructed, inflated, and capitalized upon by an industry that, effectively, cashes in on hope and despair? (Tsigdinos 2016a, 2016b; Wiseman 2016; Kennedy 2017). I can document through my experience the pressure placed on patients by a convergence of social expectations, interests of pharmaceutical companies, “miracle baby” stories in the media (partly reproducing the desired scripts of the fertility industry), a health system increasingly revolving around efficiency of procedures and outcomes rather than patient well-being.

My study also contributes to illustrating the everyday mechanisms of stigma construction around childlessness by showing how micro actions are shaped by broader standards of “normality” constructed through media coverage and popular culture (Hall 1993; Dotter 2002). Daniel Dotter (2002: 429) in this respect, in discussing the role of the media in the creation of deviance, writes that ‘[m]ass media are primary agents of meaning-generation. Much of what we take as “truth” at a given moment is filtered through the lenses of television, newspapers, films.’ Further to this and in relation to the coverage of the stigmatized gay minority, Larry Gross (2001: 8) observes that what is presented in the media as “objective” is in fact ‘achieved through a “balance” that reflects an invisible, taken-for-granted ideology.’

I particularly explore the way in which images and expectations contained in public discourse are internalized and become embodied. In this perspective, another aspect that tends not to be explicitly discussed in the literature, but

which is in fact related to these perceived standards of normality, is the suffering associated with stigma. Goffman does not really deal with its causes but through the words of another scholar (Sullivan (1956), cited in Goffman 1963: 13):

The awareness of inferiority means that one is unable to keep out of consciousness the formulation of some chronic feeling of the worst sort of insecurity, and this means that one suffers anxiety and perhaps even something worse, if jealousy is really worse than anxiety.

The suffering generated by stigma tends thus generally to be attributed to anxiety and insecurity, but otherwise regarded as somehow “obvious.” At a closer look, however, how precisely does something as abstract as a social norm or a perception create suffering, which is an embodied condition, even a physical one when it turns into pain? What contributes to the suffering, as I found out, is a sense of loss of control of one’s own life, the shock of having to deal with a major, unexpected turn in life plans that had existed in one’s mind, in some cases since childhood. This suggests that individual life-stories, or personal narratives, are important. Both the shame resulting from the awareness of the extent to which one deviates from the “norm” and the suffering that leads to self-censorship are further intensified by a sense of isolation for feeling alone and invisible: the media has a role in this process, not only in not dealing with infertility and childlessness-not-by-choice (the stories where there is never a final “baby victory”) as topics, but also in the tendency to portray those who remain childless as victims without a possibility for self-realization (Franklin 1990; Graham and Rich 2012). Narratives publicly conveyed and consolidated by the media are thus additional components of the structure of silence around childlessness that also need to be taken into account.

Before doing that, though, it is worth mentioning another underdeveloped aspect in research about stigma: making sense of the resistance to it (on coping with and challenging the stigma of infertility see Miall 1985; Whiteford and Gonzalez 1995; Remennick 2000; Riessman 2000; Todorova and Kotzeva 2003; Donkor and Sandall 2007; Nahar and van der Geest 2014; Fu *et al.* 2015; Yeshua-Katz 2019). Especially when it comes to childlessness, research suggests that resisting stigma can take different forms. Catherine Riessman (2000), in examining the resistance practices to the stigma of infertility by childless women in South India, talks, for instance, about ‘resistant thinking’ (redefining the notion of family to include nieces and nephews, for example, *ibid.*: 123); ‘strategic avoidance’ (avoiding public ceremonies and temple festivals in favour of settings that allow for invisibility, like film showings, *ibid.*: 124); ‘speaking out’ (‘talking back the challenge of discriminatory behaviour [...] confronting pronatalist attitudes and hostile circumstances,’ *ibid.*: 124); and ‘acting up’ (challenging established hierarchies by leaving the joint family, for one example, *ibid.*: 125). Papreen Nahar and Sjaak van der Geest (2014), in conducting a similar study among childless women in Bangladesh, also more clearly distinguish the strategies of women in the countryside from those in urban settings. For

example, they explain how the threat of being abandoned by the husband due to infertility (something that also affects, although to a lesser extent, urban women) leads women in villages to increased socializing for the purpose of building alliances in the community (ibid.: 388):

To create social space, rural childless women do extra work; they take charge of cooking and cleaning and take care of elderly relatives and neighbours (who are often kin of their in-laws). By doing extra work, they become indispensable to the community.

Not only does this create social pressure for the husband and in-laws not to abandon the woman, but also contributes to the redefinition of their role in the community and an improvement in their self-esteem (ibid.: 389). In urban environments, among other strategies, women might focus on developing an alternative identity by focusing on a professional career and its achievements (ibid.: 391–393).

For a study in a Western context, I could mention an investigation of ‘resistive voices’ by involuntarily childless women in Bulgaria (Todorova and Kotzeva 2003). These women, too, engage in acts of resistance that range from ‘strategic avoidance’ (of in-laws blaming them for infertility, for instance, ibid.: 147–148), to challenging the stigmatizing meanings of infertility: ‘they did not unquestioningly adopt the cultural script of the childless woman as the only one to blame, as “defective” and excluded, and as passively and desperately accepting any form of treatment proposed to her’ (ibid.: 149). That study also documents differences in opportunities and constraints between towns and small villages. More specifically, as the authors write:

[T]he extent of the silencing depends on the size of the city one lives in—with the absence of children being much more obvious in smaller towns, while at the same time the efforts to hide it or avoid it as a topic also being more pronounced.

(Ibid.: 148)

Irina Todorova and Tatyana Kotzeva (ibid.: 149) further point out that ‘the encounters with stigmatization led to an identification and unity with other women and couples facing infertility.’ This awareness of a common identity was the base from which the women voiced their resistance and even demanded action from the researchers. The women’s participation in the study was perceived, in fact, as a ‘political act’ and the network created by the study was used, a year afterwards, to create an advocacy organization to demand, among other goals, government subsidies to cover the costs of fertility treatments and a regulation of a medical system that many felt was demeaning and exploitative. While the researchers underline that the organization did not, in the end, really challenge the parenthood mandate or try to counter the stigma of childlessness (in this respect it was ‘an important, though contradictory phenomenon,’ ibid.: 150),

it does show a more substantial and formalized attempt at practicing resistance and how this has a ‘multilayered’ nature (*ibid.*: 150).

But in which conditions do these strategies arise? Both Riessman (2000) and Nahar and van der Geest (2014), who discuss the concept of resistance explicitly, suggest that class, with the educational and material resources that come with it, matters a great deal. Remennick (2000: 836), discussing Riessman’s study, further points out that it is only the well-off women who are truly able to articulate ‘resistance’ rather than mere ‘coping and management’ of stigma in situations that have been imposed upon them: ‘Resistance to stigma is possible only when stigmatized persons reject popular ideas regarding their flaws’ (*ibid.*). She goes so far as to argue that genuine resistance would have to consist in rejecting altogether the motherhood mandate (*ibid.*: 837–838). Nahar and van der Geest (2014: 383), however, distinguish between ‘resistance’ and ‘resilience’:

Resistance we take to mean a more active response to adversity and oppression than resilience; it is a counterattack (as cautious and subtle as that may be) to change existing conditions. Both resilience and resistance are forms of agency and apply to the way childless women react to stigmatization and social exclusion.

Regardless of whether the strategies adopted by the women in question to counter stigma constitute genuine resistance or not—even the Bulgarian women who challenge cultural scripts about childlessness founded an organization that does not go as far as rejecting motherhood—what matters here is the circumstances in which they develop. Remennick (2000: 837) underlines that the resources of higher-class women (in the context of the study she undertakes) enable them to create safe spaces where they can more easily articulate a different narrative without much interference from other people:

Only women who have realized themselves in other (nonfamilial) realms and have indisputable achievements to call to their credit can challenge prevalent norms. An essential mental resource for resisting stigma is the ability to disconnect from the dominant discourse, to assume a critical stance, which usually comes with education. Other corollaries of higher social status include residential privacy, hired domestic help, and private means of transportation, which together allow more choices in personal communication (e.g. the ability to avoid unsolicited questioning in public places).

These observations resonate, even if in different geographic and cultural contexts, across the other studies I have mentioned. I am particularly interested in these enabling constellations. My story confirms and further explores, in a Western context, the key role played by social networks, especially contacts with other childless women, safe spaces (paradoxically, I am freer to speak out because I am a foreigner only marginally integrated into Norwegian society,

thereby facing less disciplining mechanisms), adding the importance of the narrative dimension and highly individual nature of the constellations of objects, words, images, situation, and practices that contribute to the building of a new self and corresponding life-story.

Political communication from a minority perspective

Silence tends to be explained in political communication mostly through the theory of the “spiral of silence” (Noelle-Neumann 1993) and (partly overlapping) conceptualizations of free speech and its limitations (e.g. Midtbøen *et al.* 2017). The spiral of silence provides an explanation of why people do not speak out that revolves around their fear of expressing an idea/opinion perceived as unpopular. The media are a key source of information—albeit not always accurate—for the individual to assess what positions are mainstream. According to Elisabeth Noelle-Neumann (1993: 202), who developed this theory in the context of political elections, if people believe that their opinion is part of a consensus, they would confidently speak out both privately and in public; if they are convinced that they hold a minority position, they will be more cautious and perhaps remain silent. This, in turn, weakens the minority position until it disappears—although Neumann specifies that there might be a ‘hard core that holds on to its previous values’ (*ibid.*: 202)—or ‘becomes taboo.’

Some aspects of this theory may apply to explaining the silence surrounding childlessness and infertility—nobody, for instance, wants to publicize his/her own stigma status because they know this will not make them easily accepted. The stigmatized are never sure about the way the “normal” interlocutor will react to the disclosure of stigma. Yet, the spiral of silence relies too much on the gauging and expression of *ideas*. The same can be said for the investigation of the boundaries of free speech and its contestations. They largely rely on these fundamental assumptions about the public sphere:

Public debates are shaped by social mechanisms which silence certain groups and opinions, while amplifying the voices of others. These mechanisms create boundaries that are not (primarily) defined through judicial paragraphs, but rather barriers made of different types of perceived pressure, self-censorship, exclusion and stigma.

(Midtbøen *et al.* 2017: 16)

Boundaries of free speech are approached as ‘real’ in so far as they affect ‘individuals’ propensity to speak their mind,’ yet they change depending on the actors’ social position, time, and context. As the authors illustrate this: ‘What were seen as illegitimate opinions in the field of immigration ten or twenty years ago [...] may be seen as completely legitimate today’ (*ibid.*: 18). The questions remain, though, of why certain voices are amplified and not others and why some discourses are perceived as more legitimate than others.

The problem may, in fact, be one of “relative silence,” or dealing with the subject in a very selective manner. One could say that the story of involuntary childlessness is in fact present in the public domain, but overwhelmingly from the perspective of being defeated by technological solutions that inevitably lead to parenthood. Marjolein de Boer, myself, and Kari Nyheim Solbrække (2019) document this through a study of reality TV programmes—seven series aired on global TV channels (Discovery Channel, Style Network, E!) between 2009 and 2016—about couples undergoing fertility treatment. Although the representations of infertile women (the focus of the study) in this genre could have emancipatory potential—for instance, by showing alternative and otherwise obscured choices, experiences, and lifestyles—they ultimately reinforce traditional (pronatalist) stereotypes. In fact, they show women who are willing and able to endure fertility treatment, to control and discipline the messiness and risk of the procedures involved, and eventually *always* become mothers (ibid.: 3), to the point that the only couple who does not conceive among those participating in the shows that were analysed is simply made to quietly disappear from the storyline (ibid.: 13). These representations are thus highly unrepresentative, in fact even totally deceiving in the cleanliness and painlessness of the infertility experience, not to talk about its (non-)effectiveness in achieving pregnancy. This, as we underline in the conclusions, has extremely harmful effects on the way in which viewers both come to assess infertility treatment in family planning and the role of women in society.

So, if the infertility story is not absent from the public domain, it is a highly misleading version of what it is in the everyday reality of those who suffer from it. The question then becomes: Why don’t we hear the other side of the story?

Another framework that might help us understand the structural reasons for leaving the “dark” side of infertility out of the media spotlight is the one developed by Daniel Hallin (1984): a theory that divides public discourse into the spheres of ‘consensus,’ ‘legitimate controversy,’ and ‘deviance.’ Although this theory was originally developed to explain the media treatment of opposition to the Vietnam War in the US, it has been widely applied to other issues and national contexts.⁷ The sphere of consensus (incidentally confirming the inherent pronatalism of all societies) is described as being about ‘motherhood and apple pie’: within this region, as Hallin (1984: 21) writes, ‘journalists do not feel compelled to present opposing views, and indeed often feel it their responsibility to act as advocates or ceremonial protectors of consensus values.’ The sphere of legitimate controversy, instead, is ‘where objective journalism reigns supreme’: the aspirations to balance and neutrality that tend to characterize journalism mean that different views and positions are presented (ibid.). The sphere of deviance is where ‘those political actors and views which journalists and the political mainstream of society reject as unworthy of being heard’ reside (ibid.). In Hallin’s study these actors, in the first years of the conflict, were the protesters of the anti-war movement. They were marginalized in the war’s coverage and their voices went often unreported or subject to critique. Over the course of the conflict, mainly as a result of anti-war views being shared by political élites, their

positions became more mainstream, leading to their shifting into the sphere of ‘legitimate controversy’ and greater inclusion in the coverage. The ‘sphere of deviance’ is where the dark side of the story of involuntary childlessness is currently located.

Questions that are not addressed by Hallin’s framework and which I am trying to engage with are: Why is an issue confined to the sphere of deviance in the first place? What happens, in other words, before the model I have outlined starts to apply? A problem here is not only journalists’ reluctance to cover the issue because this is perceived to be outside of the boundaries of acceptable debate, but also the very unwillingness of the childless to speak openly about it. Many journalists, in this respect, not differently from the rest of society, are simply not aware about this dark side at all.

What I have learned through my interviews and speaking at events about infertility is that the childless themselves do not realize that the experience of infertility presents many common features, despite the uniqueness of everyone’s personal story. They believe they are alone in thinking, feeling, and experiencing what they do. Partly as a result of never hearing the real voices of others who are in similar circumstances, often the childless themselves believe the stereotypes and buy into the belief that there is no other way of living but conforming to the mainstream. On this point, British writer, playwright, and theatre director Stella Duffy (2018) writes:

Some of the suffering I have felt, and sometimes still feel, about infertility and failed IVFs and the ongoing life of childlessness not-by-choice, is self-inflicted because I too have bought into the prevalent idea that I am not a fully-rounded human being because I am not a parent, because I too have bought into the idea that mother-love/father-love/parent-love is special and different and it changes everything.

[...]

Constantly hearing the sentiments from the world that tell me I’m not a real woman because I’m not a mother, not a fully-realised human being because I’m not a parent, and internalising them, so that – on some level – I believe them myself, even though I don’t want to and nor do I think they’re right. And yet, I know that somehow, I too have taken in these ideas. Like internalised homophobia, it’s a hard thing to see about ourselves.

In this perspective, I engage with the questions of: How is “normality” constructed? What shapes the pressure towards self-censorship? What contributes to define where the boundaries of acceptable debate are drawn? How are some issues and actors constructed as “deviant” to start with? What is missing reflects the broader limitation of Communication as a field of study that I pointed out earlier: the approach to communication as mostly immaterial. This translates into a focus on messages and the content of communication (mainstream media coverage most often) at the expense (despite generalized statements about the fact that “context matters”) of the material environment in which communication

takes place, bodies interact, and social action unfolds. These are the aspects I integrate into my analysis: the role of the body, as well as the subtle ways in which we make sense of our reality and understand what is or not valued, not only through information we are exposed to and collect over time, but the very way in which material reality is organized. In relation to the last issue, for instance, I have pointed out (Archetti 2018) that even food portions sold in my local supermarket suggest that it is desirable to live in a household that consists of more than a single or a couple. I also take seriously emotion and imagination, particularly how they fit into personal and collective narratives that do end up making a political difference. In addition, I point at the mechanisms, both informational but also material, through which one breaks the silence. I will expand upon this in Section 4.

In doing so I am also taking forward those calls in the field for embracing more qualitative methods (Karpf *et al.* 2015; Manaf and Azzman 2017; Mokhtar 2017) that, so far, have mostly led to half-hearted attempts at methodological renewal and have tended, at most, to translate into the application of conventional qualitative content analysis and interviews. The most innovative example I have found so far, in this perspective, is the integration of quantitative content analysis, discourse analysis, ethnography, and interviews to explain how news coverage fits in with the making of public health (Briggs and Hallin 2016). I radically step beyond this through this book's experimental and creative writing.

Notes

- 1 Infertility, it appears, is expected to rise: according to a study from the Hebrew University of Jerusalem (Levine *et al.* 2017), the sperm count of men across North America, Europe, Australia, and New Zealand has declined, within the timeframe 1973 to 2011, by 50 to 60 per cent. Chris Barratt (2017), Professor of Reproductive Medicine at the University of Dundee, in interpreting these results, goes as far as saying that 'if the data on sperm is extrapolated to its logical conclusion, [Western] men will have little or no reproductive capacity from 2060 onwards.'
- 2 Pyne is referring here to data from the UK Human Fertilisation and Embriology Authority (HFEA 2018). As part of celebrating 40 years of IVF technology, the HFEA tweeted on 9 July 2018: 'IVF is more successful than ever before. In 1991 the birth rate was 8%, in 2016 it was 21% #IVFis40' (*ibid.*). This, however, as Robin Hadley points out in responding to the tweet, means a 79 per cent rate of failure.
- 3 Peter Conrad (1992: 209) defines 'medicalization' as 'a process by which nonmedical problems become defined and treated as medical problems, usually in terms of illness or disorders.'
- 4 With the exception of one isolated example (Goffman 1963: 86–87).
- 5 Some patients' organizations, however, also point out that the effects of disclosing one's history about mental illness are going to be very different if you are an ordinary citizen than if you are Prince Harry or Lady Gaga (Tyler and Slater 2018: 723–725).
- 6 One example from Norway is Ønskebarn (n.d.).
- 7 For an application of the framework to mapping the boundaries of the Norwegian debate on immigration in the aftermath of the terrorist attack committed by Anders Breivik in 2011, for instance, see Figenschou and Beyer (2014).

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Section 4

Silence, deconstructed

In what kind of world does my story take place, then? How does it work? Here I am weaving together the diverse strands that have been discussed so far, effectively setting the background, the stage, on which my personal story will unfold in Part II of the book. This will allow one to see that, while my experience is undoubtedly unique, what I do, feel, and think can be related both to broader research and the lives of many others in similar circumstances. That is because, in their diversity, they are all organized into patterns, a hidden code of the way in which the social world and the communication processes that operate in it ultimately work.

Reality and fiction: not an odd couple

All *reality* is made up by humans, objects, technologies, the material infrastructure of our daily life, places, ideas, stories, all meanings we create, share, agree, and disagree upon. Individual identities are shaped through the everyday interaction (face-to-face or mediated through technologies) with the people who surround us and the material environment. These exchanges include the stories—these are all forms of Tilly’s ‘standard stories’—we tell ourselves about who we are, what we are doing, where we come from, and where we are going—*personal narratives*—and the stories told by others, both about their own selves and about other groups or society as a whole—*collective narratives*. Personal narratives are key to our identity and, as seen earlier, are constituted not only by words, but also by whole constellations of objects, vocabularies, situations, places, networks of people. The media (news media, mainstream media, social media, but also popular culture, the arts, literature, cinema) are an important context where these narratives are formed, negotiated, institutionalized, contested, and transformed. The mainstream media also have a strong influence in terms of setting the standards of what is regarded as “normal” or “acceptable” against what is “deviant” (Gross 2001: 11).

While my research has specifically focused on film and the representation of the childless on screen, what I am writing here can be applied more broadly to other forms of popular culture (novels, magazines, music, and so on) and to media coverage. Even news, in fact, in so far as it is always constructed

(Tuchman 1973; Schlesinger 1978; Archetti 2010), despite the best intentions of some journalists to report the “truth,” cannot possibly be objective and evade the multiple influences that affect it, from the background and personal story of the individual writing it, to the editorial line of a news organization, to the advertisers of the platform the story will be published on. In this sense, all media content we are immersed in, regardless of where it comes from or whether it is based on fact or fantasy is, in one way or another, a form of fiction.

Fiction, however, matters a great deal. Going back to film, in my analysis I do not approach it as “mere” entertainment, but as a solid component, among many others, of the world of meanings we inhabit. Richard Rushton (2011) explicitly talks, in this respect, about ‘filmic reality’ (which we might extend to “news reality” or “literary reality” or “social media reality”). He emphasizes the concrete impact film has upon our lives by raising the questions:

What do films allow us to realize? How do films allow us to make sense of experiences, thoughts, and feelings in such a way that we become able to incorporate them into the reality of our personalities, our memories, our “being”?

(Rushton 2011: 5)

It is worth expanding a little upon how the cinematic experience (or, again, news, literary, social media experience) becomes intertwined with personal narratives, as this is important to explain both how childless individuals internalize images, representations, and messages produced by others (“a life without children is not possible,” for instance), but also try to resist them by experimenting with alternative stories (“my life has taken an unexpected turn, but it is still meaningful”). Rushton presents, as an example, the experience of reacting to the movie *Listen to Britain* (1942) described by Annette Kuhn in *Family secrets: Acts of memory and imagination* (2002). Although the movie deals with the British home front during the Second World War, an event that took place before Kuhn was born, the movie provides her with memories associated with that historical period. She is particularly intrigued, as she points out in her book, by the fact that she appears to ‘recognize’ (emphasis in original) those images: it is, as she puts it, ‘as if I had always known them’ (Kuhn 2002: 127). They feel, in other words, ‘familiar’ (ibid.). The movie also shapes her experience, feelings, and perceptions as she reflects upon them while walking outside the British Museum, even if this area of London is not in the movie. As Rushton observes: ‘The film contributes to her knowledge, understanding and negotiation of the world around her and, as such, this filmic reality enables her to experience reality in a way that it could not be experienced without the intervention of *Listen to Britain*’ (Rushton 2011: 5). As Rushton concludes, ‘[f]ilms have given us new ways to dream, but those dreams have also made available new domains of reality’ (ibid.: 7). The argument here is that, just as film and other forms of media can make available new domains of reality, they can also limit them.

Beyond film, in this book, I approach a whole range of products of the human imagination as contributing to the construction of the reality we live in: any media product—TV series, YouTube videos, news, ads on public transportation—but also academic books (the extent of whose scientific “truth” is also questionable, as we have seen), and dreams. Dreams, more specifically, as Christopher Poulos (2006: 113) writes, ‘can cut through the hubbub and haze and shadowy ambiguity of everyday life.’ They, as he continues, ‘cut to the chase’ by clarifying issues (*ibid.*: 113–114). For me they are also privileged sites of investigation into the subconscious and the liminal space between the mind and the body, a domain of discovery and possibilities, where I, the woman-researcher, process thoughts that have not yet consciously surfaced or I have not yet found the words to fully articulate. Jean Rath (2012: 443), on this point, writes about ‘the importance of dreams [in ethnographic repertoire] as a technique to agitate at the edges of awareness.’ Just as in Kuhn’s experience, all these products of the imagination become intertwined with my personal narrative and with the way in which I both relate my own story and resist the broader narratives that are continuously woven by society around me.

It is possible to challenge public narratives about what is acceptable, appropriate, and desirable, together with the stigma derived from deviating from them. I will discuss below the conditions that need to be in place for resistance to occur. Public narratives, as a result of this resistance, might be changed over time, but normally they constitute the space of possibility within which we can articulate our personal narratives, effectively a limit to the kind of selves we can become and the range of lives we can lead. According to my study and on the basis of my own experience, being childless is attributed, within public narratives, with less value than being a parent, and a life without children is highly undesirable, since it is assumed to be unhappy if not outright incompatible with the will to live. These boundaries and contents of public narratives have a deep effect on the well-being of the childless.

Health, suffering, and pain are deeply related to both identity and narratives, not just to the material functioning (or malfunctioning) of the body. An illness or life crisis, as already explained, leads to the breakdown of an individual’s narrative. Through the impossibility of realizing in everyday life what confirms to us that we are indeed who we are along our life narrative’s core values (which are largely drawn from the repertoire of publicly available narratives) also leads to a progressive loss of self. This, in turn, generates suffering. My whole world and my self started to crumble when I could not get pregnant, as I will explain, not (only) because I could not have a baby, but because the core values of my life, independence and the ability to reach the goals I had set for myself, were being denied. Effectively, the malfunctioning of my body and what was happening in my life showed me that my life was out of control. Although suffering is a feeling—or ‘mood’ (Svenaesus 2014: 407)—it can well translate into pain and deteriorating health (see my “pain diary” in Folder 4).

Explaining silence: when bodies, narratives, and suffering collide across the private–public domain

The convergence of bodies, narratives, suffering, and material realities is important in understanding silence and invisibility. These outcomes are explained by five converging and overlapping processes, which I am going to examine, in turn, before addressing the conditions for overcoming silence.

1 Stigma and being discredited: when you are not worth listening to

A stigmatized identity is a discredited and damaged one. According to Hilde Lindemann Nelson (2001: xii), an individual's identity is damaged

when a powerful social group views the members of her own, less powerful group as unworthy of full moral respect, and in consequence unjustly prevents her from occupying valuable social roles or entering into desirable relationships that are themselves constituting of identity.

As a result of being stigmatized, Erving Goffman (1963: preface) further writes that an individual is 'disqualified from full social acceptance.' This leads to discrimination that can be more or less explicit and conscious (*ibid.*: 5):

we believe the person with stigma is not quite human. On this assumption we exercise a varieties of discrimination, through which we effectively, if often un-thinkingly, reduce his [*sic*] life chance. We construct a stigma theory, an ideology to explain his [*sic*] inferiority and account for the danger he [*sic*] represents.

All of this leads to the result, which contributes to explaining the silence around childlessness, that a stigmatized person is not worthy of our attention and time.

Individuals without children might in fact speak up, but they tend to be dismissed on the ground that what they are saying is not interesting to start with. This is the outcome of what I might call the "natalist glance." I develop this term by combining the notions of the "male glance" (Loofbourow 2018) with pronatalism. I am going to expand upon these concepts. They are particularly relevant, including the gender dimension of the "male glance," because, although childlessness affects men, too, it is mostly women who are regarded as bearers of the "problem" and who most often try (and fail) to break the silence surrounding it.

To an extent, as demonstrated by the existence of misogyny and sexism (Holland 2006; Bates 2014), one could argue that all women suffer to a greater or lesser extent from having a damaged identity. Lili Loofbourow (2018), more specifically, explains the double standards that (invariably, it seems) tend to apply in approaching women's stories (in film, TV, literature) against males' stories through a combination of the concepts of 'male gaze' and 'male glance.' The 'male gaze' is the

result, as she writes, ‘of advertising combined with centuries of male-dominated image-making’: it consists, for example, in the tendency to over-examine and be hypercritical of female faces. Any possible imperfection (e.g. pores, wrinkles) is subtracted from the woman’s beauty to an extent never applied to a male face (ibid.). This experience, over time, also translates into the inability to see any depth in what is being observed. This not only applies to beauty, but also to what women write and create. Because the male gaze assumes that there is, in fact, nothing worth seeing, it turns into a ‘glance’ that categorizes, dismisses, and moves on quickly:

Faced with a woman’s story, we’re overtaken with the swift taxonomic impulse an amateur astronomer feels on spotting Sirius—*there it is!* he says, and looks to the next star. It’s a pleasant activity because it organizes and confirms, but it produces the fantasy that a lazy reading—not even a reading but a *looking*—is adequate, sufficient, complete, correct.

(Loofbourow 2018, emphasis in original)

This further leads to the outcome, as Loofbourow continues (ibid., emphasis in original), that

we *still* don’t expect female texts to have universal things to say. We imagine them as small and careful, or petty and domestic, or vain, or sassy, or confessional. We might expect them to be sentimental or melodramatic, or even [...] provocative, unflattering, and exhibitionist. But we don’t expect them to be experimental, and we don’t expect them to be great. [...] [W]e still have not quite learned to see female storytellers as either masterful or intentional.

This happens, for instance, and to return to an example I previously mentioned, to Frida Kahlo. As award-winning Mexican author Valeria Luiselli (2018) explains, Kahlo is called by French surrealist André Breton a ‘*natural surrealist*,’ thereby turning her ‘into a kind of *sauvage*: unconscious of her talent, unsuspecting of her mastery’ (ibid., emphasis in original). In reality, ‘Kahlo was hardly unsuspecting, hardly unconscious of what she was doing and who she was. She knew how to capitalise on the elements of her private life and cultural heritage, curate them carefully, and use them to build her public persona’ (ibid.). Eleanor Catton (in Loofbourow 2018), winner of the 2013 Man Booker Prize for her novel *The luminaries*, also observes that ‘male writers tend to get asked what they think, and women what they feel [...] all of the questions coming at them [female writers] from interviewers tend to be about how lucky they are to be where they are—about luck and identity and how the idea struck them.’ As Loofbourow (2018) concludes: ‘There it is again: chance, accident, and the passive construction of female artistry—not how did you create, but how were you struck.’

The ‘natalist glance’ works, essentially, according to the same dynamics, except that individuals without children are the ones being glanced at—

simplified, infantilized, and deprived of depth—and not just by men but by male and female parents.

An example of the swiftness and dismissiveness of the natalist glance, the book *Motherhood*, where author Sheila Heti (2018) debates her dilemma about whether she should become a mother, met mixed reactions. As a review of the reviews by Cynthia Houng (2018) points out, '[e]ven the most positive reviews contain an acid phrase or two.' More precisely,

dismissal of Heti's ambivalence is an extreme version of the usual response to women who meditate on this choice: women who ask "why" and not "when" to the question of children are narcissistic, immature, incapable of rising to the fullness of adulthood.

I also had the lesser value attributed to the childless viewpoint powerfully spelled out in *Eggsistentialism*, a play performed by Joanne Ryan in London (2018). In this play about the dilemma, yet again, of choosing whether or not to have a baby, the protagonist ponders the consequences of remaining childless: 'I'll be taken less seriously, be seen as less important.' Jody Day (2018), activist and founder of the association Gateway Women, further confirms the tendency to treat childless individuals as lesser adults by talking about 'pronatalist privilege': an unconscious, yet real and very systematic bias that tends to see the experiences and opinions of parents as 'inherently more valuable.' As she puts it (*ibid.*):

One only has to think of how powerful the phrase "as a mother" is, when placed in front of almost any statement. Now imagine if you were to preface it with "as a childless woman"—would the listener be inclined to lean in—or unconsciously dismiss whatever comes next as being irrelevant?

A similar point is made by Jessie Stephens, editor at Mamamia Women's Network, the largest independent women's website in Australia. As she states in a podcast (in Mamamia Out Loud 2018):

I hear it a lot from women I work with and also I have been noticing it in books, in television and in ads all the time and I just had this moment: I am bloody sick of women starting sentences with "as a mother." Firstly I find it extremely patronizing to all women who do not have children. It seems to begin a sentence with the idea that you cannot be empathetic, or thoughtful, or wise, or insightful unless you have had children coming out of your vagina—or stomach, depending. Also men never start sentences with "as a father."

2 Epistemic invalidation: when others define your "problem"

When you do not speak, partly because you know (on the basis of the way you are treated) that you are not worth being listened to, you do not get to define the problem on your own terms.

Childlessness as an existential crisis does not exist. Childlessness as a medical problem (i.e. as infertility) does.

Involuntarily childless individuals, in this respect, experience the same ‘epistemic invalidation’ to which disabled individuals are subject. Susan Wendell (1996: 122) defines this as ‘a tendency [by medicine] to ignore, minimise the importance of, or deny outright any [...] bodily experiences that it cannot explain.’ As she further elaborates upon this (ibid.: 126):

The cognitive and social authority of medicine includes the power to confirm or deny the reality of everyone’s bodily experience. Thus medicine can undermine our belief in ourselves as knowers, since it can cast authoritative doubt on some of our most powerful, immediate experiences, unless they are confirmed by authorised medical descriptions, usually based on scientific laboratory results. Moreover, this power of medicine subjects us to possible private and public invalidation by others—invalidation as knowers and as truth-tellers.

This argument applies to physical pain, but there is no reason why it could not be extended to suffering, since this can easily translate into illness and a deterioration of well-being. The absorption of the mainstream definitions by the childless about what the experience of not having children should consist in—possible discomfort related to fertility treatment—and even when it should finish—i.e. when one “stops trying”—leads to childless individuals often not being able to recognize that what they are left with afterwards is a prolonged bereavement process (Volgsten *et al.* 2010; Day 2016a, ch. 4, “Working through the grief of childlessness”). This can potentially lead to suffering remaining unprocessed and individuals remaining stuck in a narrative of an unfulfilled and unhappy life. In no way do I want to suggest that the suffering associated with not having a baby can be completely overcome. My own story and the experiences shared by childless individuals online, however, suggest that, while the suffering will likely remain with us for as long as we live, our identity will, over time, no longer revolve around it. We will be able to place it in a broader picture that recognizes ourselves as capable of becoming realized in alternative ways (ibid.: ch. 11, “Putting your plan B together”).

3 Beyond “tellability”: when your story is uncomfortable

Being a stigmatized and discredited individual means isolation to start with. One also suffers from epistemological invalidation. A childless person is thus not in an ideal position to speak out. Even if one does so, he or she might not be listened to. This is related to the ‘tellability’ of stories (Norrick 2005). Neal Norrick (2005: 324) explains that a ‘narrative is a narrative, not because it tells a story, but because the story that it tells is reportable.’ This means that, while it ticks the boxes of the newsworthy—it is not too ordinary to be interesting—it should

also not trespass towards the excessively transgressive—the ‘too personal, too embarrassing or obscene’ (ibid.: 323), or ‘frightening’ (ibid.: 327). So, when the stories of childless individuals are not dismissed, they need to fit a comfortable pattern. Usually this is the “miracle baby” story and the overcoming of infertility through science (de Boer *et al.* 2019). A different story, one that does not progress towards what is socially accepted as the “happy ending,” is silenced and obscured. In addition to this, confirming the “natalist glance,” it is regarded as providing no interesting perspective. In fact, the point of the whole story is completely overlooked. I can illustrate this through the stridently different way in which *Avalanche*, a book by Julia Leigh (2016), Australian novelist and film-maker, about her experience of six rounds of failed IVF, was received by the childless community and outside it. I have referred to this book before, but it is worth returning to it for three reasons. First, because it stimulated a range of reactions that activists and bloggers who have also published about this topic tend not to get on mainstream media: this case thus more clearly reveals the way in which the untellable story gets disciplined and brought into line when it surfaces in the public domain. Second, because most of the critiques raised against Leigh could be applied, from the perspective of acceptable discourse, to my own story, particularly the features of its self-centredness and self-referentiality. Third, because the book figures later in my own personal story: the account Leigh provides of undergoing infertility treatment was so powerful that it contributed to me plunging back into the IVF mindset (see Folder 8).

Childless authors praise *Avalanche* for its visceral, honest portrayal of what it means to experience infertility. Pamela Tsigdinos (2016b), for instance, writes about the way in which the book unveils, as she herself did in *Silent sorority* (Tsigdinos 2009), the ‘predatory nature of fertility medicine’ and ‘the courage it takes to give voice to an experience that sits outside the comfortable realm of conformity.’ Jody Day (2016b, emphasis in original), writing on the website of Gateway Women, underlines, among other merits of the book, its engagement with ‘what happens *after*’ the child dream is over.

Other female reviewers (who clearly either have not experienced infertility or have forgotten about it in case they did—my Google search reveals that they are mothers), however, produce extremely different assessments (Cusk 2016; Feigel 2016). It is also interesting to notice the confidence with which they deliver them, not for a second doubting their ability to thoroughly understand the story. Tsigdinos (2016a), in a response to Cusk’s review, quotes on this point the words of a woman who managed to conceive after several traumatic rounds of IVF and who expresses dismay at this choice of reviewer by the *New York Times*’ Book Review editor: ‘like assigning a cancer survivor’s memoir to someone who has never experienced that disease.’

What women who have, in fact, gone through IVF would straightforwardly recognize as the “tunnel vision” of an experience that is so traumatic—physically and emotionally—that it leaves no brain capacity to think about anything else is described by Lara Feigel (2016) on the *Guardian* as a lack of ‘a frame of wider reference’:

As a reader, I found it claustrophobic to inhabit her [Leigh's] rather solipsistic world.

Generally, I hate the accusation of self-obsession, with its implication that it is self-indulgent to analyse your own psyche. Thinking about feelings matters, and we are our own best raw material. Nonetheless, I found myself wondering if Leigh was self-obsessed. Although we know she has creative projects on the go, we don't hear about them in any detail, and I think that it would have helped to go beyond her sexual and reproductive life and learn more about what she was writing or thinking at this time.

Rachel Cusk (2016) of the *New York Times* effectively misreads Leigh's increasing detachment from reality, driven by growing desperation and despair, which I have myself (despite being a scientist) experienced first-hand: 'The writing falters, overwhelmed by numbers, data, Kafkaesque interpretations of statistics, invasive medical procedures undergone in a fever of superstition or increasingly untenable hope.'

This lack of understanding demonstrates precisely the nature of the problem Leigh writes about in the book. Both Day (2016b) and Tsigdinos (2016b) quote the following excerpt and I do the same here, for the third time, as it could not be phrased better:

I didn't want to tell people because I thought that unless they were involved in that world themselves they wouldn't want to listen. Or they would only half listen and so diminish my experience. Or they would ask questions that required explanations too complex for conversation. Or they would offer advice based on hearsay and a general theory of positivity. Or I would make them uncomfortable because of my proximity to the abyss. *Hush, keep your voice down, don't mention it by name.*

(Leigh 2016: 101, emphasis in original)

This story, to put it bluntly, is too frightening and painful to listen to—it is located well into the realm of the 'untellable.'

The same applies for stories that might want to point out that it is indeed possible to have a meaningful life without children. They do not fit the expected template either. As Jody Day (2016a: 326, emphasis in original) writes:

If childless women *do* get media attention, it's often to be pitied or as part of a news report about a woman in her fifties who's given birth, reinforcing the notion that we should "never give up." But what does that say about its alternative—coming to terms with childlessness? It says it's either not possible or that it has no value.

4 Consolidated silence: the institutionalization of invisibility

The more silenced an issue, the more difficult it becomes to talk about it. In this sense the “spiral of silence” applies, but the whole process, as I have shown, is far more material and needs to start from the way our bodies and their (mal) functioning fit into the range of publicly available narratives about valued identities and a realized life. Differently from the dynamics envisaged by the “spiral of silence,” you do not just think you have an unpopular opinion, you know you have an unfitting, socially inappropriate identity. Worse, you might even embrace society’s view of yourself as a morally untrustworthy individual—what Nelson (2001: 28–34) calls ‘infiltrated consciousness.’ You become socially isolated (not least in trying to avoid situations that bring you into contact with the “normals”), you are being subtly discriminated. When you try to speak out, you are not being listened to. Your absence from the public debate, both discursively and physically, means that the whole of reality is more and more organized around the needs of “the others.” In this sense invisibility and silence have political consequences. I am going to break down these dynamics to better illustrate them. I will particularly refer to Nelson’s work (2001) on the moral, social, and political consequences of narratives.

Nelson explains that a ‘damaged identity’ involves a diminished ‘moral agency.’ This is because identity is relational: it is not just about how we see ourselves and what we are doing, but also how others see us and our actions. Belonging to a stigmatized minority means occupying a disadvantaged position, one that is discredited and suspicious to start with in the eyes of others, but also one we might be aware of ourselves. This, effectively, affects the range of action we are willing to pursue and that other people allow us to take:

If other people perceive my actions to be those of a morally trustworthy person, then they will permit me to act freely. In addition, though, I must see *myself* as a morally trustworthy person if I am to act freely. Both others’ recognition that I am a morally responsible person and my own sense of myself as a morally responsible person, then, are required for the free exercise of moral agency.

(Nelson 2001: 22, emphasis in original)

In other words, ‘freedom of agency requires not only certain capacities, competencies, and intentions that lie within the individual, but also recognition on the part of others of *who one is*, morally speaking’ (ibid.: 24, emphasis in original).

Nelson illustrates this through the case of the assessment of a nurse about how to take care of a patient. The assessment in question is being dismissed by a doctor. The episode takes place at Cranford Community Hospital, which the author locates ‘somewhere in the Midwest [in the US]’ (ibid.: 1). The nurse, Pilar Sanchez, is taking care of a teenage patient, Jake, who is dying of leukaemia. The doctor, following the wishes of the mother of the boy, forbids the staff

to discuss the prognosis with him. Pilar is troubled by the fact that Jake is unaware that his illness is terminal. She also feels she is lying to him whenever she smiles encouragingly when he tells her about his plans for the future. In addition to this, she is convinced that he can handle the truth. However, when she broaches the subject with the doctor, she is silenced abruptly with the argument that she is ‘emotionally overinvolved and professionally out of line’ (ibid.: 3).

This episode is placed within the context of a narrative prevailing in the hospital about the doctor–staff relationships and that is paradigmatic of the way in which these relations unfold in other medical care facilities, too: the nurses (the ‘damaged identity’ in this case) are part of a story that sees them ‘doing the touchy-feely stuff’ while the doctors ‘do the science’ (ibid.: 3). This story is nested into a broader narrative that identifies ‘women as subservient to men, as emotional rather than rational, as mothers rather than scientists’ (ibid.: 4). What happens, as Nelson explains, is that

[b]ecause the physician identified Pilar Sanchez as fond (in the sense of foolish) care giver, her considered moral judgment that Jake be told of his prognosis did not get registered as a *moral* judgment at all. It got registered as emotional overinvolvement—assisted, perhaps, by ethnic stereotypes about excitable Hispanics. The physician’s inability to identify Pilar Sanchez as a morally developed agent forecloses the possibility of any discussion with him, let alone a case consult, and this deprives her of the opportunity to take care for Jake as well as she thinks she should.

(ibid: 24, emphasis in original)

When we are prevented from acting freely or expressing ourselves freely because we are not taken seriously, we suffer from a ‘deprivation of opportunity’ (ibid.: 23–28).

In my personal story I tell of how a doctor at the fertility clinic where I was treated dealt with my complaints about painful procedures condescendingly and how a letter sent to an editor about the insensitive and superficial coverage of childless individuals was never answered. These are small anecdotes. One could argue that there are many reasons, besides any attempt (more or less deliberate) to invalidate my moral agency as a childless woman, that led to those outcomes. Yet, they point to a trend that does exist. In Folder 7, I further show how, collectively, one small act of dismissal after the other eventually lead to policy gaps. This applies, for instance, as I will discuss, when it comes to dealing with 1.2 million childless elderly who, in 2017 in the UK alone, were not able to rely upon family networks for their own care (Ageing Without Children 2017).

