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Mindfulness and Mothering: Reclaiming Feminine Voice

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A thesis submitted in partial fulfillment of the requirements for the Doctor of Philosophy degree in Health and Rehabilitation Sciences
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ABSTRACT

Little is known about working mothers who practice mindfulness. This dissertation is a phenomenological investigation using body mapping as a way to understand how mindfulness works in the lives of six women who work in health and social care while parenting young children.

This dissertation is comprised of five integrated articles. Chapter 1 and 7 are included as an Introduction and Discussion/Conclusion to the five separate though related manuscript chapters. The main research questions that framed this research include, 'What is the work of mindfulness in the lives of working professional mothers?' and 'In what ways might a mindfulness practice help women navigate their role as a working mother with young children?'.

Each of the five manuscripts offer something unique to this work. The first manuscript, Chapter 2, uses literature to explore how mindfulness can support early years practitioners in developing a more critical and nuanced understanding of how social constructions of motherhood shape practice. In the second manuscript, chapter 3, I again use literature to explore mindfulness as a construct and how it has the potential to enhance professional practices. The third manuscript, Chapter 4, is more theoretical and philosophical and explores how phenomenology can fruitfully pair with mindfulness in a qualitative study such as this one. The fourth manuscript, chapter 5, is the first of two manuscripts that originate from the empirical study. The six women's constructed body maps where analyzed to better understand how mindfulness works in their lives. The fifth manuscript, chapter 6, explores body mapping as a method and what it can contribute to social research.

Findings include an appreciation for how mindfulness may help mothers critically

reflect on normative expectations for working women. This thesis contributes to the growing body of work that appreciates the work of mindfulness. Specifically I suggest that mindfulness may inspire professional mothers to rethink practices and beliefs that may ultimately advance the position of women and children. The research seeks to ignite conversations that have implications for Canadian families, and health and social care professional education practices.

CO-AUTHORSHIP STATEMENT

I, Lisa McCorquodale, wish to acknowledge that this thesis includes five integrated manuscripts that are the result of collaborative efforts. The primary intellectual work was completed by me. I designed, conducted, analyzed and wrote the study described in this thesis. Dr. Sandra DeLuca was my primary supervisor for the study and offered guidance and advise on theoretical, methodological, intellectual and editorial matters.

ACKNOWLEDGEMENTS

I am grateful to many for the support and encouragement I have received over the past six years. My advisor Dr. Sandra DeLuca is a rare individual who deserves much admiration for her kind and skillful guidance and wisdom. Her ability to encourage students to play in the margins is inspiring and vital in academia today. I am also grateful to my dissertation committee members, Dr. Laura Béres and Dr. Lilian Magalhaes. Laura has encouraged and inspired me as she delves into topics and ideas into which few venture. I am honoured she asked me to share in contributing to her recently developed book on spirituality. I have admired Lilian for many years, and have learned to always question and examine how power and class operate in the lives of those around me.

I am also grateful to Marnie Wedlake for her photography skills, Dr. Anne Kinsella for her support and encouragement shared over the years, and to the many students and faculty who have touched my life in some way. I feel deep gratitude for the experiences I have had over the past 6 years.

A working mother raising two young children cannot complete a PhD without the support of family and friends. My in-laws Ruth and Ian McCorquodale and parents Wayne and Cheryl Carroll have lived the creed 'it takes a village'. Their support has been invaluable and irreplaceable. My husband, Mark, was the first to encourage me to complete this work, and has never questioned the time commitment and sacrifices we have all had to make to bring this to fruition. To say I picked my life partner wisely would be an understatement.

To my children, Harrison and Maryn, it is my fervent hope that you look back on your early years and know your mommy loved you. Completing a PhD inevitably took time away from each of you, and I hope you are proud of me as you reflect on your

childhood. I can finally say 'no more computer'…and mean it! I am so proud of who you are both becoming and hope that when and if you raise your own children, you are able to do so on your own terms and with the full support of those around you.

Lastly, this work would not be possible without the six generous, inspiring and courageous women who shared their lives with me. I thank you sincerely.

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CHAPTER 1

INTRODUCTION

To destroy the institution is not to abolish motherhood. It is to release the creation and sustenance of life into the same realm of decision, struggle, surprise, imagination, and conscious intelligence, as any other difficult, but freely chosen work (Rich, 1976, p. 280).

Situating The Work

From an early age I can recall seeking moments of stillness and quiet. Growing up on a farm, where work naturally ebbs and flows with nature, may have leant me this disposition. Dedicating time for quiet is a relative rarity in contemporary life, where busyness and action tend to dominate (Wilkins, 2007). In fact, 'doing' is so important in many cultures that it is impossible to imagine life without it:

> People spend their lives almost constantly engaged in purposeful 'doing' even when free of obligation or necessity. They 'do' daily tasks including things they feel they must do, and others that they want to. Human evolution has been filled with ongoing and progressive 'doings', which, apart from enabling the species to survive, has stimulated, entertained and excited some people and bored, stressed, alienated or depressed others according to what was done (Wilcock, 2006, p. 64).

Doing makes up the bulk of our lives: a pleasurable leisure pursuit, a stimulating job, or the intimacy and busyness of caring for young children. Many people fail to notice that life can, and perhaps should, be more than this constant activity (Kabat-Zinn, 2005). *Being*, as another mode of life, is a potential corrective. *Mindfulness*, a contemplative and reflective way of engaging in the world, is one way to tap into being. This

dissertation investigates how mindfulness contributes to the lives of mothers who work and parent young children. In this introductory chapter I start by situating myself as the researcher and offer some preliminary background context for this dissertation. I then introduce the methodological approach I used in this project. I conclude with a brief introduction to each chapter.

Situating the Researcher

My husband and I both work fulltime and parent two young children. My husband owns his own electrical contracting company and I am a professor at a local community college. My son Harrison is 7 years old and came to me by birth. My daughter Maryn is 4 years old and came to us at 14 months old through international adoption. I have been an occupational therapist for 16 years, working in a variety of clinical and leadership positions. I stumbled upon mindfulness about 12 years ago after a car accident, though had been exposed to it infrequently for a few years before that. As a result of the accident I was left with fairly significant pain and lifestyle limitations. Mindfulness practice seemed to help me cope and minimize catastrophic thinking that can accompany a sudden illness and life-style change. As the years progressed and I added 'mother' to my repertoire, I noticed that my mindfulness practice became increasingly indispensible. Adding children to an already full life can mean perpetual *doing*, but I found myself consciously carving time to *be*. This dedicated time was invaluable for me.

Having a formal mindfulness practice possibly gave me the courage to undertake graduate school while parenting and working. However, not everyone was convinced this was a good idea. In fact, a few relatives even suggested that my family would fall apart at the proverbial seams if I embarked on such a 'selfish' task. Here I am at the end

of my nearly 6-year journey, and while I may be older, and possibly wiser, my family remains intact. In fact my family is now larger after Maryn joined our family in early 2013. I tried to pay no attention to my critics, but the caution dispensed to me did reaffirm that working and parenting is still a tenuous partnership for many women. This and many other experiences propelled me to want to research what mindfulness means in the lives of other working mothers who parent young children.

Doing *and* Being

Before I discuss how I define mindfulness in this dissertation, I think it is worthwhile to review doing and being. Doing is an essential part of human existence. Action and activity, for example have the potential to build and maintain physical and mental capacities, are tied to health and wellness, and are necessary for (wo)man's very survival (Wilcock, 1998). However, in modern society, doing has become so heavily linked with economics and neoliberal culture that its connection to health and wellness is increasingly tenuous (Wilcock, 2006). In fact, perpetual doing without the time for repose, may have the exact opposite effect. Busyness can also artificially blur what philosopher Damon Young (2008) convincingly describes in his book *Distraction* as existential angst. Stopping to notice habitual thoughts, distractions or obsessions can be uncomfortable, and is often replaced with a reach for a glass of wine or the remote control to calm unsettled feelings (Webster-Wright, 2013). This may be especially true for mothers who work in health and social care settings, where stress, burnout and compassion fatigue are common (Frasner et al., 2009; Wilkins, 2007). Further, *being* may be further subsumed in these settings because of an ever-increasing shift to rationalized and standardized practices (Kinsella, 2012). Slipping out of autopilot can be a difficult task, particularly because many habits and patterns are taken for granted and

assumed to be natural (Greene, 1973).

When the dominant compulsion to *do* is relinquished to a more contemplative way of *being*, there may be a shift in life's meaning and purpose. Maslow (1968) says that *being* is the contemplation and enjoyment of the inner world, and is the opposite of action. To *be* allows the opportunity to discover, think, reflect, and simply exist. Being honours (wo)man's quest for meaning, contributes to quality of life and creativity, and is linked with consciousness (made up of attention, memory, and awareness) (Wilcock, 2006).

Because of being's intimate connection with meaning, purpose, and creativity, it is often described as a spiritual way of living. How to slip into the *being* mode, and further what it offers ones life are equally elusive; they mean different things to different people (Tisdell, 2008). Taking time to disengage from action (doing) and to engage with nonphysical aspects of who we are (being) can be a profoundly spiritual act (Wilcock, 2006). In this dissertation I assume that mindfulness is a practice of *being*, and is inherently spiritual.

As Maslow (1968) asserts, spirituality can become lost in the blur of daily life: 'This inner nature [being] is not strong and overpowering and unmistakable like the instincts of animals. It is weak and delicate and subtle and easily overcome by habit, cultural pressure and wrong attitudes toward it' (p. 4). Perpetual *doing*, to the point where other ways of living in the world are subjugated, may be particularly problematic for professionals who work in health and social care. Kinsella and Whiteford (2009) note that the dominant tendency to privilege rational thought in health and social care may contribute to the subjugation of being and spirituality for women working in these professionals. This subjugation may have unacknowledged consequences when

professionals minimize the role of *being* and spirituality in their lives. Existentialists argue for living intentionally and authentically (Morris, 1998). This can be deceptively challenging:

> [. . .] standing back from daily habits to develop clarity, as we do consciously in mindfulness, we can be aware of an inner call to authenticity and stand up for what matters in life. Our everyday choices and actions form the contours of the ground on which we take such a stand in our lives. (Webster-Wright, 2013, p. 560).

Mindfulness is a powerful way to engage in the being-mode of life. This dissertation takes a close look at what mindfulness means to women who work in health and social care while parenting young children. When I refer to 'working mothers' I mean women who receive remuneration for their work. This does not mean that I believe stay-at-home mothers do not 'work', however, in an effort to refine the scope of the research, I focused on women who have professional training (i.e. in a health or social care profession), and work outside the home in their chosen field. While children only have one biological mother, I assume that children can have many 'mothers' (e.g. adoptive or step mothers), and further assume that 'mothering' is not a trait reserved for the female gender (e.g. single fathers or transgendered parents). Each of the women who participated in this study were custodial parents to at least one child. This work might hold most relevance for mothers who have primary or shared physical custody of their children.

Defining Mindfulness

Mindfulness is a way of connecting with *being*, and is the opposite of multitasking and mindlessness. Being mindful increases engagement with the present moment and allows for a clearer understanding of how thoughts, feelings and emotions

influence health, wellness, and quality of life. When I designed this research I was not particularly interested in how mindfulness makes women 'better' mothers, but rather was curious about how mindfulness supports working mothers in their various roles and responsibilities in a way that enhances the meaning in their lives. In chapter two I offer a more detailed exploration of mindfulness, but provide some context here to better frame this work.

Rigid definitions about mindfulness may be impractical and impossible. As one traditional image clarifies, "words are like fingers pointing to the moon – guiding us where to look, but not something we should mistake for the moon itself" (Heaversedge & Halliwell, 2012, p. 13). Any definitions I offer will be woefully partial, without recognizing the inherently experiential nature of mindfulness. Jon Kabat-Zinn (2013) himself emphatically states that mindfulness:

> …can only be understood from the inside out. It is not one more cognitive-behavioral technique to be deployed in a behavior change paradigm, but a way of being and a way of seeing that has profound implications for understanding the nature of our own minds and bodies, and for living life as if it really mattered" (p. 284).

Heeding this cautionary note, I introduce some context and understanding for my work below.

Jon Kabat-Zinn's (2005) definition may be the most commonly cited and aligns most closely with how I understand mindfulness in this dissertation: "The awareness that emerges through paying attention, on purpose, in the present moment, and non-judgmentally to the unfolding of experience moment by moment" (p. 145). I, as well as other scholars (Stanley, 2012b), take some exception to the way 'non-judgmentally' has

been taken up in Western mindfulness research whereby mindfulness has lost its critical edge. Rather than assume mindfulness is ethically neutral, I have come to see that mindfulness does not necessarily have to be accepting of everything that comes into awareness. Rather mindfulness, may serve as a corrective and means to hold society in abeyance, to be subject to critique and ethical assessment. This idea of mindfulness as critique became even more prominent for me as a result of this research and is explored in more detail in Chapter four.

Mindfulness is the opposite of mindlessness, the latter of which most commonly typifies the daily lives of many people in the Occident. Researchers speculate that our minds typically wander about 50% of the time, and we have between 12 000-50 000 thoughts per day, 95% of which are the same (Shapiro & Carlson, 2009)! Given these well-established thought patterns most people function very well on autopilot. These sedimented 'natural' appearing habits then become the basis for all actions, occupations or doings (Cutchin, Aldrich, Bailliard, & Coppola, 2008). When operating on autopilot, however, it becomes easy to miss how habits direct day-to-day experiences. Often habits are thought of as productive as they free up cognitive load for more novel tasks (Hasselkus, 2000), but habits can lead to maladaptive and damaging ways of being (e.g. Kiepek & Magalhães, 2011). Mindfulness enhances a person's ability to develop an awareness of habits, and how they colour experience.

This awareness is most formally cultivated through sitting meditation, often called mindfulness meditation. In paying attention to breath, without trying to change or alter it in any way, and returning to it again and again when the mind wanders, one can cultivate the stability of attention necessary to begin to notice our habits (Kabat-Zinn, 2005). Once attention is stabilized, practitioners can focus on whatever arises in the field of awareness

and attend to those processes (e.g. thoughts, feelings, sensations) with curiosity, openness, acceptance and kind regard (Epstein, Siegel, & Silberman, 2008). Mindfulness is paradoxical in that practitioners get intimate with their own experience while simultaneously distancing themselves from the 'I' or 'mine' of the experience (Stanley, 2012a). Mindfulness may also be cultivated informally through activities such as mindful movement (e.g. yoga, tai chi, walking), body scans, and mindful eating (Kabat-Zinn, 2005). Mindful awareness is not unique to those who have a formal meditation practice, in fact being mindful is a basic human quality. Epstein (2003) notes that many people experience daily mindful moments, though they may lack the language to label those moments as such.

Epstein (2003b) eloquently suggests mindfulness is not a structured reflective act, but rather "a state of mind that *permits* insight, presence and reflection, and also a habit of relating to the world" (p. 2). Generally, mindfulness may be distinct from other types of reflection in that it is perceptual or pre-reflexive of thoughts, feelings, and other aspects of consciousness (Brown & Ryan, 2003). Rather than generating mental accounts about the self, mindfulness "offer[s] a bare display of what is taking place" (Shear & Jevning, 1999, p. 204). Reflection does include aspects of self-awareness, though a particular emphasis on the present moment and a nonjudgmental attitude is unique to mindfulness (Tusaie & Edds, 2009).

The Rise of Mindfulness

Despite recent interest in mindfulness, the practice itself is not new. Mindfulness can be traced back over 2500 years to Buddhist psychology, and has had a varied and intimate connection to many world religions and philosophies (Miller & Nozawa, 2002). Kabat-Zinn's mindfulness has roots in Theravadan (Southeast Asian), Ch'an (Chinese),

Zen (Japanese) and Tibetan Buddhism (Kabat-Zinn, 2013; Stanley, 2012b). Where 'Buddhism' goes, it is transformed by its host culture, and accumulates distinctive styles from the native culture. For the purposes of this dissertation I, in keeping with Jon Kabat-Zinn, will not comment on the ways in which mindfulness may deconstruct the 'self', realize Nirvana, and/or prevent negative future rebirths (Hickey, 2010). I would be dishonest at best if I claimed expertise on Buddhist thought and the paths to nirvana. However, even among those who critique the secular way mindfulness has been formulated (e.g. Cohen, 2010; Hickey, 2010), there is consensus that practicing meditation, yoga or lovingkindness for better well-being is a legitimate goal within Buddhist traditions, albeit a lesser one than 'enlightenment'.

Mindfulness, as I am constructing it, most closely aligns with the approach developed by Jon Kabat-Zinn (Kabat-Zinn, 2005). Jon started the first Mindfulness-Based Stress Reduction (MBSR) clinic while at the University of Massachusetts in 1979. Jon writes in great detail about how he came to envision such a clinic, and what he hoped would result from introducing mindfulness, a typically Eastern practice, to the Western medical world (Kabat-Zinn, 2013). Essentially, mindfulness, despite its spiritual roots, is offered as a practice that transcends religion and culture. It is a formal meditation practice, which then extends to a way of being in the world.

I had the opportunity to train with Kabat-Zinn himself on an 8-day retreat in California during the Winter of 2014. In one of his evening plenaries he stated that his plan, from the inception of the first Stress Reduction Clinic, was for medicine to be an incubator for mindfulness. He intended to move mindfulness into every facet of society such that it sparked a radical change akin to that not seen since the Italian Renaissance (personal communication, February 25, 2014). Meditation was a fringe practice in 1979,

but rather remarkably his vision is growing to fruition (Black, 2015; Pickert, 2014) and mindfulness is verging on being 'sexy'. In fact, when I started my doctoral work in early 2011 I was the only therapist among my colleagues teaching mindfulness to clients. Now I am joined by an ever-growing group of therapists. At times, I worry that the 'mindfulness revolution' (Pickert, 2014) risks relegating mindfulness to another cognitive behavioural strategy or another 'tool' to manage life. Mindfulness, as I see it, is a much more fundamental practice than to simply call it a 'tool'.

Mindfulness has infiltrated many sectors ranging from business to elite sport training. Further mindfulness has even been postulated to be an essential part of developing feminist agency and consciousness rising (Bartky, 1995; Maitra, 2013). However, very little has been done to better understand what mindfulness looks and feels like for working mothers. One qualitative study urges further research on mindfulness as a way of life for working mothers (Eija, Uusiautti, & Maatta, 2012). I believe more research is needed to fully understand how mindfulness may support working mothers and what the practice means to mothers who work. This dissertation partially contributes to this knowledge gap. Many researchers demonstrate that working and parenting can be a struggle for women (Bull & Mittelmark, 2009; Chang et al., 2004). Jon Kabat-Zinn (personal communication, February 26, 2014) beautifully notes that children are like 'live-in teachers' for mindfulness, and says that while parenting is a privilege it can be a challenge. Researchers indicate that women who successfully negotiate their complex roles often have happier marriages, closer relationships with children, more financial stability, and higher levels of life-satisfaction (Grant-Vallone & Ensher, 2011). Mindfulness has been immensely meaningful for me as a 'working mother', and I felt compelled to explore this aspect of mindfulness in greater detail. I, like Denshire (2002),

believe that a person's professional and personal lives are rarely delineated and are in fact coextensive. For me, studying mindfulness in either personal or professional life would feel akin to the mind-body split that is lamented by many (Dreyfus & Dreyfus, 1986).

Methodological Choices

Images are always in some sense 'windows to identity' and also in some sense 'windows to the world' (Yates, 2010, p. 289).

Deluze and Guattari (in Massumi, 1992) offer the term rhizome to signify that which has "no beginning or end; it is always in the middle" (p. 25). Assuming relationships are rhizomatic, people inherently change through engagement with one another. I similarly believe that when a mother practices mindfulness she, as well as her children, and perhaps everyone she encounters, may be changed. Little is known about mindfulness practice in the life of a working mother, and as such a qualitative exploration was an appropriate stating point to address the current gap in research.

Here I clarify the philosophical underpinnings for my research. This is shared in more detail in chapter three. Lingering questions about ontology and epistemology were some of the primary reasons I returned to school to complete a doctorate. When I began, I spent many months 'living my questions'. During this time I may have looked, to an outside observer, like a dog scratching at the ground hoping to find the perfect resting place. While I may not have found *the* perfect resting place, I feel comfortable identifying as a social-construct*ion*ist and also identify with many constructivist perspectives. I see value in seeking and understanding individual experiences and meaning making. In addition, I bring a critical and feminist theoretical lens. As such I find affinity with the term bricoleur, blending both critical and hermeneutic attitudes; cognizant of their differences, yet finding their logical compatibilities (Denzin & Lincoln,

2011). Feminist ideology permeates this work, including my analytic lens. I touch on each of these briefly here, and they are described in detail in chapter four.

Social-constructionism, with a View to Constructivism

One of the key tenants of constructionism is that human decision and human culture exert profound and often unnoticed influence (Mallon, 2007). As a social constructionist I believe that social knowledge is constructed in a particular context, in a particular way. Crotty (2003) maintains that social constructionism assumes all objects are made, not found, and the means by which they are made are social and conventional. People unwittingly come to inhabit pre-existing systems, and the set of accompanying symbols are largely given. This hints at the critical edge underpinning social constructionism. It assumes culture has a strong hold on us, shaping the ways in which we view and feel the world around us (Crotty, 2003). However, I do not dismiss the role of individual meaning making, as some radical social constructionists might. I believe this has particular significance for working mothers, as few roles are more steeped in normativity than motherhood. The image of the ideal mother pervades western culture, and commonly the stay-at-home or intensely involved mother is viewed as superior to those engaged in other ways of mothering (Buchanan, 2013; Park, 2013). This social construction of motherhood can then have ramifications for how mothers, who do not fit the ideal, respond to their realities. Some scholars argue this particular social construction leads to guilt, depression and poor attachments between children and parents (Asher, 2012; Badinter, 2011; Elliott, Powell, & Brenton, 2015).

My research was informed by feminist ideology. Claiming to live under a feminist 'roof' may leave me vulnerable to accusations of vagueness. However, I do believe there are core principles that define feminist work including: Women are the

central focus, cooperative egalitarian research relationships, issues affecting women are identified, recognition of the need for change from a status quo, and a commitment to recognizing diverse and even contradictory viewpoints (Jaggar & Bordo, 1989). I question the Cartesian view of reality as universal, and further question whether reality, as assumed in the Cartesian view, is fully knowable, particularly via rational and quantifiable means alone. As Patti Lather (1991) states, feminist research "put[s] the social construction of gender at the centre of one's inquiry" (p. 71). I see gender as shaping and mediating experience. I believe in seeking out visions 'from below', where knowledge generation is therefore necessarily local, partial and embodied. Flyvbjerg (2001) summarizes my thoughts about feminist research design stating it should be *phronetic* (wise)*,* placing context, power relations, rich descriptions, and practice before discourse.

Research Questions

Many women struggle in their role as a working mother (Milke et al., 2010; Vercruyssen, 2013). Based on survey data from 130 000 Canadian adults, working mothers report the highest levels of stress as compared to single women or working fathers. These findings hold when adjusting for age, education, work status, income and sense of community belonging (Mouhammad & Gagnon, 2010). It is rather surprising then that issues of meaning and quality of life, while well researched in certain populations such as people with chronic illnesses, are rarely discussed with respect to working mothers (Currie, 2008). Many assume that finding 'balance' is essential to managing work and parenting. But others, such as Fochtman (2010), demonstrate that balance may be fictitious. More accurately, life for many working mothers is a constant negotiation in order to make meaning and purpose, in an increasingly challenging arena.

Rather than feeling failure at their inability to 'balance' work and motherhood, working mothers may benefit from recognizing the formidable challenges social constructions of motherhood place on them. Traditionally, women are encouraged to use a variety of tools and techniques to cope. Examples include positive thinking, relaxation, time alone, and seeking out help (Becker, 2010; Beshare, Hutchinson, & Wilson, 2010; Harlin-Clifton, 2008). Mindfulness may support women to adopt some or all of these 'techniques', but is more fundamental and encourages a new way of being in relationship to self and others. Mindfulness may offer women a chance to more clearly notice and change their 'place' in society. After reviewing various bodies of literature, and considering my own personal experiences and insights, I identified three themes in other papers that point to the ways in which mindfulness might be particularly useful for professional mothers (McCorquodale, 2013; 2014). Specifically, I have highlighted how mindfulness supports a relational identity, emotional regulation, and access to intuitive knowledge. However, these are conjecture based on my own personal experience. I could locate virtually no research that considers the role of mindfulness for working mothers using a variety of search terms in many relevant databases including CINHAL, Pubmed, PsycInfo, Family and Society Studies Worldwide, and ERIC. The few mentions I found were in unpublished dissertations (e.g. Harlin-Clifton, 2008; Stebbins, 2012), where findings suggest that mindfulness helps mothers remain present both at work and at home. One qualitative study urges further research on mindfulness as a way to cope as a working mother (Eija, Uusiautti, & Maatta, 2012). I believe more research is needed to fully understand how mindfulness may support working mothers, and what the practice means to working women.

Many women hold misconceptions and misunderstandings about what

mindfulness and meditation are, resulting in few actually practicing (Williams, Van Ness, Dixon, & McCorkle, 2012). When I started this research, I wanted to gain a deeper understanding of what mindfulness means to mothers who work outside the home. I have begun to offer classes to introduce mindfulness to mothers and their children, and am curious about how this practice changes the way they relate to, and think about, life as a working mother.

The main **research questions** that framed this research include, **What is the work of mindfulness in the lives of working professional mothers? In what ways might a mindfulness practice help women navigate their role as a working mother with young children?** In order to answer these central research questions, several smaller, more specific questions where considered. These included: **When a working mother relates mindfully to life what does she experience? What does she think, feel, and sense? What does she notice? What happens when she is not mindful? Does she notice a difference during mindful moments and ones that are not so mindful? What, if anything, might be missing when she is not being mindful? How does mindfulness influence a working mother's belief about herself, her children, and her work life? What, if anything, does she do differently? What issues, both positive and critical, are considered in being mindful? What are its consequences? What does it mean to her?**

To better understand what mindfulness offers working mothers, I completed this research with six women over the course of 4 months. These women were all white middle class and lived in a western context. As such these findigns reflect the experiences of women in a particular location with particular challenges that some may argue are trivial in comparison to those of many women around the world. Nonetheless,

these women are reflective of the many thousands of women in developed countries who may related to the stories they shared. See chapter five for a more detailed overview of each of the participants. The study was approved by Western University Research Ethics Board (Appendix A). I used two key informants who provided letters of information and consent forms to each woman (Appendix B). Those who expressed interest contacted me directly for further details, and completed the consent form upon their decision to participate in the study.

The study was a phenomenological investigation, and I used a relatively new data collection method known as body mapping or body map-storytelling (Gastaldo, Magalhaes, Carrasco, & Davy, 2010; Solomon, 2008). This method is more closely explored in Chapter six, though I offer a brief overview here to establish context for this research. Body maps are essentially life sized outlines of participant's bodies that are then responded upon through drawings and images in order to depict a person's life experiences. The drawings were in response to questions I posed to each participant during the body mapping session (Appendix C). Each participant's maps can be found in Appendix D-I. Appendix J is a body map that I completed myself as I prepared for the research. As I prepared to analyze the maps I used the process described in Appendix K.

Plan of Presentation

Five integrated manuscripts as well as a concluding chapter follow this introductory chapter. The first manuscript, Chapter two, entitled Social constructions of motherhood: Implications for the field, is a critical review of how motherhood is socially constructed. The target audience for this paper is those who work in the field of early childhood education and care. Both of my children attended childcare while I worked. I suggest that many who work to support families and children inadvertently reify

dominant and normative ideals that have implications for themselves as professionals as well as families at large. Now that I am teaching in a program that trains professionals who will support working mothers, I felt compelled to address this issue.

Chapter three is a theoretical paper exploring the construct of mindfulness. This paper was published in the *Journal of Reflective Practice*. In this paper I offer an examination of mindfulness in order to clarify and define the practice. I then spend time articulating how mindfulness might be generative in five ways: enhances reflective practice, supports a relational view of self, increases access to emotions, makes intuitive and tacit professional knowledge accessible, and fosters care and compassion. Examples from my own professional experiences are offered as illustration.

Chapter four is a philosophical paper where I explain the philosophical and theoretical underpinnings of my work. In this paper I explore how phenomenology and mindfulness can support each other in qualitative research, and come to deeper understandings of mindfulness. My research was a phenomenological project and this chapter clarifies why this was an appropriate methodology to explore mindfulness. In the paper I share a review of four key philosophers in an attempt to exemplify the growth and development of phenomenology. While this review admittedly leaves out many other philosophers and scholars who have advanced the method, those highlighted are foundational to phenomenology. Phenomenology and mindfulness are quite similar in many respects. The former is a study of consciousness, and the latter might be seen as a study of the mind. In this paper I share four potential compatibilities between the two perspectives. As a result of this critical review of the literature, I argue those interested in mindfulness and phenomenology respectfully may benefit from understanding their shared commonalities. Specifically, I present that mindfulness and phenomenology have

the potential to 1.) support the others method of perceiving the world; 2.) critique social structures; 3.) privilege the lived body and 4.) support relational connection. Each of these may contribute to a more just, compassionate and tolerant world.

The fifth chapter is the first of two manuscripts that came from the body mapping research. In this paper I share how mindfulness seemed to work in the participants lives. I chose to represent the women's experiences in narrative form using a fictional story that draws upon the women's experiences to bring their experiences to life. Mindfulness has at times been conceptualized as an apolitical practice, and in fact in my experience is often taught, understood and experienced in this way by many practitioners. Counter to this, I saw the women as having an appreciation of how patriarchy impacts their lives, and further making conscious decisions to live their lives in what might be described as living up to more feminine ideals. Some refer to this as a feminist consciousness. A feminist consciousness is consciousness of victimization....

> Victimization is impartial, even though its damage is done to each one of us
>
> personally. One is victimized as a woman, as one among many. In the realization
>
> that others are made to suffer in the same way I am made to suffer lies the
>
> beginning of a sense of solidarity with other victims (Bartky, 1995, p. 400).

Others write about developing a feminist consciousness in a way that I am taking it up in this paper (see for example Bartky; Gross, 1993; Klein, 1995; Maitra, 2012). Many women struggle to speak their own voice, "muted by years of training" (Woodman, 1993, p. 129). Mindfulness appeared to offer the six women in this study a means to circumvent the social mutation many women face, and "she's right there totally present. She's got nothing to lose. She can be who she is and live with the straight, flat-out, naked truth" (Woodman, 1993b, p. 87).

The women in this study were able to make authentic decisions about their lives that were often counter to dominant cultural patterns. Specifically, mindfulness seems to work in three interconnected ways in these women's lives: 1.) supports relational and collective parenting practices; 2.) defines care for self and others in unique ways; and 3.) supports women to face the challenging emotions and experiences in their lives, and by extension, supports their children to do the same. Mindfulness seemed to support them in their actions, and in essence was quite political. I conclude by arguing that more research and dialogue may be needed within the field of mindfulness to better appreciate the critical and transformative nature of mindfulness.

The last manuscript is entitled *'You Want Me to Draw What?': Body Mapping in Qualitative Research.* In this final manuscript I have two aspirations. First I hope to foster the potential uptake of body-map storytelling within qualitative research. Second, I illustrate my experiences with body mapping. Specifically I, 1.) share an overview of body mapping as a method, 2.) reviewing practical issues I encountered during my project, 3.) consider ethical issues unique to body mapping, 4.) explore how I approached analysis, and 5.) situate body mapping within social research.

This dissertation ultimately challenges commonly help assumptions about mothers who work. I focus on women who work in health and helping professions, though the findings may be relevant for a broader audience. I chose this group partly because it is the field of study in which I have professional training in, and partly because it is female-dominated and may particularly benefit from dialogue this dissertation may inspire.

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CHAPTER 2

SOCIAL CONSTRUCTIONS OF MOTHERHOOD:

IMPLICATIONS FOR THE FIELD

Introduction

Women, through our work as mothers, as students, and as teachers, have contributed our labour and our children to institutional and social organizations that have extended our own subordination and contradicted our own experiences of nurturance (Grumet, 1988, p. 45).

