DISRUPTED MOTHERING:
Understanding Women's Experiences of Mothering in Illness Through Published Autobiographical Accounts.
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Background:
We define disrupted mothering as a woman perceiving that her maternal life has become disordered [1]. Illness may disrupt women's mothering through the disease process, treatments, fatigue, hospitalisation, and the threat of death [2, 3]. This poster presents preliminary findings from a qualitative study, that derives a portion of its data from published Australian women's autobiographies containing accounts of mothering in illness. The term illness is used here to encompass physical and mental illness, and injury requiring medical attention.

Method:
Australian women's published autobiographical works (n=10) were treated as qualitative data. Drawing upon Jackson [4] and Daniel's [5], approach, sections of text in the books that referred to the author's experiences related to disrupted mothering were identified and extracted. These texts were then treated as transcripts and subjected to thematic analysis.

Findings:
Themes emerging from preliminary analysis are:
* Broken Beginnings
* The Mother I Wanted to be
* Matters of Life and Death

Broken Beginnings:
Disruption to mothering, especially during the child's formative years, sometimes led to long term repercussions for the maternal/child relationship. This was especially apparent in autobiographies where the author had a mental rather than physical illness.

In the end, it was me she hated... I was a frightening mother; always full of nerves and wanting everybody to be quiet... Marie-Anne was frightened of me and didn't see me as her real mother... She blames me for her unhappiness and refuses to speak to me... I am as alone today as the day I was born... the error of my children is to reject me because they are ashamed of a depressed bipolar mother; Hence no acknowledgement of Mother's Day. I am too idiosyncratic, too erratic for their taste. Their dismissal of me, and their unwillingness to understand me is very painful [6].

The Mother I Wanted to be:
Illness and injury impacted upon maternal/child relationships in many ways. In the acute stages of hospitalisation and recovery it was sometimes difficult for women to satisfy the emotional and physical needs of their children. This resulted in feelings of guilt and inadequacy.

During those six weeks of recovery Kaspar said to me many times, 'Mummy, you are speaking to me very badly,' 'Mummy, you are making me sad,' and 'Mummy, you are not nice to me. Oh, it broke my heart. The pain was bigger than me and I couldn't be the mother that I wanted to be' [7].

Matters of Life and Death:
In many of the autobiographies, women cited their mothering role as providing the incentive to continue to seek or comply with medical treatments, and for continuing to fight to live against sometimes horrific odds.

It was then that I decided that whatever it took, I would learn to walk, talk, eat, breathe by myself and be a mother to my boys again. Because, damn it, I was their mother, and a good one too! 'We'll see. We'll see who can't do this and can't do that,' I murmured to myself, intubated and isolated in ICU [8].

Conclusions:
Published Autobiographies are valuable as a source of qualitative data to investigate women's experiences of mothering and illness. Ill mothers face many challenges to mothering in the way they would like to, and feel they have to. This may have consequences for their treatment choices, motivation to heal, and health and wellbeing. Health professionals should remain sensitive wherever possible to women patient's maternal responsibilities, and where necessary make judicious referral to other professionals such as social workers.

References:

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