5 At a loss for words: the challenge of communicating the unshareable

Suffering gets in the way of telling the story in multiple ways: A ‘chaos story’ is fragmented by nature, is a non-story and, as Arthur Frank (2013: 101) puts it, it is ‘told on the edges of speech [...] in the silences that speech cannot penetrate or illuminate.’ You can clearly see this in Folder 3. I wrote that part of the book before coming across Frank and his work on narratives of illness, so I was in no way trying to fit my style into one of the key features of chaos stories that he describes, particularly their ‘syntactic structure of “and then and then and then”’ (ibid.: 99). Yet, in my text, one action follows the next in a perspective that resembles precisely this: a list, where there is neither a past to which what I am doing in the present can be connected, nor a discernible future direction, only a meaningless eternal present. In practice and figuratively, both in my life and, narratively, on the page, I had lost the plot.

According to Elaine Scarry (1985)—who examines the vulnerability of the body and the nature of pain in torture—it is also in the nature of suffering to be unshareable: there are really no words that can convey it. As she writes (ibid.: 60–61):

From the inarticulate it [pain] half emerges into speech and then quickly recedes once more. Invisible in part because of its resistance to language, it is also invisible because its own powerfulness ensures its isolation, ensures that it will not be seen in the context of other events, that it will fall back from its new arrival in language and remain devastating. Its absolute claim for acknowledgement contributes to its being ultimately unacknowledged.

As a result of this, it is also difficult for others to understand it. This, however, is precisely the challenge I have taken on with the personal side of this book: putting words to the chaos story, giving a shape to the suffering on the page, or at least—since I do agree with Frank (2013: 101–102) that ‘[c]haos is what can never be told; it is the hole in the telling’—trying to find words that might make apparent the contours of its wound. Particularly the use of poems and evocative writing, as I will explain in Section 5, is an attempt to connect emotionally with the reader, establishing an experiential bridge.

6 What does it take to break the silence?

Developing a new narrative or a ‘quest narrative,’ according to Brett Smith and Andrew Sparkes (2008: 233), can help reconstruct identities ‘by providing a sense of communal consciousness [*if it becomes sufficiently shared, I need to add*] and expanding cultural repertoire of stories on which to draw when re-plotting a life.’

Communication is key, particularly in the forms of our telling of the story and the listening to it by others. As Frank (2013: 109) again emphasizes, if the chaos story is not acknowledged and honoured, this precludes any possibility for

healing because denying the chaos story amounts, effectively, to denying the person telling the story (ibid.). Not only is telling a chaos story difficult because it is often so painful that words fail to convey it, but also because it is a story that “normals” do not want to hear and in fact find extremely frightening (ibid.: 101). As he explains, we live in a society where medicine promises a solution to all our ailments. In this perspective there can effectively only be “restitution” narratives: stories of how we returned to normality. A chaos narrative, which ‘feeds on the sense that *no one* is in control’ (ibid.: 100, emphasis in original) means that medicine has failed. As the author puts it bluntly: ‘the chaos narrative tells how easily any of us could be sucked under’ (ibid.: 97). That is why patients’ chaos narratives are often dismissed as other medical problems (ibid.: 110):

The anxiety that the chaos story provokes in others leads to the standard clinical dismissal of chaos stories as documenting “depression.” When chaos is thus redefined as a treatable condition, the restitution narrative is restored. Clinical staff can once again be comfortably in control: the chaos can be dismissed as the patient’s personal malfunction. That reality is classified as either amenable or resistant to treatment; in either case it no longer represents an existential threat.

The tragic outcome of this process is the denial by the same medicine that should be first and foremost committed to the health and well-being of its patients of ‘the suffering of what it cannot treat’ (ibid.: 100). This is precisely what is happening with the treatment of infertility.

In addition to this, challenging a stigma narrative is difficult. My story shows that I have experienced shame, doubt as to whether I was doing the right thing, or even if I was seen as crazy by others. I have been subject to disciplining attempts. For instance, as I will describe in more detail in telling my personal story in Folder 8, attending a Fertility Fest in London, following a panel on “40 years of IVF” (the panel included an artist and three medical experts) I commented that, having been diagnosed with unexplained infertility, I was in the very confusing situation of having a body that was simultaneously defined as functioning and dysfunctional. This was a realization that contributed to the advancement of my quest narrative of a new me, not defined around infertility and disability, but wholeness within Nature’s design. One of the medical experts replied to me that “‘unexplained’ actually just means that we do not know what is wrong,’ effectively implying that there is in fact something *wrong* with me. The conversations that followed at the event helped me neutralize this “narrative attack” by the medical expert (an example of epistemological invalidation) and I even left with a consolidated (quest) narrative about my healthy and whole-as-it-is self.

What helped me when telling my story was establishing contact with other childless individuals, writing this book—this is the textual manifestation of my ‘quest narrative,’ as well as a deconstruction of my journey into chaos—and

giving a performance lecture about involuntary childlessness, entitled “Embodied,” in front of a public at the Norwegian Storytelling Festival (Archetti 2018b). The role played by my contact and exchange with other childless individuals and a public willing to listen cannot be overestimated. They represent what Nelson (2001: 174) calls (borrowing the term from Calhoun) an ‘abnormal moral context.’ This is a community that validates and legitimates a ‘counter-story’ (ibid.: 175)—in this case my alternative (quest) narrative of being childless *and* a worthy human being with a meaningful life. As Nelson phrases it: ‘people who by the standards of the mainstream are seen as morally subnormal and lacking in cognitive authority can in the abnormal context be viewed lovingly rather than arrogantly’ (ibid.: 174). Through these experiences I have in fact become a ‘communicative body’ (Frank 2013: 48–52, 126–128) that sees possibility in illness and embodies an ‘ethic of solidarity and commitment’: ‘when the storyteller offers his [her, in my case] voice to others, not to speak for them, but to speak *with* them as a fellow-sufferer who, for whatever reasons of talent or opportunity, has a chance to speak while others do not’ (ibid.: 132, emphasis in original).

Facebook pages, in this sense, are not only networks of generalized “support” and information, as they widely tend to be understood (Weissman *et al.* 2000; Epstein *et al.* 2002; Rawal and Haddad 2005; Malik and Coulson 2008; Marriott *et al.* 2008; Kahlor and Mackert 2009; Hinton *et al.* 2010; Malik and Coulson 2010), but genuine laboratories where new narratives and new selves are being forged. This, in my experience, is a collective endeavour. It more specifically involves telling one’s chaos story (which is being honoured by others who listen to it and validate it), sharing tentative new quest stories (the self is constructed through the act of narration), and developing a vocabulary to talk about the experience of childlessness. On the latter point, some shared terms include ‘grief’ (the suffering, comparable to an extended bereavement process, that accompanies the experience of childlessness), ‘grief work’ (coming to terms with grief by acknowledging it, accepting our ‘loss,’ and developing a ‘plan B’ (for our future life), ‘the journey’ (through grief towards ‘acceptance’), ‘triggers’ (a reference/situation/image/phrase that might transport one back to the most painful moments of the infertility journey), and ‘tribe’ (the childless community). Discussions among childless group members sharing their experiences also provide arguments, shareable memes, suggestions about practices that can be used, if they fit, in our narrative, and everyday life. I will provide examples in telling my story of the incorporation of ideas I find inspiring into my developing narrative. One of them, for illustration purposes, comes from an anecdote shared by a woman on Facebook on the occasion of Father’s Day. Having taken her husband to a restaurant to celebrate the fact that he is a father figure to their dogs, she was told “Happy Father’s Day” by the waiter. To her surprise at being addressed as a “father,” the waiter explained that ‘whatever we do and whoever we are, there is a mother and father in every single one of us.’

Effectively, the Facebook pages I have been member of can be compared to “spare parts’ shops,” where each of the readers/members picks whatever piece

might be useful to assemble their new self, corresponding narrative, and behaviour that is going to both reflect and further consolidate them. As Chiara Berardelli (2018), an Italian-Scottish singer and songwriter, puts it in a song dedicated to Gateway Women, “Sanctuary”: ‘I have found the place/ where I can rewrite the story/ with grace.’

Being a professor has also helped by providing me with a platform to talk about my experience. When invited to give a lecture about the role of stories in society and politics in a workshop for performers and storytellers (Archetti 2018a), I seized the opportunity to use childlessness as a case study of a story that is silenced. The fact that I am employed by a university, despite my self-doubt about being a capable individual at points, has also given me a degree of epistemic authority. Being socially isolated, paradoxically, helped me avoid disciplining “narrative attacks” from potential neighbours or acquaintances who might have embraced the mainstream narrative of “women as mothers.” This gave me discursive breathing space to consolidate my new narrative. Having my own office, as well as the opportunity to work from home at least a couple of days a week, equipped me with the material space to develop it.

I have also mentioned before how objects (a mountain bike, for instance), clothing and accessories (shoes, earrings), practices (tango dancing), and material places (dance floors, cycle-paths in the Oslo forest) have also contributed to the consolidation of my narrative. In this respect, the quest story is a cluster of mutually reinforcing material, human, rhetorical, and imaginative components.

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Section 5

Revealing the unspeakable: finding a different language

The German artist John Koenig has resorted to inventing new words to capture feelings and states of mind that are not described by existing vocabulary. A term from his brilliantly imaginative *Dictionary of obscure sorrows*, which most appropriately applies here, is “*exulansis*” (Koenig 2015):

n. [noun] the tendency to give up trying to talk about an experience because people are unable to relate to it—whether through envy or pity or simple foreignness—which allows it to drift away from the rest of your life story, until the memory itself feels out of place, almost mythical, wandering restlessly in the fog, no longer even looking for a place to land.

My experience of infertility has risked becoming precisely this. Imagine being constantly confronted by a terrifying creature whose presence nobody but you appears to be able to observe. For a long time I thought I was imagining it. Then, by talking to other people in my circumstances, I realized that they could see it too.

This is my attempt to write about what is invisible to “the others.” I try to translate into words, as far as language allows, the unshareable pain of the “chaos story.” Sometimes I need little tricks and rhetorical devices to make the creature apparent—if not the whole beast, at least its shadow, or its footprints, or what has been left broken on the ground after it has already left. The text thus mixes analysis, excerpts of interviews, media fragments, and creative writing. This is what Carol Rambo Ronai (1995: 396) calls a ‘layered account’:

a narrative form designed to loosely represent to, as well as produce for, the reader, a continuous dialectic of experience, emerging from the multitude of reflective voices that simultaneously produce and interpret a text. It is deliberately structured to resemble what Schutz (1970) has called the *duree*, the stream of consciousness as experienced in everyday life.

By including excerpts of all kinds of media, online and offline, diary notes, imagined conversations, research data, dreams, I am trying to reproduce for the reader the experience of following my everyday life and the way my perspective,

sense of self, and personal narrative evolved in parallel with each tiny encounter with humans, objects, places, ideas—in other words, “being me.” In doing this I aim to develop a language of feeling-in-the-body fit for the twenty-first century. In a world of political polarization, conflict, and fragmentation, this language might be all we have left to achieve a genuine understanding of “the other.”

Dreams and imagination

In weaving imagination and dreams together with everyday life and research, I was particularly inspired by the work of Ninna Meier and Charlotte Wegener (2017). Dreams in my story, in particular, are an important meaning-making site. The brain at night is a place that resembles, simultaneously, a garden shed, an old cellar, a creative art studio, and an ironsmith workshop. There, my mind dissects and reassembles scraps of daily life, information I have come across during my waking hours, stray images from the media or the internet, morsels of overheard conversations, floating thoughts. They are moulded into fantastic creatures, sometimes monsters, and adventurous plots.

The brain squeezes, deconstructs, inflates, saws, coats in gold, incinerates, drills holes, magnifies, nails things that have nothing to do with each other together (that is, until they are welded together and, precisely like an appropriately named “dream couple,” they look like that’s how they were always meant to be), recycles objects and memories with no regard for tenses, logic, and consistency, or geography for that matter: present, past, and future projections co-exist, just like the many selves I have been over the years become characters who have conversations with each other in the same story, and places that are far apart in physical reality merge into a seamless landscape.

Dreams are extensions of the rational attempts to extract meaning from the events of the day, feelings, encounters with people across places, and all the reflections they elicit. They are creative scenarios of associations that help me establish new narratives, new versions of the stories I tell about my own life and experience. They play an important role in my life as a researcher, too. They are tools of analysis that suggest, in coded language, solutions to questions I could not find an answer to during the day. Through the change of perspective they offer, they bring into sharp relief the elusive essence of a problem that would, otherwise, often lie buried in the details of familiar schemes. They alert me to what is moving in the shadows of my subconscious.

Establishing a different relationship with the reader

In a further experimentation with the possibilities offered by theatre, some parts of this book were adapted for the performance lecture “Embodied,” which I mentioned earlier and that was delivered at the Norwegian Storytelling Festival that took place in Oslo on 14–15 April 2018 (Archetti 2018). My approach to the materials presented has been heavily influenced by Camilla Eeg-Tverbakk, art consultant on that project and Professor of Dramaturgy and Performance at the

Norwegian Theatre Academy (Østfold University College). She introduced me, more specifically, to her concept of ‘theatre-ting,’ which she developed in working with documentary material (Eeg-Tverbakk 2016: 2):

The etymological root of the word *ting* (thing) connects to practices of assemblage and gathering, still found in the Nordic languages [the Norwegian parliament is called *Stortinget*, literally “the big thing/assembly”]. The theatre-ting brings the factual into the spaces of the fictional, which destabilizes both demonstrating how they are equally theatrical, truthful and mystical.

Eeg-Tverbakk’s dealing with performance based on stories and testimonies, the same materials used in this book, implies approaching memory as a document—a “thing” (ibid.: 14):

Memory is neither true nor false and is neither true nor fiction. Memories are documents, and documents are things that move and transform in active relations with their surroundings, animate and inanimate, constantly being shaped and reshaped. Our memories form us as much as we give form to our memories.

My treatment of excerpts from interviews or diary notes, which are often deliberately presented without commentary, borrow from her approach, particularly her call—inspired, among others, by Giorgio Agamben (1999), Silvia Benso (2000), and Timothy Morton’s *Object Oriented Ontology* (2013)—for ‘pauses, silence, stillness, and patience’ ‘to hear and sense the withdrawn aspects of things’ (Eeg-Tverbakk 2016: 15). The connections between myself, places, objects, media content, might thus, sometimes, have to be drawn slowly, by leaving them to linger and simmer in the text before they can emerge, perhaps never fully.

This also reflects what she calls the ‘ethics of the unknown’: ‘Instead of striving towards a clear image and meaning production through a constructed narrative, it [this ethics] is more about acknowledging one’s limitations in grasping reality’ (ibid.: 23). Leaving some silence, taking time, as she writes, ‘means to listen to what has not yet been formulated [...] what can only be perceived as a notion, a murmur, or as a light touch of air’ (ibid.: 24).

What this means in practice can be most effectively grasped through the feedback she gave me about my reading of an interview excerpt while I was preparing my performance lecture (the text is presented in Folder 4 as “Reading breasts”):

Bring out the message with curiosity in saying the words. [What you are saying is] “Let’s try to understand this. There is something between the lines.” Keep these spaces open and empty. You are providing an invitation to explore the content together. It is not “you,” the performer, and “them,” the audience. We are all here *together* to try and make sense of this. You are

saying “Can we talk about this?” The point here is not to “deliver” something you know everything about. Here is somebody’s confession. There are parts between the words that are unspeakable. Your task is not trying to be an actor, but to distance it [the text] from yourself and put it in the middle, closer to the listener.¹

Leaving what could look like fragmentation and gaps on the page is thus intentionally meant here to encourage greater participation in the material by the reader, who is left with the space to generate his/her own meanings, interpretations, narrative bridges, perhaps epiphanies, both experiencing the text from the perspective of his/her own stories, as well as further incorporating it into these. Jean Rath (2012: 442) calls these spaces ‘invitational lacunae within and between the textual layers.’ They are meant to remind the reader that ‘the meaning of the text resides both in the text but also *in relation to the text*’ (ibid.: 443, emphasis in original). As Eeg-Tverbakk again phrased it, ‘by leaving spaces you are not giving the audience *one* narrative. If there are ten people in the audience, at the end of the performance [or reading the text, in this case] you will have ten different narratives.’²

This also means that the story you will read will inevitably be different from the one I told. So, regardless of my efforts to convey the reality of my experience, depending on whether you are a parent or not, on whether you are male, female, or transgender, a teenager or a pensioner, your nationality (Italian, Norwegian, Sudanese, or Japanese), whether you have brothers and sisters like me, are or not in a good mood today, have just come from the office, the gym, or are on a holiday break, whether you are reading the book on a sunny balcony or in the basement of a library, the text you read will ultimately be *your* version of my story. Be gentle with it and use it responsibly.

Notes

- 1 Eeg-Tverbakk, conversation during rehearsal, Øvinghotellet, Oslo, 26 March 2018.
- 2 Ibid.

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PART II

Life journeys

Some names and identifying details have been changed. The author recognizes that her shaping of the story may differ from that of other characters depicted in it.



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Folder 1

“About me”?

This talking woman is me. It is Saturday 28 May 2016, the day before Mother’s Day in Sweden. I am guest speaker at a “Childless Day” event. [...] My academic expertise is in politics and media. I never decided not to have children. I am not infertile either. How did I get here?

I could tell you that Linda, the person with the melodic accent who invited me and who is now a friend and role-model, was one of the members on the board of a Swedish organization, *Barnlängtan*, for the involuntary childless. I had contacted and interviewed her in April 2016 in beginning my own research about childlessness. At that time she was the founder of the closed Facebook group “*Ofrivilligt barnlös—andra sidan tröskeln—för kvinnor* [Involuntary childless—the other side of the threshold—for women]” (n.d.), a meeting and debate place dedicated to women whose wish to have a child, for any reason, never turned into reality.¹ I had joined that group in June 2015 following a reference on Linda’s blog, also called *Andra sidan tröskeln* [The other side of the threshold] (n.d.). I had got to her blog, in turn, by following a link in a tweet by Jody Day (2015), founder of Gateway Women, a UK-based transnational organization dedicated to women without children (the message was dated 22 June 2015). I had come across the Gateway Women organization searching, online, for women who might be going through the aftermath of a failed IVF treatment (February 2014). The tweet said: ‘Wonderful blog in Swedish (thank you Google Translate!) by [*sic*] on Living [*sic*] involuntarily childless.’ “Swedish” caught my attention because I knew, by then, that I would move to Oslo, Norway later that summer. I had found no blogs, websites, social media accounts, nothing at all dealing with the experience of childlessness in Norway, not even searching in Norwegian—excluding clinics’ websites, of course, and their ads about fertility treatments. A Swedish blog sounded like my new best “local” bet.

I could then tell you about how my husband and I had been unsuccessfully trying to conceive and had been referred to a fertility clinic in Leeds (UK) in late 2012. I could, but my journey through infertility began much earlier.

¹ Linda later trained as a psychosynthesis counsellor and was one of the founders, in 2018, of the first Swedish organization for the permanently childless (*Föreningen för permanent ofrivilligt barnlösa*).

Cutting the long story short

I am Italian and, at the time of writing this paragraph, 42 years old. I was born in Switzerland from Italian parents. We moved back to Italy—Sulzano, on the shore of Lake Iseo—in time for me to start elementary school. I largely grew up there, with a sister and two brothers, all younger than me. I moved to the UK, initially to find a summer job with my then boyfriend, when I was 22. There I spent the following 16 years completing my BA, an MA, and a Ph.D., then starting an academic career. I practically self-funded my entire education. My family was neither rich nor poor but, there being a single income supporting six of us, resources were tight. We were all brought up with a very strong understanding of the importance of saving money and working hard. While I grew up my mother constantly told me that I needed to study, have a job, and be economically independent. Having a baby had never been a priority for me. First, I wanted to finish my degree, then my MA, then I did not have a partner, then, years later, I met a perfect one, who I married at the age of 31. At that point I still had to finish my Ph.D., which I completed at the age of 32. I wanted, initially, at least to have my first job as a Lecturer (Assistant Professor). Later, however, I decided to follow the examples set by other female academics I knew and who were ahead of me in successfully establishing both their careers and families: I would not leave the academic market before I had been promoted to Senior Lecturer (Associate Professor). Once I got that promotion, I was finally ready to consider the option of having a child. By that stage I was 35 years old. We tried for about a year, then I went to the doctor. I had not gone to see her because I was worried that we had not yet conceived. I was there because of back pain. I returned home with a referral letter to a fertility clinic.

We went through several tests to find out why we were not getting pregnant. There were no problems at all—ours was a case of “unexplained infertility.” The doctors recommended in vitro fertilization (IVF). We went through all the preparatory further examinations. I was anxious about the whole procedure—I don’t even take painkillers, so averse am I to the use of medications. So, at the last minute, just before the treatment was about to begin, I decided we would keep on trying on our own. A year later, when nothing happened, we came back to it. We had to redo all the tests. By this stage it was late 2013 and I was 38, in fact nearly 39 years old. IVF, which we began in January 2014, did not work. It does not, on average, in three-quarters of the cases.² Although about 25 per cent success rate might still sound encouraging, age makes a fundamental difference. My odds of success, approaching the age of 40 by that time, were 11 per cent (Chambers 2017), but nobody told me about that.

The treatment failed in such a fundamental way that we were recommended, if we were to try again, a different procedure. We were going to take a break to think about it. Then a pregnancy test, out of the blue, turned positive. It was 1

2 In fact, although even the regulatory bodies insist on a positive spin, the extent of failure is higher (78%): according to the UK Human Fertilisation and Embriology Authority (HFEA 2019: 21) the “success” rate (‘overall birth rate PET [per embryo transferred]’) in 2017 was 22 per cent.

May 2014 and it was followed, a few weeks later, by what looked like a miscarriage. We took it to mean that it was possible to get pregnant naturally. At that stage I was also trying to move out of my job at Sandford University. I applied for a position in Norway in August that summer and was offered the job in February 2015. We moved to Oslo on 1 August 2015.

We, vanilla flowers

[Andreas Viestad, radio speaker]: ‘the flower opens in the faint morning light, a beautiful flower, and hopefully comes a bee that finds it and pollinates it. If that happens, the flower grows into a fruit, which then becomes a vanilla pod. But if this does not happen by sunset, the flower just falls to the ground and that was it.’

(NRK 2016, my translation)

I benefit every day from my mum’s education and discipline. She has been a positive influence in my life and not the only one—my dad has always been the living example for me of what dedication to work means. She pushed all of us four brothers and sisters to get an education, but I was clearly the one with whom this resonated most strongly. The reason is that I have always had a passion for discovery. Whenever, as I grew up, I started a new school cycle I was always the only one in the class who liked all subjects. Learning anything new gave me joy and purpose. My curiosity, on the one hand, and education, on the other, were a perfect match. Despite a consumerist culture that emphasizes choice and promotes the belief that we are all masters of our destiny, though, life is a story written by many hands. While I pursued my interests, the course of my future journey was also broadly set by a combination of events and actions taken by other people and over which I had no control. Having or not having a baby, in this light, is not entirely a choice, but a perfect storm.

I have lost count of the situations when I am confronted with a practically complete lack of awareness that childlessness happens for more reasons than either physical inability or a deliberate decision. At a dinner following an academic conference in Athens in March 2015, tired after a day of discussions and while waiting for a *moussaka*, a male colleague nonchalantly drops into our conversation: ‘So you have chosen not to have children?’ He cannot know I am still recovering from a failed IVF cycle. I would be more mentally prepared to deal with these kinds of questions now. Living with childlessness is a slow process of adaptation—rehabilitation, in fact. Also coping with social situations that involve “baby questions” is a learning process. My current self would be able to reply slightly more eloquently. At least I could construct a meaningful sentence. At the time I am taken by surprise, almost in shock at this statement, as if I have just been hit around the head. All I manage to blurt out in reply, embarrassed and resentful, watching the tablecloth and holding the extremities of my knife with my fingers, is: ‘I have not chosen... It is just that ... nothing happens.’

Three years later, in a mountain hut north of Oslo during our summer holidays, my husband Robin and I sit with the participants of a hiking tour organized by the Norwegian Trekking Association. We have just ordered a *rømmegrot*, a traditional porridge dish made with flour, double cream, and served with the butter released by the cream during the cooking. It is not a coincidence that these conversations always happen to take place at mealtimes. Talking about one's family is a way of establishing commonality with strangers and breaking the ice—a more interesting topic than talking about the weather, especially when the latter has been raining on you all day as in the Hardangervidda plateau. Having children, when you are adult, is expected, indeed assumed, to be the common experience that is going to create an immediate bond between the interlocutors. Except when one does not have them—then a crevasse might open instead. 'Some people don't have kids because they prefer travelling and having fun,' says carelessly a Norwegian woman whose name I have preferred to forget. At this stage I have learned the arguments and the statistics from the websites. Mention the "one in five" line: 'It might sound strange to you, but one woman in five in the Western world does not have children.' *Check*. Emphasize the unplanned aspect of it: 'Those who *chose* not to have children are estimated to be 10 per cent of all people without children.' *Check*. Pre-empt argument that this does not apply to Norway (nothing tends to do anyway): 'Maybe Norway's natality rates are not that bad. There appear to be many children. They are everywhere. But do you know that here one man in four will never be a father? Women tend to "recycle" the same men.'

Moving to a more academic setting, in receiving the comments to a research proposal I submitted to the Norwegian Research Council in 2016, the reviewers questioned the rationale of my project, in which I purposely wanted to interview both voluntary and involuntary childless on the ground that the boundaries between these categories are fuzzy, and childless and childfree should be regarded as extremes in a spectrum of positions that are changeable (Letherby 2002: 8). 'There is an issue about amalgamating those who are childfree-childless out of choice or life circumstance. The project needs more elaboration, definition and care in determining these groups, which are not the same, and do not perceive themselves as the same,' they wrote. They were right, of course, in their bulletproof phrasing. I could have explained my study's rationale better—my fault. I suddenly see my real mistake, though: hoping to convey in half a page that what they assume to be an obvious distinction between voluntary and involuntary childless is not "natural" at all—in other words, effectively, that their entire view of life and reproduction is wrong.

The question "Why don't you have children?" shows the essence of the problem. Assumptions: either you want kids or you don't; the outcome is the result of a conscious, rational decision. To the point that some demographic surveys, as some researchers point out (Tanturri *et al.* 2015: 13; Kreyenfeld and Konietzka 2016: 7), count those who express an *intention* to have a child as 'parents,' as if this was a done deal (for an example of such studies see Hakim 2003). Reality: the majority never genuinely *chooses* either. Most of us just get

about daily life, caught in between the dentist’s appointment, paying the electricity bill, an exam’s deadline, taking a parcel to the post office, walking the dog, doing the washing up. I met a few Ph.D. fellow female students whose pregnancy was far from planned. Like life, it “happened.” Having children was always in the back-of-the-mind zone, parked there for the “right time.” Not a priority, but never excluded. In fact, my imagined self already had children. It was just a matter of how many, which would have largely been dictated by the economic possibilities at the time “it” would have happened. My preference had already settled on two. A reasonable number, which had also been predicted, I still remember it, by the friend of a friend of a friend who once read my palm at a party in Italy when I was in my early twenties and people still smoked (I never did—you can’t blame my unexplained infertility on that). Having children was in the same “taken-for-granted” box as the first communion, getting your period, growing wisdom teeth. It would just happen one day. The only thing I did not have to work hard for because that is what *all* women do.

I regard myself as childless *by circumstance*. Jody Day (2013) lists on the Gateway Women website at least “fifty ways not to be a mother” that do not involve a deliberate choice. Among them are: ‘Never finding a suitable partner’; ‘Needing to save enough money to buy a home and pay off college debts before [one] could afford to start a family, only for it to be too late’; ‘Being with a partner who doesn’t want children at all (a childfree partner)’; ‘Being with a partner who already has children and doesn’t want more’; ‘Being unable to afford fertility treatments’; ‘Being unable to get pregnant with the eggs you froze when you were younger’; ‘Being unable to adopt because of being single, having insufficient funds, being the wrong age, being the wrong gender, being the wrong ethnicity, being disabled, not being able to afford to or being rejected for a variety of bewildering box-checking reasons including not having a garden!’; ‘Having your surrogate mother decide to keep your genetic child’ (ibid.).

These are just some of the scenarios Day came across. My personal infertility formula, on her list, is a combination of reasons 2 and 47. A life-sized tragic bingo: ‘Being ignorant about your fertility and not realising that after 35 it’s half what it was at 25’; ‘Finding donor egg treatments something you don’t feel comfortable pursuing, thereby bringing your fertility treatments to an end.’

I did not meet my soul mate, the only person I would have wanted to have children with, until I was 30 years old. All I knew about fertility is that women have children until their menopause. Sex education was never part of the curriculum in Italy when I was a student. Our biology teacher in secondary school one day just announced that he would not teach us reproduction. He never explained why. We never questioned him. We learned, however, about chemistry, physics, geology, and astronomy. We were the generation who could not rely on the internet to search for an answer when we had a doubt—not that the internet makes it easier to find the right one. Apparently, it is not unthinkable for some British teenagers to believe that one can use a crisp packet as a condom or that rinsing oneself with Coca-Cola after intercourse can work as a form of contraception (Heritage 2017)—so much for the online digital natives’ generation. We

anyway relied on whispered conversations with best friends, nervous giggling in front of others' jokes and innuendo meant to show we understood what they were talking about when we didn't. Probably those who told the jokes did not either.

Knowing how to avoid pregnancy was what it was all about. "If you get pregnant, your life is over" was our mantra.³ In a Catholic culture that sees sex in itself, not just sex outside marriage, as a sin, the perspective of teenage pregnancy was terrifying: a shame for yourself and evidence of failure of an entire family—worse than death. There is no reason, in principle, why an unmarried woman with a child should not finish her studies or go to university, if her family supports her. Yet, this very thought was, at that time, inconceivable. The scenario was clear in our little girls' minds: if you have a child you will be on your own; you will have to suffer to pay for what you have done. Your life prospects *had* to be destroyed. Your family would not have helped you. That was the message. The other side of it was that, as soon as you stopped preventing pregnancy, then it would happen. We saw it (we still do) in every movie.

The most puzzling aspect, for somebody who lives to learn like me, is that I never consciously thought about these issues. We all eventually caught up in learning about sex. Yet, I have always known more about black holes and the geology of phyllosilicates—I still remember all the names (in Italian): *muscovite* for pearl-like layered rocks, *biotite* for the darker ones—than about my own fertility. And I never even questioned my ignorance. Mainly because I never realized I was ignorant.

And even when I did realize I needed to learn more about it, I could never catch up: I read and read about the signs I was supposed to monitor to understand when I was fertile, but I always felt clumsy—a fertility groundhog day. I kept on forgetting, overseeing details. I can learn martial arts and execute a perfect upper cut. I am a qualified boxing instructor. Yet, I could never master making sense of my own cervical mucus. As much useless as at knitting, doing my hair, or waxing—those activities for which even having a Ph.D. does not seem to help.

So when we did not get pregnant straight away after having stopped using condoms I was not worried. I was 36 years old, my grandmother had my mum when she was in her forties,⁴ and my grandfather lived to reach 100. Of course there was time.

My (failed, of course) IVF story

During IVF treatment, hormones taken by injections cause the ovary to make several eggs at the same time. These are taken out of the woman's body in a minor surgical procedure. The eggs are put together with her

3 One of my Italian interviewees tells me, in this respect: 'what I tend to associate to "children" is "end" ... it is no longer "me," it is the children. Do you understand?' I certainly do.

4 While editing the book manuscript I found out she was 43 years old, my age at the time of revising this text.

partner’s sperm in the laboratory for fertilisation to take place. This is when the sperm enters the egg and the contents of both are combined to create a unique being.

(NHS 2018: 8)

Nurse consultation: This one hour long appointment with a nurse specialist is the gateway into your treatment cycle. Both partners must attend.

(ibid.: 19)

Planning calender [*sic*]: You will be given a Treatment Diary explaining your individually-tailored treatment program and the expected dates when key parts of the process should fall.

(ibid.: 19)

I cannot fully reconstruct the IVF treatment because I do not have any records of it. I threw them all away. I would have kept a note, at least of the initial date of the procedure, in my work Outlook Calendar, blended in with meetings, lectures, and conference dates, but since I left my job at the University of Sandford, all electronic traces of past life have been erased with the closure of my email account. I did use the “archive” function to store all my old messages before leaving. I still have yellow folder icons on my hard drive marked “Sandford.” But I do not know how to open them. They stand there, on the desktop, like piles of handwritten clay tablets I have no idea how to decipher. Nor do I want to find out. I also had a hard copy of a Treatment Diary where I recorded daily injections, names of medications, quantities in milligrams. I shredded it. Books being burnt in the square of the village. The winners of the war rewrite history. My victory, like theirs, is the editing of the past.

Still, I find a stray Word.doc file in the hard drive of my laptop called “The IVF diary.” This is the whole content:

13 January 2014: Started meditation with Robin and meditated for 25 minutes.

Went to Hebden Bridge for Shiatsu. It is wonderfully relaxing.

14 January 2014: Prostag injection at about 10.40 am. At about 11.30 I feel rather warm. Better than feeling cold.

My attitude is between there-is-nothing-to-see,-just-move-along and silly. Got bored quickly or lacked motivation to write a diary. Maybe I already knew how it would end from the start? “Prostag” rings a bell, but I have no actual recollection of its purpose. I had this knowledge. Like the data that gets deleted from the laptop’s bin: Where does it go? I attended presentations with PowerPoint slides at the Fertility Clinic and was even one of the few who asked questions and even took notes; I was explained again the details of the process by a nurse; I read leaflets.

Even spending half an hour now searching on the internet does not help in finding out what Prostag does. Google, instead, brings up other terms I have heard before, like “long protocol” and “short protocol.” One of these applied to me, but I have no idea about which one. All erased. It was another Cristina that did it.

The principle of IVF requires stimulation of the ovaries with hormone injections under the skin to produce many eggs at once. Egg release (ovulation) is controlled so that the eggs can be collected and removed from the body.
(NHS 2018: 21)

What I see vividly are images of Robin, who would stand with me in the bathroom every evening. My eyes are on the smooth lines of the green glass sink, one of my favourite features of the bathroom, but I know Robin is carefully watching while I prepare the syringe and inject the hormones into a fold of skin, pinched between my thumb and index finger, on the side of my belly button. Far from getting bored of observing the same procedure, he was always supportive.

Possible side effects of injections would have included, over the course of the treatment, nausea and weight gain, if I now remember correctly. I did not feel anything. I even convinced myself that I liked injections. Everything was perfect. As with anything else in my life, it was all or nothing. I really wanted this to work and went for it 100 per cent.

Your personalised diary will set out your specific instructions. Please be prepared for some instructions to change depending on your response as the cycle progresses.

(NHS 2018: 22)

At one of the several scans to check the growth of the eggs I was told that I was ‘not responding’ to the hormonal stimulation. The amount of hormones was thus increased twice. The second time the nurse explained that this was the maximum amount that could be ‘legally’ prescribed. I still wonder why she emphasized that: *legally*. Was she expecting me to insist unreasonably? Was this an attempt to use the law as a shield to protect my health from myself? An adverb used like a full stop, a fortified door, a bulletproof glass for her to hide behind. But hide, be protected from what? My continued begging and wasting of her time? My fury? Did she see me as a desperate woman ready to sacrifice or do anything to get a baby? Was I that woman?

ICSI and the unexpected

Risks of ICSI: Intracytoplasmic sperm injection, ICSI has been used world-wide for over 20 years in the assistance of male factor infertility. [...] ICSI is an artificial, invasive technique and may also use sperm that would not

otherwise be able to fertilise an egg. For these reasons, concerns about the potential risks to children born as a result of ICSI have been raised. The concerns mostly involve the risk of passing on a genetic problem that would not be transmitted under normal conception circumstances. [...] There is no clear evidence that ICSI results in more birth defects than occur randomly with natural conception. There is also no clear evidence to give cause for concern regarding the on-going physical and intellectual development of ICSI children.

(NHS 2018: 34)

We first cried, then spent the day in a confused daze. The following day we were totally fine. ‘It feels like it never happened,’ I said to Robin, pleased with my resilience.

The doctor at the meeting that followed repeated that a lack of fertilization is extremely rare. So much so that the clinic would offer us another free cycle. The sperm, however, was observed ‘doing what it was supposed to do,’ as the embryologist confirmed. He suggested that there might be ‘a genetic issue’ with the eggs—i.e. ‘*it’s my fault*,’ I thought—although not being able to see inside them, ultimately, they could not know. They never do. They also said that, if we were to try again, we should go for Intro Cytoplasmic Sperm Injection (ICSI) instead: ‘In this procedure one sperm is selected and injected into the egg.’

‘Who decides which sperm to take?’ I asked. ‘We choose the most lively,’ was the reply of the lab technician. ‘If that also fails, which would confirm that there is indeed a problem with the eggs, then we can always go for the egg donor option,’ concluded the doctor. ‘Take your time now, but do not wait too long to come back to us,’ he continued, ‘because otherwise the tests you have done will need to be repeated.’

The subtext of the whole experience, like a ticking bomb in the background, is that time is constantly draining away. We said we would take a pause and think, mainly to get out of the building without having anything else to add.

The other story: infertility, ethics, and the crisis of higher education in the UK

While working on this book I ask Robin, over dinner, ‘Why did we not go back to treatment? How is it we never got round to doing ICSI?’ We look at each other for a while, thinking, slightly squeezing our eyes in trying hard to remember. We both end, in unison, in a sigh of surrender, followed by the same ‘I don’t know.’⁵

There is not one reason, in fact, but many which, as an academic, I instinctively would like to approach in different sections as a matter of clarity, organ-

5 Up to two-thirds of all couples do not use all cycles they are offered within Assisted Reproductive Technology (ART) programmes (Wischmann (2012), in Schick *et al.* 2016: 33).

ization. In the practice of life, though, they cannot be untangled. Disorder is the order of the day.

We were uncomfortable with the idea of a single sperm, selected by a human hand, being injected into the egg. I have wondered whether my attitude had anything to do with religion. I am Catholic. Only very moderately religious, though. Yet, this procedure seemed to cross a sacred boundary of sorts. By saying this, in no way do I mean to judge or criticize those who undergo ICSI. It is *their* choice and I absolutely respect that. It just did not feel right *for me*. It was too much like “playing God.” Even without bringing deities from major organized religions into the picture, it meant forcing Nature. The competition between different sperms in fertilizing the egg, which would happen during the fertilization in vitro, has a purpose: to ensure that the genes carried by the winner of the race (presumably the strongest sperm?) will develop further.⁶ But if an embryologist chooses the sperm, then what happens to this natural selection process? What impact can it have in the long term upon the human species?

I have recently read (Elnan and Hustad 2017: 12), however, on an issue of *Morgenbladet* about the future of family that a colleague has left in my pigeon-hole (she knows I am working on the topic), that even IVF is not unproblematic: during natural intercourse the sperm that eventually fertilizes the egg is the one that can swim the longest and can survive the journey through the acidic environment of the cervix; in vitro the sperm that fertilizes the egg is the one that swims the fastest. How does this difference, again, affect the process of natural selection? Should we pursue treatments whose long-term future effects are unknown? This detail alone, perhaps quirky at first hearing, would have probably led me, if I had known, not to undergo IVF at all.

Even if we were uneasy, in the back of our minds and in my heart, about the mechanics of ICSI, we never explicitly said we would not do it. The decision rather played itself out over time. The topic got buried into busy working days, my 5.30 a.m. early-morning starts to commute to my workplace in Manchester, training, weekend walks to the Golden Acre Park. The month after the miscarriage, in June, I came across a vacancy for an Associate Professorship at the University of Oslo. It sounded like an ideal job. That became my all-absorbing objective. The application process, which involved several stages of selection, lasted until the end of the year. Before Christmas, one of the best presents I could have ever received, I was invited to an interview. It would take place in January and I was the first candidate on the ranking of the applicants. That job was, in fact, later offered to me (I had to pinch myself for the two months that followed to convince myself I had not made it up), and I signed my contract on the day of my fortieth birthday, 9 March 2015. I purposely waited a few days to make the symbolic deadline: moving to Norway and having a new life there was my next challenge. This was all possible because Robin, who had become frustrated with his work, had decided a couple of years earlier, before starting IVF,

6 During the editing I came across an article that dismisses this theory (Martin 2018).

to quit academia and take a career break to concentrate on writing. The world, or at least the countries where one can teach in English, was truly up for grabs. I had the added responsibility of being the breadwinner.

Was the baby project an attempt to refocus my life at a time when I was dissatisfied with my job? When I came across the vacancy of my present position I had been trying to move away from the University of Sandford for at least three years. The university had made the national headlines for the way it had mistreated, indeed humiliated, its staff—an example of the worst sides of the commercialization of education. In order to rebrand and modernize, the institution went through a restructuring not dissimilar from that of a company. It started cutting costs—mostly staff—and hiring administrative personnel in charge of the ‘transformation’ process, as the management called it. Not only did my department, staffed by 24 academics when I had arrived, have to deliver the same amount of courses with the eight employees left. (The university, incidentally, always managed to save face by claiming it had never sacked anyone. Since it felt like working on a sinking ship where every man just thought about saving himself, everybody was desperately trying to leave, and most managed to do so.) The administrative personnel also did not seem to understand the nature of the work we academics did. We were approached as “teaching machines” who could just deliver any subject, not as experts of a particular topic in our respective fields. If the schedule was not full of teaching hours, then it meant we were doing nothing. Departments were reorganized and merged. At some point our unit, History and Contemporary History, ended up (ironically) in the School of Nursing and Midwifery. Receivers of my emails were contacting me asking whether there was an error in my messages’ signature. I was spending most of my time answering emails and filling in forms. In principle, half of my time should have been spent on research, but there was not a minute for it. The workload, in fact, was wildly unrealistic. I was chronically behind schedule. I started to see myself as ineffective and unable to manage my time.

It was in May 2013, when two colleagues I knew well went on long-term sick leave and a constant pain in my neck helped me realize I was on the verge of breakdown, that I sought the support of a councillor. My youngest brother Emanuele, who had been doing his Ph.D. in Philosophy at Leeds University, and whom I had been seeing practically every weekend for a period of over three years, had finished his studies and moved to London. My life felt emptier for it. Becoming a mother had always been an option, but was it really the attempt to place my work into perspective and to fill the emotional void left by Emanuele that led me to pursue it with a sense of urgency?

Did I then stop thinking about it when new challenges moved into my field of vision? Or did I want to move to Norway so that we would have something major to distract us and forget about the traumatic experience of IVF?

