

**Looking forward to the birth of a child:
tales of motherhood in forums**

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Abstract

The aim of this study is the investigation of the mental representations relative to birth created by mothers through their self-narrations. We have explored several Italian forums contained in websites connected to the topic. The narrations have been analysed in their structural, linguistic, thematic and symbolic components. Then we have pointed out the gap between the declared level of the contents and the defensive strategies emerged through the formal elements. The omissions, the “unsaid” and the mental-disorderly contents, which have been covered or transformed with expressive techniques, have brought us to elaborate some hypotheses. Specially the Psychodynamic prospect offers the possibility of examine the hidden meanings of the text, without forgetting the specific communicative context linked to web and forums.

Keywords: self-narration, motherhood, digital-communication

1. Forums about motherhood

This survey has been conducted on some Italian forums dedicated to the theme of motherhood. It focuses on forty stories relating to the birth experience, which are distinguished from other posts not only for their extension, but also because they represent the formal leave from the forum and this gives these writings some importance and solemnity. They are the signal of the conclusion of an experiential

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path and constitute a witness left to other women who have never given birth (“We are here to be a precious resource for women who have to live their first birth, we must try to accompany them kindly”).

Participation in the forum is described as an experience of individual and collective growth and the forum itself can be regarded as a sort of Bildungsroman written by various female authors.

It is not useless a preliminary and general reflection about forums, which are virtual communities whose participants give life to a communication-discussion centred on specific arguments. The community is a group of individuals who interact with the written word through a series of contributions called “posts”. The communication in a forum is virtual, because participants who do not know personally, interact only through the mediation of computers and their physicality is abolished. Furthermore they do not share any space-time context: a forum is created in a place outside every place and in a time out of time. The communication is deferred: not only can you send your post from the place where you are physically at that time, but you do not know in advance if someone (and who exactly) will take it into consideration, in order to write you a response or a comment. Once again, it is worth noting that no bond binds the individual to the virtual community, so everyone can enter and leave it at one’s discretion.

The idea of community recalls the idea of group and shares many aspects with it, even if the group is intangible. These are the most significant aspects:

- observed forums are based on an implicit “narcissistic contract” (Kaes, 1993) where a narcissistic relapse, deriving from the awareness of being part of a group, is in a dialectical connection both with the possible individual narcissism, resulting from a pregnancy positively lived, and with feelings of unease, doubt and insecurity caused by an unknown experience;

- they allow an indefinite number of identifications (Freud, 1921), which permits a woman to find common aspects and parts of herself in other women of the forum, without being involved in interpersonal commitments and real responsibilities;

- they are the “fomentation places of images” (Anzieu, 1976), but unlike what happens in groups of the outside world, the conscious and unconscious images are already available in the forum and, in any case, are less destabilizing, at least because they are mediated by the written word and not transferally enhanced by the physical presence; moreover, the images are not only fomented, but also constitute a repertoire, an archive from which all female authors more or less consciously draw, so that in posts there is a high emotional and thematic predictability, which if on the one hand makes the messages less informational, on the other hand reduces the anxieties of female authors;

- the potential infinity of size of the community is not seen as a destabilizing factor and does not produce feelings of mental and emotional agoraphobia, because on the one hand the common theme offers an effective containment, on the other hand in the community there are small provisional communities promoting temporary group discussions on particular problems, and this is another aspect that contains the anxieties of dispersion;

- in these forums, the fictitious identity represented by the nickname is usually accompanied by the name of the real female writer; this determines feelings of greater authenticity than what happens in other forums;

- in the community you can clearly observe oscillations of the “group culture” (Bion, 1961), namely the conflict, mediation and integration between the mentality unanimously shared and the individual requests, between centripetal tendencies centred on the community and centrifugal tendencies oriented towards the single person;

- most therapeutic factors of the group are also in the community of the forum: altruism, imitative behaviour, interpersonal learning, universality (annulment of the

idea of uniqueness relative to one's own problems), possibility to give and get information and to inspire other people with hope (Yalom, 1970). Considering the type of communication which is used, it is impossible to determine with certainty, whether this was a real and transformative learning, or – as it seems – a “learning for a projective identification” with other women of the forum or a “learning for an obsessive collection” of information (Meltzer & Harris, 1983; Meltzer, 1986).