As a child, I clearly recall feeling hesitant about the idea of becoming a mother. I loved children, but was dismayed by the inordinate amount of work my own mother seemed consumed with on a daily basis. At times I was unsure if she was able to actually enjoy motherhood. In my child's mind, 'motherhood' equated drudgery. Now, as a mother myself, I can see that I was not naïve, but rather astute to the fact that many modern parents lives are fraught with challenges (Bull & Mittelmark, 2009; Chang et al., 2004). Many of these challenges may originate from social constructions that have broad implications for child care, education and rearing. Third-wave feminists believe that how family life is *constructed* and executed is one of the most pressing social issues of our time (Buchanan, 2013). As Buchanan asserts, those who care about women and children, "but ignore motherhood, do so at some peril, for[…]it permeates culture, society, and politics. Although motherhood is both powerful and pervasive, its construction and implications for women have been little studied" p. 116. In this chapter I argue that social constructions of motherhood shape, and continue to shape, the work of those professionals who care and educate young children, though the implications are rarely

critiqued, considered, or discussed in education or training. There is a call for early childhood educators to become more critically aware of issues that shape their lives (Dalli, Miller & Urban, 2012). Those who provide care and education for children and their families may benefit from a critical understanding of how motherhood has been constructed in the West, and the ways in which social constructions of motherhood inevitably shape their work and the lives of many families.

While there a number of ways to engage in critique (Vincenti & Smith, 2004), I highlight mindfulness later in this paper, as one approach that may be particularly useful for those interested in constructions of motherhood and its implications for the field. Critique is built upon insights from 'critical theory', which is a reaction to other theories (e.g. structuralism and modernism), and is a part of the large and diverse 'post' discourse (Kincheloe & McLaren, 2005). Criticism is useful in that such acts may illuminate new ways of engaging with the world, as offered by Gergen and Hosking (2006):

> We are free to create together new realities and related ways of life. We need not be bound by any conception, tradition, or vaunted claim that degrades or destroys the processes by which meanings come into being. In effect, we have an enormous canvas available for painting new futures (p. 301).

In this chapter I first offer a brief historical overview of motherhood in the West, and then review two particular social constructions of motherhood, which have influence over the field of early childhood education. Finally I argue for a critical awareness of these issues, and suggest mindfulness as a particularly effective way of reflecting on the implications for the field.

Working Motherhood: A Brief Historical Perspective

Despite well-entrenched patterns of oppression and subjugation (Briar, 2005),

women have historically worked outside the home. This is particularly true for women of colour, single mothers, and those from lower income households (Davis, 2012; Esdaile & Olson, 2004). In fact, the 'stay-at-home' mom is a relatively recent social construct. Prior to the industrial revolution, most women worked outside the home. My paternal grandmother's life speaks to the role women have historically played in the economic fabric of family life. Born at the turn of the twentieth century, she worked with her parents and three sisters on her family's farm in rural southwestern Ontario, Canada. After her marriage, she worked alongside my grandfather to sustain their family farm. Because they lacked modern conveniences (e.g. flush toilets, gas ovens and indoor heating) they both necessarily engaged in domestic life.

In reality, the 'stay-at-home' mom archetype is a unique cultural phenomenon associated with predominately white, relatively wealthy, nuclear families (Jones, 2012). The ubiquitous stay-at-home mom image stems from a relatively brief period initiated by the industrial revolution, and its spawn urbanism. During this timeframe, legislation was passed to 'protect' women and children from labour, and perfunctorily relegated women to the private sphere (Hoffman & Nye, 1974; Rich, 1976). The segregation of women to the private and domestic, is a return to ideals prominent in Greek and medieval periods (Jaggar & Bordo, 1989). Betty Friedan (1963) in *The Feminine Mystique*, however, shattered the myth that most women were happy home alone with their children. Writing of her experiences in the 1950's and 60's, Adrienne Rich (1976), a leading second-wave feminist poet at the time, radically called attention to the suffering woman and children experience when societal expectations force women to raise children in isolation. Rich claims many deleterious consequences including maternal depression, harmful mother-child relationships, and hindered child development. The work of Rich and Friedan, as

well as other second-wave feminists, essentially blew the whistle on behalf of women who had been forced out of the workforce.

In the ensuing years many mothers joined the labour force in droves, and were the impetous for the advent of modern childcare outside the home in many developing countries (Hallgrimsdottir, 2013). The influx of mothers into the workforce has been ripe with formidable challenges. Judith Warner (2005) writes that it is almost painful in retrospect to see how optimistic working women were in the 1970's and 80's:

> Common sense and a kind of can-do approach to solving the conflicts of motherhood set the tone. There was faith: The new generation of fathers would help. Good babysitting could be found. Work and motherhood could be balanced. It was all a question of intelligent juggling, and of not falling prey to the trap of self-sacrifice and perfectionism that had tripped up the generation that came before (p. 87).

Women may have won the right to work but they, along with their children, remained subjugated and faced enormous challenges.

Over a decade ago a controversial editorial appeared on the front page of The New York Times revealing many educated and well-paid women were choosing to leave their careers because work and motherhood represented a contradiction in terms (Belkin, 2003, October 26). This was a relatively small group of women, though they were joined by a much larger though less public group, who left and continue to leave the workforce because child care remains unaffordable (Warner, 2013). Ironically, 11 years later these same women express ambivalence about their decision to stay at home with their children facing financial strain through divorce, as well as poor overall mental wellness (Warner, 2013).

Today, third wave feminists suggest that working mothers are now in an impossible situation brought about by current social and political realities (Buchanan, 2013; Warner, 2013). While the 1980's were characterized by, "a great air of congratulation for self-actualizing, self-fulfilled motherhood through the 1990's and into the new century, the romantic image of 'supermom' has faded" (Warner, 2005, p. 88). Today's working mothers often feel as though they are losing in a game of tug-of-war, with their lives increasingly spinning out of control (Asher, 2012). Women often abandon self-care as a way to reconcile their personal and economic ambitions while meeting societal expectations of unwavering commitments to her children (Guendouzi, 2006). Further, working mothers often find themselves in a rather unfortunate paradox. Popular culture views working mothers as uncommitted employees and second-rate mothers (Shaw, 2011; Stone & Ackerly Hernandez, 2013). Yet, women are also criticized if they chose to stay home with their children or opt to not have children at all (Huizinga, 2013; Shaw, 2011). In essence, these women may be doomed to fail.

Asher (2012) notes that women assume the bulk of childcare responsibility yet, "they pay a huge price for this, in exhaustion, conflicting commitments and social and economic marginalization" (p. 133). This unequal burden of responsibility is likely unhealthy to both men and women as well as children and society at large. The brief history discussed above has shaped many institutional policies, as well as social attitudes and norms about motherhood, child care and family life. I now highlight two particularly pervasive social constructions of the 'ideal' mother, which have significant ramifications for working mothers and those involved in their children's care and education today.

Reconsidering the 'Ideal' Working Mother: Questioning Social Constructions

Feminists have argued for decades that social forces are largely responsible for

the injustices and inequality experienced by women and children (Hays, 1996; Wendell, 1990). There are many assumptions that circulate widely in western culture about child rearing, and it is easy to assume these are normal, objective, and benign expressions of the way things are. However, as Buchanan (2013) asserts, "Mother, likewise, alludes to, masks, and sustains the network of power relations that undergird gender" (p. 5). After an extensive review of the literature and considering my own experiences as a working mother I have identified two social constructions of the 'ideal' mother, which may be particularly damaging for families and those who work in early childhood education and care: 1) an ideal mother assumes primary and *intensive* parenting responsibility, and 2) an ideal mother is a *stay at home* mother.

Intensive Mom: Natural Mom

Ideologies are beliefs, ideas, opinions, and values that are used to create cultural meaning and construct a particular construction of reality (Freeden, 2003). Ideologies shape identities by defining *what exists*, *what is good*, and *what is possible* (Petrilli, 2013). In many ways the answer to what exists, is good or possible, is contestable. Regardless, the prevailing ideology assumes intensive parenting as the solitary option (Johnston & Swanson, 2006). Western culture typically perpetuates the belief that parenting should be done 'intensively'. Intensive parenting, first described by Hays (1996), assumes the following: 1.) women are inherently better at parenting than men, 2.) parenting should be fulfilling, 3.) children should be cognitively stimulated by parents, 4.) mothering is difficult, and 5.) parents should prioritize the needs of the child (Liss, Schiffrin, Mackinstoch, Miles-McLean, & Erchull, 2013). However, this belief has significant consequences. For example, Rizzo, Schiffrin, & Liss (2013) found that adherence to intensive mothering beliefs can be negatively associated with maternal

wellness. Elizabeth Badinter (2011), a French feminist, strongly urges people to question the de rigueur 'natural mom'. Attempts to be a 'natural mother', including breastfeeding on demand, co-sleeping, and making your own baby food can lead many women to assume 'intensive' mothering beliefs, and essentially return women to the home but with the added pressure of trying to maintain a career.

This is not to say that breastfeeding or co-sleeping are inherently wrong, but when taken at face value and as necessary to be a 'natural' mother, they can demand too much of families. I can recall one particular friend who was guilt-ridden because she had decided breastfeeding did not work for her. Her husband worked long hours and she lived away from most of her family. There were times she needed someone else to feed her baby, and a bottle was her only option. Sadly, she felt broken, whereas I thought she made the wisest decision for her family. I was disheartened to see how she punished herself for her decision, and increasingly became resentful of her children. My friend joins a growing number of women who do not enjoy motherhood. For example, researchers are finding that mothers who parent intensely have higher rates of depression and poorer overall health (Buehler & O'Brien, 2011; Warner, 2013). Researchers present conflicting results about whether children add or detract from parental wellbeing and quality of life (Deaton & Stone, 2014; Margolis & Myrskykla, 2011). Perhaps adherence to intensive parenting beliefs may at least partially explain these divergent findings. The rising prevalence of depression among women, at rates twice that of men (Public Health Agency of Canada, 2014), might also be partially attributed to mothers unequal parenting responsibilities and adherence to intensive parenting beliefs.

Coupled with the expectation that mothers should be intensely involved in their children's lives, is the expectation that workers spend increasingly long hours in paid

employment. These two expectations set the stage for working mothers to have little free time, working essentially two jobs. A recent analysis of a huge sample of working adults (women n=61 202, and men n=53 365) across all 15 European Union countries finds that the 'second shift' is a reality for many women (Gimenez-Nadal & Sevilla-Sanz, 2011). Married women with children who work full time have the least amount of both leisure time and satisfaction with their leisure. Impressively, women are statistically spending more time with their children now than they did in 1975 (Department of Sociology, 2010). At first glance this may seem like a sign of progress, but given that there are now vastly more women in the paid labour market than in 1975, these statistics actually indicate that many women are giving up personal time (e.g. social engagements, exercise, or time alone) in favour of 'quality' time with their children (Asher, 2012). Intensive parenting beliefs may inadvertently jeopardize working mothers mental and physical wellbeing.

Perhaps it is no wonder that many working mothers express stress and anxiety about parenting and working (Stebbins, 2012). Researchers overwhelmingly agree that maternal depression has dire consequences for children's health and well-being (Bernard-Bonnin, 2004; Feldman et al., 2009). However, few in the field write about or discuss how intensive parenting beliefs may contribute to negative outcomes for families. Beliefs associated with intensive parenting have, to some extent, prevented other adults, including fathers and early childhood educators, from receiving recognition for their role in rearing children. Women may be trapped "between their desire for help with childrearing and the threat to their personal competence posed by failure to meet socially constructed ideals of motherhood" (Sasaki, Hazen, & Swann, 2010, p. 71).

Rather than an extra pair of hands, a community of adults (e.g. fathers, child care

workers) can be an integral part of childrearing. For example, fathers active in their

children's lives tend to be happier and healthier, and their offspring similarly benefit

(Kotila & Kamp Dush, 2013; Potter, Walker, & Keen, 2013; Shwalb & Shwalb, 2013).

Similarly, children cared for in quality child care settings, particularly those from lower

income families, experience fewer developmental gaps as they grow as compared to

those in low quality settings (Gialamas, Mittinty, Sawyer, Zubrick, & Lynch, 2015).

While these findings may be true, adherence to intensive parenting beliefs and public

perception of working mothers, may mean that the work of those in childhood education

and care will remain subjugated. Public perception of early childhood education and care

has partially resulted in low salaries, challenges in recruiting men to the profession

despite the noted benefits, and lack of status for educators (Stroud, Smith Ealy & Hurst,

2000). In my experience as a mother who uses childcare and education services, many

students and professionals adhere to intensive parenting beliefs. I have been privy to

conversations where mothers' choices are criticized and, rather astonishingly, statements

are made regarding how their own children will not be or were not cared for in early

childhood centres. It may be vitally important for those in the field to consider how these

beliefs shape their work.

Joan Cleaver's Legacy: The Stay-at-home Mom

The second social construction I draw attention to is the stay-at-home mother

ideal. As previously discussed, the vast majority of mothers work outside the home

(Ferrao, 2010; Spinks, 2013). Regardless, the notion that the 'ideal' mother stays home

with her children has led to many social policies and practices that effectively make a

working mother's responsibilities more challenging. For example, within most

developed countries long hours are the social norm (Briar, 2005). This norm is based on

the assumption that employees have someone at home (presumably a wife), and hold no caregiving responsibilities. In response, women, with the exception of those in Sweden, are having fewer children (Briar, 2005) and even opting out of the workforce altogether (Belkin, 2003; Loukas, 1992). Opting out is not an effective solution for both economic (e.g. tax revenues) and political (e.g. family-friendly employment policies are more predominant with women in leadership roles) reasons (Tarr-Whelan, 2009). Further, women who work out of financial necessity cannot 'opt out'. Finally, women who work, broadly speaking, are less depressed and have better overall health than mothers who stay home (Buehler & O'Brien, 2011). This is particularly true for women who find work in flexible arrangements. Unfortunately, women, and increasingly men, who secure part-time or flexible employment arrangements experience stigma and are falsely assumed to be poor employees (Stone & Ackerly Hernandez, 2013). Combining work and family is necessary for many women and men, but social norms and policies may not facilitate success.

Intensive parenting beliefs, which feed the stay-at-home ideal, may be partially responsible for beliefs about childcare settings. Childcare, and other early learning centres, are commonly assumed to be an inferior way to care for young children, and many parents consequently opt to leave the paid workforce rather than use them even when the consequences are dire for their families (Elliott, Powell, & Brenton, 2015). Researchers and policy makers demonstrate that in fact *quality* child care can be crucial for child development, in both the short and long term, and the benefits are amplified for children from families with fewer resources (Campbell et al., 2012; Crosnoe, March, & Huston, 2012; Canadian Council on Learning, 2006). The lack of publically funded quality childcare for children of working parents, may speak to the devaluing of childcare

outside the home. Only 25% of children in Canada are in *quality* child care settings, and further only 15% of parents can secure licensed spaces for their children (Akbari & McCuaig, 2014). These statistics highlight the lack of support working mothers face when they enter the workforce.

While many employers are offering flexible work hours and creative work sites (Jermyn, 2013; Shwalb & Shwalb, 2013), these efforts may ultimately fail to improve the lives of working families if social expectations and norms about the 'ideal mother' continue to prevail (Jones, 2012). Further, until fathers can take advantage of legislation intended to support work-family balance, such as paid parental leave, without experiencing discrimination, these polices will remain 'female-friendly' rather than expected and necessary social policies (Berdahl & Moon, 2013).

Child development experts highlight the importance of quality time between mother and child (Roeters, van der Lippe, & Skluwer, 2010). Quality time is defined as activities like playing, reading, sharing meals together, and working on projects (Milke, Kendig, Nomaguchi, & Denny, 2010). Time is often a pressing and precious commodity for working mothers. The discussion I offer above is not meant to suggest that parents do not need to spend quality time with their children. However, quality time need not equate with intensive parenting practices. Many authors (Brooks-Gunn, Sidle-Fuligni, & Berlin, 2003; Page, 2013) summarize the wealth of research that conflicts with Bowlby's (1969) controversial attachment theory which claimed an infant forms a relationship with her/his mother which is unique to other relationships. Other prominent studies have argued that the quality and consistency of relationships and interactions matter more (National Institute of Child Health and Infant Development (NICHD) Early Child Care Research Network, 1997).

Johnson and Swanson (2006) summarize that intensively mothered children may experience a sense of entitlement, lack of initiative, inability to establish relationships based on mutuality, and an inability to assume responsibility; while simultaneously noting that intensive mothering persists because it values involvement with children, development of children's self-esteem, and emotional care over instrumental care. Options for resolving dialectics, in this case the dialectic of intensive mothering over women's status as a worker, (Bakhtin, 1981) include selection, segmentation, cyclic alternation, neutralizing, or reframing (Baxter, & Montgomery, 1996). A mother, for example, might select to stay home rejecting her worker identity, or segment by staying home only when her children are young. Neutralization requires cutting corners in both work and parenting responsibilities to do both simultaneously. The most sophisticated response, according to Baxter and Montgomery, is reframing. It may be vitally important for working mothers, and those who care for their children, to more clearly see the challenging context in which young children are cared for and educated in many developed countries.

Hays (2003) suggests that the intensive mothering ideology has become more culturally salient as more mothers enter the workforce. This can be explained, in part, by Foucault's (1978) theory that cultural hegemony is perpetuated by setting up for failure those who attempt to counter hegemonic forces. It may be imperative for those in the field of early childhood education and care to critically consider how this has shaped and continues to shape their work. Mindfulness, as a way of being in the world and as part of reflective practice, may be a particularly meaningful way to do so (Orr, 2002). Notably, mindfulness can serve as a corrective and as a means to hold society in abeyance, to be subject to critique and ethical assessment. In this way mindfulness may help those in the

early childhood field step outside commonly held understandings and challenge assumptions about child rearing. This may potentially improve the lives of working women and their children, as well as afford educators a deeper understanding of their own role in young children's lives. I now introduce mindfulness and conclude by offering an example of how mindfulness might help professionals gain critical insights into their work with children and families.

What is 'Mindfulness'?

A single definition for mindfulness may be impractical, as one traditional image clarifies, "words are like fingers pointing to the moon – guiding us where to look, but not something we should mistake for the moon itself" (Heaversedge & Halliwell, 2012, p. 13). Any definitions I offer will be woefully partial and perfunctory due to the inherently experiential nature of mindfulness. Gunaratana (2002) defines mindfulness as, "an ancient and codified system of sensitivity training, a set of exercises dedicated to becoming more and more receptive to your own life experience. It is attentive listening, total seeing and careful testing" (p. 21). In the West, Jon Kabat-Zinn's (2005) definition may be the most commonly cited: "The awareness that emerges through paying attention, on purpose, in the present moment, and non-judgmentally to the unfolding of experience moment by moment" (p. 145). Essentially, mindfulness is about consciousness: bringing a level of awareness to life experiences such that practitioners can actual pay attention to those experiences (Brown, Ryan & Creswell, 2007).

Mindfulness has a rich and varied history stretching over 2500 years with intimate connections to many world religions and philosophies (Kabat-Zinn, 2013; Miller & Nozawa, 2002). Mindfulness also has roots in the contemporary West with links to the philosophies of John Dewey and William James (Dryden & Still, 2006), the philosophy

and method of phenomenology (Varela, Thompson, & Rosch, 1992; Walsh & Shapiro, 2006; Willis, 1999), frameworks of professional knowledge (e.g. Epstein, 2003; Epstein, Siegel, & Silberman, 2008; Eraut, 2010; Palmer, 2009; Polanyi, 1983; Schon, 1983) and psychology (Gardner, 1993; Gillian, Rogers, & Tolman, 1991; Rogers, 1971). Essentially, mindfulness, despite its spiritual roots, is a reflective way of living that transcends religion and culture. Epstein (2003) eloquently suggests mindfulness is not a structured reflective act, but rather "a state of mind that *permits* insight, presence and reflection, and also a habit of relating to the world" (p. 2).

Mindfulness cultivates awareness of the present moment, most formally cultivated through sitting meditation, often called mindfulness meditation. In paying attention to breath, without trying to change or alter it in any way, and returning to it again and again when the mind wanders, one can cultivate the stability of attention necessary to begin to notice a variety of habits (Kabat-Zinn, 2005). Mindfulness may also be cultivated informally through a variety of activities such as mindful movement (e.g. yoga, tai chi, walking), body scans, mindful eating, and engagement with aesthetic and creative practices (Kabat-Zinn, 2005). Mindful awareness is not unique to those who have a formal practice, in fact being mindful is a basic human quality. Focused attunement to life experiences, with both awareness and attention, may reveal things previously ignored. Consider for example, what might be noticed if a professional's thoughts are not riveting from past to future with limited focus on the now?

Interest has grown exponentially in recent years with many important discovers. One of the first studies demonstrates that even after only 8 weeks, new meditators experience changes in the brain with more activation in regions responsible for optimism, creativity, joy, vitality and alertness (Davidson et al., 2003). Functional MRI scans of

novice meditators find structural changes in the brain including fiber thickening in the middle prefrontal areas and the right side of the insula (Holzel et al., 2011). Siegel (2007) suggests there are stronger integrative fibers connecting the left and right frontal cortical hemispheres, resulting in more emotional balance, leading to what Siegel calls 'integration'.

Relational Identity: A Generative Exemplar

Mindfulness may offer a number of benefits for professionals working with families. For example, mindfulness can enhance reflective practice, creativity and problem solving, equanimity, and physical and mental wellness (McCorquodale, 2015; Morrison, Goolsarron, Rogers, & Jha, 2014; Dyche & Epstein, 2011). I know specifically highlight how mindfulness promotes relational, rather than individualistic ways of thinking and being in practice. This is a perspective that may be particularly important to the field of early childhood, and may better support working mothers and their children in light of the social constructions highlighted earlier in this paper. Some erroneously assume that mindfulness, which typically involves a retreat into oneself means a retreat from the social, but as Shusterman (2008) asserts, any successful challenge of potentially destructive social constructions must include an introspective exploration of bodily habits and feelings that are correspondingly expressed. Mindfulness philosophy is replete with examples and parables speaking to the collective and relational nature of all things (Gunaratana, 2002). When professionals become more fully aware of their experience, a fixed and independent self is not found; not in physical form which changes all the time, not in feelings that come and go, nor in dispositions that change considerably over time (Gunaratana, 2002). This realization can have profound implications for those supporting and caring for families and young children. Coming to

understand that professionals exist and are constituted by the 'other' naturally places the other in a place of immense significance (Robbins, 2001). Individualistic ways of thinking tend to dominate life in the West, and are maligned by many (Van Amburg, 1997; Watson, 2006). Alternatively, Dewey (1938), a prominent educational theorist, maintains that humans continually co-construct within social systems, though he also emphasizes the individuals' own constructivist role in meaning making. Feminist theory has contributed significantly to this alternative worldview commonly referred to as a *relational* or *collectivist* worldview (Mackenzie & Stoljar, 2000). There are fundamental differences in the two perspectives, and cultural attitudes regarding parenting and childcare vary sharply within each perspective. Collectivist views are common in developing countries, and thus erroneously assumed to be inferior to individualist views, which tend to predominate in developed countries. While there are arguably advantages and disadvantages to both, parenting from a collectivist worldview might be 'easier'. Members of collectivist societies feel involved in the lives of other members of their group, and thus might be more likely to assume parental responsibility for all children, regardless of biology (Greif, 1994).

Broadly speaking, cultures that adopt more individualistic tendencies assume parental responsibilities should rest solely on biological parents. By extension, expectations placed on working mothers in individualist societies are considerable and mirror intensive parenting practices described above (Kalteikangas-Jarvinen, Terav, & Pakaslahti, 1999). These expectations are particularly damaging for women who need collective support, including single and economically disadvantaged parents (hooks, 2000). Not surprisingly, societies with collectivist assumptions are more likely to offer universal childcare (Hofstede, 2001).

Gergen (2009) asserts that a relational view enacts freedom from many assumptions derived from an individualist perspective. With a relational view, people no longer see failings as theirs alone, can feel happy rather than threatened by the success of others, and are free to see relationships as primary (Gergen, 2009). Such freedom has the potential to change the ways in which those in the field think about and form relationships with families. Collective parenting, a potential corrective to the intensive parenting beliefs I described earlier in this paper, may be beneficial for children, mothers, and professionals who work in the field of early childhood. Mothering is traditionally viewed as an individual practice, but scholars are beginning to highlight the inherently dialogic and co-constructed nature of motherhood. In many counter cultures, mothering and parenting are rarely solitary endeavors. For example, queer theorists question the popular assumption that mothering can and should be done by a female biological mother (Park, 2013). Further, many mothers need to rely on others to care for their children, as they often have no choice but to work outside the home (hooks, 2000). Researchers have identified that children raised in collective ways are more likely to resist negative peer pressure (Brody et al., 2001), and their parents have greater self-efficacy (Merino, 2013). Further, working mothers with strong quality supports to help care and educate their children report less stress and more satisfaction with their work and parenting responsibilities (Chang et al., 2004).

As mindfulness often supports more relational thinking, mindful professionals may more clearly see that raising children is not necessarily an intensive, individual practice and can be seen as a more communal and relational act. From this perspective the care offered by early childhood educators, extended relatives, and friends might be seen as essential for the full development of children. This perspective may ease the guilt

common to many working mothers, potentially support working women to find more joy in their dual roles, and elevate the status of those professionals in the field of early childhood education and care (Guendouzi, 2006).

Conclusion

I have highlighted the importance of developing a critical consciousness. This may be an essential step towards substantive change for both the field and the wellbeing of families. Specifically, I have argued that professionals who advocate for quality universal childcare, and better conditions for women and children may need to critically question taken for granted institutions and discourses such as motherhood. There are formidable challenges placed on families by particular social constructions of motherhood. Intensive parenting beliefs and the stay-at-home mother ideal are two particular constructions that may need critically analysis before effective change in both public perception and policy is possible.

Mindfulness may be a fruitful form of reflective practice for professionals to come to understand their work in new, and potentially transformative, ways. In offering mindfulness as a salve, I do not see it as a panacea. Further, I do not want to support governments and employers from adequately addressing their role in elevating the status of women and children. Briar (2005) offers an excellent reviews of policies needed to make workplaces more family friendly (e.g. extended parental leaves for both parents, flexible work hours, pay equality, universal child care, support for work-family balance such as the culture of overtime expected). However, I do suggest that mindfulness may enable a new way of seeing the world that has the potential to foster a critical perspective on issues that have silently shaped early childhood education and care. In particular I have demonstrated how a relational worldview may better support families and result in

substantive changes:

> We don't have much truth to express unless we have gone into those rooms and
> closets and woods and abysses that we were told not to go in to. When we have
> gone in and looked around for a long while, just breathing and finally taking it in
> – then we will be able to speak in our own voice and to stay in the present
> moment. And that moment is home (Lamott, 1994, p. xxxii).

With a new perspective, the field may be better prepared to advocate and enact political
change that enhances the lives of children and parents.

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CHAPTER 3

MINDFULNESS AND PROFESSIONAL PRACTICE:

A GENERATIVE DIALOGUE

Introduction

Several years ago I happened upon Langeveld's (1983) work, *The Secret Place of a Child*, and was instantly thrust back to the immediacy of my own childhood:

> In the lifeworld of the child there exist hidden places which permit the child the possibility of experiencing in a normal manner access to strange and unfamiliar worlds around him. Where does the child find his as yet indeterminate worlds?
>
> Worlds pregnant with the possibilities of new meaningful experiences? (p. 81).

Some of my earliest memories include sitting behind my grandparents' old run-down shed in their rural Southwestern Ontario backyard. Amidst the wildflowers and overrun grass I simply sat and watched the world. No one knew about the little spot behind the garden shed, but it served as a place for me to retreat and perhaps come to understandings about myself, and the world around me (van Manen, 2007). As the years passed I continued to be drawn to periods of solitude and quiet. After the birth of my son, moments spent in quiet meditation became more frequent. I began to notice how nourishing the quiet time was for me. On days when I managed to meditate I was happier, more even-keeled, and a better wife and mother. Further, as an occupational therapist for 15 years, I have seen the benefits of quiet for many of my clients who struggle to adjust to life with an illness or injury. I am also interested in mindfulness in the professional and personal lives of health professionals.

Despite having a passion for and a professional interest in mindfulness, I lacked a theoretical and conceptual understanding of the practice. For many years mindfulness

was entirely pragmatic; it was having a positive influence on my life so I continued to practice. I saw first hand what William James meant when he said, "compared to what we ought to be, we are only half awake" (1911, p. 97). I became aware of how pervasively mindless I, and presumably many others, really am during day-to-day experiences. I noticed how frequently I became caught in ruminations about the past, or daydreams and worries about the future. My intent in this paper is to attempt to clarify what mindfulness may offer to the life of a health professional by exploring five generative themes. Before introducing the five themes, I offer a brief review of the mindfulness literature.

Defining Mindfulness

'Mindfulness' has been assigned various terms in the literature including reflection and reflective practice (Johns & Freshwater, 1998), metacognition (Fogerty, 1994), prereflectivity (Greene, 1995; Kinsella, 2012; Merleau-Ponty, 1962/2012), mindfulness meditation (Germer, Siegel, & Fulton, 2005; Kabat-Zinn, 2005), receptivity (Willis, 1999) and contemplation (Miller, 1994). Definitions are also equally diverse. For example, mindfulness has been defined as a receptive attention to and awareness of present events and experiences (Brown, Ryan, & Creswell, 2007). Gunaratana (2002) defined mindfulness as, 'an ancient and codified system of sensitivity training, a set of exercises dedicated to becoming more and more receptive to your own life experience. It is attentive listening, total seeing and careful testing' (p. 21). In the West, Jon Kabat-Zinn's (2005) definition is one of the most commonly cited: 'The awareness that emerges through paying attention, on purpose, in the present moment, and non-judgmentally to the unfolding of experience moment by moment' (p. 145). There is very little agreement in the literature regarding what constitutes mindfulness. Some practitioners emphasize seven mindful attitudes (Kabat-Zinn, 2005), while others pay more attention to the four

foundations of mindfulness (i.e. awareness developed in successive order of body, mind, feelings, life) (Heaversedge & Halliwell, 2012). Despite the various attempts to conceptualize mindfulness, a clear definition may be impractical due to the experiential nature of the practice.

Mindfulness is the opposite of mindlessness, the latter of which tends to typify the daily lives of many in the Occident (Kabat-Zinn, 2005). Mindlessness may be thought of as autopilot, a mode of being that makes it easy to miss how habits direct day-to-day experiences. These sedimented 'natural' appearing habits then become the basis for all actions, occupations and doings (Cutchin, Aldrich, Bailliard, & Coppola, 2008). Given the generative nature of habits, I suggest it may be wise to appreciate which habits are productive and which are less so. To do this one must be prepared to stop and pay attention, and become mindfully aware of experience.

This awareness can be formally cultivated through meditation, often called mindfulness meditation. In paying attention to the breath, without trying to change or alter it in any way, and returning to it again and again when the mind wanders, one can cultivate the stability of attention necessary to begin to notice our habits (Kabat-Zinn, 2005). Once attention is stabilized, practitioners can focus on whatever arises in the field of awareness and attend to those processes (e.g. thoughts, feelings, sensations) with curiosity, openness, acceptance and kind regard (Epstein, Siegel, & Silberman, 2008). Mindfulness may also be cultivated informally through activities such as mindful movement (e.g. yoga, tai chi, walking), body scans and mindful eating (Kabat-Zinn, 2005). Mindful awareness is not unique to those who have a formal meditation practice; in fact being mindful is a basic human quality. Epstein (2003b) noted that many effective

health practitioners experience mindful moments on a daily basis, although they often lack the language to label the moment as mindful.

To be mindful, one must be conscious of life's moment-to-moment experiences. Consciousness, while inherently neuroscientific (Csikszentmihalyi, 1990; Elliot, 2011), relates to the human capacity for awareness and attention (Stern, 2004). Consciousness, defined as the human capacity for awareness and attention, is easily overlooked with respect to its importance in human well-being because almost everyone has some level of awareness and attention (Brown & Ryan, 2003). Awareness is the background radar used to notice what is happening internally and externally, whereas attention is focus limited to a range of experience (Brown & Ryan). Noticing when one's attention shifts from the intended focus is an act of mindfulness (Tusaie & Edds, 2009). For example, a clinician may be aware of other people in a treatment space, but will focus attention on the client directly in front of them. This awareness may become meta-awareness during daily activities. With a focus on the present moment, abandoning concern for both the future and the past, a clinician may notice subtle previously overlooked aspects of their practice: noticing for the first time a pause of hesitation before a client answers a question, or the hint of fear in the voice of a client about to return home alone after a period of convalescence in the hospital. Each moment of noticing offers new opportunities for responding and acting.