Uncertainty and the unsustainability of hope

I destroyed all the evidence about my IVF treatment because I did not want to reopen the story. Editing the past is also painful. I did not want to pore over the milligrams of Prostaglandin I was taking and cross-check them with endless online threads of conjectures about what could have gone wrong, trying to fit them into theories of hormones ‘frying’ the eggs. Should I have not trusted the doctors? Should I have changed clinics? Should I have insisted on trying IVF again? What if different doctors, perhaps abroad, had been following me? Should I have undergone treatment in Italy? If I had tried earlier perhaps I would already have a baby now. Am I still on time? What if? What if?

Hope, in this respect, is dangerous. On any online discussion thread of women trying to conceive (or TTC, as the acronym goes), one is hit by the wave of ‘baby dust’ coming your way—a blinding sandstorm of it. “Never give up!”, “Never lose hope!”⁷ “It will all be worth it in the end.” But what if the happy end never comes? How healthy is this “yes we can” of fertility, when every single month, year after year, in a regular cycle of alternating enthusiasm and depression, your hope keeps on disintegrating on the same piece of toilet paper stained with blood? Keeping on trying is not sustainable in the long term. Every failed attempt is one more scar, one more dent in one’s self-confidence.

My Italian ancestors were perhaps wiser when they used to say that *Chi di speranza vive, disperato muore*—Who lives of hope, dies hopeless. Hope is torturing myself with a slow dripping of “ifs.” I would be happier if I knew I was barren or had already reached the menopause. At least that would be the end of uncertainty.

Adoption is not an option and having children of a different kind

For some reason, when I mention that my husband and I underwent IVF but it did not work, most assume that we must be trying to adopt. There might be an impression, encouraged by the many stories of happy unconventional families we read about in newspapers and see on TV, that babies and children are widely available, almost to the point of being “on tap.” We aren’t trying to adopt because it is simply too late. We have passed the age limits imposed by the requirements for adoption applications. Most importantly, however, we are not interested.

What seems difficult to understand for some—which is related to the assumption that we must be desperate and therefore grateful for any opportunity to have access to a baby—is that we would have liked to have had a child of our own, not just *any* child. The doctors at the Leeds clinic had also suggested the possibility, in case the ICSI we never got around to trying failed, of using a donated

7 For an example of the pressure by “the others” not to “lose hope,” see the blog post “Please do not give up on hope ...” by childless author Yvonne John (2017).

egg. That was never an option. It would be for me as if my husband had a child with another woman. What kind of commitment would I have to a stranger?

I have hoped so many times to be pregnant. I have hoped so many times not to be. Sometimes the blood of menstruation was a welcome relief. I have wondered, on days when I was exercising with added rage, enjoying being out of breath and utterly exhausted to the point of aching, whether I wanted to release the anger for not being able to conceive or making absolutely sure I would not be able to. I do not really believe that strong physical exercise would stop a woman getting pregnant—otherwise the human race would have become extinct long ago, in prehistoric times or in the age of agrarian societies—but this seems widely agreed upon online—accepted knowledge for the fact alone of being repeated over and over again. As much as the idea—for which there is no medical evidence⁸—that if you do not conceive it is because of stress. How do women in war zones or among refugees manage to have children? Why do women become pregnant despite having been through extremely traumatic situations, like rape or abuse, for instance?

I remember once feeling strong cramps at the end of a spinning class while I was in Leeds, in the UK. I can vividly relive the scene. I struggle to walk into the toilet cubicle. I lean with my back against the door, close my eyes, try to breathe deeply and hold my abdomen. I could think that this is implantation cramping, the result of a fertilized egg burying itself in the wall of the uterus. It could just be some pre-cycle pain. Instead, I think that the vigorous exercise has led an early stage embryo to be destroyed. Have I just killed a baby? Was it an accident or did I premeditate it? Could I have done this before? How many times? Am I a murderer in disguise? I do not feel sorry. It is not the right time. I have other offspring that need taking care of. I need to protect them, ruthlessly. They just do not have bodies made of flesh, but they have legs, long arms. They are ideas, projects, text drafts. They develop, grow. They take root in other people’s minds, affect their thoughts and how they act. They might, in subtle ways, even shape policies. I am so proud of them. They are genes of a more prolific nature. ‘I am not dissimilar,’ I wrote in my diary that night, ‘from a drone pilot who kills at a distance, without a uniform, in her trainers. Then I have a shower and stop to pick up some yogurt, kitchen rolls, and apples at the supermarket on the way home.’

8 There is no evidence that stress causes infertility. As Johanne Sundby (1999: 15) points out: ‘[t]he emotional problems of infertile couples are associated with being infertile but do not cause infertility. [...] This myth comes from a deeply-held belief that infertility is mystical and psychic, and that once you—by magic, anti-stress therapy or by caring for a child—break the vicious circle, you will become pregnant.’ As she further explains (*ibid.*), this belief is very strong also among ‘many professionals’ and originates ‘in the early psychoanalytical literature, where female infertility was most often diagnosed as a psychiatric problem supposedly caused by conflicts about femininity or motherhood.’

The wrong solutions for no problem: Is life without children impossible?

It is easy to be swept up, as I indeed was, by the IVF treadmill. “Try while you can,” “It’s not too late,” “You might regret it later.” Quick! Quick! For an IVF clinic, patients are part of an assembly line, processed almost industrially. Because the technology is available it would seem foolish not to take advantage of it. In the mad rush to achieve the desired baby-result before the fertility shelf-life expires, though, we do not pause to reflect on what kind of problem we are dealing with—is it a “problem” at all? What are the solutions on offer? Are they appropriate?

To start with, only looking at my own experience, IVF and ICSI were both the wrong solutions to a problem, in principle, we did not have. IVF was developed to enable women whose fallopian tubes were blocked to conceive. Not my case. ICSI is a treatment used in situations when the sperm is unable to fertilize the egg, for instance, when the sperm tails are bent and cannot swim. Not my husband’s problem either. According to the fertility tests we are totally within the norm. There is no known medical explanation for our inability to conceive. Unexplained infertility affects one in five couples (Resolve n.d.). Effectively, we all undergo inappropriate treatments for the sake of medicine not having a better idea.

There is a fast-growing and extremely lucrative fertility industry that thrives on encouraging the “baby dream.” In an article about unexplained infertility in the *Huffington Post* I read: ‘*Hope to cope* [italics in original]: Not knowing the root cause of infertility means that all options are possible and you’re really only limited by your own ambition and available resources’ (Huhman 2017). A highlighted quote from ‘Dr Allison Rodgers’ (the woman smiling broadly with her crossed arms in the background of the text?) even explicitly states: ‘People think an unexplained infertility diagnosis is bad, but I really try to let my patients know it’s a good thing.’ This industry wants the involuntarily childless to feel they have a problem, for which it has a technological solution. A problem, that is what it wants them to believe, one has the power to solve if one just has the drive to keep on going (i.e. “never lose hope”) and throw enough money at it.

My local fertility website, the homepage of Ønskebarn (2018), a Norwegian association that describes itself as ‘the primary interest organization for the childless to put pressure on politicians, press and bureaucracy’ and sees its role as that of a ‘speaker and supporter for all those who are waiting for or have received a *ønskebarn* [“wish child”],’ is covered in ads (ten of them) of fertility clinics. I do not want to point the finger at them and I don’t doubt the good intentions of this organization, but could this not raise questions about whose interests this body is really serving? ReproUnion (<http://reprounion.eu/>), ‘a collaboration between Sweden and Denmark within the area of reproductive medicine,’ which is ‘world leading in overcoming infertility’ and got over seven million euros of EU taxpayers’ money, promises to ‘break the fertility code’ and claims that ‘science is the key to overcome infertility’ (Copenhagen Capacity 2015). This emphasis

on science both contributes to and fits into a broader fetishism for technology as the answer to all our ills. Understandably, this spills onto media reports. The limitations of technological solutions, though, are less often pointed out.

The success rates of reproduction technology are heavily affected by age. The bottom line is that the best insurance against infertility is conceiving earlier (Specter 2017; Gustafsson 2018). Even thinking about preserving young eggs through egg-freezing comes with the risks that taking a leap of faith into the unknown entails. Although by this stage I am distrustful of any source of information (Where does the data come from? Whose interest does it serve?), I read in the *New York Times* (Belluck 2018) that

while more than 20,000 American women have had their eggs frozen, the vast majority (an estimated 85 percent or more) have not had their eggs thawed, the first step toward creating a healthy embryo.

That means there are not enough cases to evaluate and come up with solid data on the odds of success. It also means that many clinics that freeze eggs do not have experience thawing them.⁹

The *Independent*, in the UK, reports that ‘[a]ccording to a study by the Human Fertilisation and Embryology Authority, only 14 per cent of women who attempted conception from their frozen eggs in 2014 were successful’ (Petter 2018).

Egg preservation does not necessarily mean having a viable thawed egg, which does not mean having an egg that becomes fertilized, which then develops into an embryo, which then implants into a womb, which then gets carried to full term, and is actually born live.

There are two important by-products of the marketization of parenthood. The first is the sense of guilt when the “baby dream” is not achieved. Because technology never fails, it must be the individual’s fault: I must have done something wrong, I should have eaten organic, I did not have enough pomegranate juice. I wonder what it was like in the past, when treatments against infertility were not available. One, I presume, would have had to accept whatever life brought. There would have been no other choice. It would have been painful, but it would perhaps have brought, eventually, a sense of resignation and acceptance, too. The second outcome of parenthood becoming a for-sale product is the aftershock of inflated hopes. The promise of technological solutions might seem empowering and does of course help many couples. Yet, there is a considerable proportion of involuntarily childless individuals who will never have a child at the end of it. The positive spin in the news (PR spin by the clinics, again?), in this respect, is damaging. A smug headline reporting the results of a Danish study says: ‘Three in four women WILL give birth within 5 years of fertility treatment,

9 See also Baldwin (2018).

study finds’ (De Graaf 2016).¹⁰ The study further concludes that ‘71% gave birth within 5 years.’¹¹ Fantastic. This means that after five years—the immediate association my mind makes is that this is the same duration of the Second World War—of injections, scans, physical exhaustion and emotional turmoil, having your life on hold—after all of this, nearly one-third of all patients will have suffered in vain. Who is taking care of the victims of this lost war?

I am also wondering to what extent the fertility organizations that are meant to support the journeys many embark upon to conceive a child contribute to creating the problem in the first place: one receives encouragement and help, but what happens once hopes have been raised and the longed-for result does not materialize? The problem of fixing a faulty fertility is only the beginning. Another, bigger problem, one that might last a lifetime, is the one that begins when treatment ends.

To address this, we may need a redefinition of the childlessness “problem” to start with. I am not of course suggesting that not having a child should be dismissed as a problem. On the contrary, it is a source of a deep sense of loss and grief. In fact these feelings, as I am trying to show, extend to all areas of life and persist in the long term. They demand to be taken more seriously by society as a whole. Despite my ambivalence, perhaps precisely because of it, I also experience pain, and sometimes I am overwhelmed by it. I will talk about what the grief caused by childlessness feels like later. What I wonder, however, is why does not having children *necessarily* have to be seen as a problem? This is not embracing a naive, all-positive spin on “how great childlessness is.” I am rather pointing out that all the alleged “solutions” start from the assumption that living a life without children is not possible; that as childless we are not accomplished adults, even complete human beings. I will return to this in Folder 5, where I will discuss how these assumptions are embedded, like subliminal messages, in the plots of movies, from Hollywood to national cinema productions in Italy and Norway. What if we questioned this assumption? Is it really impossible to dare to think that we can have meaningful lives, even if we don’t have children?

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10 The study, which was presented at the European Society of Human Reproduction and Embryology conference (ESHRE) in Helsinki in 2016, is presented with the same positive spin also by medical news sites (e.g. Worcester 2016).

11 During a later round of editing of this text I identify the study in question as Malchau *et al.* (2017).

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Folder 2

Relationships

At the gym I run into Ingvild, a colleague at the University of Oslo who has just attended the same Strength Challenge class, and we start small chatting. Talking about what we are working on, I tell her about my research on childlessness. I mention that I do not have children myself. As if by saying it I could, every time, get a little bit of the whole toxic experience out of my system, I add that my husband and I tried, but it did not work out. In one of those statements I tend to hear, but never quite know how to take, she tells me that a friend of hers who did not have a partner went to Spain and conceived thanks to a donated egg and donated sperm. Is it a recommendation? Is she implying I have not tried enough or chosen the wrong treatment? Does she just want to share with me a useful tip? Is embarking upon a course of fertility treatment like discovering a new delicatessen shop? Should I consider that option? Would I still be on time? Should I start trying again? I force myself to stop this line of thinking. Should I thank her? I go for smiling moderately by tightening my lips and slightly arching them upwards while nodding my head. Suggest friendliness and interest. Then look at my wrist—I forgot I never wear a watch while exercising—to signal I should get going. ‘*Ha det!*’—literally “have it,” “goodbye” in English—she hurriedly says, encouraging me to go. ‘*Vi ses!*,’ ‘see you!,’ I reply while I rush through the corridor towards my locker to make it on time and catch the metro home.

On the *t-bane*, while the wagon climbs the Oslo hill towards Frognerseteren along line 1, I am standing behind the glass and staring out into the darkness that covers the pine trees and the pretty wooden houses of Oslo-West, where perfect Norwegian families with two or more children, hybrid car, *hytta* (a countryside little house), and skis neatly stacked in the cellar live their perfect lives. The “A4 life,” as they call it. I also live in this part of town, but in a rented *sokkelleilighet*, a semi-bunker basement flat. I am trying to catch a glimpse of an answer to the question that has been rustling in my mind, like the water bottle bouncing up and down inside my backpack, while I ran to the station: ‘What on Earth brings a single woman to go to these lengths to conceive?’

Variable pressure

The story relayed by my friend is not the first of its kind I hear, read, or watch. I read *Halvbroren* [The half brother], one of the most famous novels by Norwegian novelist Lars Saabye Christensen (2001). The male protagonist, Barnum Nielsen, finds out that he is infertile (this is not mentioned in any of the synopses or reviews I have read about the book, but it is the kind of detail I pay very much attention to), but does not dare to reveal it to his girlfriend Vivian, who desperately wants a child. After having tried in vain for some time, she is suddenly pregnant with a child she has conceived with a stranger in town. The male protagonist wants to leave her—an understandable reaction, from my Italian perspective. He is later convinced, though, by his grandmother to remain with the woman. The whole situation and the grandmother's arguments that he should not be furious, rather just 'love Vivian and the child'—doing otherwise would mean he is a 'half man' (Christensen 2001: n.p., my translation)—sounded surreal to me, but I thought they fitted well with the rest of the imaginative narrative and the novel's creative plot. Until I observed a similar behaviour in the story of a Nordic Noir TV series (*Arne Dahl* [2011], season 1), where a woman who cannot have children from her partner becomes pregnant by sleeping with a stranger (the character Viggo Norlander, one of the investigators in the series) during a night out. One of my interviewees, an Italian with a Norwegian parent who has lived all of her life between the cultures of the two countries, tells me, in fact, about a Norwegian expression: "*å lure noen*," "to trick somebody" (into getting them pregnant). Another Italian interviewee living in Norway refers to the 'Friday [night outs] children.' When I later conduct my analysis of movies that include childless characters in their plots I further come across a Norwegian comedy from the 1990s, *Over stork og stein* [Stork staring mad], where a woman "tricks" a poet (who looks like her infertile husband) to have intercourse with her during a night out. Of course she gets pregnant straight away.

I am in no way suggesting that this is "normal" behaviour in Norway. Having children has been historically so important that, for instance, the Bible suggests that a woman whose husband cannot make her pregnant is allowed to conceive with his brother. I also heard a similar story, a woman conceiving with a brother of the husband, from the Sicilian village my mother comes from. However, considering my own reaction to it and that of my Italian interviewees, I can say that this option would be located at the edge of the unthinkable for a contemporary Italian, while it appears, at least, to be a more culturally available thought-reference for a Norwegian.¹

1 For sure it is more socially acceptable (and economically feasible) for a single woman to have children in Norway than in Italy. Laura Bernardi (2013: 158), in investigating the intergenerational transmission of norms about fertility between mothers and daughters in Italy, finds that having children is strongly associated with the idea of 'family' and this, in turn, is solidly related to 'marriage.' This point is confirmed by another Italian woman I talked to as part of my study, who tells me that the priority is to have a partner, *then* children. Having a child without a partner is also unthinkable for a Chinese interviewee due, as she put it, to the unbearable cost of raising a child alone in China, the fact that one's parents 'will not accept that,' and because of other people's 'comments.'

I could not possibly bear to have intercourse with a person I do not love. Could I ever be that desperate? What kind of relationship would I have with the resulting child? And how would my husband relate to it? IVF and sperm donor banks, in this respect, just remove the awkwardness and civilize the whole business of conceiving with a stranger, even giving the promise of control over the whole process.

In addition, I have often read on *Aftenposten* about single women who manage to conceive their *drømmebarn*—there is in fact a word in Norwegian that means “dreamchild.”² I also got a research assistant to investigate how the issue of childlessness has been portrayed over the past 25 years in Norwegian newspapers as part of a course to train students in research skills.³ What I can read between the lines of novels, movies, life-stories, news coverage, and what colleagues say when they talk about children is that wanting to become a mother, for a woman, is an irrepressible desire, so powerful that she would go to extreme lengths to fulfil it. And they cannot be blamed for that: giving birth is part of becoming a “real” woman. Extreme circumstances, like running out of time and not having a partner, seem to make extreme measures acceptable.

It is understandable that all societies need women to have children. The alternative is simply not having a future: no new citizens to pay for the state to function or, in the worst case scenario, the whole community literally dying out. There is no doubt that motherhood is good and desirable. And women are designed by nature to give birth. The question, though, is: How much encouragement should be directed towards motherhood? Other problems follow closely, in a cluster, like a little crowd of fruit flies gathering around an apple that has started to rot: What is the difference between a helpful socially oriented nudge and the demand, expectation, perhaps even the sense of obligation that limit individual choice and place a constraint upon one’s life opportunities? Where is the point of balance where an individual can follow one’s own path to self-realization without being forced by an outsider’s hand? Can this point of balance ever be achieved? Does it exist?

What I find interesting is the variation in the level of pressure towards motherhood across countries. Having now spent over two years in Norway, 16 in the UK, coming from Italy myself, and having talked, both through formal interviews and in informal conversations, with individuals from different countries, has given me a sense of perspective. I can see how the pressure towards motherhood is, in fact, lower in a Catholic and a (supposedly) more patriarchal

2 For one example see Tjernshaugen and Dommerud (2017).

3 Bruna Dias Pereira Saakvitne analysed 201 articles from *Aftenposten* (broadsheet), *Verdens Gang* (tabloid), *Klassekampen* (left-leaning daily), and *Vårt Land* (Christian conservative daily) from the period 1983 to 2016 to identify what issues childlessness was associated with and which sources were mostly quoted. She found that in 68 per cent of the cases childlessness was approached from a reproduction angle: this included, for instance, the mention of infertility, artificial insemination, in vitro fertilization, and ovulation tests. The most quoted sources were politicians, doctors, and experts (among the latter, often academics like professors and Ph.D. students).

country like Italy than in liberal Norway, whose role in upholding women's right is celebrated internationally. In Norway there is even a term for the pressure towards motherhood. Toril Moi (2004) calls it the '*moderskapsmaset*'—the "motherhood harping." It refers to the continuous questioning by family members, friends, and often complete strangers—everybody has a right to a share of your family planning, it seems—once a young woman reaches a certain age (usually her early twenties) about when the first baby is planned for. This might be similar to what happens in other countries. However, in Italy, if a woman did not have a partner, or a house, or a job, I would expect that she would generally be seen like a responsible individual for not having a child. She would be "off the hook." In Norway, instead, the pressure is relentless: because extensive welfare and child support (e.g. kindergartens, subsidies) are available and one can, in principle, raise a child alone, women are (tacitly, of course—nobody really says that aloud) still expected to have a baby. A "popular" option is precisely, as in the story told by my friend, to travel abroad, usually to Denmark or Eastern Europe—I have heard Riga, in Latvia, mentioned several times—and, in case of no partner, getting pregnant through donated sperm. In Norway, practically, there are no "excuses."

Lack of time, deadlines, and love

Among the reasons why I would have liked to have had a child is the fact that, as I heard from many of my colleagues, childcare commitments make one's work schedule more organized and regular. 'I am more effective because I know I have to finish at a certain time. Once you are with your child you cannot think about work anymore. It's *their* time,' is what I remember being told by a colleague at Sandford shortly after returning to work following her maternity leave. I wonder whether my life, or even me as a person, would be more balanced if I had a child. Would there be more to my life than, as it is now, mostly work?

The result of being married to another academic is that there seems to be no moment when I am not working. There are three reasons for that. One is that I enjoy my job. The second is that, being the master of my own schedule, I can always adjust it. This tends to mean being able to dedicate more work to a task in order to make it perfect. As a Danish interviewee who shares this experience put it, '[w]e can always continue.' Most people would be content with completing an activity in a good-enough manner given-the-circumstances-and-the-time-available. Having a child, for the practical purposes of everyday schedules, imposes a time limit. Being childless, instead, gives me the opportunity, in the time available, to always go the extra mile. Not necessarily a negative thing, but a danger to my health when combined with the next point. The third reason why work expands to occupy most of my waking hours, which I had to dig from the unconscious layer of my brain, is that as a childless woman I feel a pressure to achieve, to demonstrate that, even if I am not a mother, I have not wasted my life. Collecting more conferences, invitations, publications is all part of a colossal compensation game I have been playing for years without even realizing it. This leads me to regularly overdoing it like, towards the end of 2016, travelling

to Estonia, Latvia, Sweden, the UK, and Canada—five countries, beyond taking part in several “home” events in Norway—in less than two months. I met wonderful people and contributed to stimulating events, like a UNESCO conference on The Internet and the Radicalization of Youth in Quebec City or the NATO Information and Communicators’ Conference (NICC) in Tallinn. At the end of it, though, I felt utterly drained. Why was I doing this to myself?

Undated, spring 2017, my diary

“Gravel”

Don’t ask me about the darkness,
or how I cope
with the cold.

What I struggle with
is gravel.

Gravel follows me indoor
uninvited;
its sound
grinds a perfectly bright morning
into memories
of a foreign cemetery.

Gravel, foliage, rain, and salt
walked on by pedestrians
mush foliage
into brown scrub
that covers thoughts,
files sharp edges.

Without frost,
gravel is irrational,
and destroys shoes
for no reason.

Gravel is the burden of normality,
one of those too many details
of the days-in-between,
when an emergency’s ended
and the next deadline’s too far.

Mental geographies that matter

30 May 2017, my diary

To what extent are you one of “us”? What defines my empathy to you, whether I am going to listen and respect what you are saying, at the end of the day, it’s the extent to which your story matches mine.

21 October 2017, my diary

Extremism is colour-blindness. It is the inability to see the shades of grey in between. When you call “bigots” the supporters of Donald Trump, you are an extremist, too.

An undrawn chart, now drawn

Humans relate to each other through shared experiences. That is why women of my age ask whether I have children, to try and weave the first few threads of a bond between two strangers, attempting to hit the largest target of commonality that appears foolproof to them: we are both women for sure over the age of 30, so we must both be mothers by this stage, should we not? I had never understood, when I was a teenager, why dating involved going with someone to the cinema. Nobody ever invited me, that is probably why I found the time to think about it. Doesn’t one want to talk to and find out about the other person? Why not go for a walk instead? What is the point of sitting for two hours in a crowded place pretending to stare at a screen?

I realize now, though, that it’s precisely having watched the same movie, having shared both a story and the emotions the moving images, sounds, and music have evoked, that is going to make it easier to start a conversation later. There is nothing wrong with the walk, but it is convenient to go to a place that serves you an already “packaged” experience, where no awkward negotiation, discussion of preferences, and decision-making about where to go and for how long need to be involved at all.

I have always thought that communication is what enables the establishing of common ground, but maybe we need a common platform, a shared experience, to be able to communicate in the first place. Sharing experience is also the base that supports the feeling of belonging to a group: a sense of nation fostered by reading the newspaper every morning; celebrating national day, and knowing that others are doing exactly the same at the same time; or watching the Danish–Swedish series *Bron/Broen* ([The bridge], 2011–2018).

The commonality of our experience affects the extent to which we will be able not only to communicate, but also to truly understand each other. And that will ultimately affect the level of trust and commitment to the other. Many childless women I have talked to have been to see therapists and psychologists to try to cope with the storm of emotions and sense that life was getting out of control that were brought about by infertility. They did so only to find out that, even if they were talking to other women—these therapists were *hearing* them—they could not at all

get what they were expressing because they were mothers. ‘They have no idea what we feel,’ my interlocutors told me. ‘And how are they supposed to help anyway, when they, like the majority, also think that a life without children is meaningless and less worthy?’ As another woman, who was in fact feeling sorry for the therapists, concluded: ‘What can they possibly tell us? They have no clue.’

It is after the Brexit referendum that I realize that, even if I am leaning on the left of the political spectrum and I am deeply upset about the “leave” result, I cannot stop myself admiring Theresa May, leader of the British Conservatives and UK prime minister. The single tripartite reason is that she is a strong, successful, and childless woman. The same can be said for German Chancellor Angela Merkel, and Nicola Sturgeon, Scottish prime minister. It does not matter what policies they implement. I just love these women for who they are. I see them as members of my tribe.

My childless status, on closer investigation, supports a whole hierarchy of positions that, to my surprise, I have reorganized society into without fully admitting it to my conscious self. It is a full geography of imagined friends and enemies: identities of individuals or groups I can rely on and I am willing to support; “others” I am suspicious towards and would avoid coming into contact with. “Women” is a particularly large and complex category that can be endlessly sliced into subgroups—so much for the “sisterhood.”

At the far end of the spectrum, in the “safety” area, is the zone that hosts the people with whom I feel I can talk about my experience without too much fear of being judged. They will most likely understand what I say without me having to explain at length (that is another obstacle to communication: knowing that one needs time to justify one’s feelings, actions, thoughts—it is just easier not to communicate at all). They are most of the infertile, particularly those suffering from unexplained infertility like me and my husband, those who have never been pregnant, perhaps women who were born with a disability that prevents them from having children. I feel particularly close also to men who are childless. Their gender, in this respect, is completely irrelevant. The childfree, those who have decided not to have children, might belong to this area, but it depends on their worldview. If they respect, as indeed all the childfree I have personally met, the fact that people take different choices in life and some might have, differently from them, liked to conceive, they are “friends.” If they loathe, as some online groups do, the childless, even when they remain without children, only for having attempted to become “breeders,” then they quickly slide to the other end of the spectrum—“enemies.”

All women who have been pregnant, even if they have never given birth or had a miscarriage, are in the “suspicion” grey zone. Some keep on referring to the time when they were pregnant. It is unpleasant to wander there in conversation because I am envious. I would rather not talk about it because I will never know what they refer to. I know I have told of how I had a positive pregnancy test, but the version of myself who is currently writing this has decided that it was not a real pregnancy: it does not count.

Next on the scale are women who have adopted or have become, as they call them here in Norway, *bonus mamma* or *bonus pappa* by acquiring the children

the partner had from a previous relationship. They might not be considered “real” mothers by those who have given birth to their own children, but from my perspective that is not so significant: they have one or more children now. They are in an ambivalent position that depends upon whether they remember what it felt like before they acquired those children.

There are exceptions, of course. Friend and documentary director Hilde Haug, who was pregnant three times but had miscarriages, is one of them. She has now a foster-son, three *bonus* children, and five *bonus* grandchildren. She is the closest person to me when it comes to talking about childlessness. She deeply wanted to have a child. I never really experienced that feeling, but the conversations we have had about our respective life journeys, together with the tears we have shed as well, fully compensate for that possible disharmony. We can thoroughly understand each other.

Women who have given birth belong to an entirely different category, one I feel I need to approach carefully. If they have themselves experienced problems in conceiving they get upgraded to the “safe” zone. However, if they have forgotten about them (most actually do), which means they would talk openly about their children without thinking they would have found this hurtful themselves, then they are downgraded to the “enemy” zone. I will return to this point. If a woman never had any problems of that kind (I could call her a “straight-away mother”), she is for all purposes of my comprehension on another planet. She could only be slightly closer if she had lost her children.

Of course most of my colleagues are mothers. Having worked with them and having, over time, revealed details about my experience has made them shift closer to me, particularly if they put forward their own identity as a person and a professional, not as a mother, when we are together.

The “enemy” zone is that of women who are currently pregnant. I do not even like seeing them. Pregnant women with a pram are worse than pregnant women on their own. Both are surpassed, on the negativity scale, by pregnant women with a baby in their arms. The closer they physically get, the worse it is. Baby cries or noises are also difficult to bear. A Swedish woman I interviewed shared, in this respect, an experience I can identify with. She told me she avoids places with children and does not like it when colleagues take their babies to work because she is particularly sensitive to the sounds they make, especially their ‘gurgling.’ As she put it: ‘I can’t focus,’ ‘It’s almost physical [...]. I can feel it in my body.’

Summer is a more difficult season than winter. Women in tight T-shirts with protruding basketball-like bellies seem to be everywhere, especially walking around Sognsvann on a Sunday afternoon. The area hosts a two-kilometre walk around a lake and can be easily reached by metro from the centre of Oslo. The terrain is flat and safe, the landscape pleasant with plenty of picnic spots. I bet most of these women, who all seem to be heavily pregnant and close to giving birth at the same time, have timed their pregnancy so that it would end in the summer or early autumn. Maybe I am wrong and there are as many pregnancies in winter, simply the heavier coats are more effective at hiding the abdominal curves.

This imagined chart I have described, which is so detailed in my mind I have even been able to draw it, is scaring me. It is not just some mind-game or fantasy. It affects in very practical terms who I want to spend my time with, whether I want to meet someone, whether I decide to look away when they are approaching, change my seat on the train, or cross the street in order not to walk beside them. And I am not the only one. As Johanne Sundby, a professor in women's health, reproduction, and infertility at the University of Oslo, tells me in an interview,⁴ it is relatively common for the Norwegian childless to escape the holidays that involve children, like the 17 May parade, on occasion, every year, of Constitution Day in Oslo, or Christmas. The 17 May celebrations involve musical bands of school children from all over the country marching across town and playing, eventually all parading, in an impressive organizational and coordination effort, in front of the balcony of the royal family palace in the city centre. In 2016, 60,000 children (119 schools), the highest number thus far, took part (Haugsvær 2016). To avoid this, both across the city streets and online, where the parade reverberates through countless images, videos, and on TV through wall-to-wall coverage of the day's celebrations, one can travel to the *hytta* outside town and plug off. One can also go on holiday to the *Syden* (the big, undefined, and warmer south) in December.

If I am invited to an event, one of the first thoughts in deciding whether to attend is assessing the presence of children: Will there be any? If so, how many, how close, and how noisy? Age is also a factor. As in the case of a Swedish woman I interviewed, I only have issues with babies and toddlers. Babies are painful to look at. Toddlers are embarrassing to interact with: I never know what to tell them. Teenagers and children who have grown up into adults are fine. At least we can have a normal conversation.

There are other people and groups on my scale. Allies and friends are outsiders, minorities of any kind, vulnerable groups: gays and lesbians, foreigners, Muslims in a Western country, the Sami here in Norway, the disabled, people affected by mental illnesses. My enemies are religious extremists of all sorts—they all tend to be pronatalists. Right-wing extremists, too. They, like the American Republicans, tend to want to return to a mythical past “golden age” where traditional (often religious-inspired) values mean women filling “traditional” (read “maternal”) roles.

If I heard that a white Western person moved to the other side of the street so as not to walk next to a black person, or a woman wearing a *burka*, I would be disgusted. I would say that this behaviour amounts to bigotry, unacceptable discrimination, a form of intolerable radicalism. Yet—it has already happened on several occasions—I have been doing exactly this in meeting a pregnant woman coming towards me on the pavement. I look away. I have before crossed the road. I cannot help it. In my own way, against my own beliefs, I have turned into an extremist.

4 Department of Community Medicine and Global Health, University of Oslo, 12 September 2017.

Unetiquette and the uncivilizing process

Not having children has consequences for the extent to which Robin and I observe the good manners we were taught by our parents, at least in private. Having children, in this respect, is a form of revision and relearning, I imagine: in order to teach rules and “proper” behaviour to a small child, one would have to make them again explicit in the form of instructions and provide a good example for the child to imitate. I remember, for instance, how I was taught that I should be folding the clothes I have been wearing during the day when I change into my pyjamas, or that I should not put my elbows on the table when I eat. My mum actually observed these rules (my dad not always, which led to him often being told off for it). Although I still perfectly know what the “appropriate” behaviour consists in, I also know that nobody is checking on me—Robin and I tend to tell each other ‘I am not your mother...’ So, most of the time, my clothes tend to land on the floor next to the bed and, if they are lucky, on a chair, if this is not already occupied by piles of books. I would not put my elbows on the table at a formal dinner of course, but that never happens at home. I have also noticed, while waiting for delayed flights at the airport, that I often tend to be the only woman my age who sits on the floor, cross-legged or leaning on a side wall, when all seats are taken: mothers do not sit on the concourse. They also tend not to drink from the bottle. Childlessness, in this sense, provides freedom from social norms, but it is also a slow uncivilizing process.

Planned unpoliteness

Because my world is organized differently than that of most, it also works according to different rules of appropriateness. I realize this when I tell Hilde she should come and film the Childless Day event that will take place in May 2017 in Stockholm. She is working on a documentary that explores involuntary childlessness through her own personal story. It is called *Mammaen i meg* [The mum in me] (forthcoming). I tell her about the gathering the previous year and the way it was organized. How the afternoon part of the event had been open to mothers bringing along their babies. The morning session, instead, had remained closed to children due to the sensitivity to their presence by some of the participants, me included. It is all perfectly normal to me. It makes sense. I ramble along and move on quickly to tell her about the presentations. Hilde interrupts me, though, to express her surprise. While she agrees that this arrangement is thoughtful, she also points out that anyone outside of “our” group would possibly find any “child ban” outrageous.

There are also activities considered polite by the rest of society from which I abstain. For example, I do not congratulate colleagues who announce they are pregnant. I would be lying if I told them that I am happy for them. If I was entirely honest, I would have to tell them that I am envious and I feel like the person having the baby has superpowers, the magic ability to give life, which I

do not seem to have. I momentarily hate them, in fact. How can I possibly be expected to express my good wishes?

The battle for public spaces and resentment

I read an article about the way in which immigration, inequality, economic decline, globalization, and ethnic conflict combine in France to produce social fragmentation and the rise of populist parties (Caldwell 2017). An important component of the dynamics that underpin the tensions described are the daily battles over public spaces, fought through actions that would, at first sight, appear harmless. One of them is referred to as the “battle of the eyes”: ‘fought in the lobbies of apartment buildings across France every day, in which one person or the other—the ethnic Frenchman or the immigrant’s son—will drop his [*sic*] gaze to the floor first’ (Christophe Guilluy, in Caldwell 2017).

As a childless individual, I am also engaged in a battle for public spaces: a site of contention that might sound surprising is the occupancy of tables and benches in the woods and around lakes here in Oslo. On a warm and sunny Sunday close to the time of writing, Robin and I went on an excursion to Sognsvann. We had been sitting, eating our packed lunch, at a table with benches at the extremity of a wooden pier. We had just finished our sandwiches and were thinking about continuing the walk when a couple with two children simply barged in and sat at the table. We were about to go anyway, we thought, and left. These tables and benches do belong to all. We would have happily shared the space, of course. But why not ask if it was all right to sit with us? What we found offensive was that the family would not have been able to tell from our body language that we were planning to leave—we still had water bottles and a lunch box with more food in it on the table. Why had they assumed that they somehow had *a right* to that space?⁵

Two weeks later, on another Sunday walk, we stop at a table near Bântjern to have some coffee we have brought in our thermoses and chocolate biscuits. A couple with four children approaches. We are not occupying the whole table, we are sitting facing each other, on the side. Although the family could come and use the table if they wanted it, I whisper to Robin: ‘I am wondering whether we should move.’ ‘Me, too,’ he talks under his breath back to me. But neither of us

5 British journalist, writer, and broadcaster Bibi Lynch also describes confrontations with parents in public spaces: ‘Mothers are treated as superior citizens. Pavements and public transport become yours (I was once asked to get off a bus so a woman with a pram could get on, but let’s not reenact that ugly scene here)’ (Lynch 2012); in a different piece (Lynch 2016) she tells of another episode:

Let me tell you about the woman who hysterically told me to give up my reserved seat on a train—four seats around a table—so she could sit there with her family. ‘I have children!,’ she yelled. So loud, it was as if she was giving birth to them all over again. Well if you care about your family so much, love, why not reserve your own seats? I offered her the three empty spaces but that wasn’t enough.

budges. I feel sorry for this couple, who knows nothing about our previous experience, the meeting with the other unpolite family, yet who are bearing the consequences of that encounter. But we were here first. They are not going to get priority only because they have children.

Intimacy and life-saving decisions

Statistics, statistics

Infertility is a life-changing car crash. Many couples ultimately cannot make it alive out of it. The figures of the statistics do not convey what goes on behind closed doors, drawn curtains, and under the bedsheets.

Newspaper headlines seem to swing between ‘Failed fertility treatment TRIPLES the risk of divorce’ (Innes 2014) and ‘Fertility treatment does not increase the risk of divorce’ (European Society of Human Reproduction and Embryology 2017). Just like the opposing arguments in the climate change debate, however, one of the positions is a rhetorical concoction of positive turns of phrases—like a cloud of candy floss that appears to have solid volume but is, at a closer look, only made up of thin strings of spun crystallized sugar on air. The study of the second headline only refers to the fact that ‘*fertility treatment* does not increase the rate of divorce.’ At the same time it reveals that ‘the risk of break-up is mainly influenced by *childlessness*.’ Are those affected by break-up, presumably, the couples whose IVF treatment did not work? The article does not explain that. In addition, the text suggests that ‘the results of the study were not incompatible with what is so far known about the stress and anxiety caused by infertility and its treatment’: ‘We have previously found that subjects who divorce, re-partner and come back to treatment are the ones that five years before had the most stress.’

Whether a couple technically divorces or not, there is no doubt that infertility places an often unbearable strain on relationships. This most times comes from the partners being in different mental places, trying to pursue different goals.⁶

A researcher I know, who now has a child, did leave a partner with whom she had a nine-year relationship because she wanted to have a child and he could not. Despite the fact that he may have attempted to undergo a medical procedure to make it possible, he did not want to try. She told me the story on two occasions. Even if she is happily married with another person and is now a mother, in both circumstances she could not hold back her tears. They appeared so sud-

⁶ Judith Daniluk (2001: 447-448), who analyses the consequences of failed fertility treatments on couples over the three years following the procedures, concludes:

Although the experience of infertility may serve to strengthen some relationships, the findings of this study indicated that being faced with the finality of their infertility may well be a critical juncture in a couple’s relationship. This seems to be particularly the case when couples are unable to envision a life without their own biological children or when they are divided on the issue of pursuing other parenting options.

denly in her eyes, like a liquid hiccup, when merely an instant earlier she was smiling, pushed to the surface by just having brushed momentarily, through a wandering thought, a period of her life whose pain, clearly, is still raw.

Sex

Early on in the process of trying to conceive, Robin and I sensed that our relationship was under attack. We never explicitly talked about it or even identified it as a problem. We just acted in unison, as if we were a single body, a snail retreating slowly, but with the sense of purpose of its all-muscular foot, inside the shell into self-defence mode. Apart from the pressures of IVF, with its uncertainty, hormonal injections, constraints on timetable that lead to a sense that life is on hold, in a limbo, another main source of potential danger was sex. The doctors at the clinic said we needed to have intercourse at least three times a week, practically every other day. We did our best for a couple of weeks, then our bodies told us that this was not sustainable without serious damage to our bond as a couple.

Books on how to conceive are full of silly acronyms and baby talk—like AF (‘Aunt Flo[w], your period’), 2WW (‘Two-Week Wait,’ not Second World War, as I tend to read it), FTTA (‘Fertile Thoughts To All’), FMU (‘First Morning Urine’) (Murkoff and Mazel 2009: 254). I know of DH (Dear Husband), too. I cannot remember where I saw it first, but it is everywhere on the internet.⁷ Sex is referred to as ‘Baby Dance’ (BD). It is supposed to convey the idea of having fun while trying to make your “baby dream” come true. Or maybe it is meant to sweeten the ordeal of having to subject yourself to sex on demand: like an unpaid whore or a masochistic rape collector. Unless pregnancy materializes, in fact, the “fun” of the whole experience is soon replaced by exhaustion and a sense of dread. It is possible to find online, on discussion fora like “Baby and Bump” or “Baby Centre Community,” several postings related to TTC fatigue (that’s “trying to conceive,” by the way)—try Googling “tired of ttc.” Although these comments are always almost apologetic—because what is not justified in order to have a baby? Should this not be one of the best times of a woman’s life? Isn’t complaining an admission of giving up when one should never let go of hope?—they reveal the physical and psychological pressure of being continuously confronted with failure:⁸

These last weeks, as I’ve realized we are embarking on month 9, I’ve become very tired of TTC. The charts, taking temperature, pee sticks [pregnancy tests], downstairs shouting of “honey, it’s time!”, not to mention the pokes of needles for hormone testing twice a month. My poor veins can’t take much more!

7 See also Fertility Friend (2018).

8 I have slightly paraphrased the quotes presented here, while keeping the original meaning and tone, for copyright reasons, but you can access the original texts by following the links provided in the references.

I am so exhausted I am at the point of breaking down. Going to sleep knowing I have to begin the whole process again in the morning just makes me sick. Just touching those feelings by writing them down now has me in tears. I am so tired of TTC!

(“Pseudopal” 2011)

I thought this was the month. I did everything right. Got a positive OPK [Ovulation Predictor Kit result], had fertile CM [Cervical Mucus], BD [Baby Danced] at the right times ... but AF [Aunt Flo] showed her ugly face, 15 DPO [Days Past Ovulation]. I’ve been off BC [Birth Control pill] for the past two and a half years, and I feel like I’ll never get pregnant. I am SICK of getting depressed every month because my body tricks me into thinking I COULD be pregnant and then AF turns up at the very last moment.

I’m sick of false hopes. I’m sick of seeing everyone else get pregnant except me, watching them go through their happy journeys, while I am always on this neverending treadmill of TTC, trying to interpret the smallest symptom. I’m sick of OPKs. I’m SICK of thinking about CM and my LP [Lutheal Phase].

No offense ladies, but I am SICK of being stuck to this TTC board and never moving on. I feel like it’s never going to happen, and I just want to give up. Perhaps I’m just not meant to be a mother :-(Sorry to to depress you, I had to vent.