2. Formal aspects

In a forum the word takes the place of action and physicality. Especially in birth stories the language tends to recreate reality by hypertrophying its evocative potentiality. There is a comparison not only with descriptive words, but also with expressions that have to penetrate the minds of female readers and leave traces of an experience, which has to be understood even and perhaps especially from an emotional point of view. This is a word which is always strongly individual and helps to create an illusory proximity based upon solipsistic presuppositions. The body is abolished and consequently the word strives to acquire a density which can substitute the absent body, by taking its place and making itself and the described existence almost palpable. In this sense, one can think of the formal textual phenomena which can be seen in this section, both in the form of the content and in form of the expression (Hjelmslev, 1943).

2.1 Lexicon and style

The style of the texts is principally characterized by the simulation of the distinguishing features of spoken language. At the lexical level, this has been noted especially in the use of a light and informal style and of idiomatic expressions. This is an aspect which is common to different types of forums. However, it should also be noted that in parallel with this aspect, most texts are characterized by the persistent use

of scientific terminology (pap test, episiotomy, oxytocin, epidural anaesthesia, blood glucose, transaminases, Botallo's duct, Apgar index, etc.).

This is interesting because of different reasons: a) it is an exhibition of a competence shared with other women in the forum, in order to look for uniformity and harmony, not only on the basis of the experience of motherhood, but also in relation to the knowledge of this sectorial language; b) it is an appropriation of scientific terminology with the unconscious purpose to rob the other of an exclusive language which is connoted by power (the other is the gynaecologist who has the technical know-how but, as it is often highlighted, he does not show empathy and those emotional aspects which would be necessary for an experience like motherhood and especially for a birth); a woman acquires both the identity of a mother and the scientific and emotional competences, by eliminating the monopoly of scientific terminology exercised by those who are frequently seen as non-cooperative. Obviously, women do not want to eliminate the presence of a physician, but since motherhood is primarily a journey of self-knowledge, they must be able to focus their gaze upon themselves with a sufficient competence (including linguistic competence) and autonomy.

The simultaneous presence of a definitely prevalent informal register, represented by the narration of facts and emotions, and of a formal register, principally consisting of scientific inserts, is the combination of two aspects like the personal experience and the medical power which women are trying to conquer at least in part, in order not to leave the others the monopoly of the solving intervention and of specific competences in a field perceived as their own.

It should also be noted that the medical language refers to issues which inevitably refer to the personal story of a woman. They are components related to unknown and unpredictable obstacles and frustrating aspects of the reality principle, which come into conflict with motherhood, seen as an experience of direct appropriation of one's own physicality and emotions.

2.2 Syntax

A. The syntactic aspects are closely linked with the pace of a narration. The general trend emerging from the analyzed texts consists of a syntax, which is more relaxed in the moments before and following labour and birth and more syncopated and frenetic in the stages accompanying the most intense emotions of the experience, linked to what happens between the first contractions and birth (with some occasional references to the description of post partum interventions, like the application of a suture, breastfeeding or bottle feeding). This sense of anxiety is often supported by the use of a nominal syntax, which gives a brief and expressive tone to the text and communicates hurry, speed, fear, in an overloading of situations and feelings.

B. In parallel with this subdivision between moments governed by a relaxed syntax and other moments built on the accumulation of short and compressed periods, there is another subdivision based on the use of verb tenses. In fact, almost all texts are based on two verb tenses: a) present perfect integrated by imperfect (which respectively correspond to perfective form and duration form), b) the present which in fact is historical, because it refers to events that have already occurred and is especially used to actualize the facts, in order to provide them with emotional closeness, freshness and immediacy.

The textual segments that in certain texts serve as introduction and conclusion, or what precedes and follows the ritual connected to the birth, are less intense from an emotional point of view and so are usually constructed with a more relaxed syntax and the past tense, while the main narrative segment, which focuses on the birth, is written in the present tense.

The present tense and the *brevitas* of the syntax insert an interesting "live effect" which gives the female author the possibility to revive the emotions connected to the described events and to share them, as much as possible, with female readers. The

frequent rhetorical artifice to call into question the addressees with specific words (“girls”, “friends”) is useful for this purpose.