Despite recent interest in mindfulness, the practice itself is not new. Mindfulness practice can be traced back over 2500 years to Buddhist psychology, and has a varied and intimate connection to many world religions and philosophies (Miller & Nozawa, 2002). There are also foundational roots in the contemporary West with links to the philosophies of Dewey and James (Dryden & Still, 2006), the philosophy and method of

phenomenology (Walsh & Shapiro, 2006; Willis, 1999), frameworks of professional

knowledge (e.g. Eraut, 2010; Polanyi, 1983; Schön, 1983) and psychology (Epstein,

1999; Gardner, 1993; Gillian, Rogers, & Tolman, 1991; Rogers, 1971). There are

basically two variants popularized in the West; one by Jon Kabat-Zinn (2005), and the

other by Ellen Langer (1989, 1997). Langer's seminal work emphasizes active cognitive

operations, such as the creation of new categories and the seeking of multiple

perspectives. Her concept of mindfulness differs from others in that formal and informal

meditation practices are not prioritized. Jon Kabat-Zinn's conception most closely

resembles the mindfulness I refer to in this paper. Drawing upon the work of Jack

Kornfield, Joseph Goldstein and Thich Nhat Hanh (Dryden & Still, 2006), Kabat-Zinn

may be single-handedly responsible for mindfulness' rise in popularity, particularly in

Western healthcare settings. Kabat-Zinn believed the original purpose of Buddhist

mindfulness, to alleviate suffering and cultivate compassion, held promise for health and

wellness (Ludwig & Kabat-Zinn, 2008).

Empirical research and publications in the field have increased exponentially in

the past decade (Black, 2014). Research demonstrates structural and functional changes

in the brain as the result of practice (Holzel et al., 2011). Siegel (2007) also reports

stronger integrative fibers connecting the left and right frontal cortical hemispheres,

resulting in more emotional balance and overall wellbeing, leading to what Siegel has

called 'integration'. Empirical research with clinical populations, although suffering from

various methical flaws, has proven the practice to be effective at alleviating suffering

from a variety of illnesses and improving wellbeing (Baer, 2003). Research in the field of

health professional education is not as prolific, although many conceptual and theoretical

papers and books exist (e.g. Epstein, 1999; Reid, 2009; Turner, 2009). The empirical

studies appear to demonstrate that mindfulness plays a powerful role in self-efficacy of practice, patient safety, ethical practice and self-care (e.g. Gura, 2010; Tusaie & Edds, 2009). In the next section I explore five ways mindfulness supports professional practice.

Five Generative Themes

After an extensive review of the literature in a variety of fields, many cited above, and considering my own personal and professional life, I propose five ways in which mindfulness might inform practice in the health professions. Specifically, I examine the ways in which mindfulness might be seen to contribute to reflective practice, relational practice, attunement to emotions, tacit intuitive knowledge and care and compassion.

Reflective practice. Reflective practice (Schön, 1983, 1987) is one of the most influential theories of professional practice and education (Kinsella, 2012), and mindfulness has been defined as falling under its umbrella (Epstein, 1999). Reflective practice can be seen as a continuum. The inner life of practitioners (e.g. receptive reflection), an understanding of the sociality of the world (e.g. reflexivity), as well as reflection in and on action (e.g. intentional reflection) and tacit or non-intentional acts (e.g. embodied reflection) constitute 'reflective practice' (Kinsella, 2012). I propose that mindfulness overarches and informs all these reflective acts. Mindfulness pays attention to the qualities of the person doing the reflecting, an area often overlooked in reflective practice (Miller, 1994). Epstein (2003b) eloquently suggested mindfulness is not a structured reflective act, but rather 'a state of mind that permits insight, presence and reflection, and also a habit of relating to the world' (p. 2). Generally, mindfulness may be distinct from many types of reflection in that it is perceptual or pre- reflexive of thoughts, feelings and other aspects of consciousness (Brown & Ryan, 2003). Rather than generating mental accounts about the self, mindfulness "offer[s] a bare display of what is

taking place" (Shear & Jevning, 1999, p. 204). However, reflection does include aspects of self-awareness, although a particular emphasis on the present moment and a non-judgmental attitude is unique to mindfulness (Tusaie & Edds, 2009).

One of the hallmarks of reflective practice is the response (reflection in or on action) made by a practitioner when a surprising or unexpected situation occurs (Schön, 1987). However, without mindful attunement to experience, these situations may be ignored or even denied, and consequently the opportunity to respond differently is missed (Epstein, 2003a). With mindfulness as a backdrop, clinicians become curious about their own biases and question multiple possibilities within their day-to-day experiences (Sibinga & Wu, 2010). Further, Epstein (1999) argues that mindfulness can play a role in resolving disparity between one's espoused theory (e.g. what one professes to believe about practice) and one's theory-in-use (e.g. what is actually done in practice) (Argyris & Schön, 1983). For example, assuming that the profession of occupational therapy is client-centred may prevent clinicians from examining how this theory is expressed in practice. Mindfulness appears to offer clinicians the opportunity to listen and watch their theory-in-use, placing clinicians directly in the here and now of clinical interactions (Reid, 2011).

Mindfulness may also support critical reflexivity. A critically reflexive lens assumes power, language and emotions are implicated in the generation of knowledge (D'Cruz, Gillingham, & Melendez, 2007). Greene (1995) demonstrates the need for critical reflexivity, and states, "It is the cloud of givenness, of what is considered 'natural' by those caught in the taken-for-granted, in the everydayness of things" (p. 47). Scholars are beginning to articulate the ways in which mindfulness supports and augments critical reflexivity (Béres, 2009). With enhanced awareness of thoughts,

feelings and emotions, practitioners become more attuned to the situated nature of knowledge. An example, from my own practice, may serve to highlight the role emotions inevitably play in the construction of practice knowledge. In the early part of my career I was reticent to work with clients who had concurrent mental health and substance misuse issues, in addition to a brain injury. I erroneously believed I could not help someone with a brain injury until they sought treatment for mental health challenges. Today, it is abundantly clear that concurrent issues must be treated in parallel rather than sequentially (Government of Ontario, 2009). In hindsight, I now see that my own discomfort and lack of competence were framing my clinical opinion. At the time, I did not have a formal mindfulness practice, but such a practice may have attuned me to my discomfort stemming from a lack of competence. I may have then sought the necessary education and training, rather than perpetuate the stigma people with mental illness often face.

Relational practice. "*In the beginning is relation*"(Buber, 1958, p. 18).

Ways of thinking about one's self in relation to the world and others ranges from an individualistic and objective perspective to a collective and holistic worldview. Acting from a more individualist perspective one constantly,

> [...] thinks, feels, and acts as though one had a self to protect and preserve. The slightest encroachment on the self's territory (a splinter in the finger, a nosy neighbor) arouses fear and anger. The slightest hope of self-enhancement (gain, praise, fame, pleasure) arouses greed and grasping. Any hint that a situation is irrelevant to the self (waiting for the bus, meditation) arouses boredom. (Varela, Thompson, & Rosch, 1992, p. 62.)

Many scholars in the field of professional education lament the sentiment offered above, and question dominant tendencies to think individualistically and objectively (Van

Amburg, 1997; Watson, 2006). Educational theorists (Dewey, 1938), feminist theory and philosophy also contribute to a relational and collective view of the world (e.g. Belenky, 1996; Mackenzie & Stoljar, 2000). Some erroneously assume a retreat into oneself means a retreat from the social, but as Shusterman (2008) asserted, any successful challenge of oppression must include an exploration of bodily habits and feelings which express the domination. This enables clinicians to shake any shackles assumed to be natural or inevitable.

The literature of Buddhist psychology is replete with examples and parables speaking to the collective and relational nature of all things (Gunaratana, 2002). Eventually what arises, from a close paying attention to experience, is the recognition that there is no fixed self, despite an enduring Western belief in a static 'I' (Varela et al., 1992). Through mindfulness meditation a fixed and independent self is never found; not in physical form which changes all the time, not in feelings which come and go, nor in dispositions that change considerably over time. Eventually, the only thing to be found is ever changing experience (Magalhaes & Sanchez, 2010).

A relational view of self has ethical implications for health professionals. Coming to understand that humans exist and are constituted by the 'other' naturally places the other in a place of immense significance (Robbins, 2001). Moving away from a sense of self as an individual fosters freedom. Gergen (2009) asserts that this freedom emanates from a reconsideration of many assumptions derived from an individualist perspective. With a relational view of life, people no longer see failings as theirs alone, can feel happy rather than threatened by the success of others, and are free to see relationships as primary (Gergen, 2009). Such freedom has the potential to change the ways in which professionals think about and form relationships with clients. For example, the practice of

documenting in the third person, which serves to reduce a person to their diagnosis and distances the practitioner from the clinical interaction, may be questioned.

      Attunement to emotion. "*All un-spirituality, all vulgarity, is due to the incapacity to resist a stimulus – one has to react, one obeys every impulse*" (Nietzsche, 1967, p. 6).

      While emotions are traditionally seen as a hindrance to clinical judgment and reasoning in healthcare settings, this assumption does not hold in Eastern philosophy or Western phenomenological traditions (Epstein, 1999). Through mindful awareness, emotions, feelings and thoughts are observed non-judgmentally. This stance holds the power to transform one's relationships to feelings, largely through emptying minds of concepts and images that restrict (Tomm, 1995). The practice of paying attention to emotion is often critiqued, assuming clinicians run the risk of being swept away, riding every metaphorical wave of emotion that comes along. However, by failing to acknowledge emotions, which invariably exist, clinicians run the risk of blindly reacting to emotions. Recent commentary demonstrates that failing to acknowledge emotion in clinical life may in fact interfere with rational thinking (Dyche & Epstein, 2011). Further, Peloquin (2005) warns that clinicians may experience de-personalization and decreased job satisfaction when emotions are overlooked.

      The split between bodily emotions and minds may be traced back to Descartes (Damasio, 1994). Alternatively, Damasio proposed the somatic marker hypothesis, suggesting emotions can unconsciously inform actions. Shusterman (2008) offered an illustration. He noted there is an amalgam of bodily sensations and feelings when exposed to stimuli. The bodily reactions originate from stored memories of similar past experiences, and can then bias thoughts and decisions in the new experience. If the

sensations and feelings are generally pleasant, individuals will be more likely to approach the event or object; the opposite is true when unpleasant sensations and feelings are triggered.

Attending to emotions in an open and non-judgmental way opens up new ways of responding in clinical interactions. A recent example from my clinical practice exemplifies: A client refused to call me back after I told him I could not meet in his home due to a pest outbreak. I felt frustrated he did not understand my concerns. Rather than feel the need to justify myself however, I could see what I was feeling, and then simply let the emotions go. My client, who has a life-long history of rejection, was clearly feeling hurt. He had previously seen me as a therapist he could trust. Now, he was probably interpreting my decision as an act of rejection. Rather than remain frustrated, I chose to notice my feelings and focus on my client's perspective.

Tacit professional-practice knowledge. *"Hence thinking is not only necessarily intentional, as Brentano has taught"* (Polanyi, 1983, p. x).

Expertise is often assumed to arise from the meticulous application of evidence-based research. However, professional knowledge and competence is far more than technical concepts and propositional knowledge (Kinsella & Whiteford, 2009). In fact, much of what we know about acting and being in the world often remains unacknowledged or non-conscious (Pinnegar & Hamilton, 2009). This pathic, intuitive or tacit knowing stems from "the way one finds oneself" (Heidegger, 1962, p. 172). Further, it is this form of knowledge that practitioners rely on in the immediacy of practice (Welsh & Lyons, 2001). In moment-to-moment awareness practitioners have a felt understanding of experience (e.g. knowing what to say and do in contingent situations), and this

understanding can be hard to put into words (van Manen, 2007). Because this type of knowledge is hard to articulate, it is often undervalued in practice.

Dreyfus and Dreyfus (1986), Ryle (2009) and Polanyi (1983) were among the first to theorize learning from experience and the acquisition of tacit knowledge. Polyani famously used riding a bike as an example of knowing more than we can say. The work of Benner, Tanner and Chelsa (1996) and Eraut (2010) is also fruitful in articulating the ways in which tacit intuitive knowledge underpins the notion of expertise. These scholars have suggested that experts move beyond rules, guidelines or checklists, only infrequently using analytic skills when faced with highly novel situations. Expertise is often manifested in insights difficult to name on a purely cognitive level (Borrell-Carrio, Suchman, & Epstein, 2004). Expert clinicians may feel something about a situation or observation that seemingly arrives out of nowhere.

Intuitive knowledge, found primarily in the subcortical regions of the brain, comes from internal data normally left at the unconscious level (Epstein et al., 2008). The assumption is, with training, clinicians can access and utilize this information by paying attention to sensations, images, feelings, emotions and thoughts. van Manen (1995) asserted that the phenomenological method attempts to render this type of knowledge intelligible. He referred to the pre-reflective awareness mindfulness meditation cultivates. The intuitive act is passive; one must create the conditions and then allow the knowledge to arise (Depraz, Varela, & Vermersch, 2003). This can be accomplished by slowing down and taking one's time, and becomes infinitely more accessible through mindfulness meditation (Petitmengin-Peugeot, 1999).

I offer an example from my own clinical experience to exemplify the power of intuition. Many years ago, I worked at a long-term care facility with a gentleman who

was very 'difficult' as the result of a stroke. He was combative, non-verbal and physically impaired. Slowly he was beginning to engage in his life again, and after months together I began to understand his rhythms and patterns. One particular morning his screams held a different reverberation for me. Staff were convinced that this gentleman was getting more challenging to care for, and would be better managed at a chronic care facility far from his family. I sensed that something was different about him, but could not put my finger on it. I spoke at length with the medical staff, urging them to rule out other causes for his change. Unfortunately, this gentleman ended up having terminal cancer that was causing his 'behaviours', but thankfully he was not transferred to another facility before this was discovered. In this example, I was able to rely on intuitive judgments revealed through attunement to my client.

> ***Care and compassion.*** *"An open-hearted sense of compassionate interest in others can replace the constant anxiety and irritation of egoistic concern"* (Varela et al., 1992, p. 234).

Compassion and caring are commonly cited as the generative products of mindfulness. Walsh and Shapiro (2006) suggest that the compassion cultivated by mindfulness is similar to many other qualities theorized by Rogers' (unconditional positive regard) and Horney (whole-hearted attention), as well as attentional qualities theorized by Bugental (presence) and Freud (evenly hovering attention). The caring attitude fostered during mindfulness may be similar to Jean Watson's caritas where clinicians, "honor the human dimensions of [professional] work and the inner life world and subjective experiences of the people we serve" (Watson, 1997, p. 50). Literature regarding caritas speaks of the caring moment, a present-oriented moment when two people meet (Watson, 2007). Further, mindfulness may foster the adoption of an ethic of

care (Noddings, 2002) in professional practice (White, 1999). This may be advantageous as an ethic of care has been theorized to enhance ethical and moral practices (Wright-St Clair, 2001).

Epstein (1999) proposed five levels of mindfulness; at the highest level, clinicians are able to express compassion and presence both personally and professionally. Several studies demonstrate the link between mindfulness and caring practices. In one study, researchers demonstrated that clients rated mindfully trained psychotherapists higher on measures of therapeutic relationship, problem solving ability and communication skills (Grepmair, Mitterlehner, & Nickel, 2006). Further, the clients receiving services from mindfully trained clinicians reported greater symptom reduction. Mindfulness may encourage clinicians to be open to all experiences irrespective of labels such as good, bad or neutral. Brought to bear on clinical experience, this attitude has important implications; there are no 'good' or 'bad' patients, nor are there 'interesting' and 'boring' diseases. An example from my own clinical experience may be helpful. While working in a long-term care setting, many people would comment they could never work in that type of setting; the rewards were assumed to be low and excitement absent. I whole-heartedly disagreed. With a mindful view of clinical life, I saw ample opportunities for reward, and considered such labels and categories too simplistic and reductionist.

Conclusion

This paper suggests five ways in which the practice of mindfulness may inform professional practice. Mindfulness is a varied and personal practice, and as such these five themes may not ring true for all practitioners, yet in my own life a mindful attitude has been indispensable in cultivating spaces for me to simply be, attuning me to the entirety of my experiences, allowing me the freedom to see how I construct, and am

constructed, in the day-to-day happenings of clinical life. Epstein (2003a) offers

instructive ideas for how to cultivate such habits of mind. I personally find engaging in

aesthetic practices (e.g. reading and writing poetry, creating and viewing pieces of art), as

well as intentionally spending a few moments in quiet each day help prime me to the

present. Being mindful requires courage, curiosity and the willingness to see value in

stillness and emptiness. This can seem at odds with the rapid pace of professional life, yet

mindfulness is precisely about exposing the inadequacy of 'doing' without the coupling

of 'non-doing' in professional life.

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CHAPTER 4

MINDFULNESS AND PHENOMENOLOGY:

POSSIBILITIES WITHIN QUALITATIVE RESEARCH

Introduction

Raining quite hard now

More than I expected falls

Dancing between drops

Lisa McCorquodale, January 2013

Leading a meaningful life does not mean sorrow and struggle disappear, as the poem I wrote above suggests.   Regardless, life can take on new resonance when lived mindfully. However, determining what constitutes a meaningful life and how mindfulness contributes to meaning is a complex and context-laden task. With echo's of Sandra Harding's (1991) 'epistemic crisis', I often find myself wrestling with many questions when I construct a research project exploring mindfulness. I wonder why I want to know more about mindfulness, and to what end? I question if I hold too much positive regard for the practice to really 'see' another's experience? I wonder in what ways my research benefits the field and society in general.

Mindfulness is quickly captivating the world (Pickert, 2014), and I see rapid efforts to explain and measure its properties (see for example Black, 2015). While such efforts are necessary and are partially responsible for its growth, I wonder if this may be at the expense of deeply *understanding* mindfulness.

Broadly speaking, Western culture has a tendency to want to control and predict behavior through objective, scientific evidence (Sprague, 2005). However, consensus

about any given social concept is both rare and in constant flux. Social scientists have adopted many of the values and beliefs of the natural sciences (e.g. the hypothetico-deductive scientific method) (Fjelland & Gjengedal, 1994), and while this particular method is valuable for explaining and predicting relationships between properties, it holds serious limitations given the contingent and contradictory nature of the social world. This may be particularly true for the study of mindfulness. Most mindfulness practitioners come to see that experience is rarely logical and predictable, and while the knowledge gained through technical rational means is far from irrelevant, its overreliance has minimized understanding *(verstehen)* and prioritized explanation (*erklaren*) (Fjelland & Gjengedal, 1994).

Much of the research being produced today is founded on technical rationality, as a theory of action based on positivist philosophy, which privileges the logical application of a particular form of scientific knowledge (Kinsella & Whiteford, 2009; Ramirez, 2013). Standaert (1993) building on the seminal work of Robert Merton (1968) identifies three outcomes of technical rationality: *economic liberalism* (individual achievement and the free market), *the belief in unquestionable advancement through sciences* (narrowly defined), and a *bureaucratic organizational method* (tight procedures, policies and constraints). Polkinhorne (2004) and Kinsella (2012) highlight this minimizes other ways of knowing, and some argue this leads to a society organized around *fear*, rather than shared responsibility and critical thinking (Giroux, 2005). Instead of an agreed upon consensus of views, researchers and scholars might instead consider a plurality of perspectives, and diverse voices on the question of what mindfulness might be, what it is like for practitioners, and crucially how it might be used (Stanley, 2012b). For instance, Sauer et al. (2013) summarize that psychometric scales used to measure mindfulness may

not adequately grasp what it means to be aware, and advocate alternative approaches to understanding complex questions.

Qualitative methodologies, which seek to understand the nuances of mindfulness, may be useful in correcting the scientific imbalance. The intent of qualitative research is to seek a deep understanding of mindfulness as a practice, instead of an explanation or prediction of its properties. Rather than attempt to psychologize and quantify mindfulness, I agree with Cohen (2010) that studies on mindfulness could, "redefine validity in more subjective/experiential terms, taking more hermeneutic approaches to what commonly constitutes 'significance' (as opposed to statistical significance; a p-value less than 0.05)" (p. 99). Rather than an excessive focus on measuring and defining mindfulness, researchers and practitioners might turn their attention to the lived experience of practicing mindfulness, and how such practices become expressed in everyday life. I align with Merleau-Ponty when he suggests that "what we need to look for are not causes but *reasons* motivating" behavior (Moran, 2000, p. 420). Qualitative explorations of mindfulness reveal important insights (see for example Horst, Newsom and Stith (2013) and Kristofersson (2012)).

More qualitative research is needed to have a fuller appreciation for mindfulness and its potential. To this end, I outline one particular approach to qualitative research, phenomenology, which is particularly well suited to understanding mindfulness. I begin by offering a necessarily brief review of the development of phenomenology in the West, and then offer four ways phenomenology and mindfulness complement one another, and consequently might be an effective pairing in qualitative research: 1. Phenomenological method and mindful awareness; 2. Embodiment; 3. Social critique; and 4. Relational focus.

Phenomenology

What if I were to suggest that there really is no phenomenological method for research? That it is truly a way of thinking and understanding experience without preconceived perceptions (Munhall, 2012, p. 114).

 "What is phenomenology? It may seem strange that this question has still to be asked half a century after the first works of Husserl. The fact remains that it has by no means been answered" (Merleau-Ponty, 1962/2012, p. vii).   Phenomenology, the study of phenomena and the meanings things have in experience, is commonly misunderstood, only made worse by language that is often obtuse and dense. Some suggest this partially explains why phenomenology, though rich and varied, is rarely fully appreciated in the mainstream (Fjelland & Gjengedal, 1994). Part of the confusion arises because phenomenology is both a *philosophy*, coming primarily out of 20th century European philosophy, and a research *methodology* (Moran, 2000). Phenomenology developed in waves forged out of anti-reductionist and anti-constructionist thinking rooted in the turn of the 19th century (Thomas & Pollio, 2001). It grew alongside many other philosophical movements (e.g. Pragmatism, Existentialism, and Hermeneutics) and in one form or another engaged with each of these movements (Moran, 2000). There have been numerous philosophers who have contributed to its development. Correspondingly, there are an abundance of methodologies that have grown along the various philosophical perspectives. Thomas and Pollio (2001) identify at least 18 different phenomenological methodologies, and the methods that follow each variant are equally diverse. For example, some phenomenological studies have numerous participants while others have very small, though rich, data sources (Munhall, 2012).

Despite this varied history Toombs (2001) suggests there are commonalities such

that one can confidently speak of a 'phenomenological approach'. One central feature of

most phenomenological studies is the return to 'the things themselves', Husserl's original

battle cry. To do so is to abandon taken for granted presuppositions about a phenomena.

Phenomenologists assume there are two primary modes of conscious processing: the

natural attitude and the *phenomenological attitude* (Moran, 2000). The natural attitude is

an orientation toward ourselves, others, and the world in which events and experiences

are treated as Objects upon which cognitive operations are made. In contrast, in the

phenomenological attitude our attention turns toward reality as it appears or is given to

us, simply as a flow of phenomena or appearances. In the latter mode, attention is kept to

a bare registration of the facts observed. Life as it is experienced, not as it is

conceptualized, theorized or categorized, is of utmost importance to phenomenologists

(Munhall, 2012).

Many researchers claiming to use phenomenology frequently only cite scholars

who provide specific techniques and procedures to follow such as Colaizzi, (1978) or

Giorgi, (1970). Underpinning these 'how to' approaches are rich philosophical and

theoretical concepts essential to methodological rigour. Failing to acknowledge the

philosophical underpinnings of a phenomenological study weakens the scholarly nature

of the work. For example, criticizing a researcher for devoting too little time to seeking

universal essences of a phenomenon is only relevant for studies using Husserlian or

descriptive phenomenology. I most closely align myself with existential phenomenology,

as advanced by a variety of scholars including Heidegger, Merleau-Ponty, Jean-Paul

Sartre, and Maxine Greene (Morris, 1998). However most phenomenologists owe a debt

of gratitude to philosophers such as Husserl, Buber, Gadamer and Riceour, among others,

who are foundational to the method (Thomas & Pollio, 2001) for a detailed list see

Zahavi, (2008). Researchers have an obligation to understand the founders of phenomenology, and my intention in the following section is to illustrate the growth phenomenology has undergone in the past century highlighting four important philosophers. There are many others who have contributed to its growth and variation, but for the sake of space I chose some of the more prominent figures. I then offer four ways that phenomenology and mindfulness might fruitfully complement one another in a qualitative study.

Edmund Husserl (1859-1938):

Phenomenology was in its infancy through the tutelage of Brentano, Kant, Hegel and Mach, but Husserl's revolutionary philosophy detailed in *Logical Investigations 1900-1901* secured his position as the father of phenomenology (Sokolowski, 2000). Husserl was a mathematician of Jewish descent, banned from teaching in his home country of Germany as a result of Nazi strongholds. His writings were preserved and made available to other philosophers throughout Europe after his death. His philosophy, commonly referred to as 'descriptive' or 'eidetic' phenomenology, stood in opposition to 'objectivism*'*, a basic belief that reality exists independent of consciousness, and 'subjectivism', a basic belief that only internal processes of the mind are verifiable. He believed objectivism and subjectivism to be problematic, and developed phenomenology as an entirely new rigorous science. Specifically, he sought to understand human *consciousness* and to describe phenomena through the *lived experience* (Wild, 1960). His point was that even the mathematical natural sciences are founded on practical activities carried out within the lifeworld (*Lebenswelt*). Rather than presuppose the life world of human activity, Husserl prioritized it as the site of investigation.

He was the first philosopher to offer a systematic means of describing the

lifeworld to investigate the taken for granted, or what he termed the 'natural attitude' (Fjelland & Gjengedal, 1994). His intent was to transcend the natural attitude through a process called 'bracketing' to go beyond theoretic analysis and achieve *epoché*. *Epoché* represents the shift from the natural to the transcendental attitude (Smith & Woodruff Smith, 1995). In the transcendental or phenomenological view, a clear and careful description of human phenomena built from the very essences of 'the things themselves' becomes visible (Thomas & Pollio, 2001). According to Husserl (Husserl & Carr, 1970) an investigator can achieve *epoché* by 'bracketing' or suspending prior understandings, assumptions, and beliefs about the everyday life-world. It is in this state that researchers, "look at what we normally look through" (Sokolowski, 2000, p. 50). The phenomenon, now separated from everyday moorings is available for a clearer description.

Husserl's notion of 'intentionality' marks another important contribution to phenomenology. Husserl argued that humans are always interconnected with the world via intention (Thomas & Pollio, 2001). Intention, in the phenomenological sense, is very different from the ordinary word 'intention', as in 'I intend to carry out a task' (Sokolowski, 2000). Intentionality, in the phenomenology sense, means human life can only be understood as always and already in some context. While this may sound rather simplistic, it stands in stark contrast to prior conceptions of the human mind. Historically, the mind had been conceived of as separate and removed from the world, and in fact from the body it inhabited (Damasio, 1994; Shusterman, 2008).

Lastly, I highlight the contribution Husserl made to phenomenology with his notion of *eidetic intuition* or *abstraction* (Smith & Woodruff Smith, 1995). Central to Husserl's project was the effort to discover or reveal universal essences. Essences are attributes fundamental to a phenomenon, believed to be universally experienced and true.

'Imaginative variation' can be employed to stretch the limits of what might be considered the essence of phenomena (Husserl & Carr, 1970). When sufficiently pushed, through imaginative variation, the borders of a phenomenon may be revealed. For example, how far can a category be 'pushed' before it no longer fits. Can a table for example, still be called a table if it only has three legs or has bench seating attached to it? Such thinking helps researchers fully understand essential features of phenomena.

Many post-Husserlian phenomenologists furthered and altered his original assertions and perspectives in the field (Zahavi, 2008). For example, Husserl's claim that essences were universal and unchanging over time is believed to be naïve and too simplistic for the messy and complex lived world (Moran, 2000). Many also problematize Husserl's assumption that the lifeworld can be transcended. Rather than attempting to transcend our pre-understandings, others question if these offer the very context that makes lifeworld's intelligible (e.g. Ricoeur, 2007).

Martin Heidegger (1889-1976):

Martin Heidegger, a student of Husserl's, became one of the most prolific philosophers of his time writing his classic *Being and Time* (Heidegger, 1962). While he himself acknowledged the influence Husserl had on his thinking, he criticized Husserl's epistemological focus. Heidegger, perhaps because of his religious and philosophical training, argued that an ontological focus was a more purposeful exercise (Sokolowski, 2000). In opposition to descriptive phenomenology, Heidegger's method spawned Heideggerian hermeneutics, commonly referred to as interpretive phenomenology (Fjelland & Gjengedal, 1994).

Heidegger was concerned with 'Being', which is always located in a particular place, situation or context ('*Dasein'*) (Thomas & Pollio, 2001). This situatedness is

captured in Heidegger's (1962) notion of '*thrownness*'. Humans always find themselves thrown into situations beyond their doing or wishes. Choice and freedom do not come from transcending or escaping the situations, but rather come from moving forward in hopes of landing in a new one. Even when actions are impossible (e.g. Victor Frankl (1984) was a prisoner in Nazi Germany), people can always 'choose' their attitude. An undercurrent in much of Heidegger's work is culture or tradition, or of being-in-the-world. In many ways Heidegger's work hints to the criticism inherent in phenomenology: "to uncover, to disinter, to get at the roots of the traditions of western thought in order that this hardened hold may be loosened and that we may better understand the directions taken and possibilities for alternative ways of thinking" (Darbyshire, Diekelmann, & Diekelmann, 1999, p. 19). This strand of phenomenology has been widely accepted in health and social care research (Benner, 1994; Diekelmann, 1989). Some (e.g. Crotty, 1996) have been critical of how nursing scholarship in particular has accepted tradition at face value in interpretive phenomenology. However, Darbyshire et al. (1999) counter that, "the body of interpretive scholarship which Crotty criticized is characterized, not by a supine acceptance of tradition, but by a sustained and rigorous questioning and critique of everyday understandings and practices" p. 18.

The hermeneutic circle was central to Heidegger's (1962) work, but given his ontological focus his conception of the circle differed from those offered by earlier visions such as Schleiermacher and Dilthey (i.e. an interactional examination of a text's whole and parts). Heidegger's hermeneutic circle referred to the interplay between self-understanding and understanding of the world. The hermeneutic circle could no longer be perceived as a helpful philological tool, but rather represented an existential task confronting each human (Ramberg & Gjesdal, 1984). For Heidegger, our culture

provides a frame for understanding, and this is the initial hermeneutic task: lay aside our

tendency to immediately interpret and, "render explicit and thematic what is at first

implicit and unthematised" (Crotty, 2003, p. 97). Existentials may then be grasped

which ultimately leads to an enriched understanding of existence in the world. For

Heidegger then, the context (i.e. one's horizon of understanding) is critical to meaning

making. Further, understanding is only available in subtle and often incomplete ways.

Such glimpses always remain situated as wo(man) can never disengage from

situatedness. Heidegger emphasized phenomenology as being about seeking *meaning* of

phenomena rather than merely a *description* of essences as Husserl suggested (Moran,

2000).

     Maurice Merleau-Ponty (1908-1961):

     Maurice Merleau-Ponty was born in France, and received his doctorate in Paris.

His most famous work remains *Phenomenology of Perception* (Merleau-Ponty,

1962/2012). His life was cut short because of a stroke at the age of 53, but his ideas to

that point were impressive (Moran, 2000). He carefully studied Husserl's works and

critiqued his starting place for interpretation. Merleau-Ponty prioritizes the *body* in ways

Husserl and Heidegger had not. While Husserl and Heidegger emphasized epistemology

and ontology respectively, Merleau-Ponty offered a philosophy of "meaning that is

revealed in real life – where work is done and where human beings live together and

enter into dialogue" (Thomas & Pollio, 2001, p. 12). For Merleau-Ponty (1962/2012)

phenomenology tries, "To give a direct description of our experience as it is, without

taking account of its psychological origin, and the casual explanations which the scientist,

the historian, or the sociologist may be able to provide" (p. vii). As opposed to Husserl,

who offered that this prereflective state might be accessed in transcendental reflection,

Merleau-Ponty suggested examining breakdowns in the bodily circuit would bring to light routines and procedures which are hidden and assumed in our normal conscious state. He chose *perception,* as opposed to brain scans or narratives and theories, as the means to describe human experiences. For him perception, more so than thinking or language, is concerned with the ongoing transaction between a person and their world.

Merleau-Ponty states, "we never cease living in the world of perception, but we go beyond it in critical thought – almost to the point of forgetting the contribution of perception to our idea of truth" (Merleau-Ponty, 1964, p. 418). Much like during meditation exercises, perceptions of sound, sight, thought and emotions are prioritized by Merleau-Ponty. He spoke of a return to the perceptual experience, which is inherently pre-conceptual, "to rediscover, along with structure and the understanding of structure, a dimension of being and a type of knowledge which man forgets in his natural attitude" (Moran, 2000, p. 402). For Merleau-Ponty, what is brought to awareness reveals what is meaningful. For example, when I enter my living room do I notice the light streaming in through a window, or do I notice the inevitable clutter and mess of a room 'ravaged' by my two small children.