(“Goofy2685” 2010)

Compare these threads to what the book *What to expect before you are expecting* (Murkoff and Mazel 2009; I bought my copy in 2010)⁹ recommends, among many other tips administered in the same tone, in relation to coping with the process:

So you, at times, may be feeling like a sperm receptacle, which is understandable. But keep in mind that he might be feeling like nothing more than a sperm provider, which is also understandable. Remember, too, that he’s the one who’s under all that performance pressure, to rise to the occasion at the beep of a fertility monitor. So make sure you let him know how much you love him and appreciate him (and find him studlike when he is not

⁹ In leafing through it I find a print-out about “Childcare and schooling” at the University of Leeds dated 20 September 2010. The reminder that I was already planning where our child would go to kindergarten, on the unquestioned assumption that getting pregnant would happen as soon as we stopped using contraception, hurts and makes me feel ashamed. Writing this on 12 September 2018, almost exactly eight years later, brings also into sharp relief how much my life and my self have changed since then.

performing those services, also), even as you're asking him to hop-to and hop into bed for yet another round of fertilize-my-egg.

(Murkoff and Mazel 2009: 114–115)

Robin and I hated the idea of scheduling what we believed had to come from spontaneous desire. I found it humiliating and degrading. What should have been in my mind an expression of our *love* was being turned into a mechanical procreation-oriented activity. An image that kept coming back to me at that time was from a movie whose title I still cannot remember: a king and a queen in the middle ages, having intercourse in the middle of the court hall, surrounded by aides, a white sheet with a hole between them. I felt like a cow on an assembly line that needed to be impregnated by another member of the species (To do what? To provide more food for the shelves of society's supermarket, to continue with the metaphor?). It was like the features of my partner I so deeply appreciated—this was the man I wanted to spend the rest of my life with and I had pledged to respect and be faithful to in the presence of witnesses, for God's sake!—were being erased. He was turned into an anonymous sperm-making machine. I was starting to feel resentment for him. He could have been almost anyone. And while I write this I realize that perhaps, in these circumstances, having a night out with a stranger for the purpose of getting fertilized is not such a crazy thought after all.

This might well be the reason why we, ultimately, do not have a child. We just kept on *making love*—not having sex—when we felt like it. Perhaps we should have tried harder. Maybe we were not tough enough. I am absolutely sure, though, that if we had been, we might have a different relationship altogether now, perhaps none at all. And there is no guarantee we would have conceived a child either.

In an article about the repercussions of failed IVF treatment 20 years on, I read the results of a study that involved in-depth interviews with 14 Swedish women (Wirtberg *et al.* 2007). The study investigated the long-term psychological effects and repercussions of not being able to conceive upon the women's relationships. The participants were selected from a larger pool of women who underwent treatment unsuccessfully: differently from the others, who acquired children through other means, like adoption or via a new relationship, these women had remained childless throughout their life. The experiences they shared, as the authors of the article underline, although unique in their specificity to each of them, are presented as 'typical for many people in similar circumstances' (*ibid.*: 599).¹⁰ Failed IVF, the

10 Daniluk (2001: 445), in another study that investigates how 37 couples come to terms with their childless condition, finds that

[m]ost couples talked openly about their struggles to recapture some of the pleasure and joy that had been a part of their intimate lives prior to having their sexual life and their body subjected to the scrutiny of medical examination and prior to the invasiveness of medical fertility treatments. Couples lamented the time in their life when the purpose of sex was 'mutual pleasure and intimacy' rather than being associated with a 'failure' to conceive. As one man said, 'charting sex destroyed a part of our relationship that I cherished and enjoyed.'

findings show, affected all aspects of their lives, including leading to a low sense of self-esteem and a feeling of inferiority to other women. Sex was one of the worst affected areas. Not only, to show the devastating effect infertility has on relationships, half of the women who participated in the study were separated at the time of the interview, but ‘in all but one [of them], sexual life was affected in negative and long-lasting ways.’ I am struck by this paragraph (ibid.: 598):

As many as nine women [out of 14] reported that both their sexual life and their sexual desire were lost for ever. For some, this was a source of concern, but others seemed to have accepted that that part of their life was lost. ‘I understand afterwards that this is something one has to be very careful with’, said one woman. ‘The enjoyment just ebbed away’, said another. This last comment is representative of many of the comments made during the interviews. However, four women said that they had regained their sexual desire again: two with new spouses and two with the same spouse. A majority of the women ($n = 11$) expressed—in looking back at this part of life—a desire that counselling should have been offered around this.

I can imagine how the continuous association of feelings of failure and desperation to intercourse over the (presumably) long period of time these women tried to conceive did, effectively, re-programme their bodies, through a Pavlovian-response mechanism, to experience negative emotions rather than pleasure during intercourse.

It does look as though Robin and I, by placing our relationship before a phantom baby, without fully realizing it, took the course of action that saved our sex life.

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Folder 3

Identity

10 April 2015, my diary. Women without children

They end up in space—together with the rubbish left by male explorers, forever orbiting in a loop. Neither stars studding the firmament, nor mortals. Invisible, unusable, irrelevant additions to the timeless frozen limbo of rocks and comet dust.

Who or what am I? Am I still a woman, when all women seem to have children and I don't? When the full blooming of femininity is supposed to be becoming a mother? Not having children has led me to redefine the relationship between myself and my body, as if we had to sign a new contract about our living together or, using a military term, had to establish new “rules of engagement.”

In this folder I have collected materials on my mental states. In Folder 4 I will zoom in on the materiality of the body. I do so for order's sake, but it is important to understand that mind and body are inseparable. My body is not a machine, it is not the temple of my soul. I *am* my body. If my body is hurt, malfunctions, or does not perform as expected my ego gets bruised.¹

My mental states, in addition to this, do not exist as a result of thoughts that only circulate inside my head. I am also what I do, my job. I am the result of continuous interactions with other people and my environment (buildings, objects, nature, what I eat). My self is shaped by the books I am reading, by the Oslo snow gently falling on my face, by crossing the empty playground on my way back from a run, by the many mothers and children that walk back and forth from kindergarten and who use the path just opposite my office window.

My first year in Oslo: fragments of everyday trench war

‘Moving to Norway has been the best decision ever—after marrying Robin, of course!’ has become my standard answer to friends who know us both and ask how life is in our new country. I am honest. *Jeg trives godt*—I am happy here.

¹ On identity as an ‘embodied event’ see Budgeon (2003).

Yet, looking back at the period following my arrival in Norway—autumn 2015 until summer 2016—I can see a parallel story emerging. Piecing together the fragments of everyday life recorded on the pages of my diary, its notes and poems, my past Facebook posts, shopping receipts, academic calendar appointments, lines from my CV, records of visits to multiple physiotherapists in the attempt to deal with an inexplicable hip pain, consultations with general practitioners, and, eventually, three meetings with a psychologist tell another, less public tale.

The sequence of fragments (here you only inevitably see an edited version of all my commitments) reveals the contrast between the veneer of an efficient jet-setting professor and the woman behind it who, despite her struggle to keep herself afloat, is gradually sinking into deeper and darker waters. In between interviews with diplomats and journalists in Oslo—part of a project aimed at mapping the information ecology in the Norwegian capital—are also conversations and interviews with childless women. These fragments also narrate the story, between the lines, of how I became involved with childlessness as a research topic and how the idea of using creative writing and autoethnography came into my view.

4 September 2015, Outlook calendar

Meeting with Tanja Storsul, my head of department.

We discuss about my application for the promotion to Professorship, as well as teaching and research.

CV

Invited lecturer to the Strategic Communications training event for Senior Officials, “Changes in the Information Environment and Their Impact on Governance,” NATO Stratcom COE (Centre of Excellence), Riga, 23 October 2015.

22 October 2015, my diary. Riga

“Stories between autumn and winter I”

In the October darkness
 the cats of Oslo
 sneak out
 to shake the autumn trees.
 Their fur invisible
 under the night sky
 they collect leaves:
 birches’ golden coins,
parthenocissus tricuspidata blood,

half-moons from the rare maidenhair tree.
On the Akerselva²
they let them swirl and float,
before the waters freeze,
while you're asleep.

“Stories between autumn and winter II”

The golden peacocks of Riga,³
laugh above the fog.
They climb on spires,
balance on rooftops,
shine on to the present
from the past.

The golden peacocks of Riga
greet foreigners
beyond the waves,
guard the walls
of a small nation
from between the clouds.

The golden peacocks of Riga
some days don't care
and feel slightly sad
but from the cobblestoned alleys
no one can tell.

(later that day)

When I switch off the light to sleep, I hear an avalanche of fast words coming from the pillow. Their soft rustling turns into half words, whispered and distinguishable, yet never complete because each of them is continuously overtaken by the next, in an endless and uncontrollable rolling sequence. What are they saying? I have the impression that my brain knows, as when I listen to the conversations in Norwegian. I learn even when I am not aware of it. But what am I learning? Where does this murmur come from? What is my mind up to?

2 Oslo's river.

3 I am talking about the golden wind vanes.

28 October 2015, my diary. Physiotherapy near Ullevål Stadium II

The pain always slightly improves before I go to the visit, for worsening later. I do not really see any improvement.

(later that day)

Not feeling productive. Getting bored. I am a cat who needs another string to play with.

31 October 2015, my diary. The dream of the oranges

In my dream there is a thread in my mouth. I try to pull it out. I instantly recognize it: the red plastic thread that is woven to make orange nets. I understand I have swallowed a whole net, like a stranded dolphin that lost its orientation for having eaten too many plastic bags. I pull the thread and more comes out of my mouth. I can't get the whole net out at once. I need to undo it slowly, by pulling the wire little by little. The wire, though, has started cutting into the inside of my throat. There is blood coming out of my mouth. I cut the wire and decide I will try again later. This is going to require a really long time. And it is going to hurt.

1 November 2015, my diary

“Stories between autumn and winter III”

The air is windless
yet leaves wave,
frantically,
begging for help
from flaming trees.
Their silent screams
fill my ears
while they fall—
the real half-dead of Halloween,
fleeing refugees
who cannot be helped.

CV

Invited lecturer and developer of training course “Media and Communication in Countering Violent Extremism” offered by the United States Institute for Peace (USIP) and the Hedayah Centre, Nairobi (Kenya), 3–5 November 2015.

E-receipt

Before leaving, I take with me, on my Kobo e-reader, a new book by Svetlana Aleksijevitsj, *Krigen har intet kvinnelig ansikt* [The unwomanly face of war] (2014). I bought it following a recommendation by my colleague Espen Ytreberg. He is writing a novel about the explorer Roald Amundsen (Ytreberg 2016). I am inspired to hear this and tell him that I would like to use more creative writing in my research. I have interview material. But what can I do with it? ‘Svetlana Aleksijevitsj,’ he says. ‘Have a look at her books.’

This book is about telling the story of the Second World War from the perspective of the Soviet women who fought it. The narrative emerges from the interwoven canvas of hundreds of interviews. It hits me like a truck.

When women tell [their story about war], they tell nothing, or nearly nothing, of what we are used to read and hear: how some people courageously killed others and won. Or lost. How the technical equipment was, or how the generals were. The women’s stories are different and about something else. “The women’s war” has its own colours, its own lights and its own spectrum of feelings. Its own words. There are no heroes or incredible victories, there are simply people who are busy doing inhumanly human things. And it is not only themselves (the people!) who suffer, but also the earth, the birds, and the trees. Everything that lives together with us on the earth. They suffer without making a sound, which is even worse.

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		Totalsum			kr 169,-	
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Figure 2.3.1 E-receipt.

“But why?” I have asked myself time and time again. “Why, having stood up for and held their own place in a once absolutely male world, have women not stood up for their history? Their words and feelings?” They have not had confidence in themselves. A whole world is hidden from us. Their war remains unknown. Their war has been lost ... I want to write the history of that war. A women’s history.

I want to write a women’s history, too. It also relates to a war, just a less visible one.

2 November 2015, my diary

“The porcelain traveller”

This time of the year
is an echo chamber,
an empty fridge
of amplified emotions.

I walk
with a coat,
without skin,
through the airport,
like an exposed nerve,
holding myself
tight together.†

Don’t read too many pages
about Soviet girls
fighting on the frontline
of WWII
at once.
Remember
the evening clouds,
watched for too long,
can be painful.

Be careful selecting
your in-flight entertainment.
Avoid for now
disaster movies.
Eros Ramazzotti,
the only Italian artist

on the albums' list,
damages your health.

A documentary
on the construction
of a 160m skyscraper
leaning five times more
than the tower of Pisa,
18° to the West,
barely passes the test.

†(Of course I can rebuild myself
if I fall apart,
but at this time of the year,
what would I turn into?)

CV

Invited expert to Lessons Learned workshop on “Terrorism and Media,”
NATO Centre of Excellence (Defence Against Terrorism), Ankara
(Turkey), 10–11 December 2015.

14 December 2015, Outlook calendar

Interview with diplomat at Pakistani embassy

18 December 2015, Outlook calendar

Interview with diplomat at Greek embassy

19 December 2015, Outlook calendar

Interview with *Deutsche Welle* [(Knigge 2015)].

22 December 2015, Facebook updates

Journalism Studies (n.d.) shares my article on the use of poetry in research
on journalism:

Here's a real treat for everyone. Cristina Archetti's fascinating and
engaging article on journalism and poetry which is published online
on *Journalism Studies*.

Journalism, practice and ... poetry: Or the unexpected effects of crea-
tive writing on journalism research [(Archetti 2015)].

It feels like they are talking about somebody else.

31 December 2015, my Facebook timeline. Time for questions

A few months ago, I think, I can't exactly remember where, probably in one of those inspirational quotes that circulate on Facebook, I read that sometimes what looks like a great work ethics is in fact lack of self-respect. This sentence made a strong impression on me. I have been seeing it since every day across my mind, flying in slow motion and in capital letters above the chatter and the lists of things to remember, like those advertising messages that used to be dragged by one-seat planes along the summer skies of many years past.

This is going to be the year when I am important. When I will go to work early and leave early because I have to collect myself from the office. A year of lightheartedness, of it's-not-the-end-of-the-world and nobody-has-died. Of playfulness, it-does-not-need-to-be-perfect, and tomorrow-it's-another-day.

In 2016 I am going to act more like a man, not having to justify my choices, saying no, just because. This year, finally, my brain will get that expectations are only ghosts of thoughts in other people's heads, whose existence I have no evidence for.

This is going to be the year of questioning: What is success? What is happiness? Why should I not eat a cheese sandwich? What am I doing? Why am I doing it? The year of what-if? Why am I spending an hour in a spinning class if I don't like cycling? Why am I replying to this email? Of less daydreaming and more daydoing.

I am going to be selfish, mildly unpolite (which you can actually get away with when you are a foreigner because others assume it's "a cultural difference"), occasionally irrational. And greedy. For time, for vanilla yogurt even if it contains sugar, and gorgonzola despite the salt, for obsessively following the journey of single snowflakes while they fall even if this activity has no obvious "productive" implication, for squeezing every minute out of the day to do what helps me survive, or just feel slightly better. Because nobody gives you a prize for not consuming more than 3 teabags a day and when the answer to the question "what do you love doing?" is "creative writing," then there's no point in pretending there's more important work to do (important for whom?).

In short, this is going to be the first year of fuck-it: if-not-now-when?

18 January 2016, my diary

I meet Anne Hege Simonsen, an Associate Professor at Oslo and Akershus University College. We are examining together a set of Master level student assignments from my department. I tell her about my research interest in childlessness and she puts me in touch with Hilde Haug, a friend of hers who is working on a documentary on this topic based on her personal story.

28 January 2016, my diary. Physiotherapy at the gym I

I want a second opinion about the problem with my leg pain.

8 February 2016, my diary. Physiotherapy at the gym II

The therapist is convinced the pain can be managed by strengthening the glutei, abs, and back. She gives me exercises I can add to my collection.

12 February 2016, my diary

Promoted to Professor!

18 February 2016, Outlook calendar

Interview with the editor of *The Scandinavian Page*.

25 February 2016, Outlook calendar

Interview with Robin Hadley, who has written his Ph.D. on male childlessness.

26 February 2016, my diary

I am not able to deal with uncertainty. I can never fully know the consequences of my choices. What if I take the wrong turn? I am caught in a precarious balance of bets and a sense of guilt.

15 March 2016, 15.20, my diary. Depression?

I feel so upset that I start crying before I have finished explaining why I am here. The doctor, a young blonde woman, runs me through the depression test and concludes I am depressed. She is most interested in whether I want to commit suicide. I think, ‘come on, my mum would kill me if I did that.’ She hands me a referral letter to a psychologist. When I leave I am so distressed I do not stop at the machine by the entrance to pay for my visit. In Norway I can get free health care only after having spent, within a year, at least 2,185 kroner [225 euro or 256 dollars]. So two days afterwards I get a letter telling me I have to pay 50 kroner fine.

(later that night)

I am tired of crying in front of strangers.

CV

Invited lecturer to the Strategic Communications training event for the representation of the European Commission in Latvia, “Changes in the Information Environment and Their Impact on Governance,” NATO Stratcom COE (Centre of Excellence), Riga, 5 April 2016.

6 April 2016, my diary. Seeing a doctor at the University Health Centre

I tell my new doctor (I never want to see again the blonde woman who diagnosed me with depression) about my hip pain. Physiotherapy is not working. I want to investigate the problem further. She refers me for a MRI scan.

14 April 2016, Outlook calendar

Interview with Linda Malm, blogger and founder of Swedish Facebook group “The other side of the threshold.”

14 April 2016, my diary

Linda Malm has invited me to tell my story at an upcoming Childless Day event in Stockholm. I said yes!

12 May 2016, Outlook calendar

Interview with childless informant Iara.

CV

Invited keynote speaker, “Invisible Women: Where Have All the Childless Gone?,” *Myter och sanningar om fertilitet—En temadag om ofrivillig barnlöshet* [Myths and truths about fertility—A day on involuntary childlessness], Stockholm, 28 May 2016.

30 May 2016, my diary. Seeing a psychologist at the University clinic II

‘Do you know what the life of parents is like? Do you know any parents?’, the psychologist asks me, his notebook open in front of him, making me feel like I am having a supervision session and I need to think more thoroughly about whether my theoretical framework is appropriate. I don’t.

‘Has any member of your family actually told you that they would like you to have a baby? Do they want to be “saved” by you?’ I shake my head, my mouth in a straight horizontal line. ‘How do you know then?’ An elementary epistemological problem. I would spot it in no time if this was a research project presented to me by a student. Yet, because it is my lived life, I could not see it before it was pointed out by somebody else.

I agree with him that I need to talk to my family and be open with them about my sense of guilt. The feelings that interfere with my well-being, I can see it now, are based on a whole system of assumptions I make about what “others” think and what a life with children I know absolutely nothing about could be like. Where do they come from? Overheard conversations? Movies?

I assure my therapist that I will talk to my parents and siblings during an upcoming trip to Italy, in less than three weeks.

(later that day)

I do not cry because I cannot have a baby. I am crying because of the constant struggle between me wanting to be happy and getting on with my life and the whole reality and the voice in my head telling me that I am wrong.⁴

31 May 2016, Facebook updates

“Gateway Women (UK)” (n.d.) shares: ‘569 Childless & Childfree women role models with photos and mini-bios. You have more sisters than you realised!’ (Gateway Women n.d.)

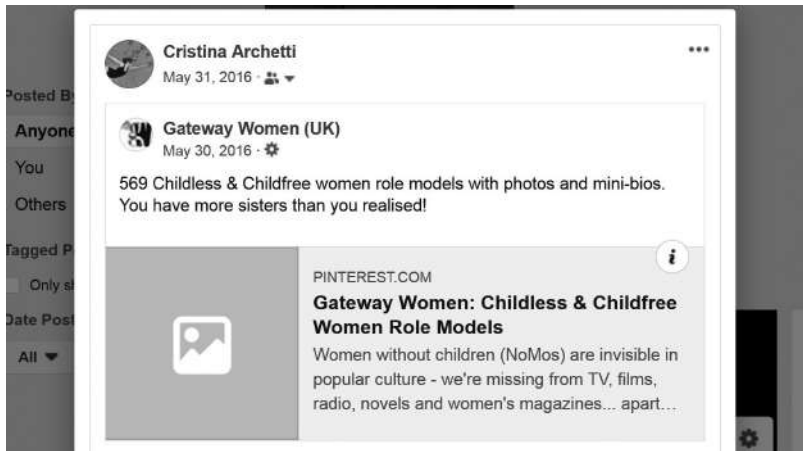


Figure 2.3.2 Childless and childfree role models.

Source: Gateway Women UK (n.d.).

4 In the transcript of my interview with Linda Malm (14 April 2016), I find my own statement on this point:

I realize that even the sorrow [about being childless] is really related to social expectations ... because somehow I've been told since I was a child that ... somehow ... there is this idea that to be a complete woman you need to have a child. So, in a way, I know that I'm worthy, but then there is this kind of voice in the back of the mind that tells you 'No, you're not. No, you're not.' It's a kind of constant struggle between the two voices, at least that's for me and I'm really, I'm working on it, to try and say 'this is all rubbish that other people have made up. This is not who I am. It does not say anything about me.'

6 June 2016, Outlook calendar

Interview with childless informant Elin.

8 June 2016, Outlook calendar

Interview with childless informant Anne.

14–15 June 2016, Outlook calendar

Trip to The Hague (Netherlands) to develop a Horizon2020 application with C-Rex (Centre for Research on Extremism, University of Oslo).

24 June 2016, my Facebook timeline. Brexit

[“feeling incomplete” emoji] The end of Great Britain. What a sad day.

28 June 2016, my Facebook timeline

Apologies for the drama. Between Brexit and selling the house in the UK, it is an overwhelming moment.

“Farewell II”

Moving is forgetting.

You want your country back, Brexiters.

I do not have one.

You have a past,

I have lost it along the way,
dismembered into all the objects
that from flat to flat

I could not fit into my suitcase.

I’ve had a hundred referenda,

“take” or “leave”

at every station.

Learning to weigh memory
against baggage allowance
has made me into an executioner
without remorse.

Still can’t abandon
these few unmatching knives and forks

I met years ago
perhaps at the back of a drawer
in a communal kitchen
or a charity shop.

God knows where they came from,
redundant fragments of someone else's life
on a journey of their own.
We have too much in common,
my fellow metal travellers.

29 June 2016, Outlook calendar

Flight back to Oslo.

14 July 2016, Outlook calendar

Interview with childless informant Grazia.

20 July 2016, my diary

Move from our temporary accommodation in the university researchers' flat to our new rented place in Skådalsveien.



Figure 2.3.3 Fellow (metal) travel companions.

Self-respect and getting an academic coach

One of the problems I have been facing over the past year (autumn 2016 to autumn 2017), I tell my new head of department Arne Krumsvik during my *samarbeider-samtale*, has been living what I call the “schizophrenic life.” I am constantly running around, moving from one commitment, presentation, international trip to the next—one day presenting about terrorism, the next about childlessness, then teaching about journalism. But I never seem to have the time to sit down and write my new and fantastic ideas, so I do not feel I am making as much progress with publications as I would like to. I always thought having many research interests helped me to be more creative and innovative—that has definitely been the case so far—but this is getting completely out of hand. Because I have been active in different fields for quite some time now, I have developed a range of contacts in each of them. I keep on receiving requests, invitations, from all. I do not seem to be able to say “no.” I have some kind of “fear of missing out.” All these activities are incredibly rewarding, especially those outside academia, but they are also paralyzing me and affecting my productivity. I feel like I keep on starting new things, but never have the time to finish them. At the same time I walk around feeling guilty that I am letting everyone else around me down. Whenever a focus on a topic I feel I am not delivering on the others,’ I tell him almost in one breath.

I have not even mentioned that, apart from my interest in media and childlessness (one could categorize it as “communication and health”), political communication, international journalism, extremism, I have recently collaborated with a colleague in analysing the historical newspaper coverage of the crash of the airship *Italia* in the Arctic on its way back from the North Pole in 1928—“media and polar exploration”? I am constantly learning, which to me feels almost like a drug. I can see how my reflections on childlessness and about the way I relate to “my” group versus the “others” can be further applied to explaining why and how society is becoming increasingly polarized: this is neither the result of political ideologies only, like extremism or populism, nor technology—think about the “information bubbles” that are said to be created by online algorithms that allegedly present us, on our Facebook feed, for instance, with information that always fits our pre-existing view of the world, making us more and more entrenched in our positions. Political ideologies and technology barely amplify what, in reality, starts as a divergence in the very way we conduct our everyday lives, with their different logistics, distinct spaces, increasingly less overlapping networks of relationships and information sources. I found the study of the historical coverage of the *Italia* enlightening when it comes to realizing that “fake news” is not a new phenomenon at all and journalistic reporting was practically as fast 100 years ago as it is in the age of social media.

Arne suggests that the support of a professional coach could help. The department is going to arrange it for me. That’s how I meet Synnøve, my personal academic coach.

‘What do you think is the issue you need to get to grips with, from our conversation so far?’ she asks, looking at me in the eye and tilting slightly—almost coquettishly—her head. I admire this perfectly balanced combination of matter-of-fact yet empathetic and understanding body language: serious in the posture, squarely confronting me, but with a grain of playfulness in her arched mouth that does not quite make a smile, but suggests that there is no wrong answer to this question.

We have been talking for one-and-a-half hours, Synnøve directing targeted questions, me reflecting on my experience, providing details and information with the purpose of identifying the ‘bottlenecks’ in my ‘working flow.’ We are in downtown Oslo, in a neat, almost antiseptic meeting room of a consulting company that provides support services to the University of Oslo, with a large table and a white board that almost covers the entire wall in front of me. I look at the charts on the board and realize that they not only map my working practices. They are also the representation of *me*. My well-being is there, too. *I am what I do*.

There is a chart on the right-hand corner that shows the area of ‘*mestrings-felt*—mastering of one’s activity,’ where we feel self-confident and most satisfied with what we do. The ‘*trives* area,’ I thought while she was explaining this. The mastering of one’s activity is related to the sense of enjoyment of one’s work, where one feels on top of the tasks at hand. This area is affected by both work demands (left axis) and the way we work (work methods and habits, right axis). When dealing with additional demands, as in my case, which place pressure on the confidence zone, then the way of working needs to change.

It makes so much sense. But what is it, really, that is threatening my confidence zone? Is it the many demands only? It is not just my working life that feels out of control. I realize that Synnøve is still looking at me, patiently waiting for my answer.

‘Being disciplined with myself and my time,’ I say hurriedly, trying to fill the silence and convince myself that scheduling writing time is the key to unblocking my cycle of eternal derailment. While I am saying the words, though, they just sound hollow, as if deep inside myself I knew that this is the wrong answer.

‘Hmmm,’ she nods affirmatively, ‘*and* you need to respect yourself and take yourself seriously, too.’

Although this is about making my work more effective, I feel a sense of *déjà vu*. It is like being back with the psychologist. The reason is that the source of the problem is always the same. And even if this is about the small details of how I organize my working day, childlessness still lingers in the picture, like the wallpaper that one does not notice but which covers the entire background.

One of the consequences that not having children has is to make one believe that, just as one cannot perform as basic a function of life as conceiving, one cannot perform other tasks either. You might think it’s an exaggeration, but having or not having children is *de facto* a proxy for skills. Why would CEOs put on their CVs how many children they have? It has no direct relevance to their ability to manage a company, especially because the raising and education

of their offspring is most probably delegated to paid others. I have felt uncomfortable at disclosing my childless status in the work environment and, after much reflection about why that was, I have concluded that it is because it diminishes me: I would look less capable, perhaps even less trustworthy and reliable.

Infertility, in other words, expands and envelops one's entire life. Infertility is the added pressure from the left axis. Childlessness sends me a message: you are faulty, you are broken, you are not able. I can see how I have started doubting myself and I am trying to keep myself mindlessly busy to prevent myself from even thinking about it. Or perhaps I am trying to prevent myself from actually doing anything significant so that I cannot be disappointed when I see that I cannot do it.

Synnøve is right: I truly have no respect for myself. I do not really think of me as worthy of taking a rest, of deserving anything outside work. She asked me earlier what kind of treats I give myself when I achieve a target. 'Treats,' I repeated cautiously, as if I attempted to taste an unknown, perhaps unsavoury, new word. I never reward myself. I am not that kind to myself, I never give myself a break. I might not be a mother, but I am a perfect evil stepmother to myself. Perhaps, and it does not seem such a wild hypothesis, I am even trying to punish myself for failing my family.

I wrote in a Facebook end-of-the-year post nearly two years ago: 'This is going to be the year when I am important.' But the reality is that I do not believe that what I do matters. Like so many other new-year resolutions it just went out of the window.

The unused love

I am meeting Helen, a Canadian researcher at Oslo Metropolitan University. We are collaborating in organizing an event. She got in touch with me after reading an article published on the university webpages about my research on childlessness. She is mother to a small son, but struggled for several years, while in a relationship with a partner who did not want children, with the perspective of never becoming one. She contacted me in the spring, wanting to talk to me about that experience and the possibility of starting a discussion about the hidden narratives that surround both childlessness and motherhood: childlessness is far more than the deliberate decision not to have children and does not stop when you stop trying; having children does not always translate into becoming the "happy parent" of the TV ads—in fact there is even research to suggest that parents, even while loving their children, regret the parenthood experience.⁵

It is a Friday evening (autumn 2017) and we are catching up after the summer break, during which we have been in contact via email and Skype and bounced back and forth the draft of a potential joint publication.

5 By this stage I have read an article by Orna Donath (2015), following a mention of her research by one of my interviewees and a further reference from a *Guardian* article, "Love and regret: Mothers who wish they'd never had children" (Otte 2016).

We are in a stylish bar in a very middle-class area of the Oslo centre, with lamps hanging low on the tables, candlelight, and a short but carefully selected list of wines, a stone's throw from Helen's new rented flat. I have just seen it: tiny but practical and with an airy balcony. She is still commuting between Germany, where her son and husband live, and Oslo. Her husband is a sommelier in a family-run restaurant in the countryside.

We order a glass of wine and quickly move, from the details of our article's draft, to comparing applying for academic positions in Norway and Germany, to relationships. She tells me more about her husband and how they met. He is clever, sporty (I know from a previous conversation that he is into extreme skiing) and has a great variety of interests, including IT and making short movies.

I tell her about how I met Robin and how the source of the attraction between us was, and still is, precisely being on the same thought-wavelength and being able to talk about our subject. 'Does it not ever get too much?' she asks. 'Yes, some days I get home late after the gym and I am exhausted. He tells me of what he has been reading, like, the Hungarian propaganda in the UK in the 1940s. And at that point it does happen that I think "Oh God, I can't deal with this."' I am laughing, 'but it is not that often,' I conclude.

Helped by the wine, my thoughts have started meandering and stirring tickling questions in the back of my mind. What is the nature of love? Apart from attraction, what sustains a relationship over time? And given that relationships are never far away from the issue of children—isn't that where all good marital relationships are expected to lead?—does the presence or absence of a child affect how a couple lives love? Or the quantity of love in our life and its flow? In fact, if the love for a child is supposed to be so strong and all-consuming, what happens when this love is not part of one's life? Where does that unused love for a child go?

24 September 2017, my diary. The dream of the gun and the cupcakes

The questions raised by the discussion with Helen, later at night, turn into a story.

In the dream Robin and I walk on the pavement near the Leeds townhall. I recognize the white building and its golden owls, symbols of the town on its coat of arms, on top of its roof. They glisten in the rare Yorkshire sun. Between the building and the pavement there are carefully tended bushes and hedges that, together with the eerie silence, seem to transfer the building to a more idyllic setting than I have ever experienced in reality—the soundtrack of the ever moving city centre traffic constantly roaring in the distance.

I spot a young man walking behind us. I see him stepping into the green area, take a rifle out and shoot at one of the bushes, where I can see now there is a grave. In fact, I realize that the whole green area is a cemetery.

While I am looking at the scene, unable to move, the young man returns to the pavement and starts moving quickly into our direction, pointing the gun at us. 'Is he going to shoot?' I ask myself while he crouches down and starts crawling, like a soldier under barbed wire on a battlefield.

Robin and I also throw ourselves to the ground, thinking (not sure according to which logic) that it will be more difficult for him to hit us than if we try running away. We move extremely slowly, though. I am not sure we will manage to escape. He is going to catch up with us.

Inching forward we reach a crossroad that appears to be indoor, inside a hall. The man with the rifle gets up, walks to a corner and picks up a tray full of cupcakes with one hand, the other hand still holding the rifle. He threatens us into helping him: he wants us to place the cupcakes and other party decorations across the roads that converge into the hall. He does not explain why he wants us to do that but we know (in that special way that only applies to dreams—knowing without reasoning) that the aim is to commemorate the death of his son. A cake terrorist.

Other people are being threatened, too. I ask the man whether, at least, we can place the cake away from curves, in a way that approaching cars can see it, so it won't cause accidents.

I do not know what he answers. I am just surprised that there are no cars approaching, only people on foot, running. It dawns on me that this is the common place where people who end up in a different destination than they had initially planned come to.

There seems to be a street party developing with lots of food and many different kiosks one can visit. There is also a desk where one can fall in love. One can either hug or cuddle a stranger. It is also possible to have sex if one wishes.

I definitely do not want to make love to a stranger—even if I briefly wonder what that would be like. I would like to try the cuddling, though. I look around to see if Robin is there, so I can ask him what he thinks. Although I can't see him, I realize that his views are irrelevant. This is something I need for myself and I would do it regardless of anything he might say.

Robin smiles while I tell him my dream. 'So what I think is irrelevant, eh? Am I not cuddling you enough?' he says, stroking my hair with a purposely exaggerated gesture of the hand. 'Maybe more people than I imagine end up, in

life, in places they had not expected they would be,' I say while turning so he can stroke the other side of my head, closing my eyes, as if I was a cat enjoying getting its ears rubbed. 'We all need emotional support to get through it, whether that comes in the form of cake, cuddles, sex, or attention.' I have by now turned 360 degrees and face Robin again. 'Do you think this could be why I find it difficult to say "no" to invitations?'

6 November 2016, my diary

"Distributed love"

Snow falling
is a pulverised embrace,
frenzied feather-light flutter
round my shoulders and hair.

Countless frozen fingertips
on my face
are the touch
of an invisible blind lover
and its fragmented gaze.

No one can be jealous
of water crystals
that melt
and merely live
for the length
of a fall.

An innocent traitor
who does not lie
nor has steps to hide,
tonight
walking home,
caught by chance
in a scattered affair,
I kissed a thousand snowflakes.

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Folder 4

Objects and the body

Spaces and objects that make up the self

Why most people get Swedish “death cleaning” wrong

Robin does not yet have a mobile phone in Norway, so during the day, while he is working at home and I am in the office, we communicate via Skype. It is through a link he sends me there (11 October 2017), in the comments' thread, and that I find after I come back from teaching, that I learn about the newest fad from Scandinavia: Swedish “death cleaning.” The topic has already generated a flurry of articles and is based on a book that came out just a week ago: *The gentle art of Swedish death cleaning: How to free yourself and your family from a lifetime of clutter* by Margareta Magnusson (2017). But the English translation is already a misunderstanding. The Swedish title is *Döstädning: Ingen sorglig historia*, which actually means “Death cleaning: No sad story.” The extent to which the philosophical stance of the author is degraded to a quick life-detox is quite shocking, in fact. The point Magnusson wants to make, as I find out later, is that by sorting what we own, we also rearrange the memories of our life and we can edit our story to a version that can nurture us best on our way forward. Margareta and I could be good friends. Things—that is the way I also see them—weave stories around us, reminding us of our life journey and, ultimately, contribute to making us who we are—our selves.

Through the evidence in this folder I examine my relationship to things, places and, as the most important material site I inhabit, my own body. The realization that I will not have children, that I will not pass on my genes, ultimately makes me more aware of my finiteness, my physical and material limitations. Sometimes I feel trapped, as in a building without an emergency exit or a capsule lost in the depth of space, in a body that feels broken, while I know I do not have a spare one. At the same time my body reaches out—as if it were an “extended shell”—to all objects and spaces around me. My body is made of pieces from the UK, is now shaped by a hill with a skijumping slope and a fjord.

Leaving Leeds

6 July 2015, my diary

“Lost & Found”

In the box
used brown envelopes
and small plastic bags
(one of them
in fact
designed for socks)—
belongings
of deceased,
forensic samples
from a crime scene.
Scraps of past lives—
some with parents,
others without.
Tellers of stories
of changing destinations,
exchanges,
experiments,
occasional derailments,
across jobs,
journeys,
geographic coordinates.
Foreign sounding names
of people I must have known,
images of places
I once gave as my address
resurface without warning,
like memories
of dreams,
like faces
of strangers
flashing
from an unannounced night train.
Standing breathless
on the platform
a candy wrap,
a tape recorder,
a dented fruit cake tin

from Betty's,
 an enamelled plate
 for which a purpose
 clearly
 was never found
 received once as a gift
 from an Iranian flatmate
 the proofs
 it all was real.
 On a piece of paper
 microscopic purple handwriting—
 a poem Cristina wrote
 when she was nineteen.

Living spaces' transitions

5 July 2016, my diary

Some normal women are having a discussion on the Facebook group of *Donne d'Italia* [Women of Italy], a page for Italian women in Norway. One asks 'What do you use in Norway to remove obstinate stains from clothes? In Italy one would use Chante Clair, but here?' The consensus quickly gathers around Vanish Oxi Action. 'You find it at the super-market. I would not say I am extremely satisfied, but it works rather well.' I have never thought about this kind of problems. There are no stains in my life.

Over the last two years Robin and I have been involved in two major moves, one from the UK to our first base in Norway, a 45-square-metre place we rented from the university, on the Blindern campus (August 2015)—the Duehaugveien flat, as we called it. Then to another rented accommodation, more spacious, along line 1 of the *t-bane*, on the way to the Holmenkollen ski jump, on the edge of the forest—the Skådalsveien flat (July 2016), a *sokkeleilighet* (a semi-basement) located under the house of a family of four.

Preparing for the move to this latter accommodation has been a major logistical endeavour. We have sold the house in the UK and have transported all our belongings to Norway. There is no way we can fit the contents of a four-bedroom house into the current 70-square-metre flat, so we have to sort out what will go into storage. This includes an Italian orange leather sofa we took months to research, select, and get custom-made. 'Does it make sense to pay 1000 kroner a month (about 100 euros or 120 dollars) to store our belongings while we wait to move to a real house? By the time we do that—which might well take years—we might have spent more than the actual value of the items,' I observed, looking at Robin in the eye when we discussed the options, still in the UK,

clearing the house before its sale. ‘Yes,’ he replied while I nodded in agreement to an argument that had never been outlined in words, but which we were both familiar with. We both knew that what we were willing to pay for was not just the storage of boxes of books one never reads or a sofa, no matter how expensive, but for a safe backup for our lives’ memories, for the project—momentarily on hold—of one day having a “proper” house—an anchor in a life that could otherwise feel it is going adrift.

Reviewing the contents of the boxes to decide what to take to Skådalsveien is harrowing emotional work. I put aside, together with the essential items we need in the here and now, the baking and cake decoration tools. They include some ornate nozzles for piping. I bought them over ten years ago with the plan of decorating a coffee and walnut cake that I have never baked. I never used them. Yet, they seem crucial to a semblance of normal life. They are the promise of good times to come, celebration, time for myself—wishful thinking, in other words, a dream I can hang onto.

It is at moments like this that I wonder whether having children would make a difference. Am I more attached to objects and their significance because I do not have a baby? Are these constellations of objects and the story threads hanging from them my safety nets? Collectively, I suspect, they are the reassurance that, at the age of 42, childless, being a professor living in a *sokkeleilighet* is fine—everything will be OK—even if this is not the place where others expect me to be.

However, what is the point of baking a cake, when it is only two of us, we are not into sweets consumption, and do not want to eat cake for days on end—cake-freezing only means that the hibernated sugary fossil will survive the whole way until the next move? As one of my interviewees put it, ‘What is the point of making it all nice for Christmas if no child sees it?’ A good point, I think, observing that we have not put any Christmas decorations up for the past few years, partly as a result of the fact that we spend the festive season in Italy and the UK, between Robin’s mum’s house and my parents’. We are celebration nomads.

It is also a matter of economies of scale: baking in a normal-sized cake tin in a normal oven requires certain minimal quantities. Even switching to a smaller tin does not help. I have tried it, by now, a few times: simply progressively halving quantities given in recipes does not work. The dough does not respond to the cooking, or the raising, the way it should; the heat of the oven is either too aggressive or, when turned down, too weak. The whole cooking tradition I come from is organized around producing meals and treats for families, or couples with friends, or groups gathered for celebrations. Cupcakes, in this respect, are the dessert-coded answer to the age of loneliness.

As a couple we are only marginally better off than singles. The Norwegian Single Association (*Ensliges Landsforbund*) here in Norway, as I have found out, campaigns precisely against the disadvantages that people who live on their own face—apparently 41 per cent of all households in Norway consist of a single person—in a world designed for families (Ensliges Landsforbund 2018c).

The Association's website mentions economic disadvantages, like paying higher taxes, finding it difficult to travel without having to incur extra costs for booking a single room, having problems buying property on the basis of a single income, but also isolation as a consequence of the financial limitations, and even not being taken as seriously as others, at work for example, for not being in a relationship (Ensliges Landsforbund 2018a).¹

Not having children, or their friends and their friends' parents coming round to visit, also means that we experience less pressure, presumably, to have a nice home. I particularly notice this in relation to the table. We do not own a tablecloth, only table mats. A tablecloth, if I think about my childhood, is the beginning of adorning the table for a meal a family is going to share. Tablecloth is ritual. But maybe this is only me being an Italian of a certain generation. Not having friends, it is admittedly difficult to say whether others, either in Italy, the UK, or Norway, own a tablecloth—how would I know? We have no table decoration, though, like a runner, for example, or candle holders. They seem to be everywhere in household shops both in the UK and in Norway, so somebody must be buying them.

We seem to have no full set of matching mugs, bowls, or plates either. Some of our crockery pieces are belongings I have inherited from past flatmates, which had been passed on to them, in turn, by others. I am eternally fascinated by these underground kitchen equipment exchanges, gifts, circulations, especially among the foreign students—a material manifestation of the fact that I have spent most of my life in education. We are now left with two wine glasses of two different sizes and shapes.

I do not have decorations in my office either. What always strikes me when I visit colleagues' offices is the children's drawings they hang on walls and doors. Yesterday, entering the Health Department to meet a researcher I am co-writing

1 After the end of the Second World War, as the Single Association outlines in explaining why it was set up,

singles could not get home bank loans. These were reserved for couples. Singles were expected to live in bedsits. Either in small bedsits with families, or they got bad bedsits by their workplace. They did not even have the right to apply for accommodation at the Oslo *Leiegårdskontor* [office in charge of allocating public housing]. (It was in Oslo and other major cities that the housing situation was worst).

(Ensliges Landsforbund 2018b, my translation)

As a result of the action taken by those who founded the organization in 1957,

politicians were asked about which right they had to discriminate the singles so offensively. Did the singles not pay taxes like the others? Did they not fulfil their duties of social responsibility like the others? Was not the singles' group entitled to social benefits like to others?