The very few texts written entirely in the past tense are characterized by the difficulty of the birth and by the fact that, although the female authors are not explicit, the child has not completely overcome its problems: past tense, together with a narrative pace which is less pressing in comparison with other texts, indicates the detachment of the moment of narration from that of the described events; it indicates the need of an emotional distance between the birth and its evocation, which on the one hand is not an obstacle to retrace those moments through the story, but on the other hand is a sign of the still persistent pain and the lack of its complete working-through.

Past tense also characterizes the entire construction of two texts referring to home births: in them even syntax is relaxed and there is not an agitated style in accordance with the intense and pleasantly intimate tone of the experience.

C. The emotional emphasis, largely obtained with the syntactic choices and the live effect of historical present, is also entrusted to punctuation, which is sometimes represented by an accumulation of exclamation and question marks, by the use of words that are entirely written in upper case or phonetically deformed (“aiutoooooo!!!!”) and in some cases by the use of emoticons.

The narrative discourse acquires vivacity also through the use of direct discourses. Even if they are not frequently used, these discourses contribute to insert in the story the voices of the female author-protagonist or of other characters, emphasizing the represented events and reinforcing the live effect.

2.3 Narrative structure

A. The texts are constructed in such a way as to create a coincidence of plot with fabula, since the facts narrated in a chronological order follow one another as in reality. In fact (apart from some sporadic exceptions, which are moderate both in

extension and at a semantic level) flash-backs, flash-forwards, digressions and ellipses are absent.

The connection of events in the story is linear and sequential. This decision to avoid changes in the order of facts is more or less consciously made for several reasons: a) perhaps flash-back would make the temporal architecture of texts more engaging but, since you are in a forum, the preliminary information about you has already been disclosed in previous posts, and then you take it for granted that you are known from female readers; b) flash-forward would also be an interesting narrative artifice, but it would make useless the strict and spontaneous adoption of the internal focus (see 2.4), because the narrative anticipation of events is only possible for an omniscient narrator, who would come into conflict with the internal point of view and with the live effect which has already been mentioned; c) there is no need of digressions in these texts, because it is supposed that, with the exception of the birth experience, the competences are shared by the community to which they are communicated, and therefore it does not appear necessary to include additional information; d) the ellipses would be justifiable in texts which narrate the facts occurred in a long period, but this is not the case of stories about childbirth, an event which occurs in a short time.

B. An interesting structural aspect of these texts concerns the course of the recounted events. As mentioned before, they are linked in a chronological order, but in order to lay a greater emphasis on the sequence of events and the suffocating pace with which they took place (or vice versa idle times) the female authors constantly use numerical indications, referring to the time of each event, the frequency of contractions and the diameter of the dilatation during the various stages of labour. Consequently, narration is rigorously divided in precise chronological segments, which are marked by the three above-said numerical indications. This device has the effect of involving female readers in the whirlwind of the described events, but from another point of view it also permits the author to control the flood of emotions felt in those moments through an easy and effective expedient. The overwhelming strength of

the emotional river is contained through the construction of many symbolic narrative dams which are close and coincide with the numerical indications, occasionally sprinkled in the narration in an almost obsessive way.

C. As mentioned before, in some texts the narration is framed within a short introduction and / or a conclusion which is as much essential as the introductory remarks. In these cases, the introduction usually has a function similar to that of journalistic articles giving you some information, which is subsequently recapitulated and developed. On the contrary, the conclusion aims to introduce the judgment, that is the opinion of the female author with reference to the way she has lived the birth ("it is the most important and intense experience of my life"). Through these statements focussed on the meaning and the emotional effect of the described event, the individual experience becomes at least partially public and exemplary, or in other words a model to be presented to expectant mothers. Despite the awareness that every birth is unique and characterized by many imponderable variables, one's own story enters the range of a possible review of references which assigns it an important specific weight also because other people can treasure it.