Merleau-Ponty's emphasis on the body reflects many mindfulness practices whereby practitioners become aware of bodily postures, sensations, and feelings before noticing the activities of the mind (Stanley, 2012a). It is not about observing one's own and other's bodies from the 'outside' but rather feeling one's own bodily sensations from 'within'. In the words of Merleau-Ponty, "mindfulness involves getting in touch with the 'lived' body of experience, rather than the 'objective' body of science. It involves knowing the 'spontaneous' body of the moment as well as the 'habit-body' of sedimented routine activity" (Stanley, p. 207). For Merleau-Ponty, the body and mind were not two

separate though related concepts following Descartes, but rather he stated, "I am not in front of my body, I am in my body, or rather I am my body" (Merleau-Ponty, 1962/2012, p. 150). This is not to say that he believed in a materialist understanding of a person as nothing more than a physical *object*. In rejecting the traditional concepts of mind and body, subject and object, as well as the ontologies they imply (dualism, materialism, and idealism), Merleau-Ponty repositioned the body as a point of insight and significance (Thompson, 2007). Rather than the received view of the body as a primarily passive physical machine Merleau-Ponty saw the body as the *lived body* (Leder, 1990): "the phenomenological fact that we are always bodily in the world" (van Manen, 1997, p. 103).

For Merleau-Ponty the relation between self and the world is not that of subject to object, but like Heidegger, being-in-the-world. To belong to the world in this way means that our primary way of relating to things, "is neither purely sensory and reflexive, nor cognitive or intellectual, but rather bodily and skillful" (Thompson, 2007, p. 247). For example, when drinking from a cup I might not identify by its objective location in space but by its egocentric relation to my hands, and I reach for it keeping my intent to sip from it at the forefront. This highlights the '*noema*' (cup) of the object of perception, and my '*noesis*' is represented by my attention towards it, in keeping with Husserl's original work (Sokolowski, 2000). For Merleau-Ponty, however, the lived body always exceeds this noema/noesis intentionality. Most of the time one's body is not presented as an intentional object but is implicit, tacit, or what he calls 'prereflective'. The body is doubled in the sense that is it both subject and object. Mindfulness meditation practices often seek to reach these prereflective meanings (Kabat-Zinn, 2005).

Max van Manen (1942-):

Max van Manen, a Canadian phenomenological scholar, was born in the Netherlands and trained in the more practice oriented Utretch tradition. van Manen is potentially more 'useful' when a neophyte researcher is looking for a 'how to'. His books (van Manen, 1997/2016) are infinitely more accessible than philosophical phenomenology texts, however his methods honour many of the important philosophers in the field. Indeed Munhall (2012) states that his method is the most faithful to phenomenological philosophy. van Manen views phenomenology as both a philosophy of being as well as a practice. He argues that phenomenological research is not particularly useful for illuminating areas in need of change, in either policy or practice (Munhall, 2012). However, Munhall also states that unlike other phenomenological methods, such as those of Colaizzi, (1978), Giorgi, (1970) or van Kaam (1966), van Manen's is sufficiently ambiguous to afford researchers the ability to go where the phenomena presents itself.

Van Manen's four lived existentials offer a means to deeply explore lived experience. Existentialism is a philosophy of who we are and how we come to live an authentic life. It originated with Søren Kierkegaard who advocated an alternative to philosophy's traditional remoteness from life (Morris, 1998). His aim was to explore the difficulties of existence. The founders of existentialism found the phenomenological method suitable for their enquiries. Phenomenologists ascribe importance to context, and this context is embedded in time, space, embodiment and relationships (Munhall, 2012), or what van Manen (2007) calls the four lived existentials. The four major existentials of human existence are lived time, lived body, lived other and lived space, and together they serve as the context upon which human life and experience always emerge (Thomas & Pollio, 2001) (see table 1 for an adaptation of van Manen's and Munhall's four lived

existentials). Lived space refers to how the phenomena are experienced in particular

places and environments. Here, researchers gain a sense of spaces, including particular

smells, appearances, and sounds (Cohen, Kahn, & Steeves, 2000). Lived body refers to

the fact that we are also bodily in the world. In this way experience is determined by the

ways in which our bodies are presented and perceived. For example, does a mother see

her body as hers alone, or something she shares with her children? Lived time refers to

how the passage of time is perceived (fast or slow) or the extent to which someone might

live in the past, present or future. Lived other refers to the connections inherent in human

interaction. For instance, the way in which a mother perceives raising her children as an

independent or communal task.

Table 1

Four Lived Exisentials: adapted from Munhall (2012) and van Manen (1997):

Existential Dimension	Foci of the dimension
Lived space (spatiality)	Explore the phenomenon from the space in which it occurs
Lived body (corporality)	Explore the body and embodiment of the phenomena, recognizing that the mind and body create experience
Lived time (temporality)	Explore the time in which the phenomena is lived (historicity), and also how the passage of time is processed by participants
Lived other (relationality)	Explore how participants are in relationships in their lives

      Now that I have offered a brief overview of phenomenology and highlighted key

scholars in the field, I turn to discuss four themes that point to the commonalities between mindfulness and phenomenology. Given these suggested commonalities these two approaches might be a fruitful pairing for my proposed qualitative study.

Fruitful Dialogue: Mindfulness and Phenomenology

Is it not the case that all human institutions – to which we might add: as well as the whole of modern life – are intended to prevent mankind from feeling their life, by means of the constant dispersion of their thoughts? (Hadot, 1995, p. 235).

Phenomenology and mindfulness promote strikingly similar attitudes and perspectives, though the former is a study of consciousness, and the later might be seen as a study of the mind. Phenomenology, as both a philosophy and method, attempts to name direct experience through perception (Willis, 1999). Mindfulness may be thought of as related to the phenomenological terms 'intentional' (life is related to objects) and 'immanent' (life is related to oneself) (Depraz, Varela, & Vermersch, 2003). In fact, some suggest mindfulness' recent rise in popularity may result in a partial renaissance for phenomenology (Walsh & Shapiro, 2006). For example, mindfulness has been offered as a method to help researchers new to phenomenology understand what the philosophical founders meant by various terms such as 'reduction', 'essence' or 'pre-reflective awareness' (Owen, 2013). Nonetheless, few researchers have made the link between phenomenology and mindfulness explicit. In an attempt to redress this gap, I highlight four ways phenomenology and mindfulness might complement one another in a qualitative study.

Phenomenological and Mindful Awareness

The following, written about phenomenological reduction, may resonate for those familiar with formal meditation practices:

The mind does not 'seize upon' the object of analysis and subdue it but attempts to behold it, to allow its reality, its beauty and its texture to become more and more present. Even here consciousness is still active, but the act of thinking is different: it is an act of reception which holds the thinking mind back from closure and returns again and again to behold the object, allow words and images to emerge from the contemplative engagement (Willis, 1999, p. 98).

Husserl was the first phenomenologist to emphasize the importance of seeing things as they really are, beyond our socially received views (Smith & Woodruff Smith, 1995). This process is quite similar to the non-judgmental attitude and intention experienced by mindfulness practitioners. As Warren, Brown and Cordon (2009) note, "Indeed, the study of the nature of mindfulness is inherently phenomenological, as it concerns the subjective nature and uses of the conscious mind. Further, mindfulness bears several striking similarities to the phenomenological attitude" (p. 64). While Husserl was more positivist in his knowledge beliefs about a reality 'out there', I, and most mindfulness practitioners, recognize that all knowing is, in a sense, subjective as it is always related to and constructed by the person engaged in knowing. This is why a contemplative or mindful view of lived experience is sometimes called *the middle way* (Varela, Thompson, & Rosch, 1992). Experience need not be dichotomized as raw, pure and ineffable, *or* molded and deformed by language and conceptualizations. A mindfulness practitioner seeks to see experiences as they are, but also see *I* as the filter of this process of interpretation.

Each approach offers a method of see things as they are. Phenomenological perspectives answer two important questions: 1. What are we conscious of (*intentionality*); and 2. What does our world consist of (seeks the *lifeworld* rich with

meaning) (Park Lala & Kinsella, 2011). For example, Maurice Merleau-Ponty believed it is through the body and with the body that people perceive the world, and this pre-reflective "perception does not give me truths like geometry but presences" (O'Neill, 1974, p. 198). Presences are generated by returning to a first level of awareness, before conceptualization, to become aware of what is present in the lifeworld (Willis, 1999). Heidegger similarly spoke of relating to the world through in-being, or being-involved-with the things of our world (van Manen, 1995). Both presences and being-involved with the world might be the same qualities mindfulness instills. The act of noticing our intentionality defines character: "Tell me what someone notices, and I'll tell you who he or she is" (Thomas & Pollio, 2001, p. 14). For those who teach Mindfulness Based Cognitive Therapy (Crane, 2009; Segal, Williams, & Teasdale, 2013) this statement might hold particular resonance. As part of my clinical work, I teach mindfulness practices to people who are living with difficulty. My intent is to enable them to see for themselves how their intentionality (i.e. what they notice) defines their lifeworld. Varela et al. (1992) call this way of perceiving the world *enactive* cognition. Cognition in this sense is not the representation of a pregiven world by a pregiven mind, but is the enactment of a world and a mind. This effectively shifts the field of cognitive science from cognitivism to a closer connection with human experience.

Mindfulness is considered to be immanently pragmatic, whereas the phenomenological method is at times accused of remaining theoretical, failing to come close to actual lived experience (Varela et al., 1992). However, I believe both methods have the potential to be quite practical. In coming to know things as they are, whether through mindfulness (bare awareness) or the phenomenological attitude (e.g. essences, bodily perceptions), the common human tendency to categorize and label objects as good,

bad and neutral using past experiences as reference points might be transcended.

Otherwise, experiences are rarely seen impartially, and actions may be based on

misinformation and misidentification. This pattern of perception runs the risk of

superficial, incomplete and distorted pictures of reality (Brown, Ryan, & Creswell, 2007).

Once things are seen with more clarity, wise action may become possible. I believe each

practice may enhance the work of the other.

The Primacy of the Body

"While in one sense the body is the most abiding and inescapable presence in our

lives, it is also essentially characterized by absence. That is, one's own body is

rarely the thematic object of experience" (Leder, 1990, p. 1).

Maurice Merleau-Ponty is accurate in suggesting it is in the body that the 'silent

consciousness' of our subjectivity resides (Turner, 2008). The body, while practically

speaking, is always present, it is paradoxically virtually ignored in many everyday

experiences. Alternatively, both mindfulness and phenomenology place the lived body as

the primary mode of investigation. I believe people typically get lost in thought or

outside experience, with little regard and awareness for how these thoughts and

experiences are expressed through the body (Leder, 1990). Wild, (1960) identifies that a

person cannot even recognize a hand as his or her own from photographs. In this way a

body is not an object, but a network of intentions stretching out to the things at hand,

which can be reached and used. The body in this sense is the primary mode of coming to

know the world.

Merleau-Ponty, (1964) led the phenomenological prominence of embodiment, and

distinguished between the lived body (*Leib)* and the objective physiological body

(*Kröper*). Through the lived body people apprehend and interact with the world; as a

medium and not merely as an object (Toombs, 2001). The lived body is in sharp contrast to the medical body as object; a view that has shaped the way health and social care professionals gaze upon a body. This has a tendency to subjugate other ways of viewing, including lived experiences, cultural preferences, emotional relations and interpretative acts. As such, considerably more is known about the physical body, than about human experience and meaning ascribed though the body. The lived body is always in this or that situation, positioned and positioning relative to some task at hand, fusing the various senses and movements into a unity of experience (Merleau-Ponty, 1962/2012). Likewise, in illness, this unity is disrupted and a person's being-in-the-world becomes altered. As Grosz (1994) offers it is through the body "placed in the world […] which makes relations between me, other objects, and other subjects possible" (p. 86I).

Likewise, mindfulness uses the body as a means to get at lived experience. Through mindfulness, discrete perceptions are seen in bare awareness, without cognitive processing, in an attempt to understand what underpins the whole of experience. In many mindfulness practices, the body serves as both an intentional and orientational locus (Varela et al., 1992). For example, in walking meditation and a body scan, practitioners might become aware of how they hold themselves in the world, both figuratively and literally. Practitioners gain a sense of being embodied, of having a body. Through direct unmediated observation of the body and accompanying thoughts, feelings, sensations and emotions, all of which are impermanent, freedom and alternative ways of being in the world can be revealed. Practitioners might be able to ascribe new meanings to their experience. For example, my body might be seen as both social and cultural when noticing the way I sit or walk reflects the social and cultural environments that surround me (Toombs, 2001). From here I can decide if the noted habits and patterns feel

authentic or assigned, or perhaps more simplistically how usefully they are in my life. Knowing the body as 'object' is important for medical and scientific purposes. However, seeing the body as a reference point to knowing self and others may enable insights and understandings about human experience previously ignored. Both mindfulness and phenomenology offer the potential to unlock this form of knowing.

Social Critique

At first glance, contemplative mindfulness and critical inquiry seem at opposite poles of a reflective spectrum, yet Eastern and Western philosophers have described a dual dimension to reflective thought that incorporates both. Contemplative practices, such as mindfulness meditation, open a broad perspective on a problem and lead to clarity of intent that may be clouded by incessant probing (Webster-Wright, 2013, p. 557).

The original Buddha, Siddhartha Gautama, may be seen as a man in critical relationship with his culture. He critiqued many of the assumptions held within the Indian caste system, questioning why social position was an inherited birthright (Adorjan & Kelly, 2008). Alternatively, he argued that a person only becomes 'good' through their intentions, actions and consequences in the world. Despite these historical moorings, mindfulness is commonly situated, understood, and researched as an individual practice, rather than as a way of engaging in social critique (Cohen, 2010). This is likely reflective of ideas born of the Enlightenment and Romanticism, where meditation and other practices rooted in religion and spirituality were relegated to private spheres, and seen as individual states of consciousness (Stanley, 2012a). Stanley furthers that while there may be some validity to seeing Buddhism as a psychology (i.e. an individual practice), there are also risks. If mindfulness is only seen as an individual therapy

concerned with helping people to feel better and carry on working and reproducing society, then paths which hold the potential to challenge society at its roots will be missed. Many believe that Kabat-Zinn's teachings are inherently individualistic and lack regard for systemic suffering (Hickey, 2010). However, Jon Kabat-Zinn (2013) himself offers, "MBSR was conceived of and functions as a public health intervention, a vehicle for both individual and societal transformation" (p. 282). I believe that mindfulness may be both an individual practice (e.g. a way to cope with everyday challenges), and one that can bring about social change (e.g. questioning social ideals of institutions such as patriarchy, class or race), and is thus of both/and quality (i.e. a private and public practice). For example, the work of many critical social theorists, such as Joe Kincheloe (2004) or Paulo Freire (2002) are essential readings for anyone wishing to teach Mindfulness-Based Stress Reduction (Saki Santorelli, personal communication, February 25, 2014). As Shusterman (2008) asserts, any successful challenge of oppression must include an exploration of bodily habits and feelings that express the domination. Doing so frees individuals to co-create their identity, shaking any shackles assumed to be natural or inevitable (Markula, 2004).

I believe mindful practices may help people manage the stress in their day-to-day lives, but may also help them redefine social expectations and codes. Likewise, Park Lala and Kinsella (2011) note that "Phenomenology has the potential to offer a critique of normative perspectives, of master narratives, or of dominant discourses" (p. 204). However, as Crotty (1996) laments, many contemporary phenomenologists fail to emulate the critical spirit inherent in the philosophy forgetting the moto 'criticize the world; it needs it!'. Husserl understood that cultural heritages (constructionism) often pre-empt individual meaning making (constructivism) (Crotty, 1996). His response was

to attempt to bracket out these assumptions so as to see more clearly. After Husserl, Merleau-Ponty identifies the transformative and critical edge to phenomenology:

> not because phenomenology intends to desert the world in favor of pure consciousness, but because we can only make those intentional threads that attach us to the world visible by slacking them slightly. The world is, as Merleau-Ponty writes, wonderful. It is a gift and a riddle. But in order to realize this, it is necessary to suspend our ordinary blind and thoughtless taking the world for granted (Zahavi, 2008, p. 665).

In this sense Merleau-Ponty recognized the body as tethered to the world, and believed that seeing these threads rendered new possibilities visible (Butler, 1988). Paul Ricoeur (2007), a more recent philosopher linked to phenomenology, has been explicitly tied to critique. He believed our world is one in which interests are reduced almost to mere instrumentality (Thiselton, 2009). Ricoeur saw that traditional forms of reflection on social life could lead to a vicious cycle of (re)interpretation replete with dogmatic prejudiced readings. A solution, Ricoeur posed, was not just reflection upon prejudices, but willful '*distanciation*' or temporary suspension of judgment in order to see that which is often invisible (Thiselton, 2009). Given the potential for critique offered by both mindfulness and phenomenology, they may be well suited to critique social contexts in the hopes of creating more just societies.

Relational

Finally, mindfulness and phenomenological both emphasize relation. In phenomenology, the entire notion of intentionality as first introduced by Husserl (Zahavi, 2003), clarifies that the fundamental way of engaging with the world is in relationship, through co-construction, rather than through alienation and distance. We are always and

already interconnected with the world through intention: "phenomenology, with its emphasis on deeply connecting with and understanding the human being in his or her wholeness and specificity" (Thomas & Pollio, 2001, p. 8). In expressing the inseparability of subject and object, Heidegger (1962) identifies Being as 'Dasein' or 'being-in-the-world'. The hyphens express the inseparability of 'a being' and 'the world'. Even when we are alone our beliefs, values, attitudes, and stances express the existential given of 'being-with' rather than being-separate from. Furthermore, it is through our bodies that we intend the world and others in it. We learn and relearn who we are throughout life on the basis of our encounters with other people. As Merleau-Ponty says, our relationships with others form the basis of history. As infants we focus on our mother's face – not to *objects* in the world (Moran, 2000).

This same stance may be familiar to those who have a mindfulness practice, as highlighted by Shapiro and Carlson (2009) who note that mindfulness is about attending and intending with compassion and connection. Thich Nhat Hanh's (1976) 'inter-being', which assumes interconnection between every one and every thing, may be akin to Heidegger's 'being-in-the-world'. Many researchers find that mindfulness practices allow a growing sense of connection and positive regard for others (e.g. Bailie, Kuyken, & Sonnenberg, 2012; Bihari & Mullan, 2012). One interesting study taught mindfulness practices to early years educators. One participant's quote nicely sums up the relational nature of mindfulness:

> The feelings of well-being I have due to my reserving judgment and being in my body when talking to my colleagues has been tantamount to a feeling of what can be described as 'Grace' and this I feel is projected out to the other person. (Burrows, 2011, p. 4.)

Deluze and Guattari offer the term rhizome to signify that which has "no beginning or end; it is always in the middle" (Massumi, 1992, p. 25). Assuming relationships are rhizomatic people inherently change through engagement with one another. I similarly believe that when someone practices mindfulness, they, and perhaps everyone they encounter, may be changed through this relationship. To fully appreciate this process research methodologies that seek understanding, in addition to explanation, are necessary.

Conclusion

Understanding what mindfulness is, and what it offers practitioners, is a difficult and messy undertaking. The practice is inherently experiential, and life experiences are so varied that it may be impossible to arrive at a consensus on mindfulness. As one traditional image clarifies, "words are like fingers pointing to the moon – guiding us where to look, but not something we should mistake for the moon itself" (Heaversedge & Halliwell, 2012, p. 13). However, I do not see this as a flaw, but rather as an opportunity to see the variety and multitude of truths that exist in this world. Qualitative research does not aim to generalize across a broad swath of populations, but rather seeks to deeply understand a phenomenon from the intimate perspective of those under study. From here the findings can be viewed and considered for applicability to other contexts and situations.

In this paper I have outlined phenomenology as a potential methodology to better understand what living mindfully is like. I highlighted four themes that draw attention to the potential compatibilities between the two perspectives. I first suggested that both practices support a particular way of attending to the world. Each can only benefit from the other's way of viewing the world to come closer to knowing experience. Secondly,

mindfulness and phenomenology both privilege the 'lived body' in a way contemporary science and medicine tend to subvert to corporal and objective understandings. Such privileging is a unique and needed view to bring more compassion and respect into the world. Thirdly, each practice offers a means of critiquing the social world. Criticism is useful in that such acts may illuminate new ways of being, as offered by Gergen and Hosking (2006):

> We are free to create together new realities and related ways of life. We need not be bound by any conception, tradition, or vaunted claim that degrades or destroys the processes by which meanings come into being. In effect, we have an enormous canvas available for painting new futures. (p. 301.)

Lastly, I have suggested mindfulness and phenomenology each offer a relational view of the world. This may be something that is sorely needed in a world that is arguably increasingly solitary and ego-driven. Merleau-Ponty believed we can come to know who we are more in relation than we might in isolation, similar to Buber's I-Thou relationship where reciprocation can be validating and respectful (Thomas & Pollio, 2001).

One of my favourite quotes comes from T.S. Eliot (1944): "The meaning of our daily lives lies in the experiencing of our daily lives, in the consciousness of the moment, at the still point; there is the dance – and there *is* only the dance" (p. 185). Mindfulness reminds me on a daily basis to notice the dance. In this paper I have argued that researchers may want to consider seeking out the multitude of dances that exist in this world. Trying to merely explain the steps of a dance pales in comparison to the actual experience of dancing. Likewise, only explaining and predicting mindfulness, while a worthwhile pursuit, can leave one feeling bereft of the joy and wonder that is the dance.

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CHAPTER 5

MINDFULNESS AS FEMININE VOICE:

A QUALITATIVE PERSPECTIVE

"To be a feminist, one has first to become one" (S. Bartky, 1990, p. 11).

"When women become feminists the crucial thing that has occurred is not that they have learned any new facts about the world but that they have come to view those facts from a different position, from their own position as subjects (Alcoff, 1988, p. 434).

Introduction

There are few life experiences that can change a woman's life so dramatically as motherhood. For women who work, this change often accompanies immense challenge. This paper explores the findings from a qualitative study about how mindfulness, as a way of being in the world, contributes to the lives of six working mothers who parent young children. Overall, mindfulness enabled them to live their lives in ways that may be seen as more feminine, a concept I clarify later in this paper. These women were more open to feminine ways of being in the world; these ways of being included the way they 1) formed relationships (Gergen, 2009; Mackenzie & Stoljar, 2000), 2) engaged in care and caring (Noddings, 2002; Tronto, 1993) and 3) responded to emotions (Benner, 2000; Boler, 1999; Damasio, 1994). As each of the participants became increasingly grounded through mindful awareness, they were able to paradoxically note the conventional and constructed nature of the self and their reality as a result of patriarchy. Doing so may be the only chance for forming a post-patriarchal society (Gross, 1993). In this chapter I start with a brief overview of patriarchy and how it impacts women's lives. I then explore what it means to live a more feminine existence. Next, I offer findings from the

study in narrative form. In a world where it is at times expressly shameful to be female (Anderson, 2015), mindfulness appears to offer women the chance to explore and even valorize femaleness. Each of these three themes can be found in the narrative I share below and are explored in more detail in the discussion.

Patriarchy and Feminist Awareness

Patriarchy, understood as the unequal distribution of power between genders resulting in female oppression (Christ, 2016), may have gained prominence through complex social, technological and intellectual factors (Gross, 1993). Interestingly, women's ability to reproduce warriors in an era increasingly fascinated with warfare is seen as a contributing factor. The rise of agriculture also replaced the previously female-centric labour patterns of horticulture. Despite this, women were initially able to 'marry' their reproductive responsibilities with productive cottage industry roles. The advent of industrialization meant women were ultimately unable to reconcile their reproductive lives with factory and office positions. These major cultural shifts created normative expectations for primarily western women and men that heavily favoured one gender (Boucher, 1995). Almost as soon as this shift took place feminist writings emerged rejecting the separation of private and public spheres (for example Mary Wollstonecraft's *A Vindication of the Rights of Women* was first published in 1792).

Today, very few roles rely on physical prowess; even military roles rely on intelligence, training and skills. To insist that women specialize in nurturance and reproduction, and by extension remain inferior to men professionally and economically, is hard to justify and further minimizes the public role of nurturance. Regardless, patriarchy remains the dominant narrative in many women's lives from a very young age (Johnston & Swanson, 2006). The existence of birth control, much lower infant and

maternal mortality rates, and a vastly increased lifespan means that women cannot focus their entire lives on reproduction even if their society continues to idealize outmoded models (Gross, 1993).

Ideologies such as patriarchy shape individual actions by sanctioning and rewarding particular roles and behaviors. The work of Foucault (Dreyfus, 1983) and Gramsci (Zene, 2013) has been used to describe how systems like patriarchy are preserved by establishing expectations that can be successfully fulfilled by the dominant cultural group, while ensuring the failure of others. For instance, rigid binaries surrounding work status (employed or at-home) and mothering (good mother or bad mother) set women up in dichotomous positions that often result in irreconcilable demands (Johnston & Swanson, 2004).

To see beyond these polarities, women may need to develop a *feminist self-consciousness or awareness*. This awareness "specifically involves the acquisition of the habit of recognizing that males and females tend to be treated differently in this society for morally unjustifiable reasons and that this has a particularly negative effect on women" (Woolfrey, 2002, p. 64). Feminists, despite their differences, seek theories that respond to this reality and aim to develop strategies of resistance (Jaggar & Bordo, 1989). In coming to recognize the damaging impact of patriarchy on oneself and the broader community women are more inclined to recognize and seek new ways of being in the world (Jaggar & Bordo). Failing to do so can result in what Johnston & Swanson (2004) notoriously coined 'the mommy wars' whereby women criticize and judge each other for a variety of reasons including employment status. An alternative is the "realization that others are made to suffer in the same way I am made to suffer [and] lies the beginning of a sense of solidarity with other victims" (Bartky, 1995, p. 400). Such realization arises

through the development of a feminist consciousness (Klein, 1995; Maitra, 2014; Woolfrey, 2002), resulting in a richer understanding of how patriarchy permeates a woman's life and other possibilities for living.

Background

This paper comes out of a phenomenological study about what mindfulness means to working mothers with young children. Living mindfully seemed to offer women a more nuanced understanding of how patriarchy impacted their lives. I met with six women to better understand what it is like to mother young children while crafting interesting and meaningful careers. As a working mother myself, I am acutely aware of the undercurrent of patriarchy that often makes mothering and working complicated. I was particularly interested in how mindfulness practice influences this experience. Each of the women had a mindfulness practice, cultivated through formal intentional focus (e.g. meditation) and more informally through noticing daily life (Wise & Hersh, 2012) (see Table 1 for participant details). Mindfulness is about "paying attention in a particular way; on purpose, in the present moment, and nonjudgmentally" (Kabat-Zinn, 2005, p. 145). Mindfulness involves cultivating *intention* (i.e., the choice of where and how we direct our attention), a particular type of *attention* (i.e., productively disengaging from moment-to-moment experiences), and particular *attitudes* – such as non-striving, acceptance, and curiosity (Kabat-Zinn, 2013; Shapiro & Carlson, 2009).

The women were recruited to the study through two key informants who each approached the participants and invited them to contact me if they were interested in participating. In total seven women expressed interest, and six met the following inclusion criteria: employed at least 25 hours per week in a health or social care profession for at least 10 years; parent between one and three children; and self-identify

as living mindfully with a formal mindfulness practice. Self-identification of significant

unresolved trauma or emotional unwellness precluded women from participating. Data

collection methods included participant-drawn body maps (see Gastaldo, Magalhaes,

Carrasco, & Davy, 2010 for a description of body mapping) as well as transcribed

interviews with the six participant about their body maps. Body maps use,

> drawing, painting or other art-based techniques to, visually represent aspects of
>
> people's lives, their bodies and the world they live in. Body mapping is a way of
>
> telling stories, much like totems that contain symbols with different meanings, but
>
> whose significance can only be understood in relation to the creator's overall story
>
> and experience (Gastaldo, Magalhaes, Carrasco, & Davy, 2010, p. 5).

In essence, research participants trace their body as a template on which the physical and

emotional journey that his or her embodied self underwent is documented (Hartman,

Mandich, Magalhaes, & Orchard, 2011). The women were further interviewed to better

understand what experiences they were depicting on their body maps. The transcribed

interviews, the actual body maps, and researcher reflexive journaling and notes

constituted the data.

Each of the women worked in a helping profession in south and southwestern

Ontario, Canada (see Table 2).

Phenomenological (Cohen, Kahn, & Steeves, 2000; Munhall, 2012) and visual

data analysis methodologies were employed (Grbich, 2013; Rose, 2012). The

interpretation is partially reflected in the constructed narrative shared below, and is more

fully explored afterward. Phenomenology is arguably a critical practice: "thinking within

the sphere of tradition[…]unthought from the thought[…]As such it is freed by tradition

from being a mere thinking back, to becoming a thinking forward" (Lovitt, 1977, p. vii).

Table 2
Participant Profiles

Participant Name (Pseudonym)	Children	Work Status	Marital Status	Mindfulness Practice
Sally 31 years old	19 month old daughter Expecting second child	Works Fulltime in a Social Services position	Married, and spouse works fulltime	Meditation practice 5-30 minutes 4-5 days per week since she was a child
Loja 48 year old	Son 11 years old and daughter 13 years old	Works a few jobs that equal fulltime work in social services	Divorced and remarried, has primary shared custody	Various forms of meditative practices for 36 years; some form of daily practice 5-60 minutes
Sonyia 40 years old (this is a pseudonym for myself as participant-researcher)	Son 7 years old and daughter 4 years old	Works fulltime in a flexible career in both academia and health care	Married, spouse works full time	Daily meditation practice 10-45 minutes/day for 11 years
Alicia 41 years old	Daughters 7 and 5 years old	Works fulltime in a flexible position in healthcare	Married, spouse works full time	Seated meditation 5-7 days per week for 15 years
Joanne 40 years old	Son 7 and Daughter 5	Part-time in health care	Married, spouse works full time	Seated meditation 20 minutes per day for 10 years
Nina 39 years old	Twin girls 6.5 years old	Works part time in education for 13 years	Married, spouse works fulltime	Daily 20-60 minute seated mindfulness meditation for 4 years
Siobhan 39 years old	Daughters 8 and 5 years old	Fulltime reduced in health care	Married, spouse works fulltime	Daily seated meditation for 15-20 minutes for 15 years

Phenomenology gathers insights from lived experience, but as an approach, it is fairly

broad. For me, and others (e.g Nenadic, 2015), phenomenology at its most rudimentary,

is about questioning, testing, and rethinking assumptions and the taken for granted about

the life experiences under investigation. From there, new interpretations that better

account for that experience can be understood. I saw these women as expressing feminist

awareness as a result of their mindfulness practice. They seemed to recognize the

paradox between their lived experiences and what the social world 'allows' many

working mothers. Much like Sartre's (1956) contention that 'the other teaches me who I

am', the women in this study were able to see the normative view of working mothers

without necessarily adopting it. As one of the women, Loja, shared:

> So for me I had to really deconstruct what it really means to be a wife and mom,
>
> and the ideals that had shaped my life, and nuclear family. When I say family I
>
> don't mean a tribe in Africa, I mean our middle class, urban Caucasian family life.
>
> Which I didn't consciously want or create, despite thinking of myself as a very
>
> independent, spirited women. But…It is what I co-created with society. You
>
> know, capitulated. Believing it was the goal.

I chose to construct a fictional narrative to represent the women's experiences

using the images and words the women shared with me. The story figures around a

fictional character Chelsey, a young woman undecided about motherhood. Chelsey's

concerns are reflective of social expectations and ideas the women shared with me about

their life experiences. The fictional story depicts a conversation that Chelsey has with the

six women in this study. While this conversation did not actually happen, the narrative

includes quotes and images that came directly from the body map sessions. The

women's experiences are reflected in the narrative as they respond to Chelsey and one

another. I crafted this story believing that narratives, as a form of representation, can

powerfully captivate attention and speak directly to the heart of an issue (Connelly & Clandinin, 1990), even when the project does not have a narrative methodology. I write with narrative truth meaning some of what I write is comprised of composite experiences of the women's stories (Jeong-Hee, 2016). While the conversation depicted in the narrative below did not actually happen the images and quotes that comprise the narrative are taken directly from the body mapping study. In essence the ideas and experiences of the research participants constitute the narrative. In addition to Chelsey, each of the women described in Table 1 can be found in the narrative.

## Narrative Findings: A Conversation with Chelsey

Sonyia wakes from her disrupted slumber - one child was sick, another scared. For the briefest of moments she thinks of mothers from a few decades ago who had no rush to get out of bed beyond meeting the school bell at 8:30am. For Sonyia however the day starts at 5:30 am. Her disrupted sleep is forgotten, and she enjoys the first cracks of daylight alone. Her family knows better than to come to her too early in the morning. She warns them regularly, *"having my coffee in the morning on the couch and just watching what is happening in my backyard, intentionally doing that, that is my time"*.