(Ibid.)

All these were good questions that could well apply, although in a different time and in relation to different issues, to the discrimination against childless individuals, many of whom are also singles.

an article with,² I saw an entire office door finger-painted with fluorescent (glow in the dark, in fact) paint.

I close the “take” box and, while sealing it with brown tape, I swear that in the new house I will bake a cake. But I do not set a deadline. Otherwise it will become work and it might turn into another stick to beat myself with. Another item on my already impossibly long list of things to do that I will have failed to cross off. And then, of course, I never get around to doing it.

The body

La ragazzina anoressica e la professoressa (*The anorexic girl and the professor*)

She is wearing baggy clothes. Or rather they are just normal-sized clothes, it is her who has shrunk. Her collar-bones, like a clothes hanger, end in shoulder tips that are pointy against the dark purple T-shirt. Her black jeans slowly swing around her thighs when she takes silent small steps, like a cat. Her long hair, running down the side of a purple and black backpack she carries on one shoulder, reaches her buttocks. She is a siren in a fairy-tale that took the wrong turn. Brunette, flat chested, pale like a sick child, her shiny, mighty fish-tail turned into scrawny legs—a creature that has sacrificed her gifts of beauty to follow ashore some prince she blindly loves, but who does not care about her—an abandoned stray animal who has wondered in from the sea, or the road.

‘I am cold,’ she says with a faint voice, as if she did not have the energy to blow more air through her vocal chords from her lungs. She crosses her arms and I see tiny thin hairs on her skin, like a light and half-invisible fur.

‘I have not eaten anything today,’ she tells me with satisfaction, looking at the ground, as if embarrassed at a compliment she is expecting to come.

I am not playing your game. ‘Maybe you should,’ I give her a third cold shoulder. *You are just envious of me,* I can hear her thinking, despite her smiling at my feet.

‘I don’t need food,’ she states proudly. I hear the unsaid rest of the sentence: *People who like food and are dependent on it are just pathetic. I am different. I am superior.* Then she says, ‘I have written a poem today.’ *She will never have the courage to read it to me.* I am correct. She removes her backpack with a swift move of her arm, which just falls out of the strap, letting the bag slide to her feet. She bends to open a zip in the top pocket, while I watch her hair becoming a dark waterfall and the line of vertebrae coming into relief along her back like a fishbone under the shirt. She re-emerges from under the wave of hair with a whip of her neck. She slightly closes her eyes. *Low blood pressure, light dizziness.* My arms almost reach

forward to hold her in case she loses her balance. Instead, my hand catches on a small paper square she is handing me with nearly nailless hands, pale short tentacles of a fish from the depths covered in chewed, broken scales. I squint at the microscopic purple writing:

“4/5/94”

Le mie lacrime non sono salate

Poco normale

Forse

Poco importante

In fondo

Ma ditemi

Spiegate mi

La verità

Un perchè

Almeno

Nulla

E tu?

Tu sogni?

E il cielo?

Solo una luce che lampeggia

C'è nessuno?

Buio

Lascia perdere

Ora

Ascoltami

Cioè

Guardami

Se vuoi

non con gli occhi

Vorrei

Insomma

Pensami

Raggiungimi

Sono qui

Non lasciarmi sola

Aspettami

Ci si può perdere

Dentro e fuori di noi

C'è tanto spazio

troppo

“4/5/94”
My tears are not salted
Not that normal
Maybe
Not that important
In the end
But tell me
Explain me
The truth
A reason
At least
Nothing
And you?
Do you dream?
And the sky?
Only a light that goes on and off
Is anybody there?
Darkness
Just leave it
Now
Listen to me
Or rather
Look at me
Not with your eyes
I would like
I mean
Think about me
Reach out to me
I am here
Don't leave me alone
Wait for me
One can get lost
Inside and outside
There is so much space
Too much

‘I like crying,’ she says while I lift my gaze, my sight now blurred. ‘... feeling the tears like rain drops crossing my face.’ Yes, especially when you are lying on the bed on your side and the tear, a full watery drop just pumped out of the corner of the eye, throws itself off the cliff of the nose set and you see it with your other eye falling on the pillow. You even hear the noise of the drop hitting the fabric, a soft “plock,” just before it is

absorbed and all that is left is a short-lived moisture on the sheet and your fingertips. I know.

‘You lie on the bed in the dark almost every afternoon,’ I tell her. She doesn’t do it during school term as she is too busy with homework and rehearsing over and over again lessons she has already learnt. She always gets top marks. But summer days are never-ending sunny and lonely emptiness. Yes, one does get lost in it. She seems surprised. *How does she know?* ‘You should see a doctor. Don’t you think you might have depression?’ I continue.

She smiles, again, amused at my interest. She is a good girl. She is polite. You don’t know what that is, do you? Nobody suffers from depression in the 1990s in Italy. You are just a difficult teenager who has grown out of a very shy child.

‘I *have* seen the doctor,’ she quips back, interrupting my thinking, ‘once, when I did not get my things for two months.’ *Le mie cose*, my things. We were ashamed even to say “period.” *Then you got them the very evening of the day you saw the doctor.*

‘Anyway I got them the same evening.’ The doctor asked whether you were pregnant just because, as he said, ‘it is one of the things you do when you are a woman.’ “Things.” Always “things.”

‘He asked me whether I was pregnant!’ She thinks it’s funny.

And you started laughing. Controlling the body, shutting down a function you hated was a victory. Seeing the doctor was an acknowledgement of your achievement. And if the same body wanted to take revenge later?

‘He made me laugh.’

‘Maybe you should listen more to the people who care about you.’

They just want to spoil my figure, they do not care about me. I am alone. Nobody cares. I wish I was the last person on Earth.

‘Oh, they say that if I do not eat I won’t have children,’ she says with a mocking voice, underlining how little she cares about them *and* pregnancy.

‘What if they were right?’

Just fuck off! Pregnancy is the most disgusting way of misshaping a body. I can’t understand why any woman would do that to herself. Becoming a monster. It makes me sick.

‘You know what is most exciting about not eating?’ She has a spark in her eye, a mixture of childish enthusiasm for discovery and madness—which might well be the same thing.

I had forgotten about this.

‘That when the body has nothing to eat, it starts eating itself.’

Mind–body relationships

‘You are not your body. You are the crazy driver behind the wheel. Just drive your body. Don’t pretend it’s difficult,’ says Erik, one of my favourite gym instructors in his usual black shirt and grey knee-length shorts. He is a dancer and fitness trainer who has done all sorts of jobs in his past, including working

on a trawler and being a lecturer in economics, as he once told the class. I recognize his varied background in what he teaches, including the invitation to creatively see training as a ‘financial project’ in which one is ‘borrowing oxygen from the future.’ He is so enthusiastic about teaching us ‘how to move’ the way ‘nature intended’ that, also today, he looks slightly disappointed that the class has to end.

Straight afterwards I stay, in the same mirrored hall, for a yoga class. Anthony (another instructor whose classes I am regularly following) is a stern-looking, wiry teacher with a strong French accent who reminds me (it’s the profile that very vaguely does it) of former French president Sarkozy. I can see how the seriousness and discipline with which he approaches yoga intimidates the students in the class. They tend to gather together—their mats too close to each other to comfortably execute all the poses we are going to go through—at the back of the room. Since I like the fact that attention to detail and technique are at the core of his lessons, I am, instead, always on the first row. He introduces the day’s practice: ‘What is *intention*? It is not only *determination*, the will to get where you want, to execute a pose. That is easy. That is only making the effort, *giving*. You need to ensure you also leave openness to *receiving*: the space for learning, empathy, care for yourself, listening.’ I take it that this means not forcing your body to the point of damaging it. ‘So intention is combining the giving and taking,’ he continues. I understand his words as balancing the mind and body.

It is the contrast behind these two opposite ways of understanding the body–mind relationship, brought into stark contrast by the serendipity of the exercise timetable, that triggers a whole existential reflection. Like one of those catchy tunes one cannot get out of one’s mind, this is the refrain—or mantra, shall I call it?—of my summer 2017: What relationship do I have with my body?

The pain diary I (Leeds, September 2013)

14 September 2013, Saturday, my diary

Pains start towards the end of Zumba class (around 11.15–11.20am) as some pulling feeling between thigh and groin. Later in the day, it migrates to the abdomen and seems to move around the hip to the lower back (left side only).

15 September 2013, Sunday, my diary

Strong pain all day: Period-like cramps and strong back pain, again only on the left side.

Night between 15 and 16: I dream a giant red ball that rolls down a slope and crashes on me. In the dream I am initially fine, but I then start retching and fear I will throw up blood because the ball has crushed my internal organs.

16 September 2013, Monday, my diary

I try a pregnancy test: negative.

I see the doctor at 10.20 am.

16–17 September, night between Monday and Tuesday, my diary

I dream that there is blood in the cervical mucus.

17 September 2013, Tuesday, my diary

I am in Sandford, at work. Some light cramps during the day. Mainly pulling sensation in the thigh/groin areas when I walk. Back pain is still there, although perhaps slightly less strong. Pregnancy test is negative.

19–20 September 2013, night between Thursday and Friday, my diary

I dream that I walk in a town in Switzerland. The roads are flooded (with clear and clean water though). I need to take a detour to get to the place I need to reach (not sure where I am trying to go). I am walking on my own. I enter a place that looks a bit like a station. I suddenly feel nauseous. There is a bin next to me and I start throwing up inside it.

I take a pregnancy test with urine I collected around 5 am (I saw the clock, which said 4.56). The urine should have had the time to become concentrated for six hours. Negative result.

21 September 2013, Saturday, my diary

Negative test. I go to Zumba, but feel a bit disabled. I do not push myself and I am surprised I do not feel like it. The back pain is almost gone, but still reappears every now and then. On the other hand, I feel a dull pain at the front and into my thigh. I particularly feel it when I walk and move. When I go to bed I realize I have a bit of pain in the middle of my back.

21–22 September 2013, night between Saturday and Sunday, my diary

I am woken up by abdominal pain on the left. Negative test.

23–24 September 2013, night between Monday and Tuesday, my diary

I dream that Robin and I are travelling through South Asia (it looks like that) and that we are going to an indoor pool (made of stone, into the ground) about five or six metres long. Robin gets into the pool. I tell him to watch me while I fly with swimming movements to the other side of the pool. More people get into the pool while I do my lengths in the air above it.

It looks like a proper period. Blood is bright red and fresh. I guess implantation bleeding is to be excluded. Strong cramps. I take two aspirins.

The pain diary II (Oslo, February 2017)

There is a pain in the upper part of my left leg that I associate with my childlessness experience. It started in September 2013, one weekend morning during a Zumba class at the Edge, the gym of the University of Leeds. Considering that, by that stage, I had been practising all sorts of martial arts, from kickboxing to taekwondo, mixed martial arts (MMA), and boxing for over a decade, getting injured during a dance class was ironic, almost embarrassing.

Since the pain was in the upper leg, groin, and ovary area I even got excited about it. Robin and I were getting back onto the IVF treadmill, through a door of scans and exams and time-consuming trips to the Leeds Centre for Reproductive Medicine, a 32 km (20-mile)-round journey on a highly trafficked road. It was so tempting to hope we could skip all that. Hope solidified into belief in a matter of hours. I was happy to spend the night in severe pain thinking that, on the basis of the evidence provided by calculations in front of a calendar and the date of my last period, against all competing explanations, it was a form of implantation cramping. I was clearly reading too many baby-talk online discussions at that time. Implantation cramping is like implantation bleeding, one of those internet-created phenomena that are supposed to take place when the fertilized egg burrows itself into the lining of the uterus to begin to grow and develop. They occur rarely—implantation bleeding in no more than one-third of the cases, while for some experts implantation cramping does not even exist—but because they are signs of pregnancy that can be seen and experienced, everyone hopes to witness them. They become “a thing.”

*

It's a sub-zero February Friday morning (10 February 2017) in Oslo, three and a half years later. I am on my way to a physiotherapy clinic and gym in a tall building outside the Tåsen *t-bane* station, along the tube line that rides to Sognsvann. I am curious to meet my new therapist, Bård, the fifth specialist—this time a “manual therapist” as his Norwegian title (*manuellterapeut*) suggests—after four physiotherapists who came up with completely different diagnoses and whose advice has made no difference to my condition. The pain just keeps on coming back.

The new therapist has been recommended to me by my doctor, a thin, middle-aged, energetic lady in a white coat, black-rimmed glasses, and purple hair. ‘He can do anything: ultrasound, steroid injections, X-rays, write you a sick leave’—she makes him sound like a medical superhero. ‘He has treated many athletes. If it's an issue he cannot solve, he knows whom to send you to,’ she continues while printing out the *henviining*, referral letter. ‘He has many patients but always gives priority to those sent from the university clinic. He will sort you out,’ she says as if sharing a best-kept secret and handing me the envelope. ‘Say to him that Cathrine says hi.’

Yoga conflicts (July 2017)

Cathrine was right. Bård recommended leg tractions and further exercises to strengthen the muscles around the hip and these are slowly having a positive effect. The gradual easing of the pain and the fact that it occurs less and less often have made me realize how disabled I have felt over the past few years and how badly this has affected my mood, even my self-esteem. For the first time last week I have “forgotten” about my hip, I did not have my mind stuck in there. It is as if my mental batteries had been drained all of this time by a programme open in the background. I realize I can concentrate better. I feel happier, more relaxed.

I have been warned that I should expect minor setbacks on the slow path towards recovery. ‘There will seem to be no reason to them, but do not get discouraged, it is normal,’ Kristin, one of Bård’s colleagues, told me while giving me some hip-strengthening exercises. Bård also told me that a complete healing may be out of the question: my hip cartilage is slightly damaged and there is nothing that can be done about it—until I decide, that is, to get my hip replaced, but it is far too early for that. ‘You are not old enough,’ he summarizes in his usual direct way.

*

After having being reminded what being my past self was like and having tasted the liberation of normality, the reoccurrence of the pain—no matter how well the rational part of my brain understands that this is temporary—feels like a kick in the teeth. Today I feel trapped in a body that is torturing me. I resent Anthony, the yoga teacher, instructing us to focus our attention ‘three fingers under the navel, where the life energy is.’ He says that every time and I instinctively think, hating everyone in the room, ‘there is nothing there.’

In leaving I am about to give him my “ticket,” a print-out slip of my class booking. I do not know what instructors do with them but, if gym users do not print them out twice, they get a fine and are no longer able to book classes for a month.

‘Sorry I was late coming in, so I did not have the time to give this to you earlier...’ I say, handing him the small piece of paper.

‘You can just throw it away,’ he replies drily. ‘OK,’ I blurt almost by default, neither really expecting the answer he gave me nor really understanding why he said that. I quickly make my way out and throw the ticket in the bin by the door. I am already walking along the corridor when I turn around. I enter the room again, pick up the ticket from the bin and approach him again. ‘I think throwing away my ticket is offensive,’ I tell him with a determined tone.

‘Why do you think it is offensive?’

‘I have apologized for being late.’

‘I think there is a misunderstanding. I throw away all the tickets anyway,’ he says with a smile.

I realize how I assumed the throwing away of the ticket was a form of punishment. In fact something my mum would have done. Is it the Southern European accent that turned him into a strict parent? Is it the fact I feel so vulnerable that I fear others will try and disrespect me—an overcompensation for my insecurity? Or is it me who just hates myself and cannot see anything but mischievous intentions all around?

‘I think there really has been a misunderstanding. I am sorry,’ I tell him, embarrassed.

‘No worries, my friend. We are all a bit on edge after a yoga class, with low sugars and all that. You are very welcome.’

I quickly hurry back to the changing room, where I throw myself through the door of the first toilet I see. It is the disabled toilet, which I feel I can use with good conscience, after having recently learned that, according to the World Health Organisation, infertility is a disability.³ I lock the door, sit with my back against it and, while the pain in the hip resumes and my whole body starts to shake, I begin to cry.

Reading breasts⁴

INTERVIEWER: Do you think that, as childless women, we have a different relationship with our body?

RESPONDENT: [...] I think [*pauses*] *really* one of the things that has concerned me is that my breasts have never been used for breast-feeding, although there has been milk in them because when I was pregnant the first time I was so late with the abortion that I had milk in my breasts. But I’ve never fed anybody with them.

I know that the nipples of a woman who hasn’t had children are different from the nipples of a woman who’s had children. So when I go to the sauna I look at women’s nipples and I have my thoughts about their being a mother or not being a mother.

INTERVIEWER: Is it because they are bigger or larger?

RESPONDENT: No, it’s the colour. The colour of the nipples, especially, it’s light brown in women who haven’t had children, more fair, than in people who have [had children], as far as I know [laughs]. Maybe you can tell me that I’m wrong [laughs].

INTERVIEWER: That’s something I thought about as well [she also examines the body of women in the changing rooms of the gym] because I have read online that the area around the nipple gets darker and bigger when one gets pregnant. I also don’t have that. I kind of look like a teenager [chuckles].

RESPONDENT: We can make a [more systematic] observation [chuckles], but I think it is right. But that’s not my own awareness about my body, it’s a way of telling who we are from a little sign.

3 ‘Infertility generates disability (an impairment of function)’ (WHO 2018).

4 Excerpt from an interview with a childless informant (8 June 2016).

INTERVIEWER: [*asks herself*: In which other respects am I different from mothers? Do I have less wrinkles? Are my breasts less sagging, my stomach firmer? How does never having had the hormones of pregnancy circulating through my body affect the functioning of my body? Or my mood? Am I less healthy because my body never went through conception and birth—what it was ultimately designed for? Am I “undeveloped”? Is my body “less complete”?]



Figure 2.4.1 Edvard Munch (1894). *Madonna* [oil on canvas]. Munch Museum, Oslo.

Source: Wikimedia Commons. A non-mother.

Genes, conferences, and academic children

Coming to the realization that I will not have a child—if it has not happened thus far it is unreasonable to think otherwise—feels like having a terminal illness. Although it is well known that childless individuals die earlier than parents in general (Doblhammer 2000; Weitoft *et al.* 2004; Grundy and Kravdal 2007; Jaffe *et al.* 2009; Modig *et al.* 2016), a study that specifically looked at the mortality of 21,000 Danish couples seeking IVF treatment (Agerbo *et al.* 2013), found that women who did not go on to have a child were four times as likely to die early compared with those who did have a child. Childless men were twice as likely to die early. It is not clear why. All studies just tend to emphasize that correlation is not necessarily causation and that the exact mechanisms which

lead to the higher mortality outcome are uncertain. Online media sources, however, are particularly insulting in suggesting that people without children might die earlier because they have fewer reasons to live.⁵ I lean towards an alternative explanation: the childless are left to fend for themselves in their old age. Family members are still relied upon, in most countries, to take on much of the elderly care. “We” have smaller networks and less secure safety nets to catch us in case we fall.⁶ In addition to this, although nobody mentions it, what effects might an entire life of exposure to stereotypes and negative assumptions have? I am convinced they must take their toll, too.

I will still die when I am meant to, but mine will be a double death because I will leave no genes behind. This makes me terrified of wasting time. I constantly feel guilty, suffer from performance anxiety. I need to make an impact. I need to leave a trace of myself, no matter whether this is invisible to others. I need to publish, I need to go to conferences. Especially conferences with non-academic actors (sorry, colleagues, but who listens to us? We just talk to ourselves most of the time): I can spread my thinking genes. My ideas can, in the backs of the minds of policy-makers, perhaps make a grain of difference in their decisions. So I say “yes” to all invitations. Imagining that my ideas could help the world become a better place might sound naive, yet it is comforting.

In the German-speaking world a Ph.D. supervisor is informally known as *Doktorvater* (Doctoral father) or *Doktormutter* (Doctoral mother). Is it healthy, in this perspective, to consider my Ph.D. students my academic children? After all, I followed their every step in the journey to scientific adulthood. I am myself one of the 175 members of the Facebook page “Professor Phil Taylor’s Intellectual Offspring” (n.d.). Phil was one of my Ph.D. supervisors. He was a trusted friend with the uncanny ability to place, with one single sentence, any worry or problem that to me looked insurmountable, into perspective. I remember him waving from the balcony of the hotel where we were all staying, in Iseo, Italy, where he had travelled with his wife Sue to attend my wedding to Robin. Robin and I were putting our suitcases into the back of the car, ready to leave for Milano Malpensa, where we would catch a flight to Paris, our honeymoon desti-

5 In a BBC article (BBC News 2012) commenting on the Danish study mentioned earlier (Agerbo *et al.* 2013), for instance, ‘Dr Helen Nightingale, a clinical psychologist,’ is quoted saying: ‘Being childless without a doubt reduces your fight for life,’ ‘[i]f you draw on cancer as an example—the support of a family, the focus on your children—your grandchildren and the desire to watch how they will turn out drives your psychological resistance to survive,’ ‘[y]ou fight for them, people hang on—it shows the power of relationships.’ Some tentative explanations provided in a blog post of the Harvard Medical School (Shmerling 2017) for the results of another study which suggests that childless individuals die earlier (Modig *et al.* 2016) are:

People with children tend to have more social interactions (for example, with other parents) than childless people, and higher social contact has long been linked to longer life; children help support their parents in old age. Childless individuals don’t have that advantage; parents may have healthier habits—less smoking, more physical activity, better diets—than those who are childless.

6 I will return to this in Folder 7, “Politics: or why childlessness is everyone’s business.”

nation. He smiled when our eyes met, then we waved to each other. He looked proud of me. He stayed on the balcony, smoking a cigarette, to see us safely off. I got into the driver's seat feeling I had received a blessing that would protect me on the journey forward, no matter which adversity I might encounter.

26 October 2017, my diary

Dear Phil,

Days before you passed away, I wrote my last email to you. I thought it was so inelegant to do this electronically, but you did not want to be visited in hospital.

I wrote that Robin and I had decided we would call our first child after you. We were honoured that you had joined us on our lives' journey. It was our way to make you stay with us a little longer.

I never managed to keep that promise. I am sorry.

Love,
Cristina

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Folder 5

Media, social wallpaper, and the cycle of silence

[I]t feels like, as a culture, we've drawn up two camps. In one, are the childfree women who get nine hours sleep every night, enjoy manicures, lack empathy and are feeling quite alright about children in cages,¹ and in the other, are mothers, who are more tired than you, busier than you, more stressed out than you, and know love like you could never imagine.

No single person tells us this. But it is a message that pervades advertising and films and even our language.

(Jessie Stephens 2018, editor and broadcaster, 28 June 2018)

Talking to walls



Figure 2.5.1 Drawing based on a Norwegian magazine's cover (*Innsikt*, March 2017). The headline reads: "*Fremtidens familie? Mor uten mann. Far uten barn* [The family of the future? Mother without man. Father without children]." Unoriginally, these novel family constellations are represented by a woman with a baby in her arms.

¹ This is a reference to the reporting of immigrant children being held in cages by authorities at the US Southern border in summer 2018.

Fra: Cristina Archetti
Sendt: 24. mars 2017 09:16
Til: [email]
Emne: Response article to family and fertility debate—Innsikt
(March 2017)

Dear [name of editor],

I am Professor of Political Communication and Journalism at the University of Oslo and I am writing in response to the discussion of the future of family and fertility in the last issue of *Innsikt*.

Having been working for the past year and a half on a project about media and childlessness in Norway and abroad, I am concerned that the journalistic coverage of these issues in Norway is not serving the best interest of the public.

The main “blindspots,” as I see them, are the following:

1. *Where are the childless?* Where are the stories of those whose lives will be affected by the decisions of the current debate on egg donation and surrogacy? Apart from statements by politicians, gynaecologists, the Biotechnologirådet [Norwegian Biotechnology Advisory Board], and journalists (one of the best pieces I have read is from a theatre commentator!), the closest it gets to the perspective of the childless is some isolated quote from Ønskebarn [association for the involuntary childless]. The only ordinary people who get onto the pages of Norwegian newspapers tend to be the mothers who have fulfilled their “baby dream.” Where are the women (and men) who are still trying or the many—who do exist, despite all the happy-ending stories—who tried and did not succeed?

2. *Is the public being fed fertility companies’ PR?* When it comes to perspective and critical thinking on the “success” rate of fertility treatments, reality is hidden behind aseptic language, accurate but selected figures, and lost nuances. On the last issue of *Innsikt*, for example, I read that ‘egg donation is carried out by removing egg cells from a woman (donor) after two to four weeks of hormone treatment. The harvested egg cells can then be fertilized or frozen for later fertilization.’² It sounds neat, clean, easy. Accurate figures are presented about IVF performance: the chances ‘to become pregnant’ (which are in fact different from those of producing a

2 My translation.

live birth, although nobody points that out) with one's own eggs for women aged 43 are '<6,' and for those over 45 downright '0.' And that is precisely why there is a debate about egg donation: because, by this stage, journalists and members of the public have looked critically at the figures. We know IVF is not the most effective option, and we have moved on to the next "best solution." The kind of solution, however, for which the same issue of the magazine suddenly presents no statistics. If I try to find information online, as any other interested reader would presumably do, I only come across data provided by clinics selling their services. How reliable are they? When it comes to egg freezing, an option some young women are literally gambling their future on, investigative reporting from the UK (www.theguardian.com/society/2016/feb/07/life-on-hold-with-frozen-eggs)³ suggests we know nothing more solid than [*sic*] what the companies who make a profit from it lead us to believe. An increasing number of women and men urgently need verified information to take crucial decisions about their lives. Why are they left to rely on Google and the clinics' ads?

3. *Are news portrayals of the childless accurate and fair?* News representations of the childless swing between the extremes of being made fun of or being pitied. Based on the continuous stream of miracle-babies stories in the news, childlessness seems almost not to exist: it is either a short-lived temporary stage or a deliberate choice. This appears to justify light-hearted approaches to it. One example from the series "De barnløses samfunn vs De barnfastes samfunn [The society without children vs the society with children]" is "Noen henter barn. Andre henter sushi [Some pick up children, others pick up sushi]" (*Aftenposten*, 16 October 2015).⁴ The piece is clearly meant to be ironic. Yet, it shows that society is largely unaware of the pain that many women (and men) experience. Fertility technology does fail and adoption's strict rules mean this option is not available to everyone: long struggles do end with deep emotional scars and without a child. I can't imagine a similar article making fun of the victims of rape, or people suffering from mental illness. Why does it seem OK to make jokes about childlessness?

At the same time the childless are pitied. The involuntarily childless women I interviewed as part of my study confirm that it is precisely the feeling of being looked down upon that contributes to a sense of shame for not having children and even to being unable to talk about it. Fairer and

3 Wiseman (2016). See also Glover (2017).

4 Halvorsen (2015).

less stigmatizing journalistic portrayals, in this respect, would be a starting point towards making the childless feel more included and improving their well-being.

4. *“When do you stop trying?”* This is the kind of question that is never raised in Norway. Barnlängtan, the Swedish equivalent of Ønskebarn, has been organizing for the past six years an “Ofrivilligt barnlösas dag [Involuntary childless day]” (www.barnlangtan.com/ofrivilligt-barnlosas-dag/) to raise awareness of the issues that affect the childless, particularly those who end up not fulfilling the “baby dream.” This stems from Barnlängtan’s realization that the very organizations that help the childless are part of the problem: since they raise so much the expectations of the individuals they take under their care, is it not their responsibility to continue looking after them when hopes are crashed by the disappointing results?⁵ An important question that will be addressed at this year’s event on 27 May (the day before Mother’s Day) in Stockholm is, among others, “when to stop trying?” This is about realistically considering the emotional-, relationship- and life-costs of fertility treatments. Don’t get this wrong. Nobody is saying that women (and men) should stop trying having children. However, can we stop assuming that the health and well-being of the childless, especially women’s, is expendable for the sake of having a baby? Can media reports, to begin with, be realistic and honest about what they can expect? Can we hear more about failed treatments? Not as scare-mongering but as part of a more balanced reporting? Isn’t this what objectivity in journalism should be about?

5. *Where are all the men?* A quarter of Norwegian men never become fathers. This has been well known for long (www.nrk.no/livsstil/eksplosiv-okning-i-barnlose-menn-1.1314577),⁶ but nobody seems to care. What is being done about this? Isn’t Norway supposed to be an inclusive society? Who are these men? There are suggestions that they are “chosen away” by women. Why? How do they feel about this? It is also assumed that the fertility of men does not have use-by dates, but is that really the case? Conceiving with older males is more difficult, even for younger women (<http://yourfertility.org.au/for-men/age/>).⁷ Could not someone write about it? Genuine equality, when it comes to fertility, might mean stopping focusing on women and talking about men instead.

5 By the time I went through the last draft in late 2018, the position of the organization appeared to have moved closer to the agenda of the fertility clinics that support it.

6 Moen and Steenbuch (2005).

7 Your Fertility (2017).

6. *Why does it take a researcher to ask all of these questions?* Norwegians are proud of a tradition of free speech—and rightly so. However, what is the point of it when, as in the case of the coverage of fertility, no genuinely different viewpoints are included and public debate becomes an exercise in group-thinking? Childlessness, as surprising at this might sound in the 21st century, is still a taboo. In fact, as I can understand by comparing the coverage of childlessness in different countries, even more so in a society that values children like Norway. Especially at a time of social change and increasing political turmoil, it is only by including diverse voices, tackling the uncomfortable questions and venturing out, when required, of the discursive comfort zone that journalism can help us find new common ground.

I think raising these points could contribute to the current debate on fertility and stimulate a more critical approach to the topic. I would be happy to either edit any of this text or provide further content in case there was any interest in publication.

Kind regards,

Cristina

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BOOKS

NEW! *Politicians, personal image and the construction of political identity*
(2014)

*Understanding terrorism in the age of global media: A communication
approach* (2012)

Explaining news: National politics and journalistic cultures in global context
(2010)

I never received a reply. To be fair, I was not really expecting any part of it to be published. I thought it would lead to some reaction, though. At least to the standard polite, yet non-committal “thank-you-for-getting-in-touch-and-for-your-interest”: acknowledge feelings, give the interlocutor some attention—presumably what they crave—no need to take action as a result.

At the time when I sent the message I had analysed over 30 movies⁸ whose plots included a childless character. This was part of a larger and, at that time, still ongoing study I was conducting of the representation of individuals without children in Norwegian, Italian, and American cinema. What was astonishing was that, regardless of the country, the genre—whether horror, drama, or fantasy—or the historical period the movie was produced in—from the 1940s to the present—childless individuals were always presented in the same way. With nearly no exception they—mostly women—were portrayed as mentally disturbed—depressed at best, psychopathic killers and monsters posing a threat to society at worst.

As the days passed I thought there could be many explanations as to why I was not getting a reaction: the editor was extremely busy; the letter went into the spam box; I wrote it in English when I should have used Norwegian and this was perhaps perceived as unpolite—my fault for being culturally insensitive. The silence that met me alerted me that getting my research into the open might be harder than I had realized. I was also interested in a new, uncomfortable feeling that had started emerging, as slowly and silently as the passing of time, cold in my stomach and at the same time burning in my cheeks—shame. When you talk about an issue that very few recognize apart from you, how does that make you look like? Was I, to the editor’s eyes, the crazy woman from the movies?

Limbo (2010)

‘Sonia moves with her kids to Trinidad where her husband Jo is working in the oil business. The milieu change and the discovery of an affair her husband has been having makes her lose grip and go into a limbo.’⁹

Undated, my notes

Sonja (mother of two) to Charlotte (childless): ‘I do not want to have your empty life!’

[...]

Charlotte (when Sonja comes to thank her for having taken care of her children while she was away, thinking about what she should do about her husband’s betrayal): ‘They [the children] made me remember who I am. Or what I can be. I am sorry I am so self-absorbed.’

8 The complete study involved 50 movies. Their full list and criteria for the analysis are in the Methodology appendix.

9 IMDb (n.d.). *Limbo*. <https://www.imdb.com/title/tt1523326/>.

After this conversation Charlotte kills herself—in her private swimming pool. Her husband loved her to bits. This makes no sense.

Bias at the royal wedding

I am among the 29 million people who, according to estimates (Fitzgerald 2018), on 19 May 2018 watched the wedding of Prince Harry and Meghan Markle. I am getting ready to go out with Sonia, my sister, who has come to visit me in Oslo for the weekend. I am going to meet her at the Munch Museum in 45 minutes. I said I did not really care about the royal family, but it is a ‘global media event’ after all—it has its own conceptual category in media studies (Dayan and Katz 1994), so why not take a quick look while I am having lunch? I end up eating standing, with Robin, in front of his laptop on the living room’s table, our shoulders rubbing, reminiscing about our own wedding. The images of the ceremony in St George’s Chapel at Windsor Castle broadcast live by *Sky News*—white and green flowers, flowing dresses, stiff feathered hats, nervous Harry, beaming bride—stream solemnly on the screen, in between my glances at Robin and at the watch.

The service, led by the Dean of Windsor, begins (BBC News 2018):

In the presence of God, Father, Son and Holy Spirit, we have come together to witness the marriage of Henry Charles Albert David and Rachel Meghan, to pray for God’s blessing on them, to share their joy and to celebrate their love.

[...]

The gift of marriage brings husband and wife together in the delight and tenderness of sexual union and joyful commitment to the end of their lives. It is given as the foundation of family life in which children are born and nurtured and in which each member of the family, in good times and in bad, may find strength, companionship and comfort, and grow to maturity in love.

The point about ‘children’ is a loud note out of tune in an otherwise perfect choreography. It signals, like an emergency siren, that it is time for me to leave. As I realize much later in the evening, though, I was not the only one noticing it. This aspect of the speech is fiercely discussed on the Facebook group “Childless path to acceptance (No TTC [trying to conceive] Talk)” (n.d.). While it would be possible for a bride and groom to select a text that does not involve the mention of “children,” it is pointed out that Prince Harry and Meghan Markle have expressed the desire to have them. Many are dismayed, though, at the assumption that the very reason for getting married appears to be procreation. If you don’t reproduce, as a member of the group comments, then is your marriage ‘without purpose’?

The Italian constitutional crisis

It is the morning of 28 May 2018 and Italy, 85 days after the elections that took place in March, is still without a government. The President of the Republic, Sergio Mattarella, last night met Giuseppe Conte, the person he has given the task to form a new government. Conte assembled a team of ministers in consultation with *Movimento Cinque Stelle* (Five Star Movement) and *Lega* (League), whose candidates now make up the majority of seats in Parliament and who would have provided support (or *fiducia*—trust) to the prospective government. Mattarella, however, must first endorse his proposal. And he has rejected Conte's suggestion. In a move that has led the leader of *Movimento Cinque Stelle*, Luigi di Maio, to call for his impeachment (can the Presidency really veto a ministerial candidate without overstressing its powers?), he has given the task to form the government to another candidate: Carlo Cottarelli.

I start watching on *Corriere della Sera* a one-minute video profile (Castaldo 2018, my translation) about this new potential prime minister:

[Black background, a montage-appropriate bright melody with an underlying ticking-clock beat begins, text appears in white and blue]

THAT'S WHO CARLO COTTARELLI IS

the economist [to whom] Mattarella has given the task to form a technocratic government

[Slide change: a picture of the economist's head and upper torso appears on the left half of the screen: he looks fairly casual in a slightly open shirt, the strap of a bag, presumably containing a laptop and important documents, like an epaulette on his jacket-clad shoulder. His hair is greying and a little receding, the skin of his slightly tanned face forms two double parentheses around his smiling mouth. He looks confident and, although he must be at least 60, I think, rather young for his age]

CARLO COTTARELLI

Born in Cremona in 1954

Married and father of two children of 25 e 24.

[after a few seconds]

He is Director of the *Osservatorio sui Conti Pubblici Italiani dell'Università Cattolica di Milano* [Observatory of Italian Public Finances of the Catholic University of Milan]

[zoom in on the image, the slide changes. Now Cottarelli, in a black and white image, wearing a jacket and tie and holding an impeccably well-folded light coat, is surrounded by journalists, all following him]

STUDIES AND FIRST RESPONSIBILITIES

Undergraduate degree in Siena, MA at the London School of Economics ...

The video then continues with the various positions he covered over his career. I cannot help noticing how the ‘married and two sons’ has the function of framing the man as serious, responsible, capable, even before being told what he has actually done. ‘Born in Cremona in 1954. Single and childless’ or ‘married and with no children.’ What effect would that have had on the viewer? How would that have impacted upon a viewer’s perception of his skills?

The importance of filler dialogue

Okkupert [Occupied] (2015–)

‘In the near future, Norway is occupied by Russia on behalf of the European Union, due to the fact that the newly elected environmental friendly Norwegian government has stopped the all important oil- and gas-production in the North Sea.’¹⁰

Undated, my notes

In this scene Wenche Arnesen (Ragnhild Gudbrandsen), the head of the PST (Norwegian Police Security Service—it could be compared to the British MI5), meets an activist from a resistance organization, *Fritt Norge* (Free Norway), against the Russian occupants. Arnesen intends to secretly support *Fritt Norge*. They meet in a secluded place, in Arnesen’s car.¹¹

ARNESEN: We don’t have time.

ACTIVIST: OK?

ARNESEN: Close your door.

ACTIVIST: What’s going on? Is this some new method?

ARNESEN: There are people who are willing to sacrifice something for their country. People with nothing to lose. I am one of them.

ACTIVIST: No husband. No children. All you have is a career where you have to kiss the enemy’s ass.

ARNESEN: My husband died five days after our wedding. I have no children. But I do have a brain tumour. The doctor gave me six months. But I have never kissed anyone’s ass. That isn’t my style.

ACTIVIST: How naive do you think I am?

ARNESEN: Naive enough to think an academic and some angry boys can win

10 IMDb (n.d.). Okkupert. https://www.imdb.com/title/tt4192998/?ref_=fn_al_tt_1.

11 Springfield!Springfield! (n.d.). Okkupert. Season 1, Episode 5, “August.” https://www.springfieldspringfield.co.uk/view_episode_scripts.php?tv-show=okkupert-2015&episode=s01e05.

against the Russians. I'll contact you on this [hands him a mobile]. It's secure.

Would this conversation have gone the same way if Arnesen had been a man?

Jordskott (2015–)

‘A detective returns to her hometown seven years after her daughter’s disappearance, trying to find a connection to a current case.’¹²

In season 2 of the series detective Eva Thörnblad (Moa Gammel) heads back to Stockholm from her hometown in the attempt to resume a normal life. However, the discovery of a body floating beneath the ice in a suburban lake opens new questions that bring her past back. In the first scene she is returning to the lake, where the body was found, together with Bahar Holmqvist (Ana Gil de Melo Nascimento), another detective she is sharing the investigation with, and Ida, the child of a colleague.

Undated, my notes¹³

BAHAR [having observed Eva collecting information from a child in the playground]: You're good with kids.

EVA: I like kids better than adults. Even when they lie, they sound more honest.

BAHAR: You should have a talk with my gang back home.

EVA: “Gang”? How many do you have?

BAHAR: Four. Two mine and two “bonus.” Hugo and Vilma are 14 and 10 while Dario and Lilith are 6 and 4. It is many and mornings are the worst. They wanna sleep in my bed, they don't wanna eat breakfast and I'm always forgetting something. It's total chaos, there's always someone ill. I love it though, you get so much in return.

EVA: How could he survive in the water [the man they found under the ice was still alive]? I wonder if somebody is missing him. He's gotta have some family.

BAHAR: Yes.

EVA [talking to Ida, who is throwing sticks into the water—trying to hit something?]: Get a longer stick so you'll hit it. Be careful not to fall into the water.

BAHAR: Eva, there's been talk about your daughter at the station. Josefine [all is publicly known is that she disappeared years ago].

EVA: Yes.

12 IMDb (n.d.). “Jordskott.” www.imdb.com/title/tt2309405/?ref=fn_al_tt_1.

13 Springfield!Springfield! (n.d.). Jordskott. Season 2, Episode 1. www.springfieldspringfield.co.uk/view_episode_scripts.php?tv-show=jordskott-2015&episode=s02e01.

BAHAR: I was just thinking. Have you considered making a new family?

EVA: No.

BAHAR: A family means life, it is most people's dream to have it.

EVA: I'm not like most people.

BAHAR: She's been gone for so long.

EVA: I can no longer have children [she has swallowed a *jordskott*: a fictional parasite, which gives its name to the series, that can enhance the senses but also, if not fed appropriately, be life-threatening for the host. It appears that a pregnancy is not viable when carrying it].

BAHAR: Sorry, we had to talk.

EVA: Ida!

Later in the series, Bahar confronts Eva over a murder she believes Eva has committed:¹⁴

EVA: Bahar?

BAHAR: So you're back? I didn't think you'd be back. Can I come in?

EVA: What happened?

BAHAR: Eva, I thought we were friends.

EVA: Of course we are friends.

BAHAR: Drop it. I matched the bullet from Silo [location where a murder has taken place] with the one who killed Desirée. The real one, hidden behind the picture. Desirée was killed with your service weapon. Why did you kill her?

EVA: Bahar, I haven't murdered anyone.

BAHAR: I have nothing on you Eva, since someone stole the bullet, but I'll keep looking until you get charged.

EVA: I had nothing to do with Desirée's death.

BAHAR: Explain it to me, then.

EVA: I can't right now. You have to trust me.

BAHAR: I'm not surprised you're alone. You only spread chaos and pain.

I have seen this all before, in the movies I have watched: children make one more "humane."¹⁵ People without children, in the logic of the plots I have deconstructed and analysed, as a result, are cold and even evil. And because they cannot be happy by having children—family is assumed, as here, to be the realization of happiness—they want to damage (out of envy? It is never really clear why, as if this was some kind of inexplicable urge they have) other people's lives.

14 Springfield!Springfield! (n.d.). Jordskott. Season 2, Episode 6. www.springfieldspringfield.co.uk/view_episode_scripts.php?tv-show=jordskott-2015&episode=s02e06.

15 It is precisely while editing version 16 of this chapter, during my lunch break, that I come across the headline, in an Italian newspaper, "Serena Williams and the power of love[:] 'My daughter made me more human'" (Piccardi 2018).

By the Sea (2015)

‘A couple tries to repair their marriage while staying at a hotel in France.’¹⁶

Undated, my notes

Roland (Brad Pitt) tries to understand why his wife Vanessa (Angelina Jolie Pitt) has tried to destroy the relationship of a newly-wed and younger couple, Lea and François, who lives next door in the hotel.¹⁷

ROLAND: Why? Say it. Why? Look at me. Look at me!

VANESSA: No! [WHIMPERS]

ROLAND: Why?

VANESSA: Stop. You know why.

ROLAND: Be honest. Say it. Say it. Come on. Look at me. Why? Because you can't have what they have.

VANESSA: No. [CRYING]

ROLAND: Say it.

VANESSA: No.

ROLAND: Because you can't have what they have. Because you're jealous.

VANESSA: No! No!

ROLAND: You're sick! You're sick.