D. Referring to the fundamental pattern of narration, you can see even in this aspect some characteristic features of the various texts which have been analysed. The first phase, coinciding with the *situation of initial order*, when it is present, is only mentioned; the female narrator seems in fact to be absorbed in the need to focus on her words about birth without evading the issue. In any case, the initial order is not chronologically beyond a few hours since the first symptoms. These signs mark the breaking of the initial narrative order, and the story itself starts from that moment on. The first contraction, the breaking of waters or some other corporal symptoms determine the transition from the first narrative phase (if it exists) to the second one. The third phase, coinciding with the evolution of events, follows paths which are different in details, but in fact characterized by the same narrative ingredients, and represents the climax of the narration also because of its extension. In the end, the

final phase always coincides with the achievement of a balance which is totally different from the initial one, since the birth of a child introduces a radical turning point in the life of a woman and a couple and forces the characters to reorganize the milestones of their previous story. However, it should be noted that the final stage changes in various texts according to the real experience; the conclusion often coincides with the sequences immediately occurred after the birth, and so with the moment when the mother is holding the baby in her arms or is feeding it. On the contrary, in the most difficult cases it corresponds to the return home and the abandonment of the hospital, seen as a place of persecution.

2.4 Focus

Another interesting aspect concerns the focus, or point of view, from which the narrator presents the events (Genette, 1972). In all texts the focus is internal, since the facts and figures are shown through a strictly subjective and personal point of view. This is evident in the narrative parts both in the past and in the present tense. In some texts you can see that the narration of events shows at the beginning, or especially in the conclusion, some segments built around opinions and reflections which are expressed with the benefit of hindsight. In these portions of text the focus remains internal, but the style changes, since the tone rises and even the viewpoint of the narrator rises: the birth experience equips the mother with the possibility to observe things from above, like in a bird's flight, where the bird can take the liberty of gliding close to the ground to show with a simulated live performance the facts relating to the birth and can then regain height to report exemplary statements, advice, opinions, reflections, expositive and sometimes argumentative inserts. The same phenomenon has been noted in the observations and comments included here and there within the text.

3. Aspects of content

3.1 Protagonist, narrator, author

A. Since the analysed texts are autobiographical narrations, their author, narrator and protagonist coincide. However, it is interesting to observe more closely this question. In fact, the narrator (the narrating voice) inserts a variable distance between author and protagonist depending on the different phases of the story. In the most agitated phases of the story, the narrator places his subjective perspective at disposal of the protagonist, who is living the tension of the birth in the simulated present tense of the narration. On the contrary, in the most relaxed phases, and especially in the end, narrator and protagonist do not coincide and the voice of the narrator adheres to that of the author, inserting comments, remarks and exclamations which explicitly indicate the distance between the two temporal grounds of the narration and the story.

B. It is also interesting to observe on the one hand the implied author (or the image of the real author which emerges from his text) and on the other the image of the recipient of the text. The implied author (Booth, 1961; Bourneuf & Ouellet, 1972; Courts, 1976), who rhetorically aims to the live effect, is regarded as the expert, or the *magister* who, thanks to her experience, can teach, or give precious information to women who have never given birth. The acquisition of a type of a controlled and personal omniscience seems an effective defence against the anxieties related to the risks which have been run and the experience of pain. The narration provides the female author with a privileged point of view which has a healing effect on the experience. Telling the facts, partly simulating to be still inside the experience, allows you to relive them from a more detached and reassuring position.

C. The image of the recipient is a collective image, that is the community of women in the forum who can find help in the story which the female author has entrusted to the virtual pages of the site. These are women who have never had the birth experience which, as acknowledged in almost all posts, is the most important element in the definitive construction of female identity. Consequently, even if only for this reason,

they are considered as a group, a plurality to whom you can refer by using the plural forms, since the single identity, or the true female identity, is conquered with the experience which they have not gained yet.

3.2 The characters

A. The mother is the *protagonist*. “I”, as personal pronoun and character, plays a preponderant narrative role. At the side of the woman there is frequently her partner, who has the narratological function (Propp, 1928; Greimas, 1966) of *helper* of the female protagonist, since he can at most assist her in a task which is in fact completely and exclusively female. You can also find some other contiguous characters, such as some protagonist's relatives. These people too are helpers, even if they are placed in the background. The role of health staff is variable. In most cases the connotation of the gynaecologist is negative and so he can be regarded as an *antagonist*, because he does not help the female protagonist in the achievement of the *object*, which in this case is the child; this judgement is rarely motivated by a lacking professional competence, but almost always by an insufficient emotional competence, since his attitude is not totally empathetic with women in childbirth. On the contrary, midwives are in most cases described as helpers, since their function is essential both from a professional point of view and for their empathy towards pregnant women. As regards health staff, it should be noted that it is depicted in a polarized way: it is either entirely positive or completely negative. In emergencies intermediate shades are not allowed.