Getting up to start the day, she reads some e-mails, and immediately takes note of one email. The headline reads, *"Why you should become a stay-at-home parent when your kids are tweens"* (Mlynek, 2015). Directly below this reads another headline, *"Do you spend enough time with your kids?"* (Pinarski, 2015). Shaking her head she turns to the full day ahead. She has to drop her kids off at school and childcare, return to her home office for a few hours work before hosting some friends for lunch…

Chelsey, Sonyia's neighbor, is the first to arrive for lunch. Sonyia met the other women when she began attending a weekly community mindfulness class, and she

invited Chelsey to join the group today. Soon the other six friends arrive, and they sit

down for lunch. Sonyia can tell something is on Chelsey's mind today. *What's up*?,

Sonyia asks. Chelsey confesses, *This might sound strange but, I am really torn about*

whether to have children. I love kids, but motherhood seems…complicated. She furthers*,*

Do you like being a mom? Chesley, not unlike many other women, identifies a 'good

mother' as one who is home and presumably 'available' to her children (Johnston &

Swanson, 2006). She is a new family physician, and has no intentions of giving up her

practice if she has children, but she is unsure how to reconcile both career and family.

Another friend, Sally, an elegant and confident mother of one, with one on the

way, thoughtfully suggests Chelsey reframe her questions. She pulls out her pen and

draws a '5 2' (Figure 1). Confused, Chelsey asks for clarification.
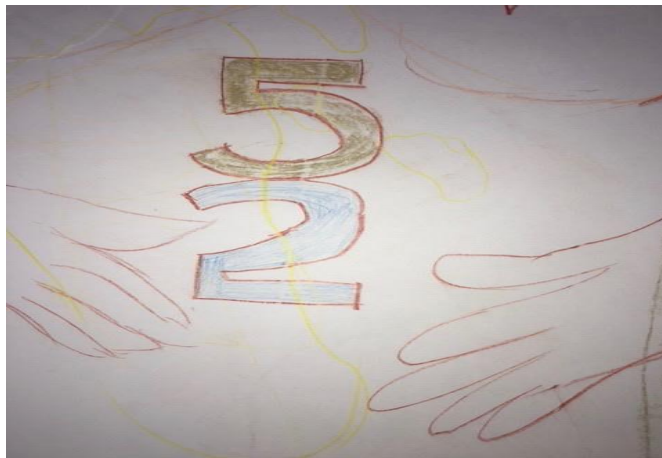

Figure 1. Sally's 5-2 Image representing her embracing other women to help raise her

daughter

The five and two are from the personality theory, enneagram's, replies Sally. *I*

am a five personality type: Intellectual, analytical. Whereas a two is the stereotypically mother who is the do all, be all, helps everyone…it's that perfect image of the mother. I am not the two, but if you invert the two you have a five. The two is my daycare provider…she's my daughter's other mother in a lot of ways. So I can be the five, and that's the working part of me, but I embrace that mirror image in order to continue in my roles. The two of us have to come together. I fully embrace her… I can't be my daughter's only mother. Here is this two-mother who my daughter spends her day with, who enables me to be the five that I am and not try to force myself into the two that society tells me often that I have to be or that I should be. Sally's ability to reframe motherhood gives Chelsey pause, she silently wonders why does mothering have to be a solidary act? She thinks of the many aunties she had growing up as the child of two busy parents. She loved her aunties and did not love her parents any less because of them. This is when Joanne interrupts her thoughts, *I agree kids should make friends and be social and have time away from their parents. It is important to have time with them but they need to have a relationship with others so they can trust others and not be scared of every stranger, and daycare is an environment to do that.*

Sally smiles knowing they have struck a chord with Chelsey, *You know a large part of who I am, and really what I am good at is my work.* Sally has worked in some difficult positions including oncology and palliative care. *Here, I want to show you something*, as she pulls her journal from her purse. *See these red squiggles* (Figure 2)*…that's pain…Kind of my physical and emotional interaction with the world. They represent the stories that I have carried from my work in social services, how they have stayed and lived with me and in me as I continue on in my practice and journey. They symbolize the people I have worked with and the stories I have carried. And how they*

have stayed with and lived in me as I continued on in my journey and in being a mother.

The tears kind of capture (Figure 3) *that too…I carry them with me from each story I*

hear.
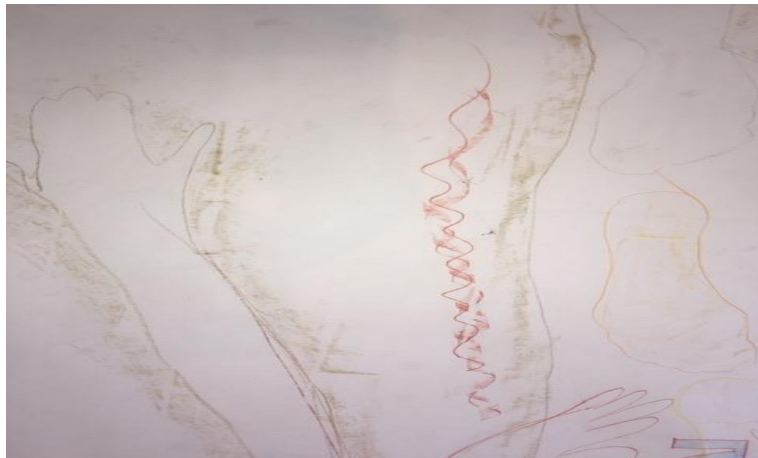
Figure 2. Sally's Red Squiggle's representing the pain of others she carries with her
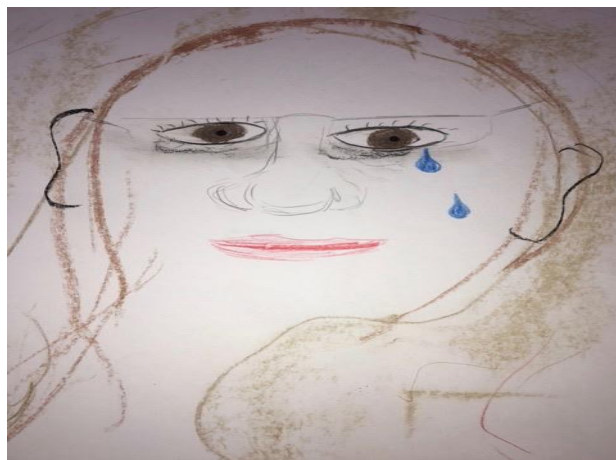
Figure 3. Sally's tears representing the pain of others she carries with her

Each woman at the table reflects on meaningful Sally's work must be for her.

This is when Joanne shares, *So I don't think I would be happy with only work or being a stay at home mom, for me they complement each other and make me full.* Chelsey asked her, *Do you feel like you are compromising?* Joanne replied, *Of course I am compromising, though I really think I do it willingly.* Sonyia adds, *You know I have seen many of you make pretty significant career choices and they rarely feel like a sacrifice. They seemed more like choices you need to make, either for yourself or for your family.* Nina looks thoughtfully for a moment and then says, *I think what I appreciate about my mindfulness practice is that it helps me notice things. So when I see how good I can feel, I think what the hell am I doing [working fulltime]? This awareness has pushed me to work part time and I am so much happier.*

I get where you are coming from Chelsey, Alicia says warmly, *I too remember thinking how are we going to manage two careers when we had our kids. I now know that you do not have to do all the work while your husband's career flourishes. Your husband needs to share the work. And what you both can't share, well then you get help!* Joanne adds, *Yes hire a housekeeper. That has been a lifesaver – frees all of us to do more of what we want to do. But honestly, outwardly I project that I am happy but behind it there are tears and just stress and fatigue. The unknowns, you known? Inwardly there are still all of those fears and mindfulness doesn't take it all away. But it helps me accept the day and accept the decision I make one day at a time.* Sally agrees: *I have a day full of other things to do, but I choose to be in each moment. To be with my daughter and I am going to choose to invite my husband into this even when he thinks we have so much to do because there is all this housework to do and we are not doing it... and I say no make this choice with me!*

Alicia looks thoughtfully for a moment. *Sonyia, I don't want to leave you with*

the impression that all will be well with a few tweaks to your life. For instance, what has

not been there for me is universal day care. That honestly impacts the quality of care

that was available for our daughter. Without universal childcare companies can pay

their employees differently, and that shouldn't be dependent on whether a child's mom

can afford a quality centre or not! Right, Nina jumps in, *that really bothers me too. I do*

have to remind myself to love - Love everyone even if they don't get it and are jerks! See

this mark here? (Figure 4), Nina says as she points to as she points to scars around her

heart, *Mindfulness brings love to my life – so I call it my heart mark. I feel like I love*

more and have more joy, more love for my family, for my work.

Figure 4. Nina's 'heart marks' around her heart signifying her love for others

Alicia comment, *Yes it is profound...that does seem to happen, I am more aware of the*

*community that I want to contribute to* (Figure 5).

Figure 5. Alicia's globe at the bottom of her map representing her care for the world; including names of numerous friends that support her

Chelsey shifts in her chair and leans closer. Right now she has a hard time thinking so globally…*I worry about losing my friends* she confides. Sonyia sweeps her arm around the table drawing attention to the gathering of women in her home, and Alicia pulls out her phone noting the number of friend in her contact list (Figure 5). *You don't need to prioritize your relationship with your children over other relationships. Actually, last night we went out for dinner with one of the day care providers – we went over to her house. I just texted her today telling her she still holds a special place in our hearts.* As Sonyia gets up to refill the coffee it makes her think, it really does take a village to raise a child. Sally, who has brought her toddler with her, stands to change her daughter's diaper. Sonyia smiles as she overhears what Sally is saying to her little girl, *Yes this hurts, yes this hurts, it's ok that it hurts.* Sonyia has always been impressed with the way Sally teaches her child that it is ok to experience pain, and to know it too will end.

This reminds her of the phone call Loja took with her son the last time she was here. Loja's children live with her ex-partner a portion of the week and her son had

called her crying and home sick. Loja had said to Sonyia after the call, *I am drawn from my instinct to protect my children from emotional pain, to 'what is the task at hand' to teach then to turn towards it, which I do all the time with my patients.…*she carries an image in her mind of her son weeping under her heart and told Sonyia, *It's his tears that move me* (Figure 6).
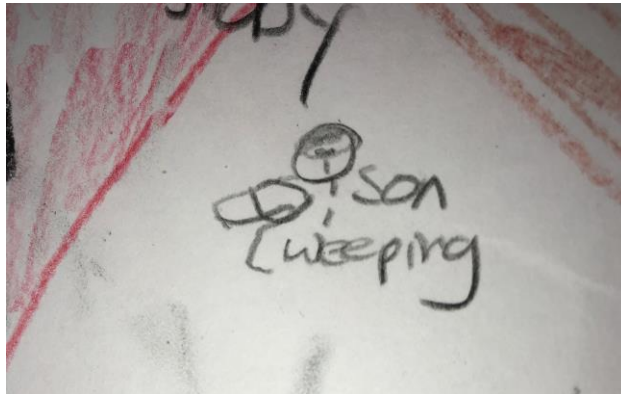
Figure 6. Loja's son crying to signify that she helps him face rather than protect him from challenges

Turning back to the group, Sonyia watches as Chelsey confess, *I worry about feeling guilty all the time*. She had been told that working fulltime is great, but she will forever feel guilty about not spending enough time with her kids. That is when Loja speaks up, *Listen you have to let that go. I spent years feeling guilty that I was a terrible mom. Each of my daughter's mother's day cards gets my heart because they are so lovely. My daughter always writes, 'I know you don't think you are a good mother, but here is why you are'. I spent years struggling with the white picket fence and …now I see my nature, and have stopped resisting, mindfulness has helped me meditate into more of who I am! I am the mom that is sitting on the beach reading philosophy to preserve my*

sanity! If spending more time with your kids is what you want, then do it, but honestly you aren't doing yourself or anyone else any favours by pretending that is what you want.

Sonyia speaks up now and says, *You know, when I was younger I was fearful of bringing children into this world. There is so much turmoil and unrest. Looking back I think this was a resignation, an almost giving up on the goodness of humanity. Fear does not need to run your life.* Alicia hesitates to tell the group what she knows to be true for so many mothers. She shares the disequilibrium she felt as a new mom: *For the longest time I didn't have children. I had my kids when I was 35, so having no kids the majority of my life my identity was school and work, and it is a hard adjustment ... but there is peace to be found…so I often find my hands in a peace symbol* (Figure 7).

Figure 7. Alicia's peace symbol representing calm even when life is chaotic

So underneath all the turmoil and fear you can find that inner peace Chelsey. This is when Loja assures Chelsey it is ok to be afraid. *I tell my daughter all the time to feel it all. I want her to be open to life. I have a journal I plan to give her when she is older. It*

has a heart on the cover. The heart is mine and the hand is hers (Figure 8) – *the vibrant*

red colour might be seen as bleeding, but I like to think of it as feeling.
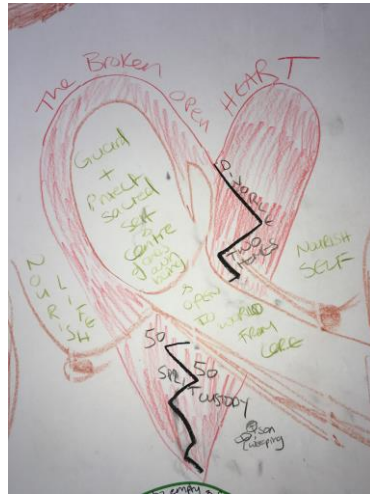
Figure 8. Siobhan's daughter's hand over her heart feeling all emotions

Sally looks up from her coffee and offers something for Chelsey to linger over,
Find your rootedness. I feel groundedness in so many ways, in who I am and what I do,
in the world, in my faith. And as I engage that and root deeply then it bears fruit in my
life. It pulls it all together. It is the way I exist in the world, the way I be. I think it is
being intentional (Figure 9*).*

Figure 9. Sioban's hands and feet reaching into the ground and trees representing her
groundedness as a result of mindfulness

This is where Loja adds, *And knowing enough not to do this or that thing you think needs to be done. The work we do is right there in those moments to make those choices really intentionally, because life is soooo precious.* Nina nods adding, "*I feel like they go together – Mindfulness is about being nice to yourself first. It is the place to start for everyone. I feel like if you told a room full of moms to be nice to themselves every day they would be like, 'What the hell? Do I need to take a bath every day? A cup of tea of everyday?' I think the most bang for your buck would be to be mindful for 5 minutes a day – that's all you need to start. And then it just grows.*

Loja laughs, recalling a conversation she often has with her partner Paul: *Paul always laughs and says 'oh, I am more for mindlessness these days'. But he is not talking about unconsciousness. Don't buy into the 'must be mindful oh dear god'. It is the real practice. It is compassion for yourself. So it's all about grace for yourself, it's all about grace for each other.*

Chelsey is not convinced one way or the other, and the other women feel strongly it is never about women following one path. Sonyia shares what she knows to be true: *Chelsey, I hope you see the possibility to make your own choices.* Sonyia believes that for true female agency to be realized, women must formulate choices as well as make choices. Lunch is over. Each woman departs and quickly leaves behind all that was discussed, not because it was unimportant but because it is gone. They are on to the next moment.

Discussion: Unraveling the Narrative

The narrative shared above constitutes the findings from the body mapping sessions with the six women described in Table 1. I interpreted the women as overwhelming speaking about how their mindfulness practice supported and refined a

feminist consciousness. Such awareness is not necessarily common. Bartky (1990) notes that while oppression of women is universal, female consciousness is not. Judith Butler (1988) contends that to know oneself the purview of society must be adopted. By critically understanding how society often views working mothers, the women in this study were better able to reject dominant narratives and render more authentic telling's of their lives. Maitra (2012) articulates that even though mindfulness meditation results in a calm centeredness, "it also empowers in providing insights into the nature of reality and thus remains absolutely relevant in the context of social activism" (Maitra, 2012, p. 371). Rather interestingly, such findings have been hinted at in other research. For example, based on survey research with 672 men and women in the United States, mindfulness was strongly associated with less sexist motivations and thinking and thus, less prejudice toward feminists (Gervais & Hoffman, 2013).

Specifically, my analysis revealed three ways that mindfulness supports feminist awareness. While certainly feminism is a very broad term, and there are various iterations, I saw three particular themes, common to many forms of feminism, permeate the women's body maps and interviews. The three themes include: 1.) *It takes a village* (encapsulating notions of relational autonomy and ideas about collective parenting); 2.) *The caring core* (representing an ethics of care and awareness of self and others); and 3.) *The embrace* (reflecting the women's willingness to turn towards pain and discomfort). In the discussion below I clarify how each of these themes presented in the experiences the women shared with me.

It Takes a Village

> *"Two hands clap and there is a sound, what is the sound of one hand?" (Hakuin,*
> *Zen Buddhist, date unknown).*

I saw the women in this study approach life from a relational and collective viewpoint (Dane & Brummel, 2013; Gergen, 2009). This is in opposition to the commonly circulated cultural narrative which dictates that parents should be able to effectively manage work and parenting alone (Greif, 1994). This, coupled with the 'you can have it all' mantra many young women are socialized into, can create unattainable goals and expectations for families (Jones, 2012; Slaughter, 2015). These ideologies may be traced to Kantian notions of humans as acting, thinking, deciding and living *autonomously*. Alternatively, a *relational* ontology assumes that people live and perceive the world within social relationships, and assumes relationships are the basis for moral responsiveness and the expression of power and knowledge (Robinson, 1999). This perspective also assumes that all human relationships are valuable and worth nurturing (Moody Adams, 2000). In essence, "rather than denying our interdependence, [the] aim is to find a knife sharp enough to cut through the fiction of our independence" (Fedor Kittay, 1999, p. xiii). The women in this study seemed to be aware of their fundamental connection to others. They saw this as a positive and inherently necessary part of parenting, particularly given their status as working mothers. They recognized that they could not be their children's only mother, and needed others to help raise their children. However, this was not because this was their only option but because they felt this was what was best for their children as well.

Rather than engage in notorious 'mommy wars', mothers who are mindful may actively seek out a community of support and partnership. Mindfulness has been postulated to offer "a model of individual power that can also support deep communication with oneself and with others" (Klein 1995, p. 82). For example, Joanne (spoke of the benefits of formal childcare), Sally (described her 5-2 childcare provider)

and Alicia (kept a close relationship with her children's former childcare provider); all forged relationships with others in ways that recognized their children's need to be raised by a collective. In turning to their community for support the women redefined traditional ethical theories – thus prioritizing interdependence, community, connection, relationships, and partiality (Jaggar & Bordo, 1989). Patricia Collins (2000) refers to collective mothering as potentially revolutionary. I saw Sally's depiction of 5-2 (figure 1) as speaking to her awareness of the benefits of collective parenting.

When asked what makes a 'good mother', many mothers report "being there" (Johnston & Swanson, 2006, p. 513). Mothers can feel compelled to adopt the 'Stay at home or wish you did!' mantra (Mottarella, Fritzsche, Whitten, & Bedsole, 2009). This can be damaging for a woman's self esteem, and limit the role other adults play in raising children. Many women try to live up to unattainable ideals of motherhood, and make work choices in accordance. For example, Johnston & Swanson (2006) note that nurses who are mothers often opt for night shift work to appear like the 'ideal' mother during daylight hours, or claim they have to work for financial reasons failing to publically acknowledge the meaningful nature of their work. A more nuanced understanding of her circumstances and possibilities, allowed each woman in this study to see their situations differently. Many of the women in this study spoke of how meaningful their work was, and could not imagine their lives without work. Because of their employment status, each of the women necessarily relied on other adults to help care for their children. They did not speak of these people as inferior to the care they could personally offer, and working outside of the home did not result in guilt that many working mothers in health and social care positions feel.

The Caring Core: 'Compassion Starts at Home'

If I am not for myself, who will be for me? If I am only for myself, what am I?

And, if not now, when? (Gross, 1993, p. 292).

For true female agency to be realized, women must formulate choices as well as

make choices (Hirschmann, 1998, p. 350).

Closely tied to a relational worldview of parenting, was a particular way of viewing care and caring. I saw the women as attentive to the needs of others as well as their own personal needs. Attentiveness is not necessarily grounded in autonomy; it depends neither on the autonomy of the giver nor of the receiver. Attentiveness develops between persons: "If the grounding of respect and attentiveness requires a universal category at all, then the fundamental dependency of human beings on one another is a more likely candidate" (Conradi, 2015, p. 120). Thinking from an ethic of care standpoint ensures relationships are prioritized, emotions are attended to, and context is considered. This way of viewing care represents interdependence and the development of persons not things (Robinson, 1999). An ethic of care "implies an opening of the heart to others, acting upon an authentic deep caring for others, stemming from a sense of an undoubtable connectedness to all living beings" (White, 1999a, p. 115). Seeing care in this way also recognizes the central role emotions play in moral life (Spelman 1991). An ethic of care comes from an impressive body of literature, including the work of Gillian, Rogers and Tolman (1991), Noddings (2002), and Tronto (1993).

The following quote effectively summarizes the logic these women seemed to employ when considering caring acts:

(1) The individual is defined in connection and relationship to others, as well

as embedded in multiple contexts, whether social, historical, political,

economic, etc. (2) responding to the other in his or her own terms, acknowledging that the other may construct reality in a different way from oneself, (3) promoting the well being of others and preventing harm, suffering, and pain, whether physical or psychological, (4) maintaining and/or repairing the relationship with the other (White, 1999a, p. 111).

Popular culture often predicates that feminism is a contradiction for healthy relationships (Dolezal, 2015). Further, images of aggressive, domineering women are often called to mind when either gender describes a feminist (Rudman & Fairchild, 2007). In reality however researchers have shown that women who are feminists both self-identify and are identified by intimate partners as stable and supportive (Rudman & Fairchild, 2007).

Mindfulness and its connection to an ethic of care have been written about in other papers. For example White (1999b) notes that Tronto's four elements of care: attentiveness, responsibility, competence and responsiveness are all actions supported by mindfulness. Few studies have explored their coalesces. In this study I saw many instances were an ethic of care seemed to be employed. For instance, Sally spoke about her willingness to listen and hear the painful stories of others and drew tears on her body map to signify how much she opened herself to others suffering. Nina expressed loved for everyone, even if she thought their ideas or actions were misguided. Such "attentiveness, simply recognizing the needs of those around us, is a difficult task, and indeed a moral achievement" (Tronto, 1993, p. 127).

I saw many of these women as using an ethic of care to address injustices and coming to care "about the needs of real others" (Robinson, 1999, p. 27). Sally's words and images exemplify this well when she drew and spoke of carrying the wounds of people she cared for clinically. Alicia brought specific attention to what was absent from

her map in terms of universal childcare as supports for families in Canada, and made comment that this meant poor working conditions for mostly female childcare workers. Nina drew marks on her skin that signified her love for the entire world, and Alicia drew a globe to symbolize her awareness of the issues her collective world faces.

Recognizing the needs of others did not result in abandonment of self care, a common critique of ethics of care frameworks (e.g. Bartky, 1990). Many of the women drew and spoke of time they reserved for themselves. Further, as explored in more detail above, they did not see their children as requiring inordinate amounts of attention, and felt comfortable taking time for themselves. Those who work in the wisdom traditions have long recognized this dialectic of care for the *self* and care for the *other*. Like Kristeva (1980) and Irigiray (1985) urge, these women often redefined gendered expectations. Each woman referenced activities that offered them sustenance, and many of the women drew or spoke of daily life in a way that moved beyond child-centric. Exemplars include Loja who spoke of reading philosophy on the beach, Alicia who wrote 'Compassion Starts at Home' on her body map, or Nina reminding other women to 'Be Nice to Yourself Everyday' (Figure 10). Alicia, Joanna and Nina both spoke of finding inner peace despite periods of chaos and difficulty, and Loja and Sally both referred to conscious decisions to avoid the 'second shift' many working mothers resign themselves to (Badinter, 2011). Finally, I also interpreted the women's efforts to secure flexible or part-time work arrangements as an act of self-care. They did not do this to be more 'present' for their kids but because it was what they wanted and needed to do given the inflexibility present in their workplaces. When Alicia commented on her transition to a more family-friendly role, Sonyia agreed saying she knew she had to move on when she

was told attendance was to be at 8am sharp. This no longer fit the image she had for herself and the life she wanted to lead.

Figure 10. Siobhan and Alicia's message to other working mothers

These actions are an important counter to intensive parenting practices that often result in mothers making personal sacrifices to the point where their own wellness is in jeopardy (Rizzo, Schiffrin, & Liss, 2013). Practices such as mindfulness can transform one's relationship to the constellation of normative standards regarding appearance, behavior and comportment (Dolezal, 2015). There are few other roles that are steeped in as much normativity as 'motherhood', and this can weigh heavily on women. As

Maushart (1999) contends, "no matter what work status decision we make what unites all mothers is a sense that they are 'missing out'" (Maushart, 1999, p. 173). The statistics on mothers experiencing depression are sobering (Health Canada, 2009). To challenge this, public discourse needs not consensus, but narrativity, plurality, regardfulness of a concrete other and a verbalization of needs and desires (Benhabib, 1992). As Tronto notes, care must be consciously evaluated – there will always be someone who does not receive care, and mothers often mistakenly sacrifice care for themselves.

The Embrace

> *What is there possibly to be afraid of, after we have dealt face to face with death and not embraced it? Once I accept the existence of dying as a life process, who can ever have power over me again.* (Lorde, 2007, p. 12.)

This final theme can be summarized by Pema Chodron's (2000) thought: "The Dharma is about making friends with the groundlessness and discomfort of those feelings. It is not about making rules so that those emotions never arise. Compassion doesn't come from trying to clean up the whole act" (p. 300). These women told me about their willingness to face their lives in a way that I saw as unique. They seemed to see all emotions, including difficult experiences, as foundational to their lives. This underpinned the previous two themes playing a central role in how they moved to a relational and caring way of being in the world. I saw many instances where the women faced challenges rather than retreat from them. Audre Lorde (2007) powerfully wrote about the power of poetry to support women in facing systemic patriarchy. Mindfulness may serve a similar function. As oppressive systems become clearer, an honest exploration supports new insights and possibilities previously unimagined. Loja and Sally completed their body maps together and had a conversation afterward about how

grounded they feel as a result of their mindfulness practice. Siobhan also drew her feet as grounded into the earth. Loja summarized this when she said that mindfulness is about:

Being a dancing tree. It has movement and is grounded. Mindfulness has always

been, for me, about bringing together dualities into oneness, into something else.

Rather than see emotions as good or bad, and chasing good experiences repeatedly, mindfulness supported these women to recognize all emotions, avoid dualities and gave them the stability to experience all that life presented. As Loja described above, each of the women depicted feeling grounded as a result of mindfulness to move with, rather than get caught in, the emotions conjured up by daily life (see Sally's grounded body map in Figure 9).

Rather than buy into the have-it-all-do-it-all discourse many women are told to assume (Somerville, 2005), the women in this study seemed to know that the road would be challenging and compromises would need to be made. The women described unrealistic employment expectations such as long hours away from home that structurally limit how high many working mothers are actually able to climb. Importantly, they did not make concessions in an effort to 'appear' normative. For example Alicia chose to leave a well-paying leadership position seeing the demands were impossible to reconcile with her family demands. Joanne, Nina and Siobhan all opted for part-time work. Slaughter (2015) writes that it is important for working women to share this narrative rather than perpetuate the belief that career and family is simply a matter of good balancing and time management.

Intricately connected to this willingness to face life's challenges was what I saw as transgressive parenting practices. Many of the women seemed to criticize the parenting style that censors the world and overprotects children in an effort to create a

'perfect' childhood.   Ruddick (1989), to counter this tendency, writes that a mother must decide whether her values or those of the larger society guide her child-rearing practices. Through facing their own pain and challenges the women seemed to feel it was their role to ensure their children also understood the chaotic and at times painful parts of life. Sally's conversation with her daughter during the diaper change, and Loja's heartbreak over her son's pain when he called from his Dad's house illustrates this well. These women knew it was a gift to give their children the ability to "learn to work and speak when we are afraid…for we have been socialized to respect fear more than our own needs for language and definition" (Lorde, 2007, p. 44). Joanne also noted,

> *I don't think kids should be coddled unnecessarily. They need to be independent,*
>
> *make friends on their, interact with other adults without parents around.*

Dewey may have been one of the first to identify that knowing-how predominates our day-to-day existence, and this know-how is always embedded within a context (Dewey, 1930). From my perspective, these women *knew* how to embrace their lives, and taught their children to do the same, even when it was difficult.

Conclusion and Implications

Change is only possible when women create contradictions – when socially prescribed behavior is disavowed in favour of new patterns and social relations. The stories and images the women shared with me spoke loudly about new patterns and social relations for working mothers. Activists like Armstrong (2013) identify that positive change for women only happens when women are able to talk and share with other women. For this reason alone the findings of this study are worth sharing. Anderson, (2015) calls attention to what she calls modern misogyny, or the myth that the need for feminism has ended. These women shared subtle, yet oppressive ways patriarchy

continues to pervade their lives as working mothers. Their mindfulness practices

however, served to transform their relationship to the constellation of normative

expectations. Gross (1993) argues that the state of mind mindfulness fosters gives

practitioners the courage to struggle against patriarchy. Meditation practice has been

postulated to incite productive anger, though "its aim [is] not vengeance[...]the suffering

of the offender...its aim [is] not to continue the cycle of suffering, but rather to interrupt it

and establish something new in its stead" (Boucher, 1995, p. 261). This study

demonstrated how six women respond on cognitive, physical and emotional levels as a

result of feminist awareness (i.e. awareness of alternatives to patriarchal ideals).

Specifically, mindfulness seems to work in three interconnected ways in these women's

lives: 1) supporting relational and collective parenting practices; 2) defining care for self

and others in unique ways; and 3) supporting women to face the challenging emotions

and experiences in their lives and by extension supports their children to do the same.

These attitudes and attributes can be associated with humankind, and need not be merely

female qualities, and in fact were attributed to men many centuries ago (Tronto, 1993).

Mindfulness has at times been conceptualized as an apolitical practice, and in fact

in my experience is often taught this way. Failing to augment meditative insights with

feminist insights, runs the risk of encouraging disempowerment (Donner, 2002). The

women in this study were able to make authentic decisions about their lives that were

often counter to dominant cultural patterns. Mindfulness seemed to support them in their

actions, and in essence was quite political. More research and dialogue may be needed

within the field of mindfulness to better appreciate the critical and transformative nature

of mindfulness. In this study I saw these women as having an appreciation for how

patriarchy impacts their lives, and further making conscious decisions to live their lives in

what might be described as living up to more feminine ideals.

I chose to represent the women's experiences in narrative form, as narratives may be more easily recalled and used as possible sources of inspiration for other women (Arendt, 1958). In cementing the women's experiences in narrative form, it may be recalled and used as possible sources of inspiration for other women (Arendt, 1958). At the same time, "phenomenological analysis of what consciousness raising reveals leads to a recognition that for something to be true about a woman's condition, it need not be universal…in an absolute way. It also reveals that consciousness of oppression is not inevitable" (Nenadic, 2015, p. 5). In essence the findings from this study cannot be assumed to be representative of all women's experiences, or even these women's experiences across time. Nenadic's quote also highlights that many women do not have an awareness of oppression like these women seemed to. Their ability to live more feminine lives is somewhat unique, and in this way mindfulness may be a practice more mothers may want to consider.

I saw mindfulness help these women come to see their lives differently from normative expectations. This redefinition of their lives seemed to be the result of recognizing contradictions between societal expectations and their lived experiences. The experiences these women shared speak strongly to new patterns and social relations for working mothers. A few years ago I came across a poem written by a Japanese monk in a book of poetry by Patricia Donegan (2008). One particular haiku poem spoke to me as a working mother:

Violets here and there;

In the ruin;

of my burnt house (p. 13).

This poem gives voice to what I feel about working and parenting. In many ways, the task is daunting, but I also believe the proverbial violet is waiting to be noticed. Prior to commencing this work, I wondered if other mothers who practiced mindfulness felt similarly. As I return to this poem some years later, I can say that yes, mindfulness may well be the violet in an otherwise burnt house. In my mind Chelsey represents all the contradictions women face when they become mothers. I hope all women who identify with 'Chelsey' find salve in the words offered by the six women who uplifted Chelsey on her journey to motherhood.