VANESSA: [SOBBING]

ROLAND: You would ruin them to make yourself feel better. You wanna hurt them.

VANESSA: No! I wanted him! Yes.

ROLAND: No! No! No. You're jealous because you're barren.

VANESSA: No.

ROLAND: You hate them. You hate them! Say it! [YELLS] You hate them.

VANESSA: [CRYING]

ROLAND: You're jealous. You hate them ... because you're barren. And I've loved you anyways. You don't want him [Vanessa has tried to seduce François]. You want me. You want children with me. You don't want him. You love me. Say it.

VANESSA: I'm barren. I'm barren. [SOBBING]

[Roland and Vanessa hear LEA AND FRANÇOIS QUARRELLING NEXT DOOR; DOOR SLAMMING]

ROLAND: Well done, darling. It seems you've just destroyed a happy marriage.

16 IMDb (n.d.). By the Sea. www.imdb.com/title/tt3707106/?ref_=fn_al_tt_1.

17 Springfield!Springfield! (n.d.). By the Sea. www.springfieldspringfield.co.uk/movie_script.php?movie=by-the-sea.

ROLAND [later trying to speak to François]: Could I speak with you for a moment?

FRANÇOIS: I don't wanna speak to you.

ROLAND: It's not what you think it is. [SOBBING] This is something that started three years ago, when we first tried to have a child. We lost that child in the first term ... so we tried again. We lost that baby, too.

ROLAND [later, to Vanessa]: They said they were going to try and fight past it. That going through something horrible could even make them stronger. She's pregnant. I assume you knew that.

VANESSA: I'm not a bad person. Am I a bad person?

ROLAND: Sometimes.

VANESSA: [SNIFFLES]

ROLAND: We gotta stop being such assholes.

When even emoticons are pronatalist

Individuals with children are the majority, so it is not surprising that even the emoticons on Skype¹⁸ are oriented towards family as the norm. Among the emoticons I notice, for instance, “super mum,” a woman in a superhero costume with long hair flowing in the wind, “family time,” an unfolding figure of a woman holding hands with a little girl and a little boy, and “dad time,” the same, but with a male figure holding hands with the children. What is, from my perspective, less justifiable is the turning of the notion of “busy day” into a changeable female figure that transforms herself from a mum rocking a baby in her arms, a tennis player, and a worker sitting on an office chair with a computer on her lap: Do men never have busy days? Are people without children assumed to have more free time? I am not blaming Skype when “polar bear” is a white bear hugging two cubs. It looks cute. But that is the thing: cuddling with children is a highly desirable situation to be in. If you cannot do that, you are denying yourself a priceless experience.

The puzzling “avocado love” is two anthropomorphic avocado halves that complete each other. Is the half with the round stone supposed to represent the pregnant side of the couple? Is pregnancy seen as the natural development of a perfectly fitting relationship? At the end of the day this is just an avocado—what agenda is a sliced piece of fruit supposed to have? Yet, the sweetness of this image is implicitly related to the “family dream” the perfect couple is expected to start. Wherever I turn, as a childless person, I am reminded that I am missing out.

18 See the full list provided by Skype Help (n.d.).

Researching childlessness

The risks of getting personal

As for revealing my personal story, the decision to expose my private life in its details has not been easy. In this respect, being a woman dissecting her own life and being childless are a double liability. First, female writers who talk about themselves tend to be judged differently from men. As prize-winning American-Norwegian writer Siri Hustvedt (in Finneide (2017), my translation) provocatively put it when interviewed about Karl Ove Knausgaard's six-volume sensation *Min Kamp* [My struggle]:

If a male author writes about his life and his feelings, he is sensitive, open and insightful. When women do the same, they just become personal and pathetic. If a woman had written the *Min Kamp*-books of Karl Ove Knausgaard, they would have never been published, or if they had been published against expectations, then they would not have got any attention. I am absolutely sure about this. Even if I—and I am after all a name in the world of literature—had written them, I believe that people would have just been horrified. Thousands of pages of self-disclosures from a woman? Come on!

Coming out as member of a stigmatized group might also not be helpful professionally. Carol Rambo Ronai (1995: 402) writes, in this respect, about the reactions to the idea of researching her own experience of child sexual abuse, another taboo topic:

Several people told me not to talk about these experiences. When I suggested my own experiences with child sexual abuse as a research topic, one sociologist advised me to investigate the general topic, using my own story as one of my interviews. In other words, he told me to bury it in other data. 'Why?' I asked. 'Because it might harm your professional career if it were known, and your work may not be taken seriously,' was his response.

Not only could dealing with emotion and the "personal" work against my academic reputation in a field where detachment and rationality are expected to be the hallmarks of the true scholar. Childless individuals are often unconsciously perceived as selfish, less trustworthy, unreliable, and mentally unstable. It is well documented that individuals without children are assumed to be emotionally troubled (Koropecykj-Cox *et al.* 2015; see also Jamison *et al.* 1979; Calhoun and Selby 1980; Mueller and Yoder 1997; Kemkes 2008). This is the unfortunate legacy of early (psychogenic, that's the technical term) explanations of infertility that attributed the failure to reproduce to a psychological malfunctioning in women. Charlene Miall (1985: 386), in reviewing previous research, shows the extent to which this led to outright dehumanizing portrayals of the infertile:

Indeed, infertility has been conceptualized as nature's way of preventing the psychologically inadequate from reproducing:

As Harlow's disturbed monkeys could neither reproduce nor effectively nurture, that seems true for people too. It is as though to some extent one of nature's failsafe mechanisms is infertility in those who are not psychologically healthy enough to nurture.

[Bardwick, 1974: 58–59]

Although there is no evidence that infertility is caused by psychological factors (for some examples across the years see Greil 1997; Wischmann 2003; Boivin and Gameiro 2015), this perception is still strong (Boivin and Gameiro 2015: 252):

The legacy of the psychogenic model has been significant. It made possible [the] entry of psychology into the exclusive obstetrics and gynecology club, which might not have happened if psychologists had only offered methods to make patients feel better. Psychosomatic questions are also the origin of much of the research contributing to our present multifactorial and broad understanding of the factors that influence conception and the capacity to reproduce. However, there are less positive legacies. Early case reports [of infertility] are the source of many persistent myths and unhelpful and ineffective advice given to couples trying to conceive (relax and you'll get pregnant, don't think about it and you'll get pregnant) that sometimes unnecessarily delay treatment.

In summary, openly revealing my childless status might make it easier to dismiss both my arguments and me as a person.

The importance of being heard, regardless

So, as a childless voice, I am aware that I am at a disadvantage from the start. However, revealing my own experience and facing the risks that come with embracing vulnerability adds, I believe, to the power of my account: I do it because I deeply believe it is worth it. Because silence breeds pain and there is a need to talk and be heard to heal the suffering. Speaking out is in itself a political act of resistance (Denzin 2003). Not only does it contribute to changing the public discourse it aims to challenge for the very fact of being available. It also sends a message that might remain unheard by those who are not paying attention to it, but comes across loud and clear to the individuals who are searching for it, those who are in similar circumstances to mine: "You should not be afraid to speak out because your point of view, ours, should be as valuable as that of anyone else." I speak, therefore I also listen to you.

Childless on screen

Researching the invisible in plain sight

I want to find out how childless individuals are portrayed in film. The study I have in mind, however, raises a range of challenges before I can even start it. How does one research the representation of a topic that, effectively, does not exist? Childlessness is about so much more than not having a baby. Yet, the majority would tend to associate it with infertility. But even buying into the majority's definition, there are extremely few movies that deal explicitly with this topic. I need to dig into the plots to find characters, mostly secondary ones, who do not have children. Everyone at some point in their life, though, did not have children. At which stage does not having children become "an issue"? I already mentioned that in Norway the *moderskapsmaset* or "motherhood harping" (Moi 2004), at least for women, starts in their twenties. In other Western countries, however, not having children silently stalks, like an invisible elephant figure slowly walking behind them, women in their thirties. Yet again, the availability of fertility treatments makes that elephant walk around a bit longer, until women are in their forties. And in the case of men, whose fertility is (wrongly) assumed not to be affected by the passing of time, at what age might not having children become a "thing"? Is it ever an issue? How do you research a topic you cannot even put boundaries around and pin down?

I decide to look for movies where not having children might be relevant to the plot. But once more, how to identify those movies? The Italian Cinema Database of ANICA (*Associazione Nazionale Industrie Cinematografiche Audiovisive e Multimediali* [National Association for the Cinematographic, Audiovisual and Multimedial Industries]) (n.d.), allows searches on the text of the movie plots, and these are fairly detailed.¹⁹ The equivalent of "childless" does not exist in Italian, so I look for "*senza figli*-without children," "*infertilità*-infertility," "*sterile*-sterile." Some of the movies, after having tried to buy their DVD or VHS online, are no longer available in any format, so I spend a sizeable chunk of my yearly departmental research funding to travel to Rome for a week and dig into the movie archives at the *Centro Sperimentale di Cinematografia* [Experimental Cinematography Centre] to watch them. A few even need to be digitized before I am able to access them. This requires multiple phone calls and email exchanges months in advance of my trip, further showing the amount of effort, time, and resources required for investigating non-mainstream topics—which partly, logistically, explains why they tend to remain that way.

The American IMDb (n.d.) database allows me to conduct keyword searches. I try "childless" and discover that somebody, in a place somewhere in the US (presumably), at some point in time, has, movie by movie, attached terms that now affect the list of titles I retrieve:

19 www.archiviodelcinemaitaliano.it/.

childless (7 titles)
 childless-couple (68 titles)
 childlessness (63 titles)
 childless-marriage (19 titles)
 childless-mother (5 titles)
 childless-woman (2 titles)

Judging by the list, “childlessness,” in the mind of the label-attacher, is not a man’s issue. What looks to be an objective search made by a machine is in fact the result of decisions—which might be wrong or affected by individual bias or unconscious stereotypes—of one or more human beings. These people may or may not have been childless themselves. Even if childless, they may still have bought into the majority perspective on childlessness (i.e. it is a female “problem”). Extricating oneself from the dominant view is more difficult than I had first thought. How does one get around this in-built bias in the very way we organize and categorize the world?

When it comes to the database of the Norwegian Film Institute (NFI) (n.d.) I can enter terms to search the movie titles. “Childless” whether in English or Norwegian (*barnløs*) retrieves a blank space that does not even seem to deserve a message of apology. However, there are several movies that contain the terms “family,” “children,” “parents,” “mother.” Childlessness is not a topic Norwegians make movies about—I learn, in fact, that the country is known internationally for its films about children and stories of “coming of age” (Cowie 2005: 17–25)—or at least it is not worth mentioning it in the title. I also start to understand the constraints of making cinema in a small country: producing a movie is so expensive that it would be an unviable activity in Norway without extensive state support (Holst 2006). The fact that such funding is taxpayers’ money means that it needs to be used for topics that are most socially relevant. To me this spells out “relevant to the majority.” In these circumstances, a minority issue like childlessness is a bad candidate to become a priority to start with. What do you do when even funding policies are against you?

To identify viable movies I thus have to talk to my Norwegian colleagues in Film Studies.²⁰ I ask them to think about any movie they have watched where they remember a character without children. I also arrange a meeting with Jan Erik Holst, former director of the Norwegian Film Institute and author of multiple books on Norwegian cinema (I count at least nine on the database of the Norwegian National Library), and even a Norwegian cinema encyclopaedia. He literally has watched *all* Norwegian movies—the country is small enough to produce a relatively limited number of films, so watching them in their entirety is actually possible. Not only does he extremely kindly agree to talk to me, but he also sends me a few books on Norwegian cinema in the post. After several

20 Thanks to Jon Inge Faldalen and Ove Solum at the University of Oslo.

chats, coffee meetings, and yet more rounds of email exchanges, I compile a combined list of all these experts' suggestions.

My sample, in the end, includes 18 films from Italy, 17 from Norway, and 15 from the US.²¹ They span the timeframe 1949 to 2017. It is the first systematic and large-scale study, as far as I know, specifically focusing on the representations of the involuntary childless.²²

Disturbing findings in a nutshell

Analysing how individuals without children are portrayed on the screen means, within my study, conducting a comprehensive examination of the characters' features and motives within each story plot: Who are the childless in the story? What do they do? What are their values? Since I am dealing with film, I am of course interested in visual appearance and actions: What do the childless look like? What do they wear? Which spaces do they inhabit? What do they eat? How do they move?, but also in their dialogue, whether audible or "internal": What do they say? What do they think?

Any character, its actions and features, serves naturally the requirements of a story plot. Yet, it is interesting to notice that, whenever a character needs to be available at any time of the day—think about detectives—or tends to behave childishly, or fits the characteristics of a villain—can you think of an evil character who has children?—then the choice tends regularly to fall onto a childless person.

It takes me months to watch all the movies I have selected. It would have been great to go through them by country. I like order. But I need to arrange them so that comedies and drama balance out and do not tip me over the emotional edge. With a horror movie about surrogacy—*Shelley* (2016, in fact a Danish film, but it was recommended by my colleagues as widely shown in Norwegian cinemas) I have to distribute the watching sessions over several days and even switch the sound off at certain points to make it less terrifying.

This is what I find, with references to movie examples you might like to watch (or just Google to get an idea of what the characters I mention look like), and without much embellishment. The childless either die, mostly because they commit suicide (especially in Norway: *Skadeskutt* ['Wounded'], 1951; *Limbo*, 2010; *Søndagsengler* [The other side of Sunday], 1996; suicide is also suggested in the ending of *Jentespranget* [Lina's wedding], 1973) or are killed (for instance, in *Døden er et kjærtegn* [Death is a caress], 1949; *Fatal Attraction*, 1987; *The Hand that Rocks the Cradle*, 1992). If they don't die, it is because they become "normal" by acquiring a baby, often against all odds: by conceiving with a husband's look-alike (*Over stork og stein* [Stork staring mad], 1994); by magic (*Ma non per sempre* ['But not forever'], 1990); through complicated sur-

21 See the complete list in the Methodology appendix.

22 For a discussion of the scant literature on the way the involuntary childless are represented in the media see Archetti (2019: 178–180).

rogacy arrangements (*Venuto al mondo* [Twice born], 2012); by adopting (*Padri e figli* [A tailor's maid], 1957; *While We're Young*, 2014); having access to others' children (in *Raising Arizona*, 1987, by kidnapping a child); having a baby donated to you (*Il futuro è donna* [The future is woman], 1984); finding a baby in a basket on the doorstep (*Noe helt annet* ['Something totally different'], 1985), or in a rubbish bin (*Il cosmo sul comò* ['The cosmos on the commode'], 2008).

If a childless person manages, without a child, to get on with life, it is because the person in question is either a female superhero (*Wonder Woman*, 2017; the character of Black Widow [Scarlett Johansson] in *The Avengers: Age of Ultron*, 2015), a female astronaut (the main characters in *Prometheus*, 2012, and *Gravity*, 2013), or a man (*Up in the Air*, 2009; *La grande bellezza* [The great beauty], 2013; *Knight of Cups*, 2015).²³ This implicitly points to the fact that, while for men it tends to be socially acceptable to be childless, for a woman it seldom is, unless she is devoting herself to a higher cause for the sake of entire humanity.

In fact, ordinary women without children, within the plots I have analysed, have no reason to live—compare Vanessa [Angelina Jolie] in *By the Sea* (2015) to Jep Gambardella [Toni Servillo] in *La grande bellezza* ([The great beauty], 2013). Alternatively, to juxtapose two characters within the same movie—*1001 gram* [1001 grams] (2014)—one can observe the striking difference between the increasingly depressed lead character (a childless female scientist) and her love interest, a kind and cheerful Frenchman (a childless male scientist).

Childless individuals, on top of this, are weird, cold, neurotic, and hysterical at best (*Who is Afraid of Virginia Woolf*, 1966; *Un fiocco nero per Deborah* [A black ribbon for Deborah], 1974; *While We're Young*, 2014), out to destroy other people's lives at worst (the Queen [Salma Hayek] in *Il racconto dei racconti* [Tale of tales], 2015; Ravenna [Charlize Theron] in *The Huntsman: Winter's War*, 2016). It occurs to me that I could have included *Snow White and the Huntsman* (2012)—the evil witch is childless—but I was limited by my own rules of inclusion: childlessness does not figure in the plot. Their terminator-like destructive fury (*Fatal Attraction*, 1987; *The Hand the Rocks the Cradle*, 1992) is often the reason why no other choice is left but to kill them to defend oneself (and the nuclear family) from their evil.

The childless tend to lead a disordered life. They drink alcohol, smoke, consume junk food, and behave irrationally: the lead character Mavis [Charlize Theron], in *Young Adult* (2011), for instance, gets drunk as a matter of daily routine. The wife in a childless marriage is shown, in *Kassierer Jensen* ([‘Cashier Jensen’], 1954), as lazily reading romantic novels and eating chocolates while her husband is at work. In the notes I took while watching this last movie, I find: ‘The close up of the chocolates underlines the sense of indulgence: even in black

23 I introduced these last movies depicting the stories of, objectively, childless men, even if being without children did not figure in any of their plot descriptions. I purposely broke my rules for deciding what to include in the study. I realized I had to in order to correct the majority's bias according to which childlessness is not a male issue.

and white they look luxurious in their elaborate decorations, different shapes, some of them in shiny wraps. We see the wife's eager hands picking three of them in short succession.' Alex [Glenn Close] of *Fatal Attraction* (1987) is shown sitting on the bed and trying to ring Dan ([Michael Douglas], who has disconnected the phone) while surrounded at once by a tub of ice cream, Oreo biscuits, a packet of crisps, a glass that contains what looks like white wine, and an ashtray with a cigarette. This is just before she starts violently stabbing the buttons of the phone with a pencil.

The childless also live in empty, soulless flats. The lead character in *1001 gram* ([1001 grams], 2014), Marie [Ane Dahl Torp], can be seen in several scenes of the movie drinking wine in the dark, in a flat getting emptier and emptier as her divorce moves along. A reason for this unruly life, it appears, is that the childless are not truly able to take care of themselves because they are not real adults. The tagline of *Young Adult* (2011), underlining this point, is '[e]veryone gets older, not everyone grows up.' Corinna [Naomi Watts] and Josh [Ben Stiller] in *While We're Young* (2014) become finally adult, after having spent most of the story with a younger couple in their twenties, by taking the decision to adopt. Although this set of movies was not part of my sample, the *Bridget Jones* trilogy (*Bridge Jones's Diary*, 2001; *Bridget Jones: The Edge of Reason*, 2004; *Bridget Jones's Baby*, 2016) similarly portrays a figure of fun that finally gets "normalized" and turned into a "grown up" through getting married and having a baby. Bridget's [Renée Zellweger] character, by the way, also consumes plenty of ice cream, binge-drinks, and smokes.

Women, in the stories I have analysed, are so affected by the inability to bear a child that their characters tend, as a result, to show extreme signs of stress and even develop mental illness. An illustration is provided by Gemma, the tormented character played by Penelope Cruz in *Venuto al mondo* ([Twice born], 2012) or Deborah [Marina Malfatti] in *Un fiocco nero per Deborah* ([A black ribbon for Deborah], 1974).

In addition to this, there seems to be a suggestion that their frustrated urge to procreate leads them to be sexually out of control. Vanessa [Angelina Jolie] tries to seduce a younger man in *By the Sea* (2015). This aspect is brought to the extreme in the story of Valeria [Barbara Bouchet], a barren woman who is obsessed by sex and ends up locked in a mental asylum, in an Italian movie (*Valeria dentro e fuori* ['Valeria inside and outside'], 1972). This latter film, which dwells on the verge of pornography, is a disturbing journey into the character's hallucinations. It made me feel dirty and uncomfortable watching it. I had to fast-forward some scenes. It entirely spoiled one of my days at the Experimental Cinema Centre in Rome.

Beyond the negative stereotypes, the problems with these representations are that life without children is never an option and that a woman who is not technically barren can always get pregnant, and mostly at first attempt—see *Maggie's Plan* (2015) or *Over stork og stein* ([Stork staring mad], 1994). In fact, childlessness appears to be a "temporary" condition until it gets "solved." Childlessness

by circumstance does not exist. Neither does unexplained infertility. Miracle babies are the norm.

I would have expected Norwegian movies to show more open-mindedness towards childless women, out of a tradition of gender equality. I expected that Italian movies, especially from the past, would be more conservative, along the line of a longer history of patriarchy and a Catholic culture. Instead, I found Norwegian films, even contemporary ones, to be strongly stereotypical and matching the conservatism of Italian films from the past. Italian movies from the 1980s onward, in fact, are considerably more daring in portraying characters who challenge the norm. Several films, for instance, deal with male infertility, an issue that is never squarely addressed within the rest of the sample with the exception of the Norwegian *Skadeskutt* ([‘Wounded’], 1951). Even in that case, however—and confirming points I made earlier—the childless character (who is mentally ill *because* of his infertility) provides a questionable “happy ending” to the story by committing suicide.

Although most of the Italian movies dealing with male infertility are comedies (*Il gatto mammone* [The mammone cat], 1975;²⁴ *Le donne non vogliono più* [‘Women no longer want’], 1993; *Il cosmo sul comò* [‘The cosmos on the commode’], 2008), they do manage to breach “a taboo within the taboo.” In *Il bell’Antonio* ([Bell’ Antonio], 1960), a drama that was nothing short of revolutionary for its time, the character of Antonio [Marcello Mastroianni] further presents the drama of male impotence. In contrast to the personal, “domestic” trauma of female infertility, this is portrayed as a very public issue. In the Sicily of the fascist time in which the story is set, sexual prowess appears to be equated with social and political status: Antonio’s impotence becomes thus a source of shame for his entire family. Interestingly, the story is based on the homonymous novel *Il bell’Antonio* (1949) by Vitaliano Brancati, which some have interpreted as dealing with homosexuality in its subtext (e.g. Rosler 2000). This, however, would have been far too incendiary for the screen—a case in which one form of deviance/taboo, impotence, is after all more acceptable, in the Italian society of the time, of even the mere suggestion of homosexuality.

It is also mostly in Italian movies that childless women are presented as strong and resilient. Examples in this respect are *Donna d’ombra* ([Shadow woman], 1988); *Ma non per sempre* ([‘But not forever’], 1990); *Viaggio sola* ([A five star life], 2003); *Due partite* ([‘Two card games’], 2009). A notable Norwegian exception is *37 og et halvt* ([‘37 and a half’], 2005); The protagonist, Selma [Helén Vikstvedt], clumsy and unglamorous, is a Nordic version of Bridget Jones. She triumphs over her detractors, in the end, by becoming a columnist for a national newspaper, as it was her dream, and by even getting a boyfriend. However, she is still a comic figure which cannot be taken seriously until

24 This title appears to play on a double meaning: *gatto mammone* (mammone cat) as a terrifying creature from the fairy-tales, and *mammone* (mama’s boy).

she has a job and a relationship. She is 38-and-a-half years old by the end of the movie. We can imagine she is still on time for trying for a baby—or IVF.

Viaggio sola ([A five star life], 2003) was the last movie I watched. It was also the Italian film in which, most clearly within the whole sample, a childless adult woman, Irene [Margherita Buy], was neither portrayed like a figure of ridicule nor pitied. Irene plays the forty-something childless and single character of a “mystery guest” who travels to the most luxurious hotels in the world to review their standards. In the story she is *respected*, together with her choices and her lifestyle. She is treated, in fact, as a male character would have been.

Fiction becomes reality

What I found about the representations of the childless is not unique to their group. Stereotyping and stigmatization on screen also affects other minorities. Asian characters on British TV, for instance, tend to be moulded onto the stereotypes of the prostitutes when female, techy guys and geeks, servants, or sexual predators when male (Khan 2017; Levin 2017). Half of Latino immigrant characters in TV programmes in the US (2014–2016) were found to be represented committing an unlawful act (The Opportunity Agenda 2017: 5). Larry Gross (2001: 63), who examines the progressive gain of visibility in the US media by gay and lesbians, writes that ‘out of thirty-two films between 1961 and 1976 with major lesbian or gay characters, thirteen feature gays who commit suicide and eighteen whose homosexual character are murdered.’ It is known that stereotypical representations affect negatively the perceptions of the groups portrayed (The Opportunity Agenda 2013).

In my own study I further gathered evidence about the way in which media and popular culture representations come silently and, through a daily drip of messages we might not even consciously notice, to constitute the assumptions that underpin our reality. Not only did I talk to several childless people who said they thought—along the lines of the film stories I analysed—that getting pregnant would be easy and that fertility treatments could, in the worst case, *always* fix the problem. That’s what I believed, too. In fact, I did not *believe* it. I took it entirely *for granted*. The discrepancy between the high hopes supported by these false impressions and the reality of infertility created, both for me and for my interlocutors, more suffering than if we had been aware that having a child does not work out in *all* cases. In addition to this, as a result of practically never hearing about the experiences of others who are in similar circumstances, often the childless themselves believe the stereotypes. This tends to happen, as Gross (2001: 16) documents in relation to gays in the US, when there is no other discourse available about a minority but the clichés produced by the majority. As a participant to an event I organized wrote to me afterwards: ‘[it] was an overwhelming experience to be able to talk about this [childlessness] openly with other people. I [...] left [...] with what felt like a new reference point in my own process [of dealing with infertility]—Meeting sane, nice, intelligent, childless

people I could identify with.²⁵ These last words brought sharply to my attention the subtle power of media representations in building unconscious assumptions—in this case again reflecting the portrayals I analysed—that other childless people are mentally disturbed.

The film analysis also helped me unravel the roots of the shame associated with being childless and its political consequences. While individuals affected by stigma—like infertility—are expected to be acutely aware of how they ‘fall short’ of the way they ‘ought to be’ (Goffman 1963: 7) and are thus conscious of it, stigma is socially constructed (ibid.: 3). The negative representations I have illustrated do contribute to the public discrediting of the childless and their consequent self-censorship. The less visible the childless, in turn, the more excluded they become from public discourse and the more society, socially and politically, becomes organized around the needs of “the others” with families.

There is, one could argue, no obligation on the part of a director to present an accurate portrayal of reality—film is art. The fact that “nobody does it on purpose” and that it is “only fiction,” though, does not mean it does not have real effects. Besides, art, and cinema with it, is always political. As Bertold Brecht (1978, in Storey 2012: 3) once put it in relation to theatre: ‘Good or bad, a play always includes an image of the world. [...] There is no play and no theatrical performance which does not in some way affect the dispositions and conceptions of the audience. Art is never without consequences.’

A demonstration of how seriously media representations of female characters in movies are taken in terms of their contribution to gender equality in broader society is the fact that Swedish cinemas have started attaching “A rating” to the movies that satisfy the “Bechdel-Wallace test”’s criteria (Kang 2016; A-list Film 2018). To pass the test, named after American cartoonist Alison Bechdel and her friend Liz Wallace, a work of fiction must feature: (1) at least two named women, (2) who talk to each other, (3) about a subject other than a man. Although these criteria started out as a set of humorous observations in comic *Dykes to Watch Out For*, in a strip entitled “The Rule” (Bechdel (1985), in Bechdel Test Movie List n.d.), they are often invoked to underline how pervasive and subtle the power of

25 When I shared the text with the person who contacted me to ask for her permission to use the quote, she further added (text also used with permission):

It’s an honor to be quoted in your book, Cristina! And, yes, it does fit well into the discussion on how narratives on childlessness cause damage to the self image as a normal person and woman. Reading this, it also brought to mind my encounter with the gynecologist at the fertility clinic, who within the first 10 minutes said: “We’ll get you pregnant! Within 2 years at the most you are a mom!” I remember being puzzled and speechless at her proclamation, as if she held all secrets in her hand. I experienced just what you so perfectly write: it created more suffering than if she had said the truth, that it does not always happen. Her office was wallpapered with the baby-successes of previously patients with their smiling babies. I remember walking out the last time, realizing I didn’t even pass the test of normalcy. It was a hard realization of “a not working body”, becoming “a not working me”. Till this day, I fight that underlying feeling she created, that I am only half-complete, I flung the exam, I don’t have what it takes.

patriarchy is, despite the widespread social narrative of female emancipation: even children's movies like *The Boss Baby* (2017), *Finding Nemo* (2003), or *Toy Story* (1995) do not pass the test (Bechdel Test Movie List n.d.).²⁶ Following observations that characters from ethnic minorities tend to be associated with illegal activities, another set of criteria—the “Chavez-Perez test”—has been developed to determine whether two non-white characters in a movie speak to each other about something other than crime (A-List Film 2018).

When it comes to childlessness, too, representations have far-reaching consequences that extend beyond individuals without children. Glossing over the trauma caused by fertility treatments and their failures in (in)fertility reality TV (de Boer *et al.* 2019: 14), for instance, as I and others concluded, conveys the ideologically laden message that

women's essential role in life is motherhood, that not being able to conceive “naturally” is a matter of failing womanhood, that women are responsible and have to take the blame for their infertility and their reproductive choices, that they must be willing and able to discipline their unruly lives and bodies during infertility treatment, that they are always able to conceive with technological assistance, and ultimately, that remaining childless is not an acceptable option.

An analysis of the “politics of survival” in the science fiction TV series *Battlestar Galactica* (Hellstrand 2011: 21) similarly shows the parallels with contemporary biopolitics (with particular reference to the case of the Norwegian welfare state, in fact), where reproductive ability is ‘a sacred quality that supersedes individual freedom’ and ‘post-human [technology assisted] reproduction’ is ‘an evolutionary advancement the female body cannot refuse.’

Responding to the results of the analysis, and in the same provocative spirit of the previously mentioned tests, I close this discussion with a practical suggestion to sensitize film-makers and audiences to the perspective of a growing group in our society: some criteria to refer to in order to ensure that the representation of individuals without children is not gratuitously stigmatizing. To pass it, a film should show a childless character: (1) whose life is not meaningless; (2) who is not trying to acquire a child at all costs; and (3) who dedicates her/himself to activities other than ruining other people's lives.

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26 And one could argue that, even if female characters are present and talking to each other about something different than men, perhaps they are still not the protagonists of the story. On this point I recently read that a mere 27 per cent of lead roles in Norwegian films are played by women (Lindblad 2018).

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Folder 6

Narratives I: an old story begins to fall apart

1 December 2017

Another dream: *I am in my old bedroom in Sulzano. Two branches covered in yellow flowers protrude from the wall. One is bigger, with broom flowers [genista aetnensis], and pierces the wall under the window, where the radiator would be. Another, smaller one, with minuscule yellow flowers, grows through the wall closer up to the glass of the window. This is the window on whose windowsill I sat writing the purple poem.*

6 December 2017

My personal story has evolved from feeling guilty and individually responsible for not having children to finding an active role in a broader plot. It is interesting how, despite the fact that unexplained infertility is a common diagnosis for a *couple*, I kept on thinking that it was *my* fault, *I* was failing my family.

I was. I am another character now. I inhabit a different space of imagined connections. I have been looking for this new space, house, country to move in all along. This is what getting over anything is ultimately about: finding another story. Or rather, *building* it.

Extricating yourself from the old story is difficult. When I think “extricating” I see myself as Gulliver being tied to the ground by myriad threads. No, the giant is both tied and floating. The tiny people with the nagging voices will not let me go. The minuscule ropes reattach themselves continuously. They are a stable system that, like any other stable system, wants to remain in balance, fights change and disruption. Breaking all the threads one by one is exhausting, like fighting with countless insects that relentlessly keep on attacking you.

There is a safety net of objects that are there to catch me when I fall, like the porridge with walnut oil. My brother Emanuele once told me walnut oil had many useful nutritional properties. I can’t remember what they were, but I started using it because it reminds me of him. Although Emanuele has not been talking to me that much recently. He has moved back to Italy to set up his own company. He tends to be stressed and often, at least when he speaks to me on Skype, in a bad mood, so I have started adding whole milk to the porridge instead.

The story is under the surface, yet when needed it seeps out, like the medicinal resin that oozes out of a cut branch to heal the damage and stop the bleeding—plasters of story patches, big and small stories to hold us up, fuel us, heal us.

Why is a new story emerging? There are more pieces of the puzzle that I am combining differently. It is a game of rearrangement. Some re-editing is good, towards building, not destroying, towards nurturing oneself, not beating oneself up.

18 December 2017. From self-help books to PTSD

I am not well. I am giving up on the writing. I am too exhausted. ‘Why don’t you do some reading instead?’ Robin suggests, anticipating my complaints at struggling to find an interesting activity to absorb the 16 working hours that separate us from the holidays. He knows “taking it easy” is not an option. ‘You always complain that you never find the time to read. Take it as an end-of-the-year research treat!’ He is right, I think, looking at the double pile of unread, or only-very-partially-read books in the living room. I pick Jody Day’s (2016) bulky volume *Living the life unexpected*. “12 Weeks to your plan B for a meaningful and fulfilling future without children,” reads the subtitle. Except that I am going to go through it in two days.

I have read all of Day’s pieces in the *Guardian*, watched her presentations on YouTube, and consumed other material on the website of Gateway Women (n.d.). I had bought this for the sake of comprehensive and systematic research, given she is a leading figure, internationally, in the mobilization of the childless. It was her, in fact, that made me realize I was part of a group. She *politicized* me. I did not buy this as a self-help book because I do not need it. I am fine. I am doing research about the topic, see? Taking action, being proactive.

However, as I lie in bed with my aching neck, quickly turning the pages and only pausing to go through the suggested activities, not only do I recognize that this is, yet again, a political manifesto. I also realize that I have much more in common with other women in my circumstances—my story is not that *unique* really, no need to be so defensive about it in my book—and that the way I live is less “normal” than I had realized, even for being a childless academic who has moved to a foreign country.

I start feeling uneasy just by filling in the initial questionnaire. This is part of a “healing inventory” designed to help the reader measure how she (the book is mostly targeted at women) is ‘progressing’ towards a ‘better place.’ I like questionnaires, particularly examining the questions to reverse-engineer the assumptions behind a study. Instead of presuppositions I secretly hope to be able to challenge and maybe even disagree with, behind the questions, in a scale from 0 to 10, I recognize myself and my life over the past few years: [question] ‘6. How angry are you about how things have turned out?’; ‘13. How full of clutter is your home?’; ‘19. How often do you worry about your childless future?’; ‘20. How well do you take care of your body?’; ‘23. How kind are you to yourself?’; ‘26. How much do you feel like an outsider in your workplace or with

colleagues?'; '29. How many minor illnesses do you get?'; '34. How much importance do you give to leaving a legacy?'; '39. How happy are you to be alive?' (Day 2016: 5–10).

The passage that startles me is:

You feel sluggish, worn out and vague. You stay busy, *too busy*, at work, but at home you can't be bothered to do much at all. You're behind with all your life admin and surrounded by half-painted walls, unfinished projects and piles of books you can't quite get around to reading. You do not really have a social life anymore.

(Day 2016: 169, emphasis in original)

I can certainly relate to serially starting new research projects I quickly lose interest in. It took me 18 months to get around to tidying up my new office in Oslo. Always in relation to books, Day mentions later that she loses interest 'after about fifty pages' (ibid.: 175). I do after around 20.

I also read: '[r]ecent research has shown that as many as 50 per cent of women who had undergone fertility treatments had symptoms of post-traumatic stress disorder (PTSD), as compared to 8 per cent of the general population who are thought to suffer from it' (ibid.: 96). I put down the book and start searching, out of curiosity, how many soldiers returning from recent conflicts in Afghanistan or Iraq suffer from PTSD. I discover that a widely cited study, which investigated the mental health problems of four US combat infantry units, found that PTSD affected 18 per cent of soldiers returning from duty in Iraq and 11.5 per cent of those who had been deployed in Afghanistan (Hoge *et al.* 2004: 19). I admire Jody Day, but I am scientist, it is my job to have doubts, verify, ask questions. Can PTSD really be practically three times higher among women undergoing fertility treatment than among veterans returning from a combat zone? Could it be that, being an activist, even if motivated by the best of intentions, Day is misrepresenting a source for the sake of her cause? I check the reference she provides for her statement, a piece by *NBC News* (Rettner 2012) that contains an interview with Allyson Bradow, director of psychological services at Home of the Innocents, a nonprofit organization that helps families in need in Louisville. Day is not distorting anything:¹

1 There are different ways of assessing PTSD. Bradow (2012: 50) found that 53 per cent of her participants met the criteria of the Post Traumatic Stress Disorder Checklist—Civilian version (PCL-C) based on 'symptom severity score.' Forty-six per cent of the same participants met a more stringent combination of criteria based on 'symptom severity score' and 'criterion pattern score'—the latter being a set of defining characteristics of PTSD outlined by the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association (DSM-IV-TR) (ibid.: 50–51).

Currently, the definition of PTSD says people must have experienced or witnessed a life-threatening event, or event that could cause serious injury.

‘The definition of trauma should be expanded to include expectations of life,’ said Bradow, who went through fertility treatments herself, and conducted the study as a doctoral student at Spalding University in Louisville [Bradow 2012]. ‘Having children, expanding your family, carrying on your genetic code—that’s an instinctual drive that we have as human beings. And when that is being threatened, it’s not necessarily your life being threatened, but your expectation of what your life can be or should be like,’ she said.

[...]

Bradow had her first child without any trouble at age 26. But when she and her husband tried to conceive a second child several years later, they were not able to. The couple was diagnosed with secondary infertility, which refers to infertility experienced after a couple has a child.

‘The general diagnosis of infertility, or not being able to have a baby, is kind of this giant earthquake that rocks your world. And then, there’s all the aftershocks,’ of fertility testing and treatment, Bradow said.

Bradow said the symptoms she experienced during fertility treatment went beyond those of depression and grief, conditions previously linked to fertility treatment. Others she spoke with felt the same.

To find out how widespread these feelings were, Bradow and colleagues surveyed 142 people who had undergone fertility treatments, and who visited online support groups for infertility. Survey participants—97 percent of whom were women—completed an online survey to assess their symptoms of PTSD. They were asked to consider their infertility diagnosis and fertility treatment as their traumatic event.

About a third of participants had been trying to conceive for one to two years, and about 60 percent had undergone fertility treatments for more than a year.

Overall, 46 percent met the criteria for PTSD. Among this group, 75 to 80 percent said they felt upset at reminders of their infertility, such as seeing commercials for baby diapers. Other common symptoms included feeling distant or cut off from people, or feeling irritable. Many also said they felt hopeless, and had changes in their personality.

I later find (and have to order it from the library because it is not available on the online databases I can access) a study entitled “Examining PTSD as a

complication of infertility” (Bartlik *et al.* 1997). In its opening, the article states that “[w]hile commonly associated with war or natural disaster, symptoms of PTSD have been described in patients who are undergoing or who have completed infertility treatment or high-risk pregnancies” (ibid.: n.p.). By discussing in depth three case studies of patients who developed PTSD following such pregnancies, the analysis illustrates the range and variety of symptoms that tend to be observed. While I read further through a sense of dread that radiates out of my stomach, in circles almost, and increases at every sentence, these are the ones I recognize most closely: not enjoying any more usual activities and deriving ‘little pleasure from social contact,’ ‘difficulty in concentrating,’ ‘increased perspiration and heart rate when confronted with emotional triggers, such as seeing a baby,’ experiencing flashbacks, a sense of ‘estrangement’ from other people, becoming ‘obsessed about physical sensations,’ having ‘distressing dreams,’ a sense that life is ‘on hold, indefinitely.’² This article demonstrates, as the authors phrase it, ‘a link between infertility, reproductive trauma, and PTSD.’ Corley-Newman (2017), in her PhD thesis *The Relationship between infertility, infertility treatment, psychological interventions, and Posttraumatic Stress Disorder*, further concludes that ‘the stress levels in women receiving infertility treatment are equivalent to women with cancer, AIDS, and heart disease, as suggested by other researchers’ (ibid.: abstract),³ ‘all conditions that have been linked to PTSD’ (ibid.: 6). Why has this been known for at least 20 years, yet I have never heard about it? Why is nobody talking about it in the open?⁴

2 Bradow (2012: 69–85) describes very similar symptoms.

3 As a childless woman wrote to me in an email shortly after being diagnosed with cancer, however, this illness might feel, after all, a more “bearable” condition than not being able to conceive:

The existential perspectives on life and my personal journey has brought me to a point where nothing seems absurd anymore. Life can not be absurd. It is just that—life. Between being born and dying we are given the choice to love life and all it contains above all. [...] I have also made the emotional realization that cancer is a far less lonely journey than childlessness. It is something I can share openly, and receive nothing but warmth, support, understanding and love back. It doesn’t change anything of my sense of identity, and if anything it has included more than it has excluded [me] from other people. It is an experience that adds to everything I would like to share about dealing with childlessness, because it is so acutely contrasting [...]. Cancer not being the worst...!

4 Elizabeth Swire-Falker, author of *The infertility survival handbook: The truth about the real success rate of fertility clinics, keeping your marriage intact, what kind of doctor you need, and not going broke* (2004), precisely addresses this problem in a blog post (Swire-Falker 2013): ‘Many an infertile woman will understand very clearly what I mean when I refer to [...] Post Traumatic Infertility Stress Disorder (PTIFSD). This is the part of our lives where we are periodically haunted by our infertility (IF) treatment, sometimes years after it has ended.’ However, as she continues, ‘PTIFSD is not yet in any diagnostic manuals.’

21 December 2017. Leaving for the UK and concentration camps

I zip my suitcase and leave out, so I can read it on the plane, the printed pdf of *Man's search for meaning: An introduction to logotherapy*. There was a reference to it in Day's book. It is the account of life in a concentration camp originally written in 1946 by Viktor Frankl (1992), a psychiatrist from Vienna. In it, he outlines the principles of logotherapy, according to which life is driven by a will to meaning. And this meaning can be found through the stories we tell ourselves: a perfect match at a time when I am searching for new pieces to edit and redraw my personal storyboard.

While the plane takes off, I find myself on the train to Auschwitz, surrounded by many faceless individuals. They are all women. I cannot help noticing the parallels between the prisoners' experience of life in the concentration camp and going through fertility treatment and its aftermath. For those of you appalled at the fact that I am comparing IVF to the atrocities of the "final solution," this is not a metaphor. Seeing your imagined child die by being ground to blood every single month over and over again *is* a personal holocaust.

In reporting what former prisoners often say about their experiences in concentration camps, Frankl writes: 'We dislike talking about our experiences. No explanations are needed for those who have been inside, and the others will understand neither how we felt then nor how we feel now' (ibid.: 8). Childless individuals do not want to talk about their experiences either. It clicks now in my mind how powerfully having lived—with one's body, senses, and emotions—through an experience affects communication. In other words, I can try and *explain* what childlessness is but, unless one can *feel* what I feel and really has *been* in my shoes, one will never truly *understand*.

The childless who undergo fertility treatment, at least some of them, also know the odds are against them, yet they desperately believe they will succeed, that they will be the exception: 'Nearly everyone in our transport [towards the camp] lived under the illusion that he would be reprieved, that everything would yet be well' (ibid.: 10).