B. The child (the *object*) is the object of thought and enters the discourse only in the last phases of labour, when the dilatation requires the relocation of the pregnant woman in the delivery room; in the previous phases it is not the subject of discourse, since the aim of the mother focuses exclusively on herself, her fears and pain. When the child comes to light is generally the moment in which it is also baptized in the narration, since it is no longer generically called “child” or by various pet names, but is called by name.

Two exceptions: in one case the name is mentioned during the monitoring of heartbeat; in another text it is revealed before birth, since the child is given a sort of rudimentary will, a capability of choice and thought: "he/she was well in the belly of his/her mum and did not want to leave it".

In all texts you can also note the confirmation of the tendency, already observed, to contain the emotions through the use of numbers (regarding the day, hour, dilation and frequency of contractions). The birth of the child is regularly accompanied by name, date, time, height and weight: "March 12th, 13:53, 3,600 kg, 51.5 cm", almost as in a medical report. The whirl of sensations and emotions is controlled through the use of numerical data.

3.3 The dyad

After the birth, the roles of the characters is reorganized: the mother-child dyad gradually becomes a single and indivisible unity and the other presences fade or disappear. In some texts the father is introduced as a member of a triad, but the female author primarily seems to make this overture in order to repair a carelessness due to the exclusivity of her experience as a protagonist.

The dyad is created in the first place in relation to glances and sight. The mothers who gave birth with caesarean under general anaesthesia underline the lack of this visual experience: "Unfortunately I have not seen my little love immediately, I was told that it was all red and angry", but against this frustration there are good emotional dyadic antidotes: "my child has seen its father earlier than its mother, but we already had a relationship that no one can break".

The importance of sight in creating an empathetic relationship is underlined by some mothers' decision to record the birth of their children with a camera, as if to immortalize a fleeting moment, but also to allow them an impossible vision, even if in retrospect.

The real birth of the child coincides with its becoming the object of observation by the mother and sometimes by the father (“the father had eyes only for her”), and in some cases also by health staff. It is a real epiphany, or an exit from the dark belly of the mother to appear in the world, which is confirmed by the vision, the contemplation. This attitude is also returned by the baby: “that little thing with a lot of hair who was looking me straight in the eyes”. Consequently, the dyad is in fact built on the symmetrization of the vision and the mutual exchange of glances: “I look at him and he looks at me”.

Even touch and in general physical contact are crucial in the “recognition” of a baby. Taking up a child in one’s arms is the materialization of the wish for the reappropriation of that part of oneself which has left one’s body. Sight is the perception, the mutual recognition and the implicit subscription to an agreement of a dual membership; the physical contact, or touch, is the signal of the reappropriation of a relationship with material reality and outside world; what you are living is an experience, which on the one hand gives you such a pleasure to make you forget the pain of labour and birth (“suffering, crying and then forgetting everything by taking up the baby in one’s arms”) and on the other hand makes you go out of the dimension of wish and dream and makes you go back into reality (“taking up in one’s arms that little being, who has been dreamt for 9 months”).

The fusion and mutual dependence, momentarily interrupted by the separation of bodies during the birth, are finally reaffirmed with the first feeding and create the dyad in a definitive way (“I have breast-fed him for the first time, I will never forget it”). Sight, touch and breast-feeding ward off the anxiety about separation, void and loss felt by the mother (“I was watching the monitor and inwardly said : _But where is Gabriele?“(“).

Even if in opposite cases, the confirmation of these observations also emerges from the writings of those mothers whose child was in an incubator: the nostalgia due to the

impossibility to see, embrace and, in some cases, feed it clearly emerges from their words.

In these narrations the father is an additional element of the dyad, rather than a third pole which can expand the emotional dynamic in a triadic direction. The father cuddling the mother is mirrored by the mother cuddling her child, but is not just a symmetrical duplication; from the perspective of the mother a cuddle with her is a confirmation and recognition of the dyad, or a sign of love towards herself and the part of herself which is no longer within her.