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CHAPTER 6

'YOU WANT ME TO DRAW WHAT?':

BODY MAPPING IN QUALITATIVE RESEARCH

Introduction: The Body In Research

My body has always been a question mark,

Never quite knowing what it means

To be alive

 (Suresh, 2016, para 810)

As this opening stance suggests, the body is an oft-neglected entity. I find the body in qualitative research is particularly absent, as many qualitative methods rely on cerebral and intellectual data collection and analysis (Prosser, 2011). Additionally, research commonly either emphasizes the mind (i.e. cognitive and linguist representations) or the physical body (i.e. objective biologically based scientific exploration), but the lived body, also worthy of serious philosophical and empirical investigation, is ignored (Munhall, 2012). Further, the body as a source of investigation is often an add-on to interview-based data methods rather than the primary source of data (Drew & Guillemin, 2010). Alternatively, the lived body offers the opportunities to attune to ways humans think, feel, taste, touch and hear the world around us (Munhall, 2012). How I appear to and express myself in my own eyes and in the eyes of others, and how I am able to express activity and vitality in my eyes gets at the lived body (Thomas & Pollio, 2001). Body mapping is a research method that might access these experiences, and will be the focus of the remainder of this paper.

As a child I could spend hours combing through old photo albums. Being drawn to images is perhaps part of what makes us human. Not surprisingly then, I selected a

visual method, body-map storytelling, for my PhD dissertation. I completed a phenomenological study about what mindfulness means to working mothers with young children. I met with six women to better understand what it is like to mother young children while crafting interesting and meaningful careers. As a working mother myself, I am acutely aware of social institutions and discourses that can make mothering while working complicated. I was particularly interested in what a mindfulness practice contributed to this experience. Each of the women had a mindfulness practice, cultivated through formal intentional focus (e.g. seated meditation) or more informally through noticing daily life (Wise & Hersh, 2012). Mindfulness can be thought of as the process of "paying attention in a particular way; on purpose, in the present moment, and nonjudgmentally" (Kabat-Zinn, 2005, p. 145). Because my particular project investigated mindfulness and how it is implicated in working mother's day-to-day lives I had many 'lived body' questions. For example, how does mindfulness allow mothers to see their children and their work differently? How does it make them touch or move differently in the world? How do their experiences get expressed in their bodies? Further, I was aware that gaining an appreciation for how mindfulness is expressed in the body could lend additional insight into its value as a practice and wanted to select a method worthy of this potentiality.

In this paper I have two aspirations. First I hope to foster the potential uptake of body-map storytelling within qualitative research. Second, I illustrate my experiences with body mapping by specifically, a) sharing an overview of body mapping as a method, b) reviewing practical issues I encountered during my project, c) considering ethical issues unique to body mapping, d) exploring how I approached analysis, and e) situating body mapping within social research.

Body Mapping

Body mapping may be considered a 'visceral approach' in that it elicits data about feelings and emotions within and expressed through the body (Sweet & Escalante, 2015). Rather than privileging cerebral activity, body mapping elevates emotion and somatic experience in understanding the workings of 'mind' and consciousness. This is particularly true in the data collection phase of the process. Rather than elicit primarily cognitively filtered answers from participates, body mapping encourages non-cognitive responses from participants. The responses are then necessarily analyzed cognitively by both researcher and participant. However, to engage from an embodied perspective initially is a unique aspect of body mapping, making it particulary well suited to appreciated how a phenomena is experienced by participants (de Jager, Tewson, Ludlow, & Boydell, 2016). Body maps are essentially life-size human body images created by:

> Using drawing, painting or other art-based techniques to visually represent aspects of people's lives, their bodies and the world they live in. Body mapping is a way of telling stories, much like totems that contain symbols with different meanings, but whose significance can only be understood in relation to the creator's overall story and experience (Gastaldo, Magalhaes, Carrasco, & Davy, 2010, p. 5).

In essence, research participants trace their body as a template to document their physical and emotional journey (Hartman, Mandich, Magalhaes, & Orchard, 2011).

Body mapping has been used for thousands of years to help people understand themselves, their bodies, and the world they live in. Body-map storytelling has a long history as a therapeutic process (Cornwall, 1992; Solomon, 2002) and transitioned to become a research method several decades ago (Sweet & Escalante, 2015). Its research

origins are arguable and there are relatively few published exemplars (although

exemplars include Gastaldo et al., 2010; MacGregor, 2009; Meyburgh, 2006).

Traditionally, body mapping has been seen as a means to include people who might

otherwise be excluded from the research process due to limited literacy, difficulty

articulating ideas, or general difficulties in communicating about complex emotions and

topics (Drew & Guillemin, 2010). Ideas and issues difficult to explore through verbal

discussion alone may be more readily accessed through body mapping (Cornwall, 1992).

The methods fit within the 'draw and write technique' (Williams, Wetton, & Moon,

1988). It is also typical of the work found in visceral geography which sees the body as

the geographical space of inquiry and pays particular attention to how bodies feel

internally – sensations, moods, physical states of being – in relation to surrounding

spaces and environments within communities (Hayes-Conroy & Hayes-Conroy, 2010).

Body mapping has also been used more extensively in the field of occupational health

and safety (Gastaldo et al., 2010).

Its use 20 years ago in South Africa as an art-therapy for women living with HIV

and AIDS brought more prominence to body mapping. It was seen as a therapeutic way

for women living with HIV/AIDS to document their stories and provide a keepsake for

their families after they passed. It was then manualized by the Aids and Society Research

Unit at the University of Cape Town to better understand women's HIV's treatment

literacy (Aids and Social Science Research Unit, 2004). Solomon (2008) further

manualized the method also using HIV/AIDS as an exemplar, though noted body

mapping could be useful for diverse populations.

Body maps can be completed by individual research participants or collectively in

workshops. Body maps then become potential springboards to generate themes for

further commentary through interviews or focus groups. For example Cornwall (1992) used body maps in focus groups with rural women in Zimbabwe to better understanding their knowledge of reproductive issues, whereas Crawford (2010) used body maps to help individuals better understand traumatic events. Mann (2002) effectively shows how powerful the work can be in a focus group noting that the youth in her study named body mapping as a particularly good activity out of a range of activities in a day long workshop. The youth shared that they learned a lot, most notably that others shared their feelings and had similar experiences (Laws & Mann, 2004). I suggest that it is important to offer participants the choice whether to participate in a focus group or sole-participant session. As one of my participants shared,

> *And I thought about doing it as a group – oh it would be fun and be social and then I thought about doing the actual exercise. It would change my answers. I would be too easily influenced (pause)… This is a more accurate representation of me and it would be different with others in the room, and not in a positive way.*

Regardless, when I did meet with women in a group format, the sessions were very social and supportive. Because the sessions were quite long, I supplied some nourishment, and this seemed to help build a supportive atmosphere for the group-setting participants.

After gathering relevant demographic information, body-mapping sessions typically require participants to respond to a researcher's enquiry (or series of enquiries) with a drawing (refer to Table 3 for the body mapping questions I used). To create these questions I narrowed and adapted the steps offered by Solomon (2008) and Gastaldo et al. (2010). Participants are then asked to elaborate on their completed drawing through written answers (e.g. Gastaldo et al., 2010 asked participants to create a narrative to

accompany their maps) and/or verbally in the course of an interview (e.g. Guillemin, 2004 met one-on-one with participants) to further describe and clarify the contents of the body map, and provide a commentary around which the researcher can build their analysis (Mair & Kierans, 2007). This discussion is a departure from the more intuitive and embodied mapping process as the participant and researcher work together to understand what is depicted.

Table 3

Questions Posed to Participants to Then Be Responded to Visually on Body Maps

(adapted from Gastaldo et al., 2010 and Soloman, 2008)

1. Participant(s) trace their body in a position that says something about their lives as women who practice mindfulness, and then highlight their body shape in a material of their choice (e.g. paint, chalk).	7. Drawing a self-portrait: Participants asked to draw a self-portrait on the face of their body tracing that represents how mindfulness shapes the way they face the world
2. Participant(s) highlight their body shape and hand/foot prints in paint as a way to demonstrate their presence in the world	8. Creating a personal slogan: Participants create a personal slogan about the strength they receive from their mindfulness practice as a working mother.
3. Drawing where you come from and where you are moving towards: Participants chose and draw a symbol to represent where they are coming from and what their dreams are for the future as a working mother	9. Marks on the skin: Participants draw on marks that they have *on* their skin (physical) *under* their skin (physical or emotional) on their body map to represent their physical and emotional interaction with the world as a working mother who practices mindfulness
4. Painting in your support: Participants write the names of those who support them as working mothers on their body map	10. Participants create a symbol to explain to others what mindfulness means for them as a working mothers
5. Body scanning – marking the power point: Participants visualize the point(s) on their body where mindfulness gives them their power ('power point') then create a personal symbol to represent them and draw it on the power point	11. Public message: their message to the general public about why they practice mindfulness as a working mother
6. Creating a personal symbol: Participant draw a symbol on their power point on the map that represents how they feel about	12. Participants decorate the rest of their body map until they are satisfied that it represents them

themselves and how they think of themselves in the world	

Practical Considerations

I found relatively few published articles that explicitly described the process of creating body maps. My intention here then is to discuss practical and logistical issues I encountered to guide other potential researchers. The maps typically take more than one session to complete. Because creating body maps is a relatively time intensive process, it may be wise to offer participants the choice as to how they would like to complete their maps. Two women wanted to meet with me for over four hours and in that time they created their maps and shared the meaning behind their depictions with me. Others broke the session up into three separate meetings - two to create the map and one to discuss the map. Some met in a group setting, and others wanted to work alone. I found that most, though not all, of the women wanted to talk while they were creating their maps and offered what turned out to be the first step of analysis during the sessions. As I completed more sessions, I began to invite discussion with the women about what they were creating and why. I actually found the conversation during the body map session the most instructive. I could gather in-the moment feedback from the women about why they were representing their experiences in a particular way. Waiting to debrief after the session seemed to lessen the emotion and passion the women had for their drawings. At a minimum I suggest the time between body map sessions and debriefing interview should be less than a week.

Issues around ownership are also important to consider. Many of the women expressed interest in keeping their maps when I no longer required them. While I was able to accommodate this request, clarity about ownership as part of the consent/ascent process may be necessary.

Deciding what materials to offer your participants for them to use as they respond on their body tracing can be challenging. It is important to offer appropriate materials so that their creativity and ideas can come to life via words, symbols, or any other markings (see Table 2). No two projects will have the same materials list, though some may be more typical such as paint or chalk. For example, I provided wooden two-dimensional figures that could be used to represent children, and also had magazines present that contained images of families. These items would likely be irrelevant for projects with a different focus. I make some worthwhile observations about the material I provided and share those in Table 4.

Table 4

Materials List (Bold Indicates Material Used Most Frequently by The Women)

Material	Comments About the Materials
• Paper large enough to draw a body about 2 meters long	I used heavy-weight paper cut to 3 feet x 7 feet size from a roll that I obtained at an art supply store, though others have used large cardboard (Aids and Social Science Research Unit, 2004) pieces.
Art Supplies: • Glue • Scissors • Coloured pencil crayons • Markers • Pens • Washable paint • Water • Glue • Charcoal • Coloured paper • Magazines • Beads • 2-dimensional wooden figures	Once the women selected a medium they were comfortable with they tended to use that throughout their body map. Many of the women selected charcoal to outline their bodies and this material tended to transfer very easily onto their skin and clothing. In future, I would advise participants to wear washable casual clothing.
Additional Materials • Mirror • Camera • Hand Sanitizer and wet wipes • Anatomical diagrams	Some of the women used the mirror while creating their self-portrait. The other materials were used primarily by myself as the researcher.

• Tape recorder • Notepad for analytical notes	

Last, typically researchers will need to store, transport and view a variety of data sources including transcribed data from the body map and debriefing sessions, multiple life-size body maps, field notes, and research journal entries. I encountered some difficulty during the analysis process in that the maps are very large and take up considerable room. I had to rent a room at a local library in order to look at all the maps at one time.

Ethical Considerations

Here I share ethical considerations that are potentially unique to body mapping. A popular formulation for mutual research practices is the call for researchers to work *with* rather than *work on, about* or *for* participants (Luttrell, 2010). This is a particular strength of body mapping. Mair and Kiernans (2007) summarizes research that uses what they call 'draw and write investigation techniques' as 'user-centred', 'bottom- up' and 'participatory', and a technique that dissolves the barriers between the researcher and the researched. Despite this, I had some difficulty getting my body-mapping project through institutional review board. Review members were concerned I could be harming participants by researching a deeply personal experience using such a highly reflective method. Alternatively, Laws and Mann (2004) argue that vulnerable populations have an opportunity to heal when given the chance to explore past experience through body mapping. If undertaken in a supportive and understanding environment, participants have the opportunity to explore life experiences and regain confidence for future possibilities. At its best, participation can be an important tool out of victimization, passivity and silence. Rather than pose a risk to participants, visual methods like body mapping when executed thoughtfully can communicate our deepest feelings (Prosser,

2005a).

Another ethical issue that I considered throughout the study related to confidentiality. Visual researchers have ethical standards to uphold and, "an obligation to ensure that confidential information is protected" (Papademas, 2009, p. 253). Additional warning is offered stating information should not be "used in ways that would unfairly compromise research participants or confidants" (p. 254). However, participatory methods such as body mapping run the risk of paternalism if participants are not fully informed and able to provide input into this process. For example, I encouraged participants to consider confidentiality when recording names of people on their maps. I had the following conversation with one of the participants:

> Lisa - *Ok write the names of those who support you as a working mom. You could also write down a law or policy. You will also want to consider anonymity, and protecting people's privacy. So for example would your husband mind if you put his name on your map?*
>
> Participant - *Ok*
>
> Lisa - *So for the last 7 years what has helped you do your role?*
>
> Participant – *So my husband Bill* [pointing to his given name she had just drawn on her map]

Despite my caution to consider whether to include his name she still placed his given name on her map. Several of the women wanted to honour the people who support them and did not want to protect identities. Another participant summarized her feelings about confidentiality when we revisited consent at the end of her body mapping session:

> *You know there are first names on here, and not many people would put those names together and those that could?... I don't care. They are close to me*

and I am honouring them.

Rather than sanitize the maps, I opted to keep the names the women placed onto their maps. I may have felt differently if breeching confidentiality revealed negative or difficulty information about someone who had not given consent. In this case however I decided that to honour those who support working mothers, when they themselves identified limited supports, was the right thing to do. Regardless, considering the women consented to their maps being used in a variety of public places including publications and presentations it was worth revisiting consent throughout the body mapping process.

As I approached my first body mapping session I recall feeling some serious trepidation about my method of choice. I was increasingly conscious that being asked to produce images, as part of a research project may appear strange. And initially it appeared that my apprehensions were founded. I had a similar experience to Guillemin and Westall (2008) in that despite being clearly and repeatedly informed about what the body map session would be like, many of the women appeared surprised when asked to do so during the research encounter. In opposition to many other draw methods, body mapping *is* the session so there are no interview questions to break the ice and build rapport save obligatory introduction and demographic questions. Virtually each woman expressed trepidation about the process and emphasized their lack of artistic ability. Notably, virtually each woman also ended the session with a completely different sentiment. The following conversation with one of the participants exemplified a typical response. She started her session unsure and appeared anxious:

> *Participant – And I can't do this wrong, can I?*
>
> *Lisa - No absolutely not. This isn't about making it look pretty or an artistic exercise*

Participant –Ok (long pause)… So is this how you use the paint?

She ended her session this way:

Participant – *Even though it's not beautiful it's fun, you are creative and being*

creative breeds health! This was so fun, I'm so excited about this!

Many participants volunteer to engage in research because they believe they can valuably

contribute (Cox, 2013), so to initially feel unprepared could be disconcerting. As I reflect

back on the study, and knowing the positive note all the sessions ended on, I would worry

less about participant hesitation and rather offer participant's patience, reassurance and

time to warm to the idea of drawing as research (Owen 2013). McNiff (2007) highlights

that these 'people' skills are particularly essential in arts-based research.

Analyzing Body Maps

The process to knowing entails perpetual curiosity as well as wearied surrender

in which one's understandings transform (Lapum, Ruttonsha, Church, Yau, &

Mathews David, 2011, p. 100).

Spencer (2011) notes that visual data analysis is a balance of inductive processes

– allowing the images to speak for themselves – and deductive processes, whereby

structuring principles derived from theory are utilized. Although the use of visual

research is gaining acceptance, Drew and Guillemin (2010) warn there is a relative lack

of attention directed at how to rigorously analyze visual images. Analysis can be

complicated by what Kristeva (1980) calls prior codes, or accumulated cultural

knowledge. Spencer (2011) also warns humans are notorious for falling into 'trope-like'

interpretations, essentially jumping to well-entrenched thoughts, frameworks or

metaphors, almost in knee-jerk fashion. To understand latent and less obvious meanings,

researchers should be willing to investigate beyond more obvious reading (Banks, 2007), and understand that no two images will have the same reading – prior experiences are too diverse to reach unanimous understanding (Spencer, 2011). I relied heavily on both Rose (2012) and Gubrium, (2013) to analyze the data and discuss each in turn.

Rose (2012) offers a detailed account of qualitative visual data analysis using interpretive concepts of *composition, semiology and discourse* to provide a rich data-driven exploration of the images meanings. Composition relies on interpreting the location and relation of different images on the map. Semiology, or semiotics, is the study of symbols and their meanings. Discourse is concerned with interpreting specific knowledge about the world, which shapes how the world is understood and how things are done in it (Rose, 2005). While I read Rose's text prior to beginning analysis, the complexity and richness of the process was partially lost on me until I experienced it for myself. It is my intention to offer exemplars from each form of analysis as possible guides for other researchers.

Composition is about the spacing and placement of images on a map (Rose, 2012). There were many instances where these concepts were highly relevant to the women's experiences. For example, one of the participant's maps was heavily concentrated on her head and heart with very little happening in her lower body. In conversation with her it was clear mindfulness strongly influence her emotionally:

Participant – *I am really aware that there is very little going on down there [point to her legs].*

It looks like mindfulness draws me to my core and is very central around my heart on this map. Yes very much so…and this wasn't necessary obvious to me until I started to draw.

Another participants map was very bright with rich saturated colours. She stated that this

represented how vividly she experiences life, and in her words felt:

> *More love of everything so I think this is a cool symbol – just more love* [said with
>
> emphasis] (see Table 5).

Table 5

Sample Images and Level of Analysis
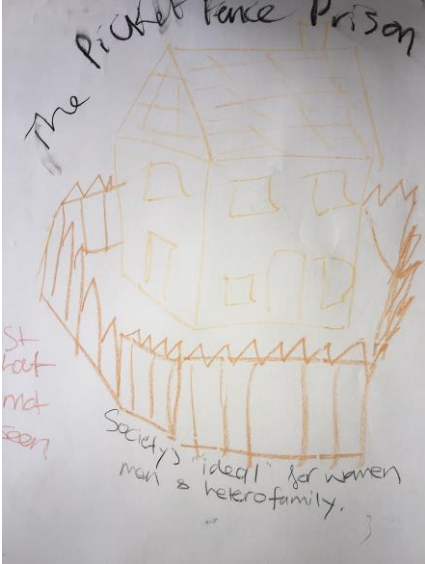
Level of Analysis	Images from the Participants and Description of Analysis	
Composition Level of Analysis	 This entire map was centered around the participants heart suggesting mindfulness was very central to her emotions and life	 This participant used bright colours and spoke of how she feels her life is more vivid with mindfulness

Table 5 (Continued)

Semiotic Level of Analysis		
	One participant drew a peace symbol to represent the sense of calm she feels in an at times chaotic life	This was one of many images the participants drew that were *denotive* of their willingness to accept all emotions, though at first glance this might be interpreted as sadness
Discourse Level of Analysis		
	This was a strong message about rejecting cultural discourses about parenting and marriage	This was a participants feet standing on a globe to represent her global versus individualistic way of being in world

Semiology is the study of symbols. Rose (2005) describes both paradigmatic and denotive symbols. 'Paradigmatic', or culturally representative images or signs, are useful to understand messages on body maps. For example, many of the women drew peace symbols. This image instantly connotes a particular message about their experiences. 'Denotive' images, or images that serve as representations often need a narrative to fully anchor the participant's meaning. For example, many of the women drew images that depicted pain or difficult emotions including tears, blood and cuts on their skin. After discussion however it became clear to me that the pain and difficult emotions were seen as productive in their lives rather than a challenge or difficulty (see Table 5).

To study *discourse* is to understand how particular forms of knowledge and formulations about the world get expressed. Foucault might say that discourse disciplines people into thinking and acting in certain ways (Rose, 2012). The women's images however seemed to both name and then resist popular discourses. For example, one participant depicted 'the white picket fence' narrative of hetero-normative families but added the words '*prison*' to signify her resistance. Additionally, another participant drew her feet standing on a globe rejecting individualistic ways of thinking saying about the image, "*I'm more aware of the community that I want to contribute to*" (see Table 5).

In addtion to the work of Rose (2012) described above I relied heavily on the work of a few others. Grbich (2013) offers a unique chapter on how to analyze visual data in a way that gets beyond obvious meanings. She identifies one approach called structural analysis. Structural analysis asks "what is the meaning of these images for participants" (p. 208). Drew and Guillemin (2014), building on her work and others (Oliffe, Bottorff, Johnson, Kelly, & LeBeau, 2010; Oliffe, Bottorff, Kelly, & Halpin, 2008) offer three analytic stages to highlighting this meaning-making: *Participant*

engagement (Stage 1); *Researcher-driven engagement* (Stage 2); and *Re-contextualising* (Stage 3). Each of these three stages on their own are unavoidably limited; they are cumulative and, together with Rose's (2012) method identified above, provided me with a rich and rigorous analysis.

In stage one, the participant's perspective of their body map is elicited to understand their intention(s). In the context of visual research, reflexive epistemologies "hold that the meaning of the images resides most significantly in the ways that participants interpret those images, rather than as some inherent property of the images themselves" (Spencer, 2011, p. 7). During this process it was important for me to ask 'who is the analyst?' While the researcher brings particular expertise, including their ability to theorize and see patterns, they cannot be the first level of analysis. The researcher is best placed to provide overall analysis to the research which occurs in stage two and three (Guillemin & Drew, 2010).

Stage two of the analytic process includes researcher-focused reflections and development of themes based on what was said/unsaid and included/avoided on the body map. Through the processes of documenting, coding and categorizing a variety of data sources, patterns/themes emerge and can be interrogated. Rose's (2012) approach, exemplifed above and Grbich's (2012) analytic questions also helped me reach more critical insights at this stage (see Table 6).

During Stage three, I explicitly focused on working with applied theoretical frameworks and conceptualizations to finalize a robust analytic explanation. Theory is present at each stage of the research, but is prioritized here. Based on the analysis I completed in stage one and two I eventually came to a few key insights that formed the central themes of the study. The body maps helped me to understand that mindfulness

appears to offer women the chance to explore and even valorize femaleness. The most

overwhelming and repetitive theme was the notion of redefining the self in more

feminine terms. As each woman became increasingly grounded in her experiences,

through mindfulness, she paradoxically became aware of the conventional and

constructed nature of herself and her reality. From here women were able to define their

roles as worker/mother in more authentic terms.

Table 6

Sample of Critical Questions to Ask During Analysis (adapted from Grbich, 2012)

Sample Critical Questions
• Where is the viewer's eye drawn to in the image and why?
• What relationships are established between the components of the image visually?
• What do the different components of an image signify?
• Is there more than one possible interpretation of the image?
• Are the relations between the components of this image unstable?
• What knowledges are being deployed
• What relationships exist between components of the image(s)
• How do such other signs impact on and affect the image?
• How does the image reflect or depart from dominant cultural values?

Body Mapping's Contribution to Social Research:

Body mapping and phenomenology paired well together in this study.

Phenomenology served as the methodological framework for my study, though its

application to other methodologies may be as useful. As one participant stated body

mapping is not a cerebral exercise:

None of it was planned – I much prefer to go with my intuition, otherwise I will

overthink it and write 60 pages. So I just choose to see what came in the moment,

so some of it is quite known [to me]and are images and symbols that have come to

me repeatedly when I became a mother.

This struck me as representative of the type of data a phenomenological study seeks to

elicit: "…embodied and intersubjective relations [and] first person intuitive experiences

of phenomena" (Dolezal, 2015, p. x). Thus far body mapping has been primarily used as

a method within participatory action research projects, and has been explicated linked to

phenomenological investigations (de Jager et al., 2016). Further research is needed to see

how fruitfully body mapping might pair with other methodologies.

While there are many contributions body mapping might make to qualitative

research I highlight two of the more important ways this method supported my study:

First, what struck me about this method was the richness of the discussion and how

quickly the women would reach to sensitive and powerful topics. Second, compared to

qualitative interviews I had conducted in other projects, this method seemed to incite

greater political commentary. I discuss each of these in turn.

Rich Data

While the profile of visual methodologies has climbed since Prosser, (2005b) first

articulated the challenges visual researchers face, the field is still in its infancy and

confidence in the ability of visual images to provide important social findings are at times

tenuous. When I initially started my project I was hopeful my visual data could stand

'alone'. I imagined that the images would tell a tale without the need for additional

interpretation through words. However, I found that it was only with words that I was

able to fully understand what the women's experiences were like. The richness of this

description however struck me as more powerful than words alone. The 'blue eyes' drawn by one of the participants illustrates my point (see Table 7). One of the steps in the body mapping sessions was for the women to make a self-portrait. This particular participant used blue crayon to colour her eyes. Initially I assumed she was simply colouring in her natural eye colour for her self-portrait. However, when I looked at her closer I noticed her eyes were not actually blue. When I explored this with her in the interview there was a much richer understanding to be had. She shared that her eyes become blue when she cries and feels things deeply. She shared that mindfulness helps her feel all of her emotions without turning away from any of them. This experience highlights for me why Mair and Kierans (2007) argue that the text or verbal commentary, and not the drawings, should be the researcher's primary analytical focus. While this example demonstrates an important analytic insight it also highlights the power of visual methodologies. Without the drawing I am not confident we would have come to the same discussion. It was such an important discussion that it prompted me to start to notice if this was common to other mothers who practice mindfulness. An overarching theme eventually became about mothers turning to the difficult emotions and painful parts of life and our discussion about the blue eyes was fundamental to its development.
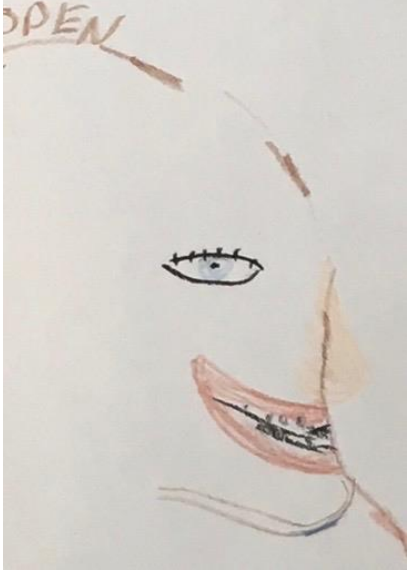
Social Critique

Body-map storytelling is a data generating research method used to tell a story that can visually reflect social, political and economic processes. Further, individuals' embodied experiences and meanings attributed to these process and how they shape participants lives become clearer (Gastaldo et al., 2010). I certainly had more critical aspirations for my study as evidenced by the broader aims for my study: 1) Contribute to knowledge about what mindfulness means to mothers who work as a professional in the

Canadian context; and 2) Understand how mindfulness helps working mothers consider their lives in light of the current socio-political context. As the second point highlights, I was expressly interested in critically examining how women negotiate social-political influences as working mothers. Ganesh (2007) highlights that visual data may be critical to challenging power relations and social structures, and to envision a more hopeful future.

Table 7

Rich Data Imagery

Body Map Question and Participant Response	Participants Visual Response
Body Map Question Step 8: *Drawing a self-portrait: Participants asked to draw a self-portrait on the face of their body tracing that represents how mindfulness shapes the way they face the world* Participant's discussion of the drawing: *Participant – my eyes aren't blue unless I am crying* *Lisa – You made them blue? Can I ask why?* *Participant – [as her eyes start to well up with tears and start to look more blue] Yes…I cry when I am happy, when I am sad, when I am moved, when I laugh really hard, and when I was a little girl they were a really vivid blue, and my eldest had really vivid blue eyes too.* *Lisa – So I am curious, is that a good thing or a bad thing for you? Not the right words but…* *Participant– Good [laughing]...absolutely good! And it helps me in the work that I do that with absolute certainly that all emotions are absolutely healthy and good.*	

Because I had critical underpinnings, I was concerned I may generate politically correct, sanitized or overly conscious drawings, particularly given the subject matter which is steeped in normative ideals. Instead, the depictions the women created seemed to authentically critique their social world. There were few depictions of how 'happy' mindfulness made them, or how 'ideal' their families were. Body mapping does seem to be particularly well–suited for critical and political insights. The 'white picket fence prison' discussed above was one of many images that challenged dominant cultural narratives about motherhood and working. Another researcher who used body mapping suggested, "that the exercise will 'empower' participants through the acquisition of knowledge and personal insight" (MacGregor, 2009, p. 89). Other researchers seem to support this claim. MacGregor, (2009) found that political messages permeated all the body maps in her study with women living with HIV and AIDS. Additionally Sweet and Escalante (2015) found the women in their study used their body maps to critique how unsafe neighbourhoods can be for women and offered different possibilities to make safety a priority. In a recent systematic review of body mapping it is noted that it has political roots, and many projects include varying degrees of a social justice agenda (de Jager et al., 2016).

Limitations and Judging Quality

Body mapping is not without its limitations. It goes without saying that what participants depict cannot be blindly treated as a reliable guide to what they subsequently go on to do or how they live their lives. However, it is important to note that this analytical assumption can apply to more traditional forms of social research. Further some participants had more barren maps, which posed a challenge analytically. Perhaps this demonstrated a lack of interest on the participant's behalf or a lack of artistic ability.

With little imagery to work with it can be difficulty to reach more latent meanings or critical insights. Alternatively, the absences may be important venues to better understand the phenomena under investigation.

The use of images can be foreign for participants, who may already be intimidated by the idea of research. At times I found the participants wanted 'hints' as to what to draw. One of the steps asked the participants to draw a symbol that represented their 'power point', or where they draw upon for strength. The dialogue below with two different participants about the same step exemplifies:

Participant – *Can you give me some hints?*

Lisa – *It could be a symbol, a word, a phrase, a number, a letter…*

Participant – *hmmmm…ok I am going to do a word*

Another participant asked:

Participant – *So where do I draw it?*

Lisa – *Really anywhere.*

Participant – *ok, I'm still not sure…ummm*

Lisa – [after a long pause] *So, if it feels cerebral then you could place it on your head. If it feels bodily then maybe on your body.*

While this step was a challenge for some of the women, for others it was an opportunity to draw very powerful imagery. Rather than a flaw in the step or question, perhaps people who are not as creative need additional support in body mapping exercises. At times I worried that my directions were too leading, and wondered if seeing a sample blank body map outline might be less so and help some participants better understand what they are being asked to draw.

The imagery the women provided made analysis and meaning making a richer

and more authentic process. However, I am conscious that body mapping requires additional time from participants, and researchers must weigh the pros and cons before asking participants to offer up several hours of their time. For me, the time was well spent and the women seemed to enjoy the process. This may not always be the case. Many of the women commented on how much they enjoyed and benefited from the process so this alone bolsters me to consider using the method again as shared by one of the participants:

> *You know that felt really good. You can go through your days and not notice what is helping you and why. This makes sense to me and it re-affirms that I need to keep doing what I need to keep doing and to prioritize me time, which can feel expendable, and it shouldn't be!*

Conclusion

During one of the debriefing interviews from a focus group, two of the participants had the following dialogue:

Participant 1- *It was hard to stay away from words!*

Participant 2 - *I want to hear what yours is all about.*

Participant 1 - *No I want to hear what yours is all about!*

Participant 2 – (laughing) *It expresses all sorts stuff. I don't know where to start!*

As this passage suggests, body mapping can be a fun and expressive experience for participants of social research. It can also be a confusing and overwhelming experience for researchers and participants new to the method. My hope is that this paper offers some insights and assurance about how to proceed with a project that includes body mapping. While body mapping is certainly not the only method to support egalitarian research practices or incite political thinking, and does come with potentially serious

ethical challenges, it is worthy of consideration for social research. Body mapping may not be suited to all research topics or participants, but perhaps this paper will inspire other qualitative researchers to give serious consideration to the method. Body mapping privileges the body in research in ways that I argue are simultaneously fun, accessible and meaningful for both participants and researchers. I conclude with a more hopeful note about the body, and the ability to express ourselves bodily, citing a poem by Mary Oliver (1986):

You do not have to be good.

You do not have to walk on your knees

for a hundred miles through the desert, repenting.

You only have to let the soft animal of your body love what it loves.

Tell me about despair, yours, and I will tell you mine.

Meanwhile the world goes on.

Meanwhile the sun and the clear pebbles of the rain are moving across the

landscapes, over the prairies and the deep trees, the mountains and the rivers.

Meanwhile the wild geese, high in the clean blue air, are heading home again.

Whoever you are, no matter how lonely,

the world offers itself to your imagination,

calls to you like the wild geese, harsh and exciting--

over and over announcing your place

in the family of things.

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CHAPTER 7

CONCLUSION AND IMPLICATIONS

When Women Gather,

McCorquodale, 2016

When I am with children, I am a nobody, and the greatest privilege I have when I approach them is to forget that I even exist, for this has enabled me to see things that one would miss if one were a somebody – little things, simple but very precious truths (Montessori, 1992, p. 85).

Summarizing and reflecting on a project that is the culmination of almost six years' worth of work is a daunting task. At times I have been inwardly, and outwardly, critical of academia believing that research agendas can be out of sync with the 'real' world. However, as my time as a graduate student draws to a close, I now believe that our society needs spaces and places to think fancifully, unrealistically and creatively about the 'real' world. Without this chance, we risk losing creative and truely scholarly scientific inquiry. However, I still believe social research that meaningfully contributes to the 'real' world is also essential, if for no other reason than to better the circumstances and lived experiences of others. As such, I begin by addressing the research implications of this work highlighting contributions made to: the field of mindfulness; working mothers and their families; the field of professional practice; and methodological contributions. I next discuss particular strengths and limitations of this study, and consider quality criteria for this project. I conclude with future research directions and offer some final thoughts about this study.

Research Implications

The value of any academic work may be partially judged by what it contributes to a field of study. While I remain humble in my contributions I offer particular ways this research adds to a variety of fields.

Contributions to Mindfulness

This work offers two important contributions to the field of mindfulness. First, there are very few studies that look at the intersection of working and parenting and how mindfulness contributes to their coalescence. This study adds to a very small group of largely unpublished studies in this area (e.g. Harlin-Clifton, 2008; Stebbins, 2012). Conversely, there are relatively large bodies of work that look at mindfulness and how it

influences professional life (e.g. Dyche & Epstein, 2011; Gura, 2010) as well as parenting experiences and practices (e.g. Bailie, Kuyken, & Sonnenberg, 2012; Bluth & Wahler, 2011). The intersection of the two is a relatively ignored facet, though no less worthy of attention. Other researchers have shown that how parents feel and think about their roles as worker/parent has strong implications for parental and child well-being (Cooklin, Dinh, Strazdings, Leach, & Nicholson, 2016). Cooklin et al.'s longitudinal study with 2693 mothers and 3460 fathers found that inflexible work environments were particularly detrimental to mother's wellbeing. Other studies demonstrate that working and parenting can be problematic for mothers resulting in stress, burnout and disengagement from both work and family life (e.g. Becker, 2010; Beshare, Hutchinson, & Wilson, 2010; Bull & Mittelmark, 2009; Cunningham, Bartels, Grant, & Ralph, 2013). The six women in this study were able to build their emotional wellness as a result of their mindfulness practice, despite difficulties encountered in their social and work environments. This is not to say that mindfulness was a panacea for these women, but I do think it was a protective factor for them.

This brings me to the second contribution this work makes to the field of mindfulness. This research highlights the political nature of a mindfulness practice. I think this is something that is discussed to a limited extent, and often in the periphery (e.g. Stanley, 2012) in the field and further attention is warranted. As I discussed in detail in Chapter 5, mindfulness seemed to support the women in developing an awareness of feminist issues and how their lives were impacted by patriarchal policies and social attitudes. This is a relatively quiet discussion in the mindfulness literature. A few of the participants in this study actually commented on the relative androgyny in mindfulness discourses. As Sally said,

This would be fine if you are in a society that honours the body as sacred, but until we get there I don't think we should be erasing a gender just yet!

Rather than adhere to normative ideals of motherhood, these women thought creatively about their lives, could recognize contradictions in expected versus lived realities and adjusted their lives accordingly. The following quote by Mcweeney (2014) captures what I saw as the core of their experiences: "As our perceptions of Necker cubes and duck-rabbit pictures illustrate, reality is able to sustain multiple determinations and perspectives, although none can be sustained exhaustively and no two contradictory perspectives can be sustained at exactly the same time" (p. 135).

It may be important to pay attention to the feminine in mindfulness – the bodily, the subjective, the personal and the political. Doing so seemed to help the women in this study navigate work and family life. For the women in this study, mindfulness was a powerful means for them to develop a feminist consciousness and to resist dominant narratives that often negatively contribute to mother-guilt and possibly depression and anger. From this position they could exist in the world in ways that felt more authentic and meaningful. Many feminist scholars encourage women to appreciate anger as an appropriate response to institutionalized oppression and that an "angry experience is a kind of knowing experience" (Mcweeney, 2014, p. 123). Like Audre Lorde (2007), I do not think that all anger is productive or healthy. Anger turned inward can be particularly destructive. It is my hope that readers of this work see the 'rage' shared by these women in a way that challenges and provokes rather than alienates or dismisses. These women did not share their stories to insight pity, but rather that to provoke thought and consideration into how family life might be constructed differently.

Contributions to Working Women and Their Families

We can, all of us, stand up for care. We can change how we think, how we talk; how we plan and work and vote. We can come together as women and men. We can finish the business our mothers and grandmothers began, and begin a new revolution of our own. (Slaughter, 2015. p. 256.)

I identify with Chelsey, the character developed in the narrative in chapter five. Like Chelsey, I was originally quite hesitant to become a mother, though my affinity for children was never the challenge. Perhaps my journey to motherhood was what propelled my professional decisions. As my career has progressed I have moved increasingly towards wanting to work with children and families. While I was completing this work I transitioned from primarily a clinical role as an occupational therapist and practice leader, to an academic role working as faculty in an Early Childhood Leadership Degree Program. I was hired because of my expertise in professional practice and my interest in family wellness. It is my hope that this work shines a light on different ways of engaging in the world that could have positive implications for working mothers and their children.

Working mothers often sense that the choice to work always brings loss: either she loses her autonomy and health, or her children's wellbeing suffers (Fedor Kittay, 1999). This is an obviously simplistic understanding of the consequences of being a working mother. The women in this study appeared to appreciate a forum to voice their experiences and share their ideas about how mindfulness contributes to their family life. Quite honestly, I almost get euphoric thinking about a world where all men and women perceive their lives and view their culture in the same way the six women in this study did. At the risk of losing sight of the complex nature of parenting and work, I am left to consider what might be different for mothers if they adopted a more mindful view of the world. I wonder how many mothers could avoid depression? I wonder if women might

feel less guilt as working mothers? I wonder how many children would feel more securely attached to both their mother and father, while simultaneously feeling supported by a loving community? The following conversation I had with Siobhan speaks to these questions:

> Lisa – *When I was a kid I actually never wanted to be a mom. My mom was a good mom, but she always seemed to carry the weight of the world, which she sort of did (laughing). And I always felt that she was very busy and it looked very hard to me, and 40 years ago it was hard. I think it was harder than today, but there is also a lot of privilege and joy that comes from raising kids and…it [parenting] is both, and not an either or type of endeavor.*
>
> Siobhan– *For me I always wanted to be a mom but I was worried about screwing up my kids! But now I am like, 'it's too late!'. It is so complex, even if my girls ends up in therapy (laughing) that is ok.*

There is something very rudimentary and complicated about motherhood. Despite the 'apple pie' idiom, mothering cuts deep into people's psyche. One of the women shared with me the following:

> *Honestly, when I got your [research] proposal I was at home and I got teary and I thought 'ok I guess I better do this'!*

This comment encourages me to consider what this study offered to the participants. Because body mapping has a connection to therapy, I was clear that this study was not a therapy, but it became obvious to me that it was therapeutic for participants to have a venue to voice their experiences and concerns. Further venues for working mothers to share their concerns may be warranted, particularly in academic research. I see storytelling as a chance for people to encounter others, and in particular as

an effective way to consider a collective history. As I suggested above, mindfulness

supported the women in this study to see their lives as socially situated. Further, I think

they had a deeper appreciation for both past and future generations of mothers. This was

the impetus for me to create 'Chelsey', the fictitious woman at the centre of the narrative

shared in chapter four. In my mind Chelsey represents all the contradictions women face

when they become mothers. I hope all women who identify with 'Chelsey' find salve in

the words offered by the six women who offered support to Chelsey on her journey to

possible motherhood.

Generally speaking the care and mothering of children has been historically

assigned based on sexist and classist assumptions. The gendered and privatized nature of

care has traditionally excluded fathers, and other competent adults, from caring for

children (Fedor Kittay, 1999). Most women in this study seemingly had enough wealth

at their disposal to pay for other, less wealthy, women to care for their children while

they worked. However, this predominately privatized and female "crumbled

infrastructure of care" (Slaughter, 2015, p. 232) is no longer sustainable. Policy makers,

and by extension society, may need to seriously consider how to rebuild this

infrastructure without further subjugating an entire gender. This is pressing work

considering 4/5 of mothers with young children work in Canada (Ferrao, 2010), and few

of these children attend quality childcare and education (Gialamas, Mittinty, Sawyer,

Zubrick, & Lynch, 2015; Canadian Council on Learning in Education, 2006). While the

initial phase of change may be the personal awareness these women described, for

effective change to be realized structural barriers need to be addressed. At a minimum,

this study demonstrates that mindful attitudes may help incite the changes required for

working mothers. Further, boys and girls may need to be socialized differently and laws

and regulations more clearly enforced. For example, it is still overwhelmingly mothers who seek flexible work arrangements, often out of a sense of guilt. Perhaps more troubling, men still face job insecurity when they take parental leave (Boreili, Nelson, River, Birken, & Moss-Racusin, 2016). I recently shared the findings of this study with a friend. She confessed that her husband had cried after the birth of their son, disheartened that he could not take any time at home with his newborn. He had felt that to do so would almost inevitably result in a 'sudden' layoff, that he had seen happen to virtually every other new father who tried to take parental leave with his company. It is essential to note that, "as long as a cultural ideology of *mothering* expectations is perpetuated and ideologically differentiated from *parenting* expectations, mothers will be prone to responding to their parenting identity in gendered ways" (Johnston & Swanson, 2006, p. 519). I genuinely hope my own children will both recognize *and* have at their disposal different possibilities when and if the time comes for them to raise their own families. The insights and awareness mindfulness nurtures may be a first step in realizing this potential.

All of the women in this study were quite similar in that they were all around the same age, had positions in health or social care, and lived in a similar geographic location. They were also quite privileged in many ways. As such I wish to acknowledge and express my understanding that the women in this study are not the most vulnerable working mothers. They all held post-graduate degrees, and had many supports in place to perform their roles effectively. I am however more inspired than ever to consider how mindfulness may influence women in much more dire circumstances. Is mindfulness even relevant when there is no food in the refrigerator or electricity is turned off due to unpaid bills? I have worked with many families during my clinical work that were in

these very situations. If I am honest, I rarely spoke of or introduced mindfulness to these families assuming, perhaps falsely, that they had 'bigger fish to fry'. I still question if that was the right thing to do, and in some ways now regret not giving these families the potential opportunity to see their own lives in ways that may have opened up new possibilities. This study was expressly about women that did not fall into this most vulnerable group of women and the findings need to be viewed as such. Further research is needed to seek out other groups of women's experiences as working mothers.

Contributions to Professional Practice

I recall the moment I decided to leave a particular work position I had held for a few years. I was sitting in a training session, for what I cannot honestly recall but I do recall my supervisor sharing: "You signed up for this position and I expect you to be here Monday to Friday 8am sharp to fully 4pm. Just because your children are sick does not mean you are too. I expect you to be at work". I knew then that my time in that particular position would be limited. I could not envision myself thriving long-term in a work setting that was so unforgiving, and frankly cold towards the challenges of being a working parent. It is my hope that this study can be used to better inform those in leadership positions to reconsider the policies and practices they institute in their workplaces and how they impact families with young children. Many of the women in this study made strategic career choices. For example, Alicia left a demanding inflexible leadership position as the role caused too many conflicts for her family life. Virtually all the other women actively sought part-time work to avoid what they knew would be work-family conflict if they did not. Perhaps this is why 70% of those Canadians who seek part-time work are women (Government of Canada, 2015). While the women in this study were not resentful of these choices, they clearly saw how inflexible work

environments impacted their family life negatively. In an ideal world there would be more understanding of work-family obligations and adjust policies and practices accordingly. Mindfulness seemed to help the women navigate these transitions effectively, but I would like to see it taken a step further so that mindful organizations (e.g. White, 1999) could better recognize their strong impact on family life.

Fully 82% of those employed in health and social services are women, and they contribute nearly twice the amount of child-caring hours than their male counterparts (6.5 vs. 3 hours per day for those with children under 5) (Government of Canada, 2015). As the preceding chapters have pointed out, working and parenting can be particularly difficult. Further, burnout, bad faith and disengagement are increasingly common for those in health and social care (Roh, 2016). I believe efforts must be put forth to mitigate these trends, to ensure we have health and social care workers who are able to be present, authentic and caring. When you combine inadequate systemic support for families, and the emotionally challenging work many people in professional life encounter it can be a perfect storm for even further disengagement or possibly retreat from the field entirely (Association of Canadian Community Colleges, 2012).

This speaks to the need for a critical edge to professional life. Mindfulness may be a transgressive practice (Conradi, 2015). Mindfulness is not always viewed as a critical way to approach the world, though I am not alone in arguing for this recognition (Adorjan & Kelly, 2008; Napthali, 2003; Stanley, 2012). I have theorized this notion in Chapter three, but it was affirming to see the critique these women expressed through their experiences. Many of the women represented insights and experiences that I saw as transgressive. Various societal constructions of family such as 'the white picket fence' image were challenged by the women in this study, and replaced with an interconnected

sense of care and responsibility for self and others. Particularly fascinating for me was the grounding and connection to their broader communities these women described. Attitudes such as attentiveness, responsibility, nurturance, compassion – traditionally associated with women and traditionally excluded from public consideration can become central. All of the women in this study were in female dominated caring-intensive positions. While this research was not expressly focused on professional practice, it does have the potential to valourize and centralize care as a useful and important position in professional practice. Caring has traditionally been considered a private moral issue, and has in recent decades become hyper-focused on children (e.g. intensive helicopter parenting) (e.g. Asher, 2012; Rizzo, Schiffrin, & Liss, 2013). Returning care to public places may overcome dualisms and bring balance to the relation of reason/emotion, heart/mind and to reduce the control of reason over emotion in moral reasoning and agency. Doing so has important implications for professional practice, where too often reason and mind have predominated decision-making and considerations for quality (Blair & Robertson, 2005; Davies, 2003).

Methodological Contributions

The method of body mapping was explored in greater detail in chapter six, but it is instructive to provide a summary here as well. This study is somewhat unique in that, to my knowledge, the methodological pairing of phenomenology and body mapping has not been done before. The images and words produced from the body mapping session were rich additions to my phenomenological analysis, and I would encourage other researchers to consider a similar pairing. As I described in Chapter six, body mapping was a highly effective way to gather rich data and without it I am not sure I would have had the same level of appreciation for the women's experiences. The 'blue eye'

discussion I had with Sally, as described in Chapter six, was a very rich and meaningful conversation about what mindfulness offers to her life. Without the actual image to build upon I do not believe we would have come to the same insights about how mindfulness impacts her life emotionally. I believe the body mapping exercise enabled me to gather more authentic and less cerebral representations of the women's lives. As Siobhan shared after her body mapping session, there were insights on the map that even she found surprising:

> Siobhan - *Yes very much so…and this wasn't necessary obvious to me until I started to draw.*

I recall remarking to my husband while in the middle of data collection that I felt like I was carrying home sacred artifacts after each session. For me, the sessions were fun, creative and powerful experiences to share with the women. Siobhan and I had a conversation towards the end of her body mapping session and she commented on how surprised she was by the clarity of her drawing and how central her drawings were on her body map. This immediately struck her as reflective of how mindfulness impacts her life, but was not necessarily something she processed consciously until the body mapping session:

> Siobhan – *I am really aware that there is very little going on down there [point to the lower half of her body map].*
>
> Lisa - *That is why I am growing to love this type of research. It is so interesting…I am positive if we sat down on two chairs we would not get the same type of information, like we are when you are drawing your experiences.*

One thing I did not discuss in Chapter six was how emotional some of the sessions became. I think this speaks to how quickly the discussions and images produced

got to the core of the women's experiences, and thus how highly effective this method was to reach phenomenological insights. I actually began to share the following with the final few participants:

> *Something for you to know is virtually every woman has cried or been on the verge of tears. I think it is such a personal topic that it really hits home, so if that happens for you it is totally normal.*

I debated sharing this, but I decided it was the right thing to do. I think it was helpful for the women to hear that the process, while highly emotional for other women as well, was very powerful and the emotions the process triggered were not necessarily negative emotions. Further, I think this helped create a safe space for the women to deeply share their lives through their body maps. A few of the women even thanked me for offering this information as it better prepared them for the process. Some may see this as a potential ethical risk of body mapping, but as I stated in Chapter six simply because the body mapping session were emotional and therapeutic, does not mean the sessions became a form of therapy. My overwhelming sense was that the women found it affirming to have a chance to share their insights and experiences as working mothers, and this was particularly evident when women chose to meet in a group format. One participant told me I should make a point of mentioning how nice it was to participate in a session with other women and share food and drink while talking about such a personal topic.

Lastly, I found the body mapping sessions very egalitarian. Giving participants the choice to complete the body maps in either group or individual sessions, as well as the length and number of times participants wanted to meet may have contributed to this tone. While this may not be an option for all researchers, in my experience it was a

welcomed choice. Without hesitation I would consider body mapping again as part of a qualitative research project. The method may not pair well with other methodologies or topics, but it is worthy of consideration if richness, critical insights and egalitarian research practices are a priority (Flyvbjerg, 2001).

As the preceding chapters have pointed out, working and parenting can be particularly difficult. Further, burnout, bad faith and disengagement are increasingly common for those in health and social care (Roh, 2016). I believe efforts must be put forth to mitigate these trends, to ensure we have health and social care workers who are able to be present, authentic and caring. When you combine inadequate systemic support for families, and the emotionally challenging work many people in professional life encounter it can be a perfect storm for even further disengagement or possibly retreat from the field entirely (Association of Canadian Community Colleges, 2012). There is a relatively small body of literature on body mapping (e.g. Cornwall, 1992; Crawford, 2010; Gastaldo, Magalhaes, Carrasco, & Davy, 2010; Greenhalgh, 2004; MacGregor, 2009; McCorquodale, 2014; Meyburgh, 2006; Nasim, 2009; Solomon, 2008; Unit, 2004). This project contributes to this small though important body of literature, and furthers the understanding of how body mapping can contribute to qualitative research.

Quality

I spent several months listening to the transcribed material. I would literally plug in my computer to my car stereo and listened to the audio files everywhere I drove for about a month. I read and re-read the body mapping session transcripts and visually reflected on each body map as a whole, in addition to looking at individual images and body maps in isolation. This full immersion in the data left me with what I felt was a true sense of what the women were telling me. I repeatedly thought about what each of these

women would say to the others if they had a chance to meet, as not every woman met in a group session. I learned a lot from my time with each of the women, and began to construct the core messages each women shared with me into a common narrative that eventually became the story centred around the fictitious character Chelsey in Chapter four. Virtually all of the quotes/ideas and images arose from the body map session and subsequent analysis. I chose to use a story in particular because I think stories captivate and speak more to the heart of an issue than any other form of representation (Loh, 2013). While I am not a novelist, it is my hope that I have done justice to the participants' experiences. I believe stories are about meaning and how people convey meaning in their lives. As such I felt sharing these phenomenological findings in a narrative was fitting. Narratives may be judged by the extent to which they hold verisimilitude (rings true for others with similar life experiences or can imagine it to be so), but also can be considered using other criteria including member checking, reflexive journaling, and prolonged engagement with the material (Jeong-Hee, 2016). I have already referenced the imersive process I undertook during data analysis, and I also kept a detailed reflexive journal that started long before the study even began.

I shared the story in Chapter five with each participant to seek feedback from them regarding how I had interpreted their experiences. The feedback I received was quite positive and left me feeling comfortable with my interpretation. Nina offered four words when she read the interpretation material:

"This is f—king awesome",

Another woman shared,

"I found myself tearing reading this excerpt you sent. Curious. So much layered into this topic, so much unspoken, unsaid, unreflected in our 'work' of mothering.

You've given us a gift".

In addition to narrative quality criteria, acknowledging that narrative work is quite phenomenological in nature (Munhall, 2012), this research may be evaluated using phenomenological quality criteria. Polkinghorne (1983) suggests that phenomenological accounts can be evaluated based on 1) Vividness; 2) Accuracy; 3) Richness; and 4) Elegance. I discuss each in turn.

Vividness speaks to the degree to which a representation generates a sense of reality and draws readers in. By representing my data visually and narratively, it is my hope that readers of this dissertation can feel the women's experiences and are compelled by their words and ideas. It was a conscious methodological choice to explore the questions using body mapping as I felt this method would most sharply capture the women's experiences.

When a representation has *Accuracy*, readers can recognize their own experiences or imagine how they might experience the world from the perspective of the participants. The feedback I received from the women about my analysis supported my findings. This offers increased accuracy to this study.

Richness asks the reader to consider to what extent the account draws them in emotionally. Representing the data both visually and narratively I am hopeful that readers are triggered to feel the lived experiences of these women in a way that they might not have otherwise. I spent many months analyzing these women's experiences. Partly because I was so intimately familiar with the topic as a working mother myself, but also because there was an enormous amount of data. Sessions with each women constituted up to 5 hours of recorded data, and the maps contained complex images to decode. For this reason my sample size is small, though arguably quite rich in

understanding.

Last, *Elegance* speaks to the degree to which the account is described in a graceful, clear and poignant way. While I am admittedly not a novelist, it is my hope that my writing is clear and articulate enough to do justice to these women's lives. I think the images contribute to the elegance of this study lending particular poignancy to their experiences that words alone may not have done.

Researcher Reflexivity

As I had intimate experience with this research topic, it is essential to address my own process of reflexivity during this study. How can I be sure I did not see what I wanted to see? I was particularly conscious that my literature review, offered in chapters two and three, was fully supporting my findings. For example, in chapter two I had theorized that mindfulness supports professional practice in five ways: contributes to reflective practice, relational practice, attunement to emotions, tacit intuitive knowledge and care and compassion. I found three of these theorized themes within the empirical study that followed the writing of chapter two and there. Did this mean I forced the data in a particular way? With time and efforts towards researcher reflexivity I began to see this as a positive sign. I now see that the findings in both chapters two and three compliment and heighten the accuracy of the findings in chapters five. This study lends further support that mindfulness really does contribute meaningfully to these core concepts of relational identity, care and compassion, as well as attunement to emotions.

As I shared in the introductory chapter, I have my own personal experiences with mindfulness as a working mother. I was very aware of these experiences and completed my own body map (Appendix J), wrote extensive journal entries and reflected/meditated my way through the research process. I did not want to 'force' the data given my own

personal experiences. In fact, I am such a part of this research that I am the character

Sonyia in Chapter five who hosted the lunch with Chelsey and the six women. I decided

to include myself in the narrative because having participated in the body mapping

session virtually left me with no choice. The women naturally drew me in to their

experiences, questioned me about mine, and were curious to share commonalities and

differences. It would almost be a disservice to the women and the insights they offered to

me to remove myself from their stories.

Because I chose to present my study as integrated manuscripts, I had to make

certain analytic decisions. There were a few different ways I could have represented the

findings. There are other papers I could have written, and may still do so. There was a

lot of data that revealed important ways mindfulness impacted the participants' parenting

practices, and there is more to be said on this topic. I eventually decided to focus on how

mindfulness supported the women to live their lives in ways I found were reflective of

feminine ideals of relational/collective identities, respectful of ethics of care and

openness to all emotions. It is important to note that I saw these themes pervade all the

women's stories, but each woman told a unique tale. For instance, some spoke more

pointedly about the grounding mindfulness offered to them, while others discussed in

greater depth the vividness of life as a result of their practice. These alone could serve as

the framework for another paper from this study.

Strengths and Limitations

I have considered a variety of strengths of this study throughout this dissertation.

For example, chapter six addresses particular strengths of body mapping as a

methodology, and I discussed how fruitfully the research method paired with the

methodology of phenomenology above. In addition, my own experiences as a working

mother with two young children myself may have attuned me to better understand the women's experiences and phrase questions such that rich data could be gathered.

No research is without limitations and projects of this nature are subject to more unique limitations than others. Chapter six goes into more detail about the limitations imposed by body mapping. Given that body mapping is a form of aesthetic representation, I was constrained by the ability of the participants to visually depict their experiences. This approach may require more creativity and artistic enagement than other qualitative methods. For some women this method was an amazing opportunity to tap into their creative side, but for other women it seemed a bit more foreign. When women struggled to represent their experiences visually, I consequently had more limited data to consider analytically. In addition, body mapping necessarily takes considerably more time for participants to complete than a traditional qualitative interview might. While this may be seen as a particular strength of body mapping, it must also be acknowledged as a limitation of the method.

Participant recruitment was limited to women my key informants were familiar with. While I tried to select two key informants who where well respected in the field of mindfulness as well as health and social care work, I am nonetheless limited to their own perspectives of women to invite into this study. Other recruitment techniques such as public advertising in more targeted locations such as yoga classes, may have resulted in a different group of women agreeing to participate.

Finally, because I had six women participate in this study, I was able to deeply explore their experiences, and spend considerable time with them in the body mapping and debriefing sessions. Generalizability is not the purpose of qualitative research and as such readers must consider that these women are in a particular location and context

before assuming these findings apply to all working mothers. However, this study is novel in that few other studies have looked at how mindfulness influences a working mothers life. It is my plan to continue in this line of research going forward.

Future Directions

In many ways this study has only elevated my curiosity and interest in how mindfulness can contribute to one's life. Conversely, I am also more tempered in my beliefs about its contributions. I say this because mindfulness, as an individual practice, can only do so much to challenge deeply entrenched social mores and systemic barriers. While I do believe that public policy can be changed one story at a time, until policies and practices better reflect the needs of a family's life, working and parenting will continue to be challenging. Because I believe that change arises in complex and small ways, sharing the women's experiences here is a small effort towards inciting needed political change. From my perspective, more research is needed to better understand how mindfulness contributes to working mothers lives, as this is an under researched area. In addition, as I stated above, I believe more research is needed to understand how to move organizations towards more mindful organizations.

I have long been interested in how mindfulness contributes to professional practice. While this study did not exactly look at professional life, its consideration for how mindfulness impacts working mothers partially addressed this area of interest. However, as I have grown and evolved as a mother, occupational therapist and academic, I am increasingly interested in how other professions influence the lives of families such as child care providers, teachers, and a variety of other service providers. I was so struck by some of the attitudes and beliefs I have encountered as my children attend early childhood education and care programs, that I was compelled to write chapter two with

this audience as my focus. I think further work is needed to better appreciate how other professionals, who support working mothers, can better advocate and appreciate the needs of modern families.

Concluding Thoughts

Without reservation, I am a better person for having completed this research. Ultimately this work is the academic version of a love letter to my children. We have all sacrificed as I pursued my dream of higher education. I hope my children, if they choose, can raise their own offspring with an understanding of how the worlds of work and family are enmeshed and constitutive of one another. It took becoming a mother myself, despite considering myself a feminist, to fully appreciate the challenges many families face because of socio-political barriers. My final hope is that my children can look back, possibly when they are adults, and be proud of their mother's work. Ironically, feelings of regret for the time spent away from my family linger, despite my adamant belief that guilt does a mother, or her children, no good!

One of my colleagues calls research 'me-search'. As I reflect on the past five and a half years, I have to agree. I selected a project that is very personal and close to my own heart. As a working mother who practices mindfulness, I found the practice quite instructive in my own life and was interested in hearing about other women's experiences. The process was fascinating, thought-provoking, affirming, frustrating and disheartening all at once. The frustration was not with the study or with the women but rather that we, as a collective, still have a long way to go before children and women are given the status and supports they deserve.

Spending such a long period of time on anything can result in fatigue and disinterest. Rather surprisingly, my interest in the field never waivered, though my

interest in having more time with family has certainly grown! I am somewhat sad that

this chapter of my life is closing. Taking the time to deeply explore this topic has been

one of the richest experiences of my life, and I am deeply grateful for the support I as a

working mother received to be able to do so.

I conclude with a poem one of the participants, Alicia, sent to me a few days after

our body map session. She added the following words: '*Thanks for coming to Toronto*

and helping me reflect on what mindfulness means to me as a working mom'. She shared

this poem noting it is one of her favourites, and I too was instantly taken with the poem's

message. Despite Alicia's thanks, it is I that am forever grateful for the opportunity to

learn with and from the six remarkable women that shared their lives with me:

A Settlement,

by Mary Oliver

Look, it's spring. And last year's loose dust has turned

into this soft willingness. The wind-flowers have come

up trembling, slowly the brackens are up-lifting their

curvaceous and pale bodies. The thrushes have come

home, none less than filled with mystery, sorrow,

happiness, music, ambition.

And I am walking out into all of this with nowhere to

go and no task undertaken but to turn the pages of

this beautiful world over and over, in the world of my mind.

Therefore, dark past,

I'm about to do it.

I'm about to forgive you

for everything.

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Appendix A

Ethics Approval

Western Research

Research Ethics

Western University Health Science Research Ethics Board
NMREB Delegated Initial Approval Notice

Principal Investigator: Sandra DeLuca
Department & Institution: Education/Faculty of Education, Western University

NMREB File Number: 106616
Study Title: Living Mindfully: Mothering and Working
Sponsor:

NMREB Initial Approval Date: June 05, 2015
NMREB Expiry Date: June 05, 2016

Documents Approved and/or Received for Information:

Document Name	Comments	Version Date
Instruments	Body Map Session Questions	2015/05/01
Revised Western University Protocol		2015/05/01
Letter of Information & Consent		2015/05/29

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the above named study, as of the NMREB Initial Approval Date noted above.

NMREB approval for this study remains valid until the NMREB Expiry Date noted above, conditional to timely submission and acceptance of NMREB Continuing Ethics Review.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario.

Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB.

The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Ethics Officer, on behalf of Riley Hinson, NMREB Chair or delegated board member

Ethics Officer to Contact for Further Information

Erika Basile	Grace Kelly	Mina Mekhail	Vikki Tran
ebasile@uwo.ca	grace.kelly@uwo.ca	mmekhail@uwo.ca	vikki.tran@uwo.ca

This is an official document. Please retain the original in your files.

Appendix B

Letter of Information and Participant Consent Form

Mindfulness for working mothers: A phenomenological body-mapping exploration

Research Team

Dr. Sandra DeLuca, PhD, Principal Investigator
Faculty of Education, Western University

Ms. Lisa McCorquodale, MSc, PhD (c), OT Reg. (Ont.), Co-Investigator
Health Professional Education
Faculty of Health Sciences

Researcher Background:

I, Lisa, have worked in health care for many years as an occupational therapist, and have been practicing mindfulness for about 10 years. I am a mother to a son, 6, and daughter, 3. I am interested in what mindfulness means to working mothers who practice mindfulness. I would like to invite you to participate in this research study.

Description of the Research

Mindfulness is increasingly becoming mainstream in the West. Researchers continue to demonstrate how mindfulness improves the health and wellness of those who live mindfully. However, there remains a significant gap in the literature regarding what mindfulness offers to women who work outside the home. While there are accumulating bodies of literature that help explain and understand how mindfulness supports both professional practice and mothering, relatively little is known about what mindfulness means to working mothers. Being a working mother brings its own unique circumstances, particularly in the current Canadian context where quality childcare can be challenging to secure, and social attitudes and policies are not always supportive of women working and mothering. To redress this gap, this project will investigate what mindfulness means to working mothers.

Invitation to Participate

You are being invited to participate in a research study that aims to:
- Contribute to knowledge about what mindfulness means to mothers who work as a professional in the Canadian context.
- Understand how mindfulness helps working mothers consider their lives in light of the current socio-political context

The purpose of this letter is to provide you with the information you require to make an informed decision about your participation in this research. Your participation is

completely voluntary and you may leave at any time. Further, if you experience any discomfort during the interview you can choose to not respond to portions of the study with no consequences. We are looking for women who work in a professional setting and are willing to participate in one session (with the option for a second session depending on your preference and the time required for you to share your experiences). Each session would be approximately 2-3 hours in length. You will be asked to think about what mindfulness means in your life as a working mother. I will provide you with many of the questions in advance so you can have some time to consider and reflect before we meet. You may want to spend 1-2 hours thinking about these questions before our actual meeting, though you are not expected to draw your body map until we meet.