'The majority of prisoners suffered from a kind of inferiority complex. We all had once been or had fancied ourselves to be "somebody." Now we were treated like complete nonentities' (ibid.: 32): unlike the prisoners, at least initially, those undergoing fertility treatment have not been taken away from their homes, families, and robbed of all their belongings. Yet, one is similarly degraded to just a body—and a malfunctioning one. How can subjecting oneself to invasive treatments (perhaps for years) that are crashing for the body and the mind for the sake of having a baby not be a denial of a woman's self-worth and identity? And when treatment fails and one "returns" to "normal life," there is nothing that is "normal" any longer.

The feeling of despair—which in the case of the childless sets in when, after so much effort, the results may fail to materialize—affects the prisoners' health (ibid.: 37):

Those who know how close the connection is between the state of mind of a man [or woman]—his courage and hope, or lack of them—and the state of immunity of his body will understand that the sudden loss of hope and courage can have a deadly effect. The ultimate cause of my friend's death was that the expected liberation [which he had dreamt would take place by a certain date] did not come and he was severely disappointed. This suddenly lowered his body's resistance against the latent typhus infection. His faith in the future and his will to live had become paralyzed and his body fell victim to illness.

Particularly the lack of connection to the future, Frankl explains, drains the inmates' life of meaning (ibid.: 35, emphasis in original):

The Latin word *finis* has two meanings: the end or the finish, and a goal to reach. A man who could not see the end of his "provisional existence" was not able to aim at an ultimate goal in life. He ceased living for the future, in contrast to a man in normal life. Therefore the whole structure of his inner life changed; signs of decay set in. [...] Regarding our "provisional existence" as unreal was in itself an important factor in causing the prisoners to lose their hold on life; everything in a way became pointless.

I am reminded of how several childless women talk about not managing to have a child as "having their [imagined and longed for] future stolen from them."

But the most worrying aspect of Frankl's account is how some inmates, having lost any sense of purpose, just give up and let themselves die (ibid.: 62):

a behaviour pattern crystallized to which they [American soldiers] referred as "giveup-itis." In the concentration camps, this behaviour was paralleled by those who one morning, at five, refused to get up and go to work and instead stayed in the hut, on the straw wet with urine and faeces. Nothing—neither warnings nor threats—could induce them to change their minds. And then something typical occurred: they took out a cigarette from deep down in a pocket where they had hidden it and started smoking. At that moment we knew that for the next forty-eight hours or so we would watch them dying.

These were the individuals who could not find a reason to live. What distinguishes those who manage to find a new story to fuel their existence forward from those who don't? Which group do I belong to?

23 December 2017

Reading newspapers is a special treat for a moment of the year when we finally have time to leaf through them. In the *Times* today, I find two interesting articles. They make me feel at home:

“I was just as happy when I was singleton” (Parris 2017):

[subtitle:] The assumption that we can only find commitment as a couple has become a tyranny that needs to be challenged.

[...]

In some hinted but relentlessly implied way, it is drummed into us that those who end up alone have missed the jackpot in the lottery of life.

There’s a kind of oppression in this. I shall call it monophobia. Endlessly insinuated like so many prejudices, it’s all around us but we don’t see it. Wrapped in cotton wool and coochy-coo, the brutal assumption that two is better than one sinks like a stone into every heart. The soft tyranny of romance has anesthetized us to the everyday cruelty of these everyday slights unless we listen out. And then we hear it everywhere.

“There came three wise people of non-binary gender” (Coren 2017):

[subtitle:] Baby Jesus in a high-vis vest and heavenly host praising no particular god ... it’s the Nativity story for the snowflakes.

[...]

10. And, lo, the angel of the Lord came upon them and the glory of the Lord shone round about them, and they were sore afraid that it would set off their PTSD or epilepsy, so they made Him turn the brightness right down and put up notices.

11. And the angel said unto them, Fear not: for behold, I bring you forms to fill in about your ethnicity and gender, which will enable us to select a representative group to go and look at the baby Jesus.

[...]

Chapter 2

[...]

9. And when they were come into the house, they saw the child with Mary his mother, and didn’t make a fuss, because some people are not lucky enough to have children and should not be made to feel excluded.

24 December 2017

‘It is only the three of us’ is the argument we use to say that we do not think we are worth the effort. I bought a Christmas jumper and new earrings but, at the last minute, I decide not to wear them. I was tired after all the cooking and thought that, anyway, nobody would notice. Family, or having guests, helps in keeping rituals alive. Without rituals, thinking about it the following day, the occasion does not feel that special any more.

Of course I would like to see my family, but why do I feel *I have* to be there around Christmas? If I am honest, because in the back of my mind I think I have no alternative very good reason not to. Having your *own* family, instead, appears “important” enough, a licence to skip the obligations to your parents. Robin’s siblings, who have children and never spend Christmas with their mum—because anyway we’ll do that—are, effectively, exploiting us.

25 December 2017

I follow little of the annual Queen’s speech at 3.00pm. I am irritated by her family portraits in the foreground.



Figure 2.6.1 The Queen’s speech.

Scrooge (1970)

‘A musical retelling of Charles Dickens’ classic novel about an old bitter miser taken on a journey of self-redemption, courtesy of several mysterious Christmas apparitions.’⁵

5 IMDb (n.d.) *Scrooge*. www.imdb.com/title/tt0066344/.

A childless and selfish old man is only interested in his business. The meeting with three ghosts and the perspective of burning in hell make him change his ways.

Despicable Me (2010)

‘When a criminal mastermind uses a trio of orphan girls as pawns for a grand scheme, he finds their love is profoundly changing him for the better.’⁶

An evil and criminal childless man is made more human by a group of children.

5 January 2018

In the kitchen, waiting for my tea to brew, I notice that I keep on taking side steps, then move the weight from one to the other. I have started doing this during the holidays. These are tango steps. I had a go at it for free, months ago at the University, as part of a programme called *trening i arbeidstiden* [training during working hours]. My body is telling me that I should be taking a dance course. I start searching for one online.

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Folder 7

Politics: or why childlessness is everyone's business

When I think of all the people who want to forbid abortions, it seems it can only mean one thing—not that they want this new person in the world, but that they want the woman to be doing the work of child-rearing more than they want her to be doing anything else. There is something threatening about a woman who is not occupied with children. There is something at-loose-ends feeling about such a woman. What is she going to do instead? What sort of trouble will she make?

(Sheila Heti [2018: n.p.], author of *Motherhood*)

Stolen future, stolen past

Many women I have been talking to told me that dealing with infertility means coming to terms with 'having their future stolen'¹ (I know I have written it already, but important points need to be repeated). An imagined life-that-was-going-to-unfold as a mother, taking pictures of a baby growing up, rediscovering the world through his/her eyes, leaving the child at the gates for their first schoolday, maybe attending their wedding later on in life, lying on a deathbed surrounded by children and grandchildren. A whole imagined album, several volumes, of yet-to-be-taken pictures. We only knew that the background, light, and season might change, but this was always supposed to be our destiny, the script we had been rehearsing in our heads for decades. We were just going to reach our hands and pick on the shelf of life, at the right time, the volume with the roles, situations, milestones we had been promised we would achieve. Instead, the archives have closed. The shelves are empty, the volumes burned.

Not only do I feel my future has been taken away from me, but also my past, that invisible thread that tied me to all family members who came before me.

1 Katy Lindemann (2018), founder of the website "Über Barrens Club" (n.d.), writes on this point for the *Guardian*:

My grief is not because a life without children is inherently inferior, but because it's the loss of a future that I deeply wanted, that represented happiness and belonging. This is a stereotype that my feminist self dismisses with contempt—but emotions that my infertile self can't seem to rationalise away.

What was the point of all my ancestors did, all of their sacrifices, the very point of their existence, if my family ends here? *Cri, do you really think you are that important?* I ask myself. *As if they had all been "working" for you!* I see, I know, I agree, *but de facto*, they did. They probably never even asked themselves why they lived. And that's the point. They never did because they knew they would live on through their children. Eternity, or the human DNA-encoded surrogate of it, came as a taken-for-granted bonus. I will die at some point. Just in a more final way. And until then, I am stuck in the present.

31 December 2017. Eternal present

Around this time of the year, about a century ago, the eighteen-year-olds of the time—the boys of [18]‘99—were sent to war, to the trenches.

Many of them died there.

Today our eighteen-year-olds go to vote, protagonists of [our] democratic life.

I suggest this reflection because, sometimes, we run the risk of forgetting that, differently from the generations who came before us, we have been living through the longest period of peace in our country and in Europe.

This does not happen in many places around the world.

We are even witnessing the resurfacing of the nuclear arm-race.

We are facing difficulties, today, that we need to keep firmly in mind. But we must not lose our awareness of what we have achieved: peace, freedom, democracy, [civil] rights.

These are not affordances that should be taken for granted, neither [we should think that] once gained, they are going to last forever. They need to be defended, with great care, never forgetting the sacrifices that were made to achieve them.

We cannot live in the trap of an eternal present, similar to a suspension of time, which ignores the past and obscures the future, thereby distorting [our] relationship to reality.

Democracy thrives out of engagement in the present, but is fuelled by memory and a vision for the future.

(Mattarella 2017, my translation)

It's New Year's Eve in Iseo and, from the dinner table, I am listening to the speech by the Italian President Sergio Mattarella. At a glance, even before he starts speaking in his fatherly yet businesslike demeanor, and despite the lavish

surroundings of the Quirinale Palace in Rome, I empathize with him more than with Queen Elizabeth for not bragging about his reproductive status through family portraits. I am distracted, instead, by the Chinese-looking table lamp on his desk on the right of the TV screen and the fact that the EU flag next to the Italian one, on the left-hand side, is the only one that remains visible once the camera zooms in on him. What does this setting reveal about Italian politics? Maybe there is a fun academic paper to write there.

I am touched by his reflection about the “trap of the present.” It suddenly dawns on me that, what might look like a personal drama and existential crisis, has in fact much broader implications. Can nations survive the “eternal present”? When a national project is bigger than the life of any single individual, what happens when more and more citizens are forced into the time horizons of their individual life-spans? What is it, at the end of the day, that keeps us together as a society?

The personal is *really* political

Just because it is an emotional topic, it does not mean that childlessness is “only” personal. In fact, all the instinctive prejudices about the childless are correct: we are an existential threat to society. Even if involuntarily so, we are extremists. Not reproducing means there are not enough citizens to pay for the welfare state and pensions. Societies that have a natality deficit die out. A healthy birth rate is also seen by far-right groups as an insurance against the gene “pollution” by the immigrants they hate and who often have a skin of a different colour. From the right-wing fanatics’ point of view, we are traitors of the nation. How much more political can not having children get?

Beyond the demographic concerns, the debates about the integration of immigrants or the alienation of individuals who turn to violent extremism show that a source of instability and potential danger to democratic societies are not external aggression or war, rather internal fragmentation. In this respect, what happens in a society when one woman in five or, as in Norway, one man in four, potentially, does not feel that their needs, interests, even self-image are reflected by the world around them? Despite my status of a highly qualified professional, my inexistent social network after nearly three years in Norway makes me a shining example of failed integration. As a result, I do not even read the Norwegian news because most of it tends to be irrelevant to my life—not to talk about the ubiquitous pictures of children and exposed pregnant bellies. By the way, I even started a “children’s count” project aimed at quantifying and comparing the babies’ and toddlers’ images on the homepage of *Aftenposten* (Norway), the *Guardian* (UK) and *Corriere della Sera* (Italy) to provide hard evidence for my anecdotal impressions. Despite having tried twice, I never managed to do this for more than a few days—it hurts too much. *Aftenposten*, however, always outnumbered the foreign competitors. If my case sounds too personal or trivial, take it from literary critic and feminist theorist Toril Moi (yes, I mention her again, because she is a rare dissenting voice in an otherwise children-obsessed country) and her assessment of Norwegian media coverage on motherhood (2004: n.p., my translation):

We are being fed with propaganda about motherhood and family life. Every single weekly magazine enthusiastically shows images of minor celebrities who express themselves on how great it is to have children, and dwell on coverage of women who are unhappy because they can't have children, but who are saved by technology, or if necessary by adoption. [...] All of this is *moderskapsmas* [motherhood harping]. The motherhood harping flattens reality. Where is the encouraging [positive] coverage of women without children?

On the progressive isolation of the childless from public life, I can further mention the work of Robert Putnam. As an investigator of the reasons behind the decline of civic engagement in the US and Italy, he observes that one of the reasons for the progressive deterioration of associational and civic life is changes in the family structure (see e.g. Putnam 2000). As he writes in relation to the situation in the US (Putnam 1995: 75): 'fewer marriages, more divorces, fewer children, lower real wages [...]. Each of these changes might account for some of the slackening of civic engagement, since married, middle-class parents are generally more socially involved than other people.' Traditional paths of civic involvement, in other words, have tended to revolve around family networks and do not always suit single and childless people.

What are the long-term effects of the isolation that comes with childlessness, both on the life of the individuals without children and the wider fabric of society? Although not having children might both have advantages and be a desirable condition for some, children do tend to play a function of "social glue" (Ellingsæter *et al.* 2013). When my family moved to Italy in the early 1980s my dad found a job thanks to a conversation my mum had with another parent while she was waiting for me and my siblings outside the school gate. This is only an anecdote, but it is not difficult to see how getting together around children's activities easily becomes an occasion for information sharing and intelligence gathering about what is going on in the community, which plumber is reliable, where to buy good-quality bedsheets, what is the most durable washing machine brand, who can volunteer for a cake sale that will help fund a new playground. Quantifying the extent of what we are missing and its impact upon our well-being in the long run is difficult.² We only have one life and no alternative experience to compare it to: we just learn to get by with the available resources

2 Pearl Dykstra (2006: 749–750), by drawing upon a range of studies, highlights five ways in which social integration contributes to well-being:

First, through members of a social network, one has access to different kinds of resources [...]. Second, network members can act as bridges to other social circles, facilitating communication with different groups and social strata [...]. Third, benefits may be derived from having others with whom one can develop shared ideas, a common interpretation of reality. Fourth, being embedded in a community may provide benefits in the sense of having a purpose in life that transcends the individual self [...]. Fifth, benefits may come from what takes place in the interactions with others, such as companionship that is offered, the feelings of acceptance that are conveyed, or the encouragement that is given to follow good health practices.

without questioning. The absence of children from the lives of many individuals means, for sure, the loss of networking and social engagement opportunities at least to some degree.

Social networks also come with resources, both material in the form of help and support, but also human—company, friendship, someone to talk to. As Patrick Präg and others point out (2017: 35):

[i]n the next thirty years, childlessness will exacerbate the problem of the ageing populations [in Europe], at both the macro and micro level. The imbalance in the age structure will be more evident in those countries where beside low fertility an increased proportion of people will remain permanently childless. At the individual level, older childless men and women will not be able to rely on their offspring network for care and assistance, but also not for company and social contacts.

It is true that not having children does not have to result in isolation: Clare Wenger and others (2007: 1421–1422) review a range of studies which show that individuals without children might develop different networks, with friends, siblings, and siblings' children (if they exist). Individuals without children might also be economically better off (Tanturri *et al.* 2008). One could in fact argue that, by not having children they could have more time to cultivate alternative relationships and support networks, perhaps through membership of organizations—through engagement in charitable work, for example. Once the hypothesis of this 'greater sociability' is put to the test, though, it is not confirmed. There is strong evidence that, ultimately, the social networks of childless individuals are smaller than those of parents (see e.g. Wenger *et al.* 2000; Dykstra 2006; Dykstra and Wagner 2007). Children, in fact, are found to be 'intermediaries to the broader social environment: the neighborhood, schools, and social services' (Wenger *et al.* 2007: 141). Pearl Dykstra (2006: 762) also points out that '[a]s has been established repeatedly [...], they [childless] are more likely than parents to have network ties with age peers (friends, colleagues, cousins) and for that reason are more likely to lose network members with increasing age.' More specifically, according to the analysis of Wenger and others (2007: 1448), childless support networks tend to be 'private restricted'—that is, 'associated with an absence of informal support'—and 'local self-contained'—'household focused and typically associated with arms-length relationships with a sibling, niece or nephew, or cousin and, where there is no spouse, reliance on neighbors in an emergency' (ibid.). Although, as they conclude, the lifestyles of both parents and individuals without children 'are equally sustainable' in normal circumstances, the fragile support networks of the childless quickly fall apart in cases of 'impaired mobility, failing health, or increasing frailty' (ibid.: 1449). That is why contact with children is a consistent predictor of older adults' quality of life (Farquhar (1994), in Wenger *et al.* 2007: 1420) and '[a]fter spouses, adult children (or children-in-law) are the most likely to provide support and care

in all countries' (ibid.). Who, then, is going to take care of the childless when they are at their most vulnerable?³

The British organization Ageing Without Children (AWOC)⁴ aims to raise awareness about the lack of policies to protect the well-being of citizens who are growing old without children due to either choice or circumstance, their children having died before them, or having become estranged from family members. As the organization points out (Ageing Without Children 2017), in the UK:

[t]he numbers of people over 65 without adult children are set to double from 1.2 million at the present time to 2 million by 2030. At the moment 92% of informal care is provided by family and 80% of older people with disabilities are cared for by either their spouse or adult children. The older a person is, the more likely they are to be cared for by their adult child. This year [2017] for the first time, more older people need care than there is family available to provide it.

Robin Hadley (2018), co-founder of AWOC and one of the rare researchers who has been investigating male childlessness, raises some disturbing questions: 'How did they [policy-makers] miss that [over a million people without a network of support]?'; Why the 'total silence around the impact for AWOC people?'; 'Why is there so much personal anger and institutional defensiveness, denial, and resistance' when these points are raised?

Even in Scandinavia, the celebrated social and gender equality does not seem to apply when childless individuals are involved.⁵ In fact, as Kari Melby and Bente Rosenbeck (2009) point out with particular reference to Denmark and Norway, the Nordic welfare states have historically developed on the basis of a progressive politicization of reproduction: having children has shifted from being a private, family-related matter to an opportunity for the state to manage populations and discipline bodies. Reforms aimed at gender equality and women's participation in the labour market in the Nordic contexts are thus based on a biopolitics that encourages the formation of families and is, effectively, pronatalist. A book specifically dealing with the politicization of parenthood in Scandinavia (Ellingsæter and Leira 2006) hits the issue squarely on the head by posing the question: 'Policies for whose needs—mothers', fathers' or children's?' (ibid.: 272). This ordinary-sounding question betrays again, from the

3 It is while I am editing this chapter that a member of the Facebook group "Ageing Without Children" (n.d.) shares a *New York Times* article, "A generation in Japan faces a lonely death" (Onishi 2017), accompanied by a question that makes me shiver: 'Is this how we too are all heading?'

4 Ageing Without Children, at the time of reviewing the proofs for this book, in January 2020, is being replaced by Ageing Well Without Children (AWWOC, <https://www.awwoc.org/>).

5 I initially assumed that the tendency to tacitly delegate the care of the elderly to family members would be most prominent outside Scandinavia, particularly in countries where the welfare state is not as pervasive and developed. However, fertility and reproductive health expert Johanna Sundby, in an interview I conducted with her (12 September 2017), pointed out that institutionalized (non-family-provided) care is regarded, even in Norway, as 'the last resort.'



Figure 2.7.1 ‘In the future it is him who will ensure you get a worthy old age’: A campaigning poster by the *Venstre* [Left] party on the Oslo metro (29 August 2017). Little chance for me, then.

perspective of a childless person, the inherent pronatalist bias of research and the taken-for-granted assumptions behind the worldview of most citizens who have grown up in the Nordic welfare state and internalized its values. The childless have no role. This is not only because the book, as one could argue, is about *parenthood*, but because, as I can appreciate from having gained an understanding of the broader picture, the childless are *not expected to exist at all*.

The case of socially isolated childless men in Norway (Skrede 2015) underlines, in this sense, a failure of inclusion of the “Nordic Model”: one in four men over 45 will never be a father but this issue, with the exception of some unenlightening media articles that regurgitate statistics every now and then, is quietly ignored. My research also confirms that women-friendly societies like Sweden and Norway may in fact be only *mother-friendly*, raising again questions of inclusion for those women who will never experience motherhood. I will return to this shortly, but some women, clearly, already appear to be more equal than others.

The “natural” order

Orna Donath is a sociologist from Israel. I meet her in Oslo in early February 2018, on the occasion of a one-day seminar I organized on the topic of “Untold stories: When the family dream goes unrealized” (Untold Stories 2018). The aim of the event is to give a voice to the stories that are silenced. More specifically, in a society that tacitly assumes forming a family as a rite of passage to adulthood and the hallmark of a realized life, the presenters today will deal with the

questions: What happens when one is confronted with infertility? What if becoming a parent is not what one had expected? In relation to the latter, Donath will present a very important story that is even more hermetically sealed under a taboo lid than not having children—an experience so unimaginable that it sounds both impossible and unspeakable: regretting motherhood (Donath 2018).⁶

Donath is a fierce woman with a sharp mind and bright red lipstick. She has a thin frame, but her every word lands in the room with the weight of the rock-solid conviction that drives her. She is motivated, as she will write later in an email, by ‘rage’ against ‘social imperatives’ and daily routines that support a ‘single script’ for women. Through her research she has specialized in the field of motherhood, non-motherhood, time and emotions from a sociological and feminist perspective. Her book, *Regretting Motherhood*, has been translated (thus far) into 11 languages.

Before her presentation she is keen to stress that she is not interested in the motives behind women’s regret of motherhood: ‘they all have their own story and different reasons.’ Instead, she finds it more interesting to reflect upon what society’s denial that any such thing as a regret of motherhood even exists actually ‘tells about us.’

The denial of regretting motherhood, she begins, ‘tells a social and political story’ in which women’s bodies are disciplined through the ‘threat of regret’: ‘Women who do not become mothers are told they will regret it. And mothers who regret are told they do not exist.’ There is an endless amount of decisions we take in our life, she continues, and that we do regret, like getting that plastic surgery, having made that tattoo, having married or divorced a certain person, and so on. So why is it impossible to comprehend that there are women who might regret having become a mother—generally speaking, a life-changing experience? But, no, ‘stop saying bullshit’ these women are told: ‘There is no way you are going to regret it.’

This categorical unwillingness to even believe that regret for motherhood can exist is related to two questionable assumptions, she explains. The first is that motherhood is part of women’s biological destiny: ‘motherhood is perceived as the natural course for each and every one of us. Because we have the same reproductive organs, as females, it is assumed that all our dreams, wishes, abilities, disabilities, and decisions are the same.’ According to this argument it is not possible to regret motherhood, since this is a natural and unmissable outcome for every woman.

The second assumption is related to social perceptions of time. In capitalist, neoliberal societies, Donath explains, time is understood as linear and it is always going towards progress, self/improvement, and a promise of a better future. Regret is thus seen as temporary: ‘later it will be all right. It is just a matter of time until you feel comfortable [with being a mother].’ In this

6 Donath’s quotes from this point onward are based both on her presentation in 2018 and additions she made after I contacted her for approval of the text (August 2019).

perspective, even postnatal depression fades into the image of the future “normal” happy mum: ‘it [depression] will last half a year, one year, five years,’ still a limited amount of time until a woman will realize that her destiny had always been that of becoming a mother. Donath, however, points out that this is illusory: ‘I have interviewed women in their seventies and they confirm that there are some women who will never “get over” it.’ It does not mean that they hate their children. The sentence I hear most often, as she continues, is ‘I love my children. I just hate being their mother.’ Society panics around women who regret motherhood because ‘they break our notion of linear time,’ ‘they are not providing us with the catharsis of a happy ending.’

In addition, ‘motherhood is treated as a role, a job,’ ‘a thing’ that must satisfy continuously the needs of others. ‘If we treated motherhood as an intersubjective relationship, it would become more understandable why women might regret motherhood: she [the mother] is going to be involved for the rest of her life with a person she does not know, a person with whom she will be in a relationship (concretely or symbolically) until her last breath.’ In relationships there are always possibilities for mistakes, therefore for regret.

The assumed desire to be a mother is part of a supposed “natural,” even biologically ingrained, nurturing and caring role of women. This would appear to be the way things have always worked. As I have had the opportunity to reflect further at a conference on “Gender and Representation,” however, this is again not “natural” at all, but manmade (literally). Marianne Moen (2017), an expert on gender at the time of the Vikings, explains the way in which gender is constructed through historical research and the interpretation of archaeological findings. She points out that our ideas about the Viking society, where men were warriors and women stayed at home looking after the children, largely (still) reflect the values of the Victorian men who started studying that civilization. Both men and women from the Viking age, for instance, were buried with keys or weapons, but while this was interpreted as evidence of status for men, in the case of women the same artefacts were used as a confirmation of both their role in the house and their belonging to a man. There is plenty of archaeological evidence that women were public figures and warriors, and had positions of power in the community. Yet, even the most recent visual reconstructions of how life could have looked like at Kaupang, the first known Viking commercial hub in the south of Norway, men dominate the scene. Moen shows the audience an impression of the village on the screen: ‘There are 43 men and 7 women,’ she says. ‘There are also 7 seagulls,’ she adds, letting us draw our own conclusions. The same, she explains, happens with earlier history: although the evidence suggests overwhelmingly that both men and women were involved in hunting, men are still portrayed as the “hunters” and women as the shelter-bound “gatherers.” ‘The past legitimizes the present. The present creates the past and round and round we go.’ The result is that gender roles become unquestionable: ‘It’s always been this way.’

An alternative perspective

Claims of inevitability are tools to silence, stop questioning, stifle any perspective for change. Politics in a democratic country, instead, should be a confrontation through civilized means and negotiation: nothing should be “inevitable.” I used to believe that it was not possible to manage a country without a majority. I find, in fact, these notes in my diary:

Is it possible to run a society without a majority? If we need a majority, then isn't the oppression, to some extent, at some point, even within democratic societies, of some minority unavoidable? What if the childless are one of these minorities?

By this stage of my journey, however, I no longer believe that oppressed minorities are “necessary.” Oppression is the result of some groups being excluded, self-excluding or, as in the case of the childless, both. That is why it is important for the childless to speak out and make sure they are heard: so that our needs are not ignored and our existence registered. The next, and more constructive, question then becomes: How can we be a more inclusive society, where we are all, men and women, appreciated for everything we can give, not measured against our biological capabilities?

In the race to become leader of the British Conservative Party in summer 2016, Tory MP Andrea Leadsom, the opponent of Theresa May, used repeatedly the argument that ‘as a mother’ she had ‘very real stakes’ in the future of the country: although May, childless, ‘possibly’ had ‘nieces, nephews, lots of people,’ Leadsom said, ‘I have children who are going to have children [how could she be that sure, by the way?] who will directly be part of what happens next’ (BBC News 2016). This line of reasoning is just one version of the possible story. In the middle ages, in fact, rulers specifically employed individuals without children, for example, celibate churchmen and eunuchs, to look after the affairs of state on the ground that they would not dedicate themselves to the accumulation of wealth for their own families and offspring, but for the common good (Höfert *et al.* 2017). This is the precise opposite of what is happening today with the “superparents” trying to push their children ahead in the frenetic race to the top.⁷ The “common good” of the pre-modern era coincided with that of the ruler of course. In a democratic society it could be that of the broader community.

I have also understood that there are alternative ways of being a parent: this does not necessarily involve selfless volunteering, teaching, or even dealing with children at all. Helping others develop and grow does not need to consist in more than being a good citizen, a good neighbour, a good friend. I still struggle with the material side of survival through the genes, but I try to focus on how ideas

⁷ Interview with Johanne Sundby, Department of Community Medicine and Global Health, University of Oslo, 12 September 2017.

shape the world and, with those, the way many more people live and think. I can inspire and encourage others to see the world differently through my research.

The present *can* be a trap and indeed a limbo where nations can lose their collective memories. It does not *have* to be that way, though. It can also be liberating. ‘Being in the present is what Buddhists aspire to,’ I was once told after I explained my feeling of being stuck in a dimension with neither past nor future—a great counter-argument. Along its lines, the present moment can be seen as the ultimate source of freedom. Without the constraints of a tradition to carry forward, a reputation to defend, perhaps the childless are in a more favourable position to become innovators. We can dare, we have more time to realize ourselves through work or whichever activity we decide to pursue following our passions. Perhaps we are the diverse voices we need in an age of little totalitarian bubbles. In the words of Sarah Roberts (2017), Australian counsellor and founder of The Empty Cradle (n.d.), ‘a healing community for childless women,’

the thing that’s amazing about childless women is that we’ve never had this number of women who are burning to be nurturers, who are so well educated, and who have such a passion for creating change in this world. And one of the really key things of the healing process [the journey through which we come to terms with a future without our own children] is that once you can move from the small-l life that is about *me*, and *my* family and *my* children and you can shift that into the big-L Life, which is actually about humanity and the future of humanity and what is it that we need as a human collective, childless women [and men] have such an important role to play for the future of humanity, the healing of the planet, healing of the Earth, healing of our communities.

In the linear understanding of time that prevails in our society, as Donath points out, we are being told that we should be living the perfect and successful life. We are sold, along the way, the accessory advice and tools: from blogs on how to become the perfect parent, to botox fillings to remain young forever, to fertility treatments (Gonçalves 2018). This way, however, we are losing sight of life’s unpredictability and the fact that we never have full control over our circumstances. Are we, then, setting ourselves up for failure?

Although I did believe that I had been denied the opportunity to be happy, I now understand that I was wrong. Happiness does not have to come in one shape. Against the one-size-fits-all notion of domestic bliss—in Norway: married, two kids, house, car, holiday cottage in the countryside, skiing holidays for Easter, trip to the *Syden* during the summer; in Italy, as one of my Italian interviewees put it, turning into the “happy family” of the Mulino Bianco ads (a brand of baked goods)—we could in fact just live our time in the best way we can. This would mean embracing uncertainty, the twists and turns of life, pursuing our interests, being true to our values—in other words, building our own happiness as everyday practice, not as ideal against which no reality will ever be a good enough match.

Jody Day (2016: 314–321) also questions the idea that not having children must necessarily lead to isolation. There are many children who do become estranged. They might die before their parents, too. We can establish alternative networks. Isolation can be very real, but it can also be that terrifying picture of a future of loneliness, that “regret” Donath talks about and we are being threatened with by the majority for disciplining purposes. If we accept this image, it can become a self-fulfilling prophecy. The future, instead, is what we make of it and what we have been fighting—by speaking out and trying to change existing policy, for instance—and preparing for.

So do not ask me whether I can be happy without a child. Of course I can. I am: I do not have a choice. Because this is the only existence I have and I am more than a reproductive machine with legs.

10 January 2018

The creative space is a space of conflict and pain. Transformation, rebirth, requires dying first.

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Folder 8

Narratives II: what it takes to weave a new story

Tango, walking, and performance

4 January 2018

SMS, Sent by Mette Kaaby, 17.48

Hi, I wonder whether you could step in at short notice to give a presentation to performance artists about storytelling. Tomorrow at about 1030 in Oslo?

It's Sunday evening and I am amused. I was just telling Robin how I wished I could write creatively as part of my professional life. And there it was: in a parallel universe, there was a Cristina who was indeed a storyteller and was already engaged in artistic pursuits. This SMS, which, at first, I thought had been sent to me by mistake, led to a phone conversation and to a chain of decisions I would not have taken before: I said "yes" to preparing a new lecture in a handful of hours and, after that, I said "yes" to delivering a performance lecture—with no background whatsoever in theatre and two months to prepare—at the upcoming Norwegian Storytelling Festival. It was the beginning of embracing the creative possibilities of open-endedness.

16 January 2018, my diary

I have an immense privilege. I can really live the life I want. Extreme freedom scares me. It scares everyone. It is a jump into the unknown without a safety net.

21 January 2018, my diary

The book is the story of my body's pain, of how my body helped me UNDERSTAND.

I experience pain because I am not part of a story of my choosing. I am the character of someone else's tale. Being fake hurts.

1 February, 2018. Meeting with Camilla

It is my first supervision meeting with Camilla Eeg-Tverbakk. She is Professor of Dramaturgy and Performance at the Norwegian Theatre Academy. She speaks softly and has a playful twinkle in the eye. Her gestures are harmonious and balanced, as if she was practising tai chi. She reminds me of an infinitely calmer version of my mum. I immediately like her. During our first encounter we discuss the briefing and the topic. Then she asks: ‘How does being childless feel?’ It is after she repeats the question with an emphasis on *feel* that I am forced to mention that it makes me feel more mortal. Just saying these words aloud hurts, as if something inside me was breaking. The sharp debris puncture the surface and, unprepared for it, I start crying. Camilla is clearly used to dealing with emotions. She acknowledges what is happening, neither embarrassed nor concerned. She does not judge. She tells me that, even if this happened during the performance, it would be completely all right. I appreciate this, yet start wondering whether I got myself into a project that is too personal, too emotional, too far out of my comfort zone to handle.

We then rehearse an exercise I can try out at a presentation I am due to give on this topic next week (Archetti 2018a). I am going to walk in front of the audience, Camilla explains, to bring their attention to my body, enable them to become aware of it, *witness* it; then I am going to use breathing and silence to allow them to participate in the emotions and the meanings evoked by terms I associate with “infertility” and that I am going to say aloud. This should just take a couple of minutes, Camilla says. I can then get on with the “normal” presentation. ‘You do not have to do it if you do not feel comfortable, but you *could* try this out,’ she adds, gently encouraging. ‘It is to get a *taste* of it,’ she concludes, her slightly tilting head suggesting there is a discovery waiting to be made it would be a pity to miss. She will be anyway at the event to watch my presentation.

Tango: The subtle art of walking

Camilla told me I did well in experimenting with the walking, breathing, and pauses at the “Untold Stories” event: ‘You really allowed us to *feel*,’ she commented after my presentation. I am so proud of having bravely tried out something new. Yet, when, a few days later, I receive the video recording of my talk (Archetti 2018a), I cringe watching my horrendous steps. My shoulders are arched, as if I am bearing a weight on them. I am tense, unnatural, ungainly.

Attending tango lessons thus acquires the role of a much more essential item on my list of current everyday needs: not at all a fancy hobby, rather more like food or a medicine. Tango is about learning to walk more gracefully. Tango is also interesting professionally, I tell myself: it is all about the communication and negotiation of decisions between the two dance partners about steps, pace, direction, all without using words, just through signals that travel through the body. I can explore the embodiment I am working on for my performance.

I am struck, however, when I will read much later in *The wounded storyteller* (Frank 2013: 39), that American writer, literary critic, and editor Anatole Broyard started taking tap-dancing lessons after receiving a prostate cancer diagnosis. Broyard talks about this in a collection of essays about life and death, most of which he wrote while he was battling against the illness that would eventually kill him (Broyard 1992). Frank (2013: 39) points out the significance of the dance practice as a form of resistance in a context in which illness ‘plunges the body into a lack of desire’:

These lessons, besides probably being something he always wanted to do, were part of his self-conscious attempt “to develop a style” to meet his illness: “I think that only by insisting on your style can you keep from falling out of love with yourself as the illness attempts to diminish or disfigure you.”

Looking back at it, I had fallen out of love with myself, too. I did not just need to walk more elegantly. I needed to regain a dignified posture, to feel worthy again, to look sexy to myself.

“Tango notes,” desktop PC file

- Do not look at your feet
- Head up, think about the space around the head
- Think about two belts that must remain parallel at all times: around the shoulders and around the hips
- Feet slide on to the floor, as if attracted by a magnet
- Find “the space inside the hip” for a smoother step
- One leg slightly bends while the other leg moves forward, slide forward pushing with the back leg, thinking of going ahead (whoom!)
- Going backwards straighten the leg as quickly as possible, ready to adjust the length of the step.

24 February 2018, my diary

Walking with my head up while I rehearse at home gives me vertigo. I am no longer used to standing tall. The floor feels so far away below me. I am trying the walking step combinations we practised on Thursday. I was the only one constantly looking at the floor. The voice of my teacher, Ina,

keeps on resounding in my head: ‘Cristina! Do not look down! *Be a queen.*’

CV

Invited lecturer, “New Media, new threats? Understanding communication dynamics in the age of extremisms, propaganda and ‘fake news,’” NATO Joint Warfare Centre, Stavanger, 23 March.

23 March 2018, my diary

Military people are stylish walkers. It is not only because they have trained in marching. It is because they are proud of what they do. They defend the country. They know they do something useful. The appreciation of the nation is behind their every move. It is scripted in their bodies.

Fortellerfestivalen (Oslo, 14–15 April 2018)

I am on the *t-bane* travelling to the Storytelling Festival with a huge bag. Camilla had warned me that the volume of objects and props that I had started taking to



Figure 2.8.1 On the way to the *Fortellerfestivalen*.

our rehearsal meetings would, in parallel with the development of the project, ‘just grow more and more.’ In my bag there are: a luxurious bulky wool jacket with a (fake) fur collar I bought a year ago, which I have never worn; a frame with the picture of a dried-out apple; hiking boots (I will start my performance wearing them); my favourite Wonder Woman mug; a pair of red high-heel shoes (the red patent leather tango shoes I ordered from Italy have not arrived yet, so I pretend that these are my dancing shoes); a board marker; a roll of one-metre-wide white sheets of paper that protrudes from the bag like a sword; a red short-sleeve blouse; a booklet with the performance script; my laptop; post-it notes; sparkly pendant earrings; sturdy tape.

The venue, a creatively refurbished building in central Oslo that used to be a bank and is aptly called Sentralen, has been turned into a tropical jungle: potted plants of all sizes and grass carpets deliver the promise of stepping into a “*fortellerhabitatet*” [a “habitat of stories”], a forest of overlapping tales I will populate with other storytellers. Between today and tomorrow I will perform my lecture three times. In greeting Camilla, I tell her that ‘carrying my bag this morning, as if I had a huge belly, I felt like I was pregnant.’

After my first performance I am approached by a man. ‘I am the manuscript author of one of the movies you must have analysed.’ In the performance I gave the essence of the results of my film analysis. He mentions the title of the film. ‘Wow! It’s so nice meeting you! It was one of the very few movies that directly dealt with the topic.’ He wrote about it, he explains, because he also had a first-hand experience with it. He wants to find out what’s it like to talk about such a personal subject. ‘It is hard,’ I say. ‘My husband is not here today ...,’ I continue. ‘I was going to ask you ...,’ he interrupts. ‘No, we talked about it, then we thought it would be too emotional for me if he was in the same room.’

‘I understand. Does it help? Talking about it, I mean?’

‘It does. It is a form of *digesting*. It does not come easy. It takes energy and effort, but it slowly *is* helping me to break it down.’

16 April 2018, my diary

I keep on thinking about a comment by a woman after my second performance. ‘Thank you for this experience,’ she told me with tears in her eyes. The following day she attended again. ‘Your performance really unlocked something in me. I am also childless. It was like a form of therapy.’ It was a form of therapy for me, too.

Fertility Fest (London, 11–12 May 2018)

I enter Bush Theatre, adjusting the mint-green NHS-patient-like wristband I have just been given as my daily pass. Walking along the slick counter surface of an arty café, I get to an airy open space framed by visible brickwork on bright-coloured walls. There is a cabinet in a corner, displaying high-quality pastries invitingly lined up, while in the centre stands, on a wooden table, a glass water dispenser with slices

of orange and lemon peering through a layer of dew. Other people, nearly all of them women, are waiting to go upstairs and attend the first panel of today's events. Fertility Fest (2018) presents itself as 'the world's first art festival dedicated to fertility, infertility, modern families and the science of making babies.'

I have travelled to London yesterday from Oslo with Hilde (Haug) and Lars (Erlend Tubaas Øymo), her photographer—we called ourselves "the Norwegian delegation." They will shoot footage and interviews for Hilde's documentary *Mammaen i meg* [The mum in me] (forthcoming). Linda (Malm) and Robin (Hadley), whom I have seen in Oslo earlier this year, will be here, too. So are other names whose work I have read, like Jessica Hepburn, one of the organizers, author of *The pursuit of motherhood* (2014) and, more recently, *21 miles: Swimming in search of the meaning of motherhood* (2018), as well as activist Jody Day. Hilde plans to interview me again after the festival.

I find myself a place near a corner, from where I can take in the room and observe both those who are there and the newcomers. I can tell the childless apart from their demeanour. They walk at the margins, with uncertain steps, avoiding eye contact (that is probably the way I move, too, I think), looking like they want to hide and disappear, standing close to the wall and nervously fidgeting with their phones.

Taking my seat for "40 years of IVF," I start a conversation with a woman sitting next to me. She is a midwife, as she explains, who is at this event to learn how to take better care of women who have difficult pregnancies due to infertility. 'Really?' I reply, taken aback. I had actually never thought about that. Pregnancy is just about where my imagination would venture to. I have never wondered what would happen afterwards. 'Yes, because they might have had miscarriages and complications before. They are in constant state of anxiety that something might go wrong.' 'I see.'

'And how come you are here?' she asks me.

'I am a researcher. I am myself involuntary childless and I am interested in the silence around infertility, particularly in why childless people do not talk about it.'

'But that's obvious, isn't it?'

The panel begins, giving me an opportunity not to reply to the midwife, who practically just told me that my research is pointless. The panel includes an artist and three medical experts. In a comment I make in the Q&A session that follows it, I mention that, having been diagnosed with "unexplained infertility," I am in the very confusing situation of inhabiting a body that, according to medicine, is simultaneously defined as functioning—all is fine according to medical tests—and malfunctioning—I am "infertile." One of the medical experts replies with nonchalance that 'actually "unexplained" just means that we do not know what is not working—there is so much we still need to learn.' She effectively implies, saying it straight to my face, without even thinking I could get offended or hurt at her remark, that there is in fact something *wrong* with me.

While I get up, still dismayed at the unawareness of the devastating effects words can have, even by medical staff who should know better, a towering woman approaches me. ‘I liked your comment,’ she says. ‘Thank you,’ I reply, surprised. She tells me she cannot have children because of a medical condition she names, but I cannot remember. ‘It is difficult for people to understand,’ she continues, ‘that even if I do not make children, with my disability, this is my wholeness.’ I love this expression. *This is my wholeness.* I immediately add it to my vocabulary.

That evening I watch *Eggsistentialism*, performed by Joanne Ryan (2018), a profound and clever investigation of the many aspects involved in choosing whether or not to have a baby. The following day I nearly bump into her. I tell her how much I enjoyed her performance and I hug her. She tells me she remembers me: ‘You had a notebook and wrote something down. What was it?’ ‘It was part of your monologue,’ I tell her while I start leafing through the notebook I carry even while I am walking around, ‘when you were weighing the pros and cons of both being a mother and remaining childless.’ ‘Here it is,’ I tell her before reading it aloud: ‘As childless, I’ll be taken less seriously, be seen as less important.’