4. The defences

In the autobiographical texts written by mothers in forums you can find defences (A. Freud, 1936; Lingiardi, Madeddu, 2002; Barbieri, 2007a), which regard both the formal and thematic level.

Repression (or *suppression*, which is not easily identifiable in the analysed texts) emerges in the first place from omissions.

In some texts there is no mention of pain, but only of the positive aspects of the experience. Another aspect which can be seen is the almost complete lack of references to the feeling of having within oneself a child, a life. This can be explained both perhaps because this was already written in older posts and because this feeling does not belong to the birth experience, but to an earlier phase which is cancelled at the approach of the birth and is dominated by other feelings, fears and expectations.

Another fact which is not explicit is the description of the feeling perceived when the child leaves the maternal body; it is a possible sign of the difficulty of working through the bereavement connected with separation and abandonment. In only two texts we have found evidence of this feeling, but in the first case the female author refers to her first birth and not to that one which has just been given; in the second one the statement is immediately cooled by numerical and statistical data, as already seen

in other texts: "I can feel its body abandoning my body" (it was 16.45 on January 11th).

Another omission regards the place. While time is represented in detail and with an almost obsessive insistence, the place is not practically described in the texts of women who have given birth in a hospital. This is a cold and detached place, which is necessary but not empathetic and cannot be not included within the parameters of narrability that are focused on oneself, on one's own emotions and on what is in harmony with them. Instead, the few stories relating to home births give space to spatial components (light, silence, etc.).

Even the descriptions of people who have participated to the birth are missing, briefly outlined and enter the story exclusively for their narratological function (helper, antagonist, etc.).

Other defences underlined in the analysed texts are:

- *isolation*: birth is not seen as the point of arrival of previous experiences, but is isolated and seen as an event for which understanding and working-through are not necessary external connections; it is approximately presented as an absolute and self-sufficient event. Only afterwards this event will be reconnected with the previous experiences, not because it has been determined by them, but because with its strength it is able to rewrite the past and to guide the future in a significant way;

- *rationalization* (or *intellectualization*): it emerges from the wish to retrace step by step the birth experience from a narrative point of view and with a great insistence on details, in order to check its most intense emotional components; the strict chronological order indicated in the text is a part of this defensive strategy; this technique can also be attributed to the *secondary process*, in which a very intense and tumultuous emotional experience is segmented, accurately organized, made coherent and fit to be told and thought; elements of intellectualization can also be seen in expositive and argumentative declarations, in judgements and considerations included

here and there in the texts ("it is important that during her pregnancy a woman should listen to herself, discover the strength of a woman and be the protagonist of the birth");

- *self-assertion and self-observation*: the narrations are strongly focussed on the narrating subject, seen not only in a grammatical sense, but as a fulcrum of the represented world; self-assertion is an attitude connected with the *omnipotence* deriving from having lived an experience like that which has been described; the presence of "I" is less evident in stories of home births, where the prevailing pronoun is "we", a sign of an event which is shared and collectively lived by the mother, her partner, midwives and the child;

- *splitting*: to control and make thinkable the lived emotions, female authors often use a split and strictly bipartite representation of the narrated reality, where all reassuring and positive aspects face the distressing and negative components; this polarization principally regards features of the described characters and feelings and sometimes it shows itself in the rhetoric figure of antithesis; the splitting is supported by other two complementary defences such as *devaluation* and *idealization* (principally of characters) by means of the rhetoric figure of hyperbole; in relation to splitting you can connect the ways in which births are symbolically represented: after the "opening of the ball", some texts regard this experience as a "hell", a "calvary", a "massacre", while other texts regard it as a "paradise" where the helpers are "angels"; this attribution of qualities also depends on the *projection* of one's own insecurities, anxieties or confidence on other people; the splitting is significantly mitigated in stories of home births, where all participants positively cooperate in the event and the involved feelings are not represented in an extreme and antithetical way;

- *affiliation*: the omnipotence is not incompatible with the need to depend on others (mainly health staff) in order to face the birth and contain the destabilising emotions; the oscillation between one and the other pole of splitting depends on the way in which this defence is worked through;

- *retroactive annulment and reaction formation*: these two defences are interwoven in the analysed texts and are sought for their healing effect on the experience of pain, which on the one hand is forgotten, erased by happiness deriving from the contemplation of a child, and on the other hand is contained and reversed by irony (“the child did not want to leave and, in order to remain, had decided to wrap the umbilical cord round the neck”), also expressed through similarities (“my love seemed Schumacher, driving as a fireman”);

- *anticipation*: it is a defensive strategy which can be seen in a limited number of texts where the introduction anticipates some information on the birth, which is then recapitulated and developed.