The sessions will be conducted in a location convenient for you (i.e. work, university setting, other public location). Your participation in this study will include all of the following:

- If you agree to participate you will be asked to create a body map which will be viewed by others, so that they can learn about your life, your challenges and your solutions. Body maps are life-size human body images created by using drawing, painting or other art-based techniques to visually represent aspects of your life, your body, and the world you live in. Body mapping is a way of telling stories. You will be given questions at least two weeks in advance of the body map session so you can think about what you might want to draw on your body map. All supplies will be provided.
- If you agree to participate in this research you will be asked informal questions during the body mapping session about what you are drawing and why , so we can fully understand what you are representing in your drawing. You may decide to meet a second time to answer these questions if you feel rushed or would like additional time to complete your body map.
- If you agree to participate in this research you will be given the option to complete your body map session with other research participants in a mutually agreed upon convenient location, though you may opt to do the session(s) with the researcher only.
- If you agree to participate in this research you give permission to exhibit your body map, as long as the purpose is to raise awareness about your experiences and promote social change.
- The information obtained through the interviews or the body map, might be published in another form (e.g. dissertation, a manual, a publication, book, website, in print or electronic format). Your body map and interview transcripts may be used for educational/teaching purposes or secondary analysis after the study is complete.
- If by participating in these interviews, you feel that your memories or emotions are hard to handle, you can ask the interviewer to recommend counselling services. If you are distressed the sessions will be stopped immediately, and you can decide whether you want to continue at a later time or withdraw from the study without penalty.

In order to collect information, the body map sessions will be tape-recorded and the researcher may also take notes or transcribe the sessions. If for some reason you provide

information that could identify you or someone else you mention during the session, the researchers will make sure to change enough details so that anonymity is preserved. Lisa McCorquodale will be facilitating and asking you questions while you make your body map to better understand what you are drawing and why. A copy of this letter and a copy of the consent form will be provided for you to keep for your own reference if you choose to take part in this study.

Eligibility

To participate in this study, you must be a practicing professional within a 3 hour driving distance from London, Ontario Canada. You must work at least 25 hours per week in paid employment. You will have been working for at least 10 years, and are proficient in the English language. Additionally, you will have between one and three children living with you who are between the ages of 1 and 15. You must identify as living mindfully and have what you consider to be a formal mindfulness practice that is part of your daily routine. If you self-identify as having significant unresolved trauma or emotional unwellness your participation in this study is not advised, and we ask that you not participate in this study.

Privacy and Confidentiality

Your participation in this study is voluntary. You may refuse to participate, or withdraw from the study at any time. Should you choose to withdraw, your data set will be removed from the study and destroyed. The results of this study may be used in scholarly publications or presentations, however a pseudonym will be used in place of your name to protect your privacy and confidentiality. No information that discloses your identity will be released or published without your specific consent. Research materials will be accessible only to the research team. Research materials will be stored in a locked filing cabinet at my office and destroyed after a period of ten years. Your body maps will be photographed, and you will have a choice to either keep your map or the researcher will store your map. Personal identifiers will be removed from any research material taken off site, will be stored on a password protected computer and any hard copies will be stored in a locked filing cabinet at the local site. All information will be strictly anonymous.

If you have questions about the conduct of this study or your rights as a research participant you may contact the Office of Research Ethics, University of Western Ontario, at 1-519-661-3036 or email at: ethics@uwo.ca. If you wish further information about this study you may contact Dr. Sandra DeLuca.

Lisa McCorquodale, PhD (c), MSc, BASc, BHSc OT Reg. (Ont)
Health Professional Education
Faculty of Health Sciences, Western University
Participant Consent Form: Mindfulness for working mothers: A phenomenological body-mapping exploration

Investigators: Dr. Sandra DeLuca and
Ms. Lisa McCorquodale

I have read the Letter of Information, have had the nature of the study explained to me, I understand my role as a research participant and I agree to participate. All questions have been answered to my satisfaction.

I also agree that my body map may be used for the following purposes:
1) In articles: _____Yes _____No
2) In book chapters: _____Yes _____No
3) In presentations, slide or print form: _____Yes _____No

Signature of Research Participant:_____

Print Name: _____ Date: _____

Signature of Person Obtaining Consent:_____

Print Name: _____ Date: _____

Appendix C

**Questions Posed to Participants to Then be Responded to Visually on Body Maps**

(adapted from Gastaldo et al., 2010 and Soloman, 2008)

|	
1. Participant(s) trace their body in a position that says something about their lives as women who practice mindfulness, and then highlight their body shape in a material of their choice (e.g. paint, chalk).	7. Drawing a self-portrait: Participants asked to draw a self-portrait on the face of their body tracing that represents how mindfulness shapes the way they face the world
2. Participant(s) highlight their body shape and hand/foot prints in paint as a way to demonstrate their presence in the world	8. Creating a personal slogan: Participants create a personal slogan about the strength they receive from their mindfulness practice as a working mother.
3. Drawing where you come from and where you are moving towards: Participants chose and draw a symbol to represent where they are coming from and what their dreams are for the future as a working mother	9. Marks on the skin: Participants draw on marks that they have *on* their skin (physical) *under* their skin (physical or emotional) on their body map to represent their physical and emotional interaction with the world as a working mother who practices mindfulness
4. Painting in your support: Participants write the names of those who support them as working mothers on their body map	10. Participants create a symbol to explain to others what mindfulness means for them as a working mothers
5. Body scanning – marking the power point: Participants visualize the point(s) on their body where mindfulness gives them their power ('power point') then create a personal symbol to represent them and draw it on the power point	11. Public message: their message to the general public about why they practice mindfulness as a working mother
6. Creating a personal symbol: Participant draw a symbol on their power point on the map that represents how they feel about themselves and how they think of themselves in the world	12. Participants decorate the rest of their body map until they are satisfied that it represents them

Appendix D

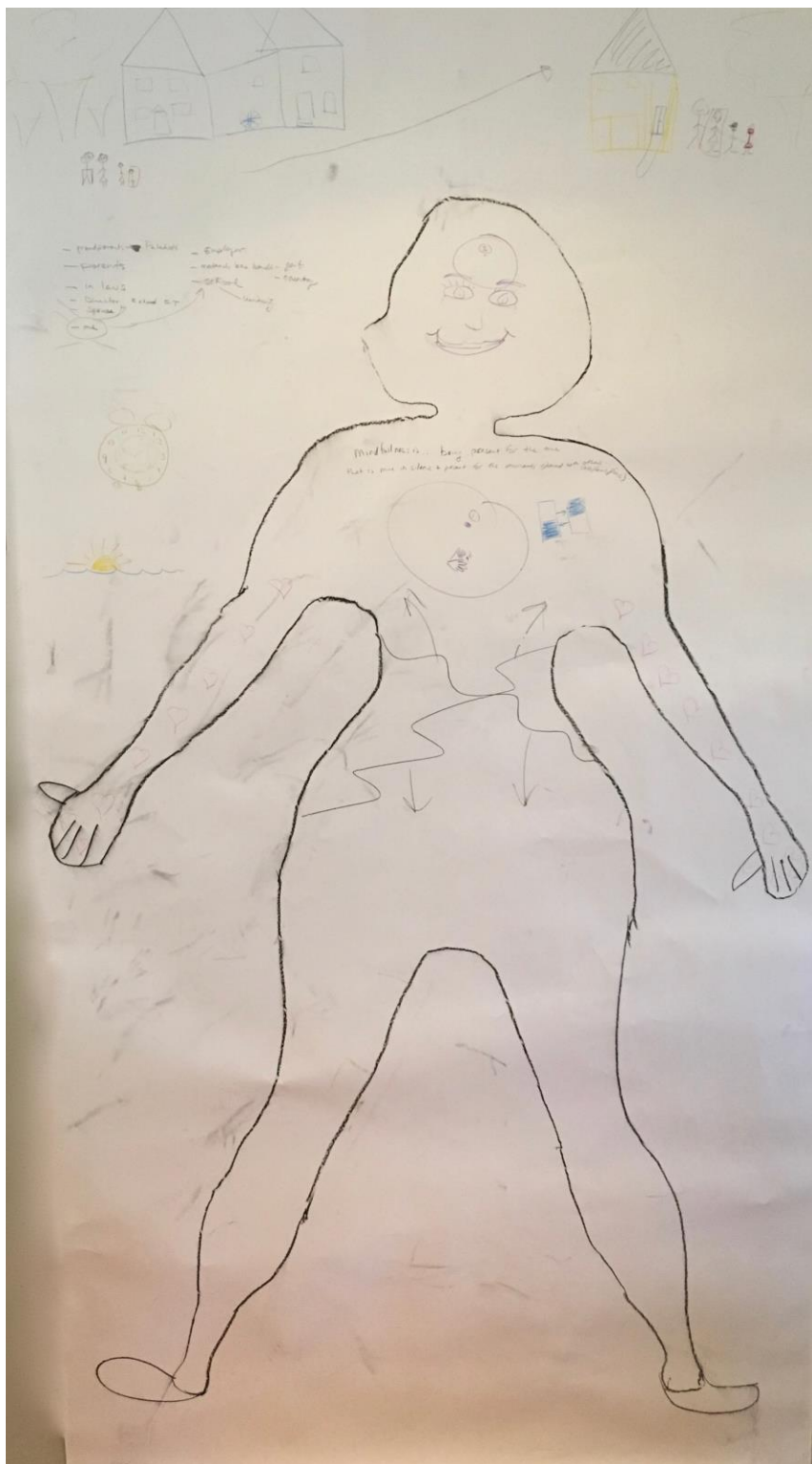**Sally's Body Map**

215
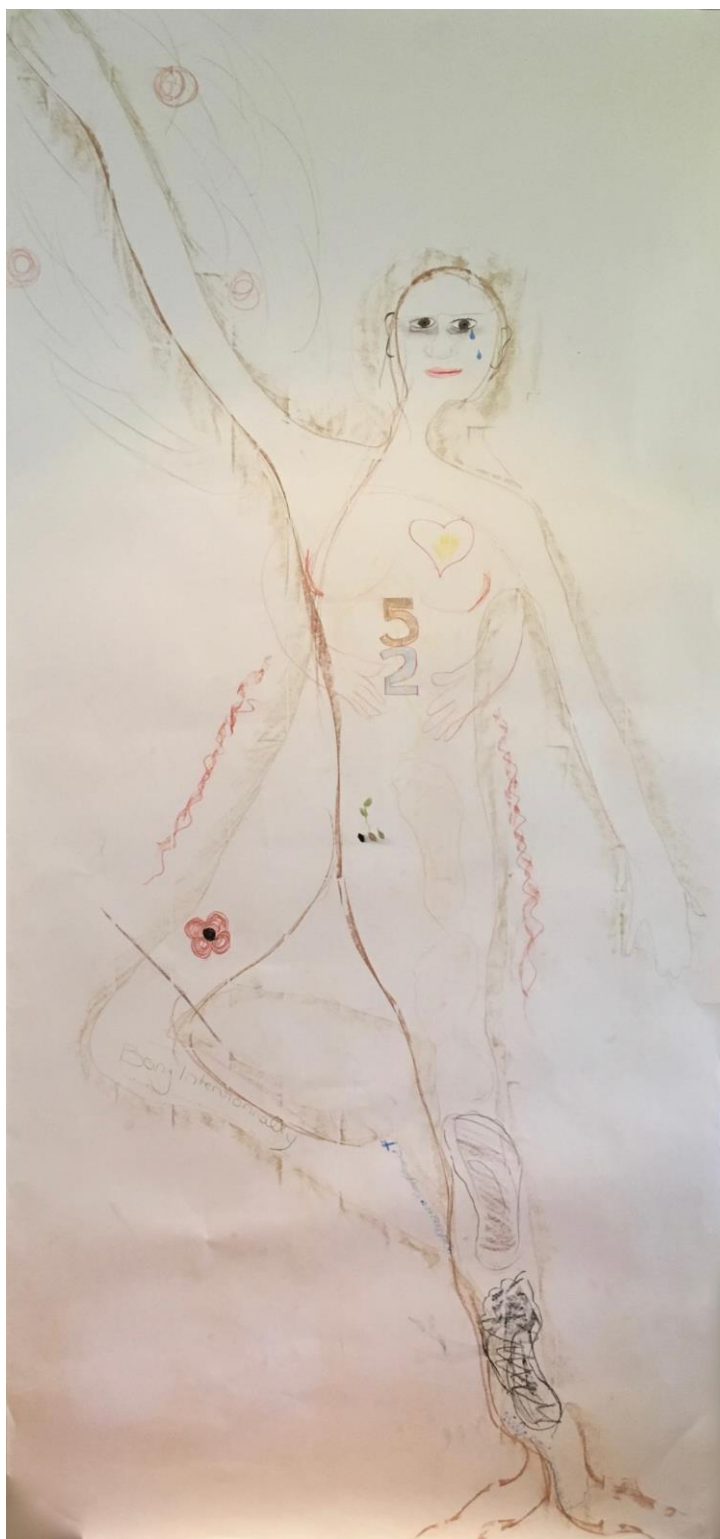
Appendix E

Loja's Body Map
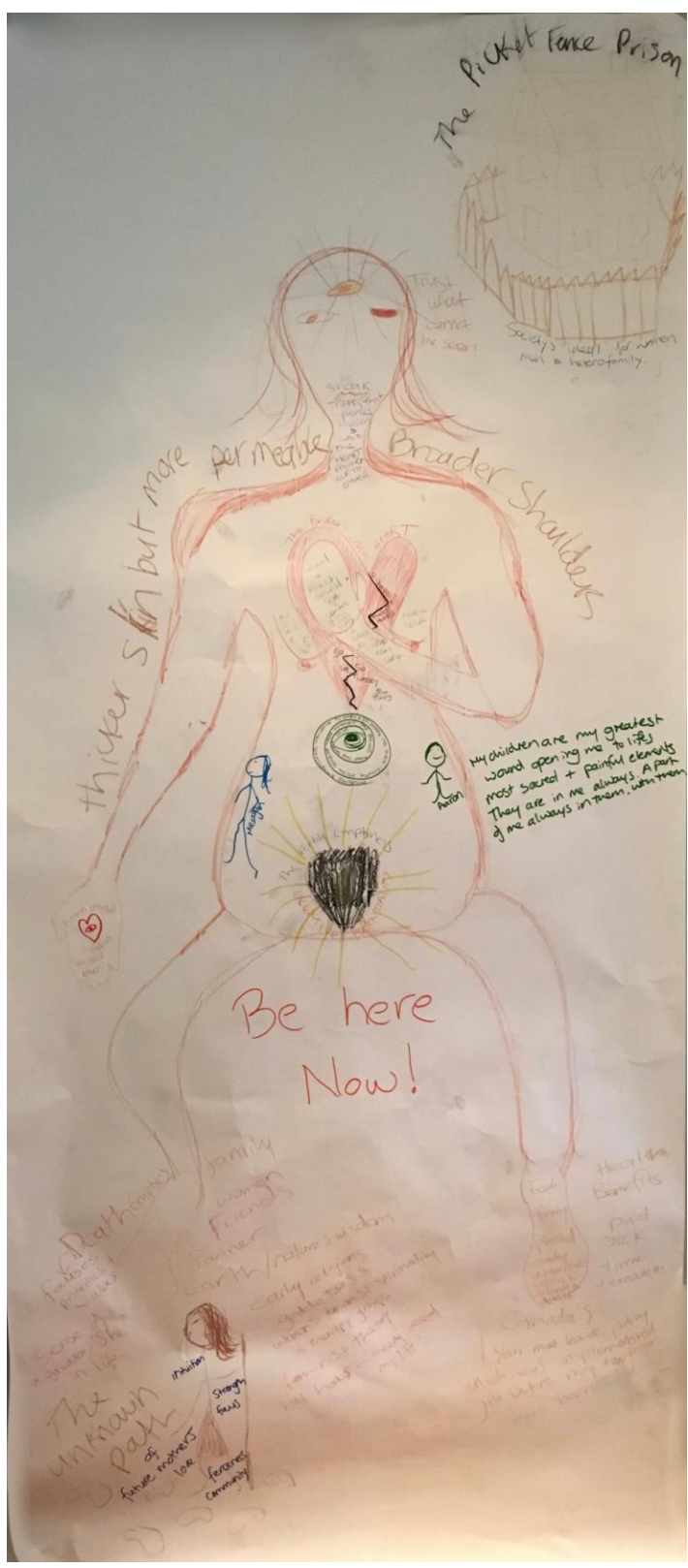
Appendix F

Alicia's Body Map

Appendix G

Joanne's Body Map

Appendix H

Nina's Body Map
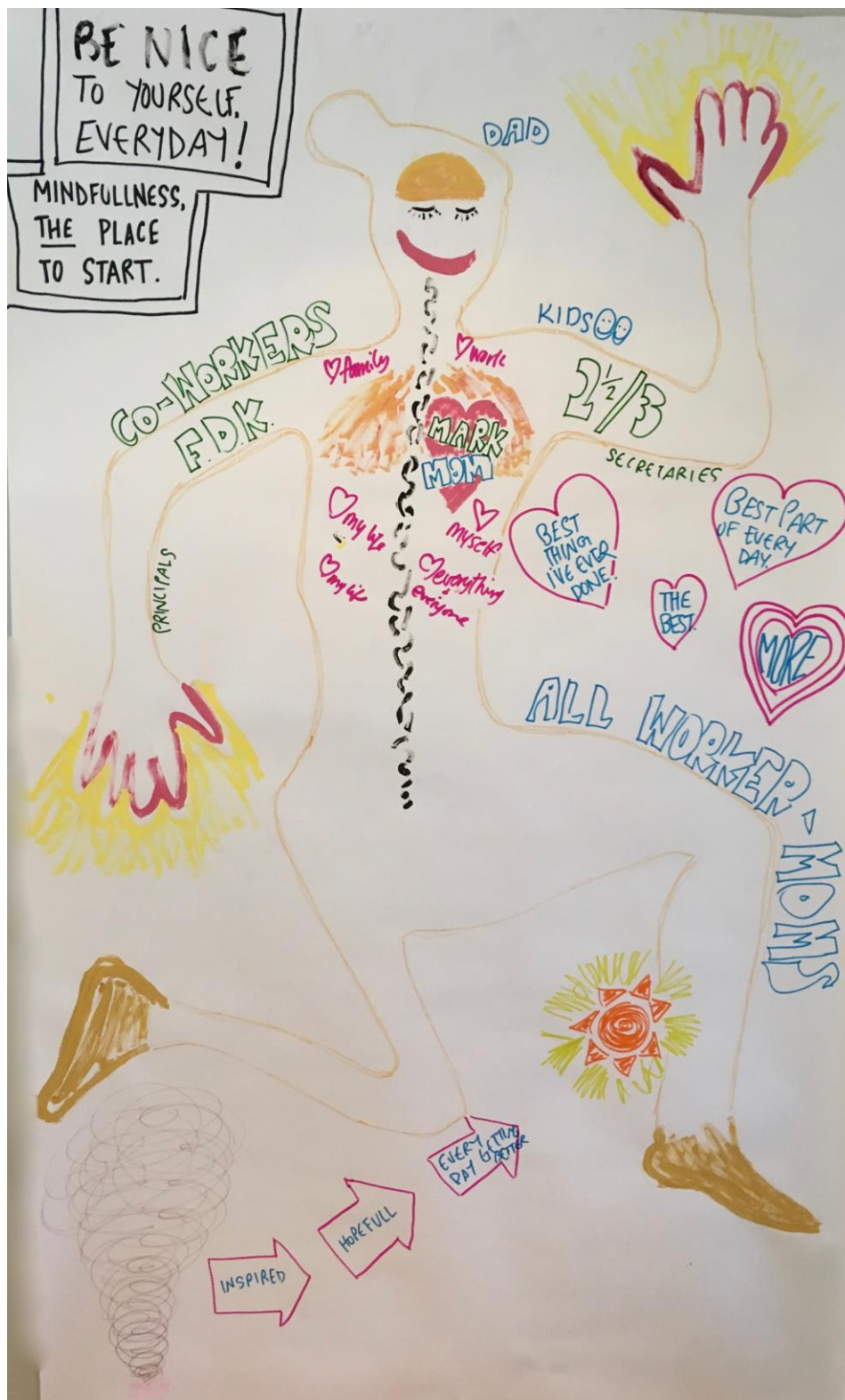
Appendix I

Siobhan's Body Map
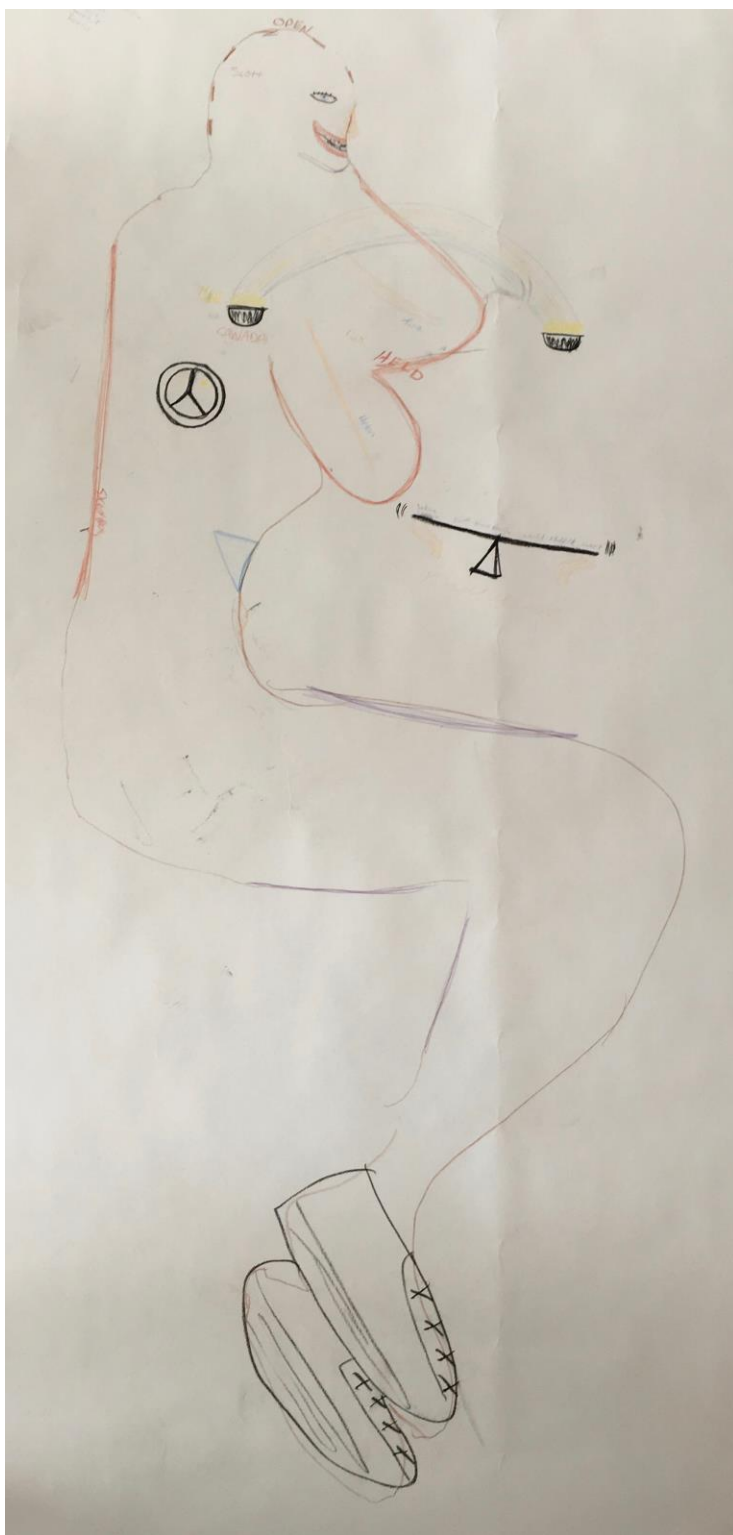
Appendix J

Lisa's Body Map
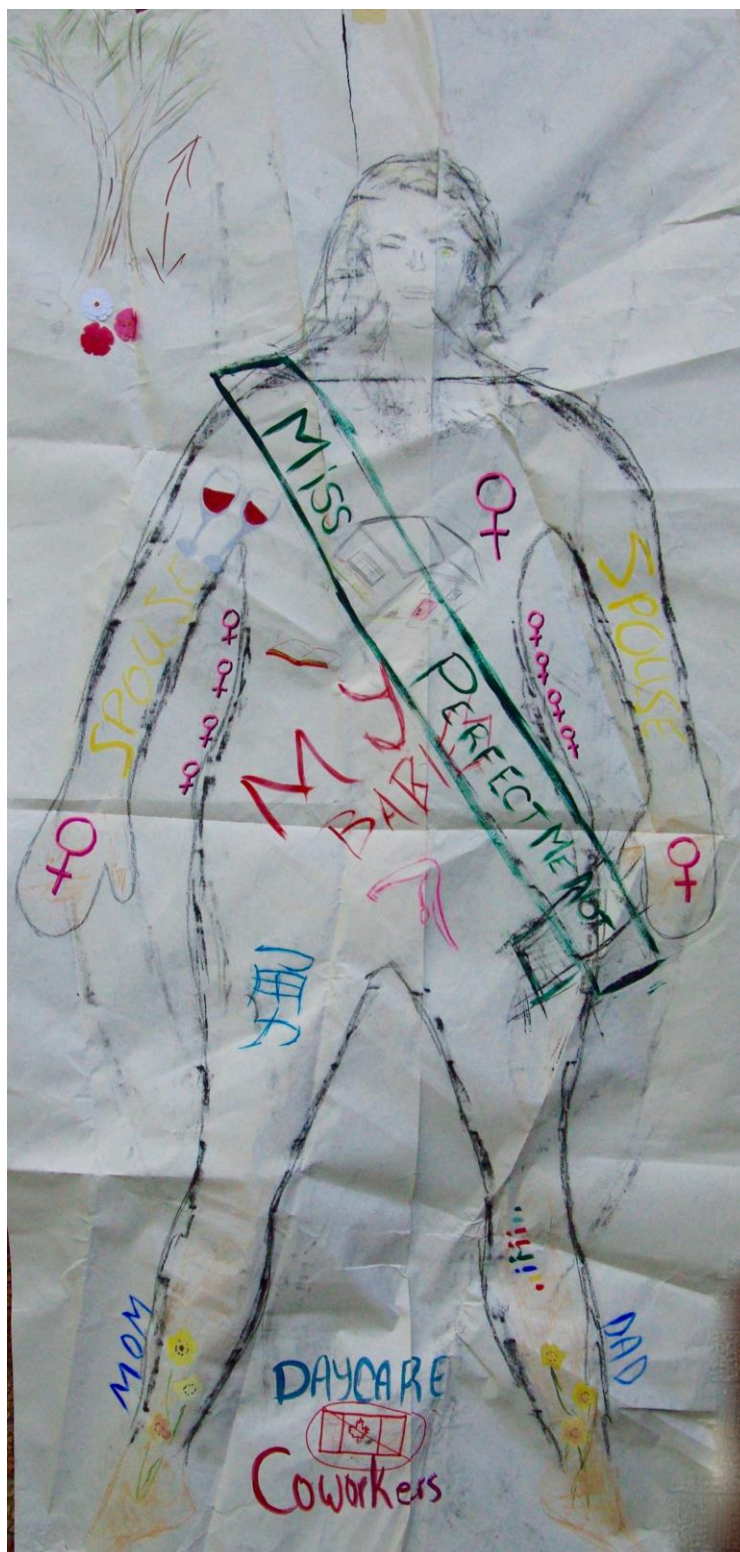
Appendix K

Steps for Proposed Phenomenological Study (adapted from Munhall, 2012)

Stage	Actions undertaken by researcher	Purpose in my study
Immersion	Explore the philosophical underpinnings of phenomenology	To gain a level of comfort with the philosophy and related terms behind phenomenology – highlight the emphasis on Merleau Ponty, van Manen and Munhall as guiding my research
Articulating the aim of the study	Identify what the researcher hopes to accomplish through the research	I hope to demonstrate how mindfulness might enhance the lives of working mothers through careful explication of the role such a practice in the lives of the women in my study
Distinguish the experience that is the study	Identify what aspect of experience is the foci of the project so that others can say 'this' is being studying not 'that'	My study will look at the phenomenon of mindfulness in the lives of working mothers in the particular context of health care (at the nexus between work and home not at work or home)
Decentre self and come to 'unknown'	Reflect on own beliefs, preconceptions, intuitions, motives and biases so the study is not designed to 'hear' what I want to see and be completely open to the others experiences	Create my own body map documenting my experiences and assumptions as a working mother who practices mindfulness. Also my own personal mindfulness practice will help me remain open during the data collection phase. Writing in a reflective journal throughout the process will help me gain deeper understandings. I will also consult with my dissertation committee throughout the process.
Identify one	Using philosophical and	My main research

overarching question	methodological underpinning articulate an overarching research question that supersedes and informs subsequent questions	questions asks **'What is the meaning of practicing mindfulness in the lives of mother who work in health care'**
Existential inquiry	The steps taken to gather the existential material (interviews, photographs, artwork)	In my study I plan to dwell in data offered through language (discussions) about drawings (body maps). Taking my time to understand the meaning each participant tries to convey – paying particular attention to similarities and differences between experiences
Context	Describe the situated contexts of all who participate in the study, exploring the 'throwness' of each participant to understand that each person is always situated	Understanding of the four life worlds will help contextualize each participant in this study
Writing the phenomenological narrative	This stage is marked by creativity and openness to what appears during analysis. Each participants story may be first written, or thematic presentation of findings may be more appropriate	I have yet to decide upon a method of write up but will remain open to various ideas as my project unfolds
Answering the 'so what' and reflecting on the meaning of a study	This pieces helps fulfill a moral and ethical imperative, and offers valuable insights and implications for others	I hope to offer valuable insights and possibly new ways of being for other working mothers

Lisa McCorquodale

EDUCATION

PhD Health and Rehabilitation Sciences	Jan 2011-present
Professional Education Stream	

Faculty of Health Sciences, *Western University*
Supervisor: Dr. Sandra DeLuca

Master of Science	
Health Professional Education Stream	2005-2008

Faculty of Health Sciences, *Western University*
Thesis: **Palimpsest: Rethinking the therapeutic relationship through a critically reflexive lens**
Co-supervisors: Dr. Sandra DeLuca, Dr. Elizabeth Anne Kinsella

Completed one year, Master of Educational Psychology	2005-2006

Faculty of Education
University of Western Ontario

Bachelor of Health Sciences	1998-2000
Occupational Therapy	

Faculty of Health Sciences, *McMaster University*

Bachelor of Applied Sciences	1994-1998

Faculty of Family Studies, *University of Guelph*

PUBLICATIONS

Durocher, E., Kinsella, E.A., McCorquodale, L. & Phelan, S. (In press). Ethical tensions related to systemic constraints: Occupational alienation in occupational therapy practice. *Occupational Therapy Journal of Rehabilitation (OTJR): Occupation, Participation and Health*.

McCorquodale, L. (Submitted). Mindfulness and phenomenology: Possibilities within qualitative research. *Qualitative Inquiry*.

McCorquodale, L. (Submitted). Constructions of motherhood: Implications for the early childhood field. *Early Childhood Education Journal*.

McCorquodale, L (2015). Mindfulness and professional practice: A generative dialogue. *Reflective Practice: International and Multidisciplinary Perspectives*. DOI: 10.1080/14623943.2015.1005587

McCorquodale, L., & Kinsella, E.A. (2015). Critical reflexivity in client-centred therapeutic relationships. *Scandinavian Journal of Occupational Therapy*. Early Online, 1–7. DOI: 10.3109/11038128.2015.1018319

McCorquodale, L. (in press). Mindfulness for working professionals: A reflexive

examination. In. L. Béres (Ed), *Practicing spirituality: Reflections on meaning-making in personal and professional contexts*. London: Palgrave Macmillan Publishers Ltd.

McCorquodale, L. (2013). Mindfulness in the life of an occupational therapist: The being behind the doing. *Occupational Therapy Now, 15*(3), 14-16.

Zhang, Z., Fyn, D., Langelotz, L., Lonngren, J., McCorquodale, L., & Nehez, J. (2014). Our way(s) to action research: Doctoral students' international & interdisciplinary collaboration