I am surprised by how many talks by keynotes and panel conversations revolve around language: I attend “Why don’t you just adopt? And other dismissals!” by writer, speaker, and broadcaster Sheridan Voysey and the panel “#awkward—The language of infertility.” Having a vocabulary to define what one experiences or even having a repertoire of ready-made sentences to deploy when asked questions that hurt is like having a shield to defend oneself. I make a mental note of what sounds to me like the best reply to “Why don’t you just adopt?”: “Why don’t *you* adopt?”

I also finally watch Jody Day live, talking about pronatalist privilege (Day 2018). Here are the women and men I have been reading about and who have inspired me. Here I am not a researcher interested in a bizarre issue, probably, as I imagine other people thinking (with enough evidence provided by how uncomfortable they look when I tell them), “because she is traumatized.” I can see the volume of interest and research in the topic; the behind-the-scenes attempts at framing childlessness as a problem that can be solved by technology by a fertility industry that is worth close to \$20 billion and whose greed speaks hidden in between the (mostly genuine) caring words of the medical professionals;¹ I am impressed by how many angles this topic is examined from and how important art is to access a place of pain “that does not speak its name”—another powerful expression I like the sound of. This is an important subject of investigation. My research is useful. *I am not mad. And I am not alone.*

1 According to Laura Spoelstra (2018), the global fertility market was valued at \$14 billion in 2016. By 2020 it is estimated that it will be worth \$21 billion.

22 May 2018. The lessons of performance

I meet Camilla in a café downtown to review our respective experience of working on the performance. I am particularly interested in getting some pointers about the way forward. I have got a taster of the opportunities offered by communicating differently about research. I cannot possibly stop here.

We discuss *Fires in the mirror*, a piece of documentary theatre by Anna Deavere Smith (1992), and the earth-body work by Cuban American performance artist Ana Mendieta (Viso 2004). Camilla also recommends *The transformative power of performance* (Fischer-Lichte 2008), about the blurring of the line between actor and public. The book is, more specifically, as I will discover later, about the way performance *materially* affects the audience—in fact even relies on the physical chemistry that arises from the interactions between all people present.²

‘I have been feeling different after having given the performance,’ I tell her.

‘In which way?’ she asks

‘I feel like, for the first time, I have truly been *listened to*. I also *know* that this time I have been *understood*. The members of the audience could get what I was talking about.’ I say while she nods.

‘I also feel so much more energized, motivated,’ I add.

‘There is a circulation of the energy that comes from being present with your body in the same space, sharing the same floor, breathing the same air. That is why actors can’t go to sleep straight after a performance. It is not just the adrenaline.’

‘What could I do to experiment more?’ I ask.

‘Try and perform the lecture as much as you can, find more places where you can do it,’ she recommends. ‘See how this affects you.’ I told her earlier that there is a video of it now, which I made available on YouTube (Archetti 2018b). She agrees that this is good, but ‘the experience is of course not the same as being present, witnessing it, as you cannot share the space with a body who is going through emotions.’

‘This is the point,’ she continues, ‘*daring to feel*. This is not sentimentality, not the way [Donald] Trump, for instance, uses emotion for effect, to manipulate a reaction out of its audience. It is about letting go of ego, allowing emotion to circulate, not identifying with it, letting it be part of your psychophysical system. The more you allow and accept what is happening in *you*, without producing emotions but letting them pass through you, the more you allow *them*—the audience—to experience.’

2 Erika Fischer-Lichte (2008: 36), by relying on Max Herrmann, explains that ‘[t]he audience’s physical participation is set in motion through synaesthetic perception, shaped not only by sight and sound but by physical sensation of the entire body.’ As she continues, ‘[t]he audience responds not only to the actors’ physical actions but also to the behavior of the other spectators’ (ibid.).

I completely recognize what she tells me in what I have witnessed. In fact, as a result of what *they* felt, I have become a different person: a cleaner, less burdened, healed version of myself.

‘Is there any workshop or course I could do?’

‘You could try contact impro. Or “5 rhythms.” This is a session where you dance to five different rhythms or “waves”—“flowing,” “staccato,” “chaos,” where you dance frenetically then, I think, it’s called “lyrical,” where you develop your own style, and then “stillness,” when you return to calm. I haven’t done it in some time. I should. You really start wondering “Who is moving this hand? Is it really me? Do I really want to move it this way?” You will like it.’

(19 November 2018)

Performance is so much more than an alternative format for communicating research to an audience. It makes at least four contributions to my research.³ First, as a tool of *investigation*: in a field (like Political Communication) that tends to rely on the analysis of what is being explicitly said/written, it enables exploring what is embodied and unspoken. It allowed me to explore the stories written in the body, the role of movement (and even walking) in my personal narrative. It showed me that, by changing the practices of everyday life, I could also change the self.

Second, as a tool of *engagement*: by involving academic and external audiences both analytically and emotionally, performance supports deeper understanding. More specifically the members of the audience could “get” what I was talking about because they *felt* a little of what I felt in their own bodies. The material presented is also accessible, entertaining, immersive: not only could I practically pack much more content into my presentation than in an ordinary lecture. I could also inject *life* into it. In fact, I did not give a presentation, I provided an *experience*.

Third, performance is a tool of *reflexivity*: by helping the investigator keep track of the “I” within the practice of research and identify, unravel, and develop those connections among data for which coherent words have, not yet, been found. Performance allowed me to embrace a new way of working in which intuition is valued and respected. I learned to trust it and to trust the process. For sure, intuition was always a step ahead.

Camilla, in our preparatory work, had asked me to pick objects I associated with the topic of the performance. ‘But do not think too much about it,’ she told me. ‘You do not need to have a worked-out rationale.’ In fact I did not know why I had chosen the jacket with the fur collar I had never worn and the shoes initially. I see now what they were pointing to. The jacket was the object that was too luxurious to be worn by a self I regarded as unworthy. The dancing shoes were not just accessories for my feet, but birthing aids for my new self.

3 These points are further developed in Archetti (2019).

The performance also made me realize that in the creative writing I initially thought I was developing as a “popular book” or a novel, there was in fact a theory. The framework developed in Part I, once I could see it, was just under the surface of the poems and the evocative writing.

Fourth, performance is a tool of *change*: it transforms reality. The sharing of emotions, as Erika Fischer-Lichte (2008: 21) explains, is self-referential and constitutive of reality, thus performative. I healed in the very process of telling my story. Also some of the spectators, as they told me after the shows or got in touch via email after watching the video of the performance online, were changed by it.

26 June 2018, my diary

What am I made of? Lake water, rock, prickly pear thorns (that sting even if you do not see them), brown packaging strings (those of the “My favourite things” song), words with a view, and butterfly wings. What are stories made of? The same.

Improvisation

27 June 2018, my diary

Tomorrow we are going to leave for the UK to visit Robin’s mum. On a whim, this morning, I searched for “5 rhythms” and found there is going to be a session in the evening. I cancel my gym booking and head off to Tøyen.

I dance barefoot for nearly two hours, unaware of the time passing, in a bright dance studio of the Norges Danseskole. I feel slightly conscious at the beginning. I wonder how I look, but nobody here cares. The other participants, around 30 I think, are of all ages and appear truly free: some roll on the floor, others hop, or stand with eyes closed, or dance frenetically, or sit. To someone just entering the room, it might look like a place full of crazy people. I like the fact that nobody pays attention to me, hence, probably, nobody judges me.

As the waves of rhythm flow seamlessly into each other, I get into a trance-like state, captivated by the way my body moves, wondering, as Camilla had predicted, why does it move in the way that it does. Is it me who decides how to move it, or does the body have its own mind? And if we have two minds, then where is the “other mind” located? How can I access it? Who or what controls it? It is a smart mind, quick, and free like the wind. How can I give it more credit or more of a role in my everyday life?

I physically feel the energy coming from the many other people in the room. It is like a magnetic field. Sometimes our gestures become synchronized. By moving across the room, participants spread their styles. We are influencing each other without speaking and, as it seems, without even consciously watching each other.

While heading home my whole body is electric, my mind brimming with thoughts. To free the mind, one needs to free the body.

The summer crisis

3 July 2018, my diary

The difference, the difference. I have read two books while at Robin's mum.⁴ I can keep my attention, plunging into the text, staying there, like a diver with oxygen to spare.

I can focus without becoming distracted. I actually have *interest* in what I am reading. I am not forcing myself to do it because I have to. The wind has started to blow. It is a dizzying sensation. I did not know it until I started to sail again. I have been drifting, drifting, drifting, all of this time. For the past four years.

4 July 2018, my diary

Yesterday, while returning to Oslo, I left the folder with my notes, notebook, and a book about identity and narrative [(Nelson 2001)] on the plane. I feel like an idiot. I always double check the luggage compartment, but somehow I did not do it this time. Am I boycotting myself? Am I too stressed and upset to remember things?

During the flight I managed to read the whole of *Avalanche* (Leigh 2016), a short but intense book about a tortuous journey into unsuccessful IVF. I finished the last page while landing. All I was thinking about was getting off to catch the train and get home as soon as possible.

Today I struggle to concentrate. I feel like my balance is lost, as if my happiness depended on that folder and now I have to find it at all costs.

It is all getting out of proportion. I spent the morning calling Oslo airport, Gatwick, various numbers of the baggage handlers of the Norwegian airline. I am anxious, my heart beats faster, I feel a weight on my chest. I am afraid, scared of something, but I do not know what.

This is a failure. I keep on obsessively clicking on the MissingX.com website. Damned technology. In the past I would have just had to wait, like in waiting for your period. Instead, the refresh button becomes a pregnancy test it is just too easy to pee on.

In the evening I meet Robin, at the supermarket, to do the grocery shopping on my way home after the gym. I tell him that, although I had tried to focus on the exercise, I could not get the thought of the missing folder out of my mind. I want to forget about it, but I can't. It's an oppressive and intrusive

⁴ *The diary of Frida Kahlo: An intimate portrait* (Lowe 2006) and *Grief is the thing with feathers* (Porter 2015).

burden. That's why people start drinking or taking drugs—because they can't forget.

'It is as if your boyfriend left you, or somebody died,' Robin observes. 'It's a form of grief, isn't it?' *It's grief*.⁵ He is always right. I have poisoned myself with emotional CO₂ again. With hindsight I should have been wiser with my selection of reading.⁶ I thought I was stronger, that I was out of *it* and sailing. But that was 24 hours ago.

5 July 2018. Narrative attacks



Figure 2.8.2 Tweet attack.

Source: Shower Thoughts 2018.

Robin forwards me the link to this tweet on Skype because it relates to the topic of my book. Today, a sentence like this is a stab in the heart.

5 By now Robin and I are aware that the losses—of control of one's body and of life goals—that accompany childlessness lead to a prolonged grief process (Volgsten *et al.* 2010). Differently from other life crises, this can remain unresolved because 'when the loss is of a potential, not an actual loss, the couple may not realize they are allowed to grieve' (*ibid.*: 1290). Anxiety, in addition to this, is a manifestation of grief (Smith 2018). And yet, even if I knew about this because I had read the research, I could not realize the way grief was affecting me before Robin pointed that out to me.

6 Rereading this text while editing the final version of the book, I realize how, at the time, I was blaming myself for having mismanaged my own emotions. I accept now that ups and downs are part of the process. As I wrote in relation to this experience later, 'we live and learn and, most importantly, we live further to share our stories' (Archetti 2018c).

A story written in everyday gestures

From: Robin Hadley <[email]>
Sent: 10. July 2018 13:46
To: Cristina Archetti
Topic: another year another poem

Hi Cristina,

How are you? Hope all well.

Here is another poem [the first is in Hadley 2018a] that I knocked out while I was trying to write this blog: 'There's something missing in my life': non-fatherhood on 'Father's Day' [Hadley 2018b].

No candle

No candle to light, no cake to cut, no nappies smelly, no teeth to keep, no
hand to squeeze, no stories read, no surprise to feign, no plays to see, no
shoes to clean, no sports-day drama, no parties to piece/police, no presents
to buy, no amends to make, no scrapes to clean, no kiss-it-betters, no tears
to dry, no hearts to mend, no embarrassment to give, no graduation photos
snapped, no 'Can you help with this?' No now-empty nest, no grandchild
to hold, no legacy to give, no one to call, no one to catch the fall, no
wishes heard, no life-lived described, few tears shed,
no candle lit.

There are links to other blogs on the theme of being a childless man on
Father's Day at the end of the email.

Very happy if you want to use it/pass it on/ write a song ...

All the best,

Rob

—

Dr Robin Hadley
@robinhadley1
www.wantedtobeadad.com

11 July 2018, my diary

I have printed out Robin's further reply email to pin it on the wall and read again a point he made about creativity: 'Bask, Cristina, bask in the beauty of where you are and of being in doubt: doubt is the gravity of creativity. Have fun!' Just wondering, though, if I wanted to write a mirror-poem with a positive spin, what could that look like?

TIME

Time to think, to dream, to write into the night, morning silence, bad manners allowed, no bad examples set, short-notice decisions, gym every day, last-minute bookings, forgetting public holidays, no birthdays to remember, tango courses, living in the present, endless love for fewer, connection with nature, routine, non-routine, limited cleaning ever required, (moderately) disposable income, endless love for all, freedom from legacy, admirer of beauty in all that exists, stronger bonds with siblings, ruthless survival skills, dialogue with a body not taken for granted, clean-slate life, having gone through grief, can survive anything, emotional warrior,
timeless

14 July 2018, my diary

As usual on Saturday mornings, I went to the Cardio Challenge class in the gym. I was quite tired to start with and wondered how I would possibly get through the 55 minutes of training without having to endure it as a mild form of torture. Then, shortly into the class, I felt a sudden rush of energy, as if I had unlocked and tapped into a secret power storage that made every movement effortless. I feel I have accessed a place in my body I did not know existed.

Whatsapp "Family" group, 18.54

We have bought mountain bikes! Robin has not been on a bike for at least 35 (!!!) years. We have trained going up and down the road outside our place 🍷🍷🍷 (as if we were 10 years old and had just received the bike as a present 🎁😊). Now we are ready for tomorrow's expedition 😊



Figure 2.8.3 The new mountain bikes.

(later that day)

My Facebook timeline

“Gateway Women (UK)” (n.d.) shares “Showered” (Chamberlin 2017):

Then, there is the unprescribed nature of our [childless] journeys. They are not as linear, not as easily externally definable as someone getting hitched or having a baby. For example, my ability to dream again, to interface with our new potential future, has started to come back over the course of the past year, gradually seeping in and, naturally, different than it was before.

But [...] after a multi year long spell of not being able to sustain excitement for, well, ANYTHING, I found myself about to complete a yoga teacher training and quite engaged in what may lie ahead.

15 July 2018, my diary

Even if life is about more than having a child, I did momentarily lose the plot—literally. What was my life-story? Where was I going? What was my life about? Maybe this is not any different from a man’s stereotypical “midlife crisis,” but with a mountain bike and tango shoes rather than a motorbike as a response to it. Maybe, not having children, I have in fact the opportunity to fundamentally question and reassess my life while mothers, who might well be going through the same thoughts, are not supposed to show any “doubt” since they should be satisfied with children being the meaning of their lives.

13 August 2018, my diary

My old self is dead. It was someone else, with a body that was defective and hurt. Now I am different. She is aware of her own perfection and wholeness. Her body is healthy. The pain is mostly gone: I actually handle it differently. I do not have to endure it, I do not have to be passive. I do not deserve it. I can slightly shift position, take breaks, exercise less, and even accept it and work with it. The pain is in fact still there, but I no longer pay attention to it. It is part of me rather than my enemy.

Epilogue⁷

[...]

CHANGE SLIDE: PICTURE OF TREES & TEXT



18/8/2017

'Dear Linda,

I thought about you during the trip, particularly in spotting some trees growing on the edge of cliffs (I have attached the picture). It suddenly occurred to me that we all childless women are like those trees. We balance on the edge, but we hang on each other and never fall.'

7/9/2017

'Dear Cristina,

Thank you for the lovely picture and the symbolic of childlessness compared to a tree on the cliff [...]. If we don't live, we will fall. Beautiful.'

Figure 2.8.4 Trees on cliffs.

SIT & TAKE OFF THE TANGO SHOES but leave them in front, next to the hiking boots, then stand barefooted next to them (create a “evolution” sequence?)

CHANGE SLIDE: FEET



Figure 2.8.5 My feet.

7 From the script of the performance lecture “Embodied” (Archetti 2018b).

THIS NEEDS TO BE SLOWER, LIKE AT THE BEGINNING

SPRING

[read the date]

4 February 2018

It is one of those ordinary Sunday mornings when for the rest of the day Robin and I only have planned to spend some time together, go for a walk in the afternoon, I will talk to my family on Skype, perhaps I'll catch up on some emails later. Winter is clinging on to Oslo and, despite the bright sun, it is -8°C outside. In closing the curtains of the bedroom, the little hill of snow outside the window glistens like crystal powder. In our basement we are protected by a glitter wall.

We make love, then lie naked in each other's arms, as we have done countless times. It is on this ordinary day that, unexpectedly, I sense a feeling that can only be called "spring." Without any defined image forming in my mind, it has the texture of a fabric with big printed flowers. It spreads like a perfumed scent through the limbs. A caress-like breeze that comes from a distant past, from a place deep inside the body. A place hidden among muscle fibres, of calm, sunshine on green grass, warmth, where time does not pass. Where there is no sense of guilt, no location I should rather be, nothing I am expected to do, no deadline. A place of pure light, simplicity yet completeness, a place from where a beginning is possible and where everything, naturally, unproblematically, is just exactly the way it is.

FOLD NOTEBOOK & PUT IT ON TABLE**SAY "Thank you"**

Figure 2.8.6 The stage after the last performance.

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Conclusion

Roadmap for the foreseeable futures

While writing this book I have been asking myself whether I was making a positive or negative contribution to the world in which I live. The fact that I have never asked myself the same question about other books I have written is an interesting pointer at the disciplining mechanisms that become activated, inside our heads, when we attempt to challenge the pillars of the taken-for-granted status quo. Could not a greater normalization of childlessness, I wondered, encourage more people to live without children, further contributing to the Western demographic crisis, perhaps even supporting a growth in antinatalism? My answer is ultimately “no.” The issues and questions I raise are meant to contribute to a debate we need to have, and which is long overdue, as a society. An increasing number of women and men cannot make informed decisions about their future because either they do not know much about their own fertility or what they read about dealing with infertility is not only misleading but comes in some cases literally from the PR book of the fertility industry (Zoll and Tsigdinos 2013; Kennedy 2017; Tsigdinos 2018; Zoll 2018). The best insurance against infertility, as it has been pointed out, is not egg-freezing but realizing one’s biological limitations and conceiving early (Gustafsson 2018; Specter 2017). Whether this is desirable, feasible, and whether it enables true equality among genders is the next discussion we need to have.

It is because children are precious that we need parents, who bring them into an already overpopulated world, to do so because they want them and are in the position to care for them. We also need to be able to see the contribution to society that individuals without children make, from doing their job well, to inspiring others, to just being supportive friends, loving brothers or aunts: one can be a parent in a different way and this does not necessarily have to involve care or selfless volunteering. Making the perspective of a life without children acceptable is the most effective way of starting to deal with the burden that stigma places on the health and well-being of the childless.

Talking of health and well-being, writing heals—literally. Writing is like alchemy. It transforms matter. Toxic thoughts, in being transferred onto the paper of my notebook and then again onto the laptop screen, melt and remould. The pencil strikethroughs blunt their edges, the keyboard tapping erodes them like drops on a rock, just more quickly than in geological time. They are

boulders ground to detritus by a thinking glacier in fast-forward mode. Then, like quicksilver drops, they self-assemble and take shapes that were unthinkable before. These forms defy conscious logic with their beauty, like the camphor tablets that turn into jewel purple crystals when you heat them in the secondary school science lab, or the plane that manages to fly despite its weight. The physical laws never capture the surprise that spirals from your stomach into a smile.

I have metabolized, I think, the worst of my grief. Yet, it is still tough. I am inching forward, opening a path that might lead me to be more at peace with myself. I am slowly finding my ways to cope. Peace will not eventually just materialize. There is no peace, only fragile ceasefires. I know I need to work at them, continuously, incessantly. Balance is like standing on a ball. I need to keep on moving. It is all about finding the point of equilibrium, but where is this located? Between not trying and trying too hard, between not challenging yourself and overdoing it. Between being too bold and too shy, between the regret for having made one choice, and the regret for having made a different one. Somewhere, there. Some days the point shifts because I have been on a trip abroad, because I have worked at the weekend, have taken one class too many in the gym, or the winter has arrived and it is darker earlier in the evening. So collect information, data, monitor, review, adjust. I am the manager of a dam that mustn't collapse.¹

I am starting to take myself less seriously, to forgive myself. I need more tolerance for myself, more kindness. Maybe I need to treat myself as my own child. "It is difficult when you are not a mother to start with" is the first thought that comes to mind. Then I remind myself that I *am* a mother, just of a different kind, and that learning is my specialty after all, my reason for living.

I find it helpful to think that grief is temporary, that I just need to take a day at a time, and that, ultimately, I have the power to rewrite my story.

6 August 2018

"Transition"

red blush of an apple

a yellow leaf

a bee
on spent flowers

hovering

¹ It actually might as well collapse—it is not going to be the end of the world (20 August 2019).

I breath
sunbeams
in fizzy air

electric flickering
tickles the lungs
vibrates in the fingers

slivers
of summer light
sheared shorter
one minute at a time

resonance
of soul fermentation
to come
under a lid
of darkness
and cleansing cold

time for
re-arrangement
re-editing
re-writing
re-telling

stop looking for me

transformation
in progress.

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Appendix

Methodology

Ordinary derailments

It started with interviews. I thought I was trying to find out how childless people were attempting to establish a new identity for themselves by connecting with each other online: a study of “mobilization.” That is how I presented the project to the Norwegian Research Council in a research bid I submitted to it in 2016 (it was rejected). I was trying to map the social networks of the interviewees, their media consumption, use of technology, sense of identity, how they talked about not having children, and infertility. I cast my net wide. I soon understood, though, that I was completely on the wrong track. Apart from the activists whose materials I had accessed online and who had created the (mostly closed) online platforms on which other people were interacting, practically nobody else wanted to talk *publicly* about this issue. Sure, the fact that thousands of individuals come together online to discuss *is* a beginning of what might become, myriad steps later, “mobilization,” but none of the ordinary people I talked to wanted to “come out” and “be seen” as childless. By striving to get the topic out into the open, in fact, I was myself an activist.

The interviews brought to my attention the importance of emotion, personal stories, and the fact that the inability to speak was physically and materially related to the impossibility of making any sound when overwhelmed by grief. The people I spoke to also talked about the feeling of being overlooked by the rest of society, misunderstood, dismissed. They wanted to be more visible, yet could not speak out. How could I explain this?

I then reoriented the study to try to understand why one would be ashamed of being childless, why one would remain silent. Not being able to conceive is not a crime. The people I talked to had desperately tried to have a child. They had not “brought it upon themselves.” There had to be something out there that led them to feel and act the way they did. I started to follow more closely online groups for the involuntary childless and decided to investigate the representations of childless individuals in popular culture (film). My hypothesis, which was confirmed, was that negative representations of the childless and the stereotypes about them—from throw-away comments in the office (“you can’t understand, because you don’t have children”) to demonizing portrayals (the

‘crazy-childless-woman flick’)¹—did contribute to confining childlessness to the taboo zone.

The interviews, the popular culture study, and online participant observation helped me place some points on a conceptual map, which I even presented in a PowerPoint slide during an invited speech (Archetti 2017b, see below). What I was not sure about, though, was how exactly the factors I had located on it—among them “policy,” “social media,” “emotion,” “public arena,” “popular culture”—were connected. Even if I conducted more interviews or observed more interactions, I realized, I could never gather enough material to precisely explain how, over time, identity, body parts, personal and public narratives, the material environment, and the messages that bombard us over an entire lifetime combine and produce suffering, pain, varying behaviours, policy, and either contribute to destroying old stories or creating new ones. Where and how could I get hold of a “complete dataset”? There was no choice: I had to use my own experience and engage in a method I had never before considered: autoethnography.

The broader framework

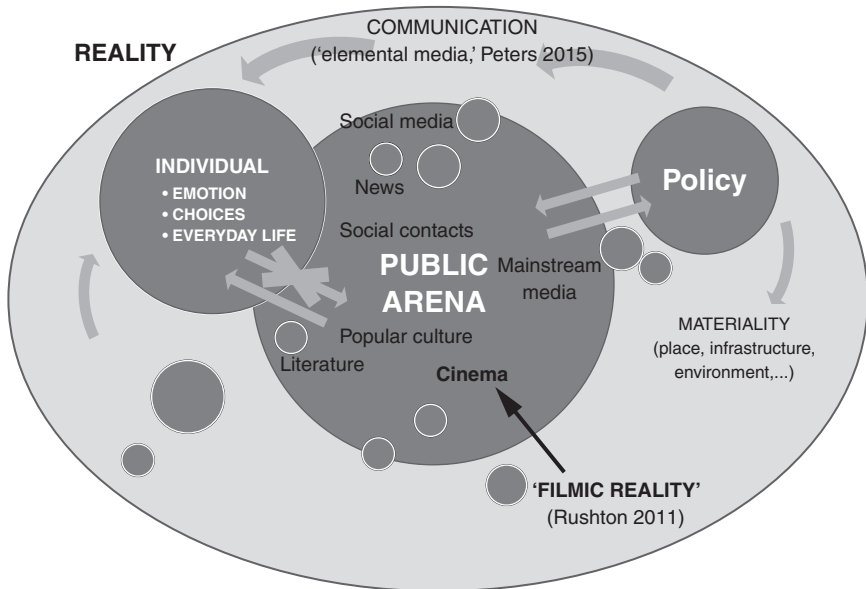


Figure A.1 Mapping silence: a first draft (Archetti 2017b).

¹ I first heard about this in an online article (Stewart 2016).

I thus employed a retroductive research strategy (Blaikie 2000: 108-114) to hypothesize, on the basis of my own personal story, possible connections between the factors on the map, for which I then tried to find further verification by going back to my interviews, the film analysis, additional literature, and the evidence both streaming in from the Facebook pages I was following and new informal conversations. This material would help me demonstrate that the findings applied beyond my individual case.

Method details (as I would write about them in an article)

The study described in this book set out to understand why, despite the affordances of twenty-first-century communication and despite the fact that it affects a growing number of individuals, there is so much silence, globally, around involuntary childlessness. It combined: semi-structured interviews; a comparative qualitative content analysis of 50 films from Italy, Norway, and the US; an ethnography that has been ongoing for six years and involved: participant observation on internet discussion fora dedicated to trying to conceive (2013–2015) and closed Facebook groups for the involuntary childless (2015–); organization, participation, and contribution to events dedicated to (in)fertility (in Sweden, Norway, the UK, and online); and countless informal conversations with childless individuals. Here are some more details.

The formal semi-structured interviews were conducted between May 2016 and October 2017 and lasted between 40 and 86 minutes, with an average of about an hour. The nationalities of the interviewees were: British (1), Chinese (1), Danish (1), Italian (6), Norwegian (4), Swedish (5). They included 16 women and 2 men. One of the men is Dr Robin Hadley, who is both one of the very few international experts on male childlessness and outspoken about his own experience of it. The sample, given the difficulty in finding individuals willing to talk about such a sensitive topic, was largely opportunistic. Most interviewees were met at events dedicated to (in)fertility. Some contacts were obtained through interviewees recommending a friend (snowballing), others through recruiting on a secret Facebook group.

The aim of the interviews was to identify the personal narratives related to the experience of being infertile/childless, as well as the human-object-meaning assemblages that supported these narratives. In this sense, the interviews did not focus on the participants' personal opinion and perception only (coding there was conducted thematically), but they also provided evidence about the processes underpinning the structure of silence external to those individuals.

The interviews, which were largely explorative, focused on mapping the possible reasons for silence through the investigation of the way in which the experience of infertility/childlessness affects one's identity and perspective on the world. More specifically, the interview questions focused on personal story (individual pathway into childlessness), the navigation of daily life as a childless person (effect of childlessness on social networks, on range of activities, spaces, and places one would go to, sense of self, personal narrative), media consumption

(including reactions to media coverage related to fertility/infertility, perception of social narratives related to family and fertility), and use of communication technology (to connect with other childless individuals, if applicable).

The interviews were conducted, with the ethical approval of the Norwegian Centre for Research Data (NSD), both face to face and over Skype. They were recorded with the consent of the interviewees (who were informed that they could withdraw from the study at any point without having to provide an explanation), later transcribed and anonymized.

The background research for the study included additional interviews with experts: apart from Robin Hadley (social gerontologist and independent researcher on male childlessness), they included also Eira Bjørvik (researcher on the history of assisted reproduction in Norway, University of Oslo), Johanne Sundby (internationally renowned scholar on infertility and women's reproductive health, University of Oslo), and Anders Möller (a pioneer in research on the existential aspects of childlessness). Möller, Professor Emeritus at Ersta Sköndal Bräcke University College, Stockholm, was interviewed by Hilde Haug for her documentary *Mammaen i meg* [The mum in me] (forthcoming) and the video-recorded conversation shared by her with the author.

As for the analysis of popular culture, this included 18 films from Italy, 17 from Norway, 15 from the US, and spanned the timeframe 1949 to 2017. Popular culture was examined both as a vehicle of collectively shared narratives and a tool for their consolidation. The screen, in fact, has been found to be a privileged site for the detection of these narratives (Koos 2009; Hellstrand 2011), and to have an influence in shaping social norms about family and gender roles (Tincknell 2005). Films from Italy, Norway, and the US were compared partly for opportunistic reasons (understanding of the original language), but also to verify the relationship between, on the one hand, broader cultural narrative frameworks related to gender, the role of the individual and family in society, and, on the other hand, representations of childless individuals. A review of the literature on the representation of childlessness far exceeds the scope of this appendix (for this see Archetti 2019c). Suffice it to say that this is so limited that my analysis was going to be mostly exploratory: Would childlessness in Norway—a country with a tradition of gender equality and a strong welfare state (Ellingsæter and Leira 2006)—be portrayed differently than in the US—liberal and individualistic (Waldman 2006: 69, 75–77)—or Italy—relatively more patriarchal and family-centred (Luciano *et al.* 2012)?

The sample included films in which not having children, either for the protagonist or secondary characters, was relevant to the story plot. The Italian films were selected on the Italian Cinema Database of ANICA (n.d.) (National Association for the Cinema, Audiovisual and Multimedial Industries), which allowed searches on the text of detailed movie plots, through the search terms: “*senza figli*-without children,” “*infertilità*-infertility,” “*sterile*-sterile” (the equivalent of “childless” does not exist in Italian). As for the US case, movies were selected from the IMDb (n.d.) database through the keyword “childless.” To identify relevant Norwegian films, I relied on the knowledge of plots by Norwegian colleagues in Film Studies at the University of Oslo and Jan Erik Holst, former

director of the Norwegian Film Institute and author of multiple books on Norwegian cinema. A list of titles was compiled based on these experts' combined suggestions (see full list below).

The film content analysis addressed the question “What are the representations of involuntarily childless individuals like?” This consisted in a holistic qualitative examination of narratives of childlessness based on characters' features and motives within each plot: Who are the childless in the story? What do they do? What are their values? These aspects were coded on the basis of visual appearance and actions (What do the childless look like? What do they wear? Which spaces do they inhabit? What do they eat? How do they move?), as well as in terms of their dialogues (What do they say? What do they think?).

When it comes to the ethnography, online participant observation included both sites dedicated to pregnancy and to involuntary childlessness. The main discussion websites related to pregnancy were: Mumsnet (Talk—Conception) (n.d.), Baby and Bump (n.d.), and Baby Center—Community (n.d.). In relation to involuntary childlessness, the participant observation took place on: closed Facebook groups (“*Ofrivilligt barnlös—andra sidan tröskeln—för kvinnor* [Involuntary childless—the other side of the threshold—for women]” [n.d.]; “Childless Path to Acceptance (No TTC Talk)” [n.d.]; “Childless Perks!!” [n.d.]); and the websites of Gateway Women (n.d.) and World Childless Week (n.d.). Both Gateway Women and World Childless Week also reach out through homonymous open Facebook pages, which were also included in the study: “Gateway Women (UK)” (n.d.) and “World Childless Week” (n.d.). Quotes from discussion fora on the internet are used only in cases where the material is publicly accessible and anonymous—and in that case the text is additionally paraphrased. No quotes are used from closed groups.

I took part in and contributed to two events held in Stockholm on the occasion of Involuntary Childless Day (Archetti 2016, 2017a). In Norway I contributed to (Archetti 2018a) and organized a public seminar in Oslo—“Untold stories: When the ‘family dream’ goes unrealized” (Untold Stories 2018)—and I co-arranged a follow-up event for medical practitioners (“*Ufrivillig barnløshet og helsemessige perspektiver* [Involuntary childlessness and health perspectives]”) in Kristiansand (24 October 2019) where I also presented my work on this book (Archetti 2019a). I contributed to World Childless Week in 2018 (10–16 September) (Archetti 2018b, 2018c, 2018d) and in 2019 (16–22 September) (Archetti 2019b, 2019d). I am one of its 23 World Childless Week Champions, together with activists, bloggers, and authors: Stephanie Phillips (founder of World Childless Week); Jody Day (founder of Gateway Women); Berenice Smith (founder of Walk in Our Shoes [n.d.]); Linda Malm (founder of the Swedish association for the permanently childless—*Föreningen för permanent ofrivilligt barnlösa* [n.d.], Facebook group “*Ofrivilligt barnlös—andra sidan tröskeln—för kvinnor* [Involuntary childless—the other side of the threshold—for women]” [n.d.], and the blog *Andra sidan tröskeln* [The other side of the threshold] [n.d.]); Robin Hadley (one of the founders of Ageing Without Children [n.d.]); Catherine-Emmanuelle Delisle (*Femmes sans enfant* [Women

without children] [n.d.]); Tere Dattari (*Mujer sin hijos* [Women without children] [n.d.]), and others. Through these events I had the opportunity to engage with childless individuals who were at extremely different stages of their “journey”: from outspoken campaigners and qualified therapists who have developed a highly reflexive approach to their own experience and that of others, to individuals who might just have started coming to terms with the shock of infertility.

Childlessness on screen: list of films

This is the sample of films on which I conducted my analysis of cinematic representations of childless individuals. The list is organized in chronological order of release, per country.

Italy (17 films)

- Padri e figli* [A taylor’s maid] (Mario Monicelli, 1957). Royal Film, Filmel, Lyrica Filmel.
- Il bell’Antonio* [Bell’Antonio] (Mauro Bolognini, 1960). Arco Film, Cino del Duca, Societé Cinématographique Lyre.
- Valeria dentro e fuori* [‘Valeria inside and outside’] (Brunello Rondi, 1972). Naxos Film.
- Un fiocco nero per Deborah* [A black ribbon for Deborah] (Marcello Andrei, 1974). Paola Film S.r.l.
- Il gatto mammone* [‘The mammone cat’] (Nando Cicero, 1975). Medusa Distribuzione.
- Il futuro è donna* [The future is woman] (Marco Ferreri, 1984). Faso Film, Union Générale Cinématographique SA, Ascot Film GmbH.
- Fatto su misura* [‘Made to measure’] (Francesco Laudadio, 1985). R.P.A. Cinematografica.
- Donna d’ombra* [‘Shadow woman’] (Luigi Faccini, 1988). Piperno, RAI Radiotelevisione Italiana.
- Ma non per sempre* [‘But not forever’] (Marzio Casa, 1991). Cecchi Gori Group Tiger Cinematografica, Esterno Mediterraneo Film, Reteitalia.
- Le donne non vogliono più* [‘Women no longer want’] (Pino Quartullo, 1993). Penta Film, Officina Film.
- L’inverno* [‘Winter’] (Nina Di Majo, 2002). Dodici Dicembre, Farfilms, Rai Cinema, Psycho Film.
- Viaggio Sola* [Five star life] (Maria Sole Tognazzi, 2003). Bianca Film.
- Il cosmo sul comò* [‘The cosmos on the commode’] (Marcello Cesena, 2008). Medusa Film, Agidi.
- Due partite* [‘Two card games’] (Enzo Monteleone, 2009). Cattleya, Rai Cinema.
- Venuto al mondo* [Twice born] (Sergio Castellitto, 2012). Medusa Film, Alien Produzioni, Mod Producciones, Picomedia, Telecinco Cinema.
- La grande bellezza* [The great beauty] (Paolo Sorrentino, 2013). Indigo Film, Medusa Film (co-production), Babe Film (co-production), Pathé (co-production), France 2 Cinéma (co-production).
- Il racconto dei racconti* [Tale of tales] (Matteo Garrone, 2015). Archimede, Le Pacte, Rai Cinema.

Norway (18 films)

- Døden er et kjærtegn* [Death is a caress] (Edith Carlmar, 1949). Carlmar Film.
- Skadeskutt* [‘Wounded’] (Edith Carlmar, 1951). Carlmar Film.
- Kassierer Jensen* [‘Cashier Jensen’] (Nils R. Müller, 1954). Contact Film AS, Ø.C. Vennerød & Co.
- Jakten* [‘The hunt’] (Erik Løchen, 1959). Studio ABC AS.
- Jentespranget* [Lina’s wedding] (Knut Leif Thomsen, 1973). Teamfilm AS.
- Hustruer* [Wives] (Anja Breien, 1975). Norsk Film AS.
- Hustruer—Ti år etter* [Wives—Ten years after] (Anja Breien, 1985). Norsk Film AS.
- Hustruer III* [Wives 3] (Anja Breien, 1995). Norsk Film AS, Magdalenafilm AS.
- Arven* [‘The inheritance’] (Anja Breien, 1979). Norsk Film AS.
- Brennende blomster* [‘Burning flowers’] (Eva Dahr and Eva Isaksen, 1985). Norsk Film AS.
- Noe helt annet* [‘Something completely different’] (Morten Kolstad, 1985). Media Vision AS, Norsk Film AS.
- Over stork og stein* [Stork staring mad] (Eva Isaksen, 1994). Moviemakers AS, Norsk Film AS.
- Søndagsengler* [The other side of Sunday] (Berit Nesheim, 1996). NRK Drama.
- 37 og et halvt* [‘37 and a half’] (Vibeke Idsøe, 2005). Filmkameratene AS, Svensk Filmindustri AB.
- Limbo* (Marie Sødahl, 2010). SF Norge Produksjon AS, Nimbus Film (co-production), Bob Film Sweden (co-production), Galt Alliance Films (co-production).
- Sykt lykkelig* [Happy happy] (Anne Sewitsky, 2010). Maipo AS.
- 1001 gram* [1001 grams] (Bent Hamer, 2014). BulBul Film AS, Slot Machine (co-production), Pandora Film Produktion (co-production).
- Shelley*² (Ali Abbasi, 2016). Profile Pictures.

United States (15 films)

- Who is Afraid of Virginia Woolf?* (Mike Nichols, 1966). Warner Bros.
- Fatal Attraction* (Adrian Lyne, 1987). Paramount Pictures.
- Raising Arizona* (Joel Coen and Ethan Coen, 1987). Circle Films.
- The Hand that Rocks the Cradle* (Curtis Hanson, 1992). Hollywood Pictures, Interscope Communications, Rock’n Cradle Productions.
- Up in the Air* (Jason Reitman, 2009). Paramount Pictures, The Montecito Picture Company.
- Young Adult* (Jason Reitman, 2011). Paramount Pictures, Denver and Delilah Productions, Indian Paintbrush, Mandate Pictures, Mr. Mudd, Right of Way Films.
- Prometheus* (Ridley Scott, 2012). Twentieth Century Fox, Scott Free Productions, Brandywine Productions.
- Gravity*³ (Alfonso Cuarón, 2013). Warner Bros., Esperanto Filmoj, Heyday Films.
- While We’re Young* (Noah Baumbach, 2014). InterActiveCorp Films LLC.
- Avengers: Age of Ultron* (Joss Whedon, 2015). Marvel Studios, Walt Disney Pictures.

2 This is a Danish/Swedish movie which was widely shown in Norwegian cinemas.

3 This is a UK/US film.

- By the Sea* (Angelina Jolie Pitt, 2015). Universal Pictures, Jolie Pas, Pellikola, Plan B Entertainment.
- Knight of Cups* (Terrence Malick, 2015). Dogwood Films, Waypoint Entertainment.
- Maggie's Plan* (Rebecca Miller, 2015). Black Bear Pictures, Freedom Media, Hall Monitor, Locomotive, Rachael Horovitz Productions, Round Films.
- The Huntsman: Winter's War* (Cedric Nicolas-Troyan, 2016). Universal Pictures, Roth Films.
- Wonder Woman* (Patty Jenkins, 2017). Warner Bros., Atlas Entertainment, Cruel & Unusual Films, DC Entertainment, Tencent Pictures, Wanda Pictures.

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Index

Page numbers in *italics* denote figures

Also this index, as the rest of the book, is a bit different from the ordinary. First because it is a list of relevant terms and issues compiled by a member of a silenced minority who, as a result, has an alternative view on reality than that of most readers. Within this perspective, you will find issues and phenomena that only “we” can see—“the others,” the “dismissal (of the childless),” “the crazy childless’ (stereotype),” for instance—and terms that involuntary childless individuals in online communities tend to use—like ‘journey,’ ‘acceptance,’ ‘plan B,’ ‘tribe.’ Other entries relate to matters that are central to the experience of infertility, but which are not acknowledged by the “majority”: for example, “existential dimension of childlessness,” “grief (of childlessness),” “mind–body relationship,” “involuntary childlessness: compared to terminal illness,” or the explicit notion of a “meaningful life without children.” To an observer who has not lived firsthand what it *means* and how it *feels* not to be able to conceive, some terms might sound trivial—like “normality,” “happiness,” “hope” or “love”—or simply out of place—what has “noise (made by children),” “eternal present” or “future: loss of” to do with not having children? They are, however, significant to the worldview and experience of a childless individual. That is why, as a provocation against the expectations of the mainstream discourse about the subject (very few medical terms are listed at all, in that respect), they are indexed, too.

The second reason this section is going to be unusual is that, even within the constraints of the list-format, I continue the creative writing experiment of the main part of the manuscript. You will thus come across words, comments, and questions (both mine and expressed by “the others”) that have shaped my experience of infertility and that of my interviewees. A couple of examples are “*you: can’t understand because you don’t have children 251; don’t know what love is (until you have a child) 176*” and “*feeling like social wallpaper see walls: talking to.*” These fact-based-yet-disruptive entries, together with the novel associations generated by the juxtaposition of a wider range of terms associated to childlessness and infertility (the contrast between “taboo” and “tango,” listed consecutively, for instance), are designed to “shake” and broaden the reader’s perspective on the subject. These terms and expressions are in italics to differentiate them from the more “traditional” index format. Boundary lines, however, and as you might expect by now, are never rigid and sometimes will blur.

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