5. Writing, reparation and identity

Any text is the product of a series of transformations (Bion, 1965) that, according to Bion, start from an emotional experience and raw sensory impressions, which are filtered by α function, and are transformed into α elements, or unconscious images constituting the first step towards the formation of thought (Bion, 1963). According to Ferro (1996, 1999), α elements give life to “narrative derivatives”, which are the patient’s associations during a psychoanalytic treatment. In any other communicative context which is not psychoanalytic it should be more appropriate, in our view, referring to “internal narrative derivatives” (Barbieri, 2007a), or potential segments of stories that are suspended and stored in brain, waiting to be activated and placed in a real narration. “The text derives from the activation and mutual connection of internal narrative derivatives in a sequence endowed with a semantic and logic consistency” (Barbieri, 2007b).

In accordance with Bion and as clearly noted in the analysed texts, emotions are more or less consciously the primary data with which female authors of the forum have to come to terms. In the working-through that gradually leads to the writing-up of a text, these same emotions determine the evolution of the narration and the activation

of mental strategies which give the possibility to express the same emotions, by working them through them and making them thinkable.

Another important aspect of this question lies in the fact that the narrations of forums are written. Writing compared to spoken language, has a higher degree of planning, a different corrigibility and the permanence of signs (Ong, 1986). These posts, even if on a stylistic level, simulate an oral style to create a context of greater emotional sharing, are written and use the following aspects in an interesting direction: planning allows an important redistribution and a mental readjustment of facts and emotions related to childbirth; the corrigibility means that the facts of lived reality are not unchangeable, are not fixed once and for all, but can be modelled, reconnected and rethought; the permanence of signs contributes to make an experience less volatile and to retain it, making it observable from outside by the same female author. These are important aspects which encourage the reparation (Klein 1929; Klein & Rivière, 1953; Segal, 1952, 1991) and the working-through of disturbing and painful feelings (Ferrari, 1994). Even for these aspects, writing promotes the activation of thought, both because the text is like a container where you can elaborate the contents of the mind, and because the text itself promotes the oscillation between PS and D (Bion, 1963), that is between fragmentation and integration of the contents of the mind.

The healing function of texts also depends on their location in a mental dimension, identifiable both with the "potential space" theorized by Winnicott (1953) and intended as a transitional mental dimension, placed between "me" and "not me", between the inside and the outside, and with the "imaginary place" mentioned by Vallino (1998) and seen as an elsewhere in which emotions are transposed and kept at a safe distance in order to become thinkable. It should be noted that these aspects also belong to the virtual space of the forum, which is in a suspended dimension, partly transitional and partly imaginary.

A final observation is that the autobiographical text helps to build a narrative identity of the author (Bruner, 1991; Smorti, 1997). Even in the narrations observed in

forums, each female author puts forward her own identity, or a self-image to be presented to a recipient. As noted, the addressee of a forum is represented by the other women of the virtual community, but the need for working-through and the narration of one's own emotions determine that the first real recipient is the female author herself. In other words, texts are addressed both to the Other and to the Other in the Self (Barbieri, 2007a) and build the identity of the female author also thanks to the differences which have been created, even if unconsciously, between the real author, the implied author, the narrator and the protagonist-character, who have the same biographical referent, but do not coincide in the semantic field of the text.

In case of communication within a forum, it should be noted that the construction of identity is placed in a strong frame of predictability. The authenticity does not involve the working-through of an identity which is characterized by originality and uniqueness. This regards not only the thematic level, but also the structure of the texts and the adopted language showing the same pattern, as if to point out that the forum helps to build an identity which is shared and common to all the women who have become mothers or are pregnant. The forum is a communicative context which is comparable to a maze of mirrors, where the self-image overlaps with the image of the Other and vanishes into it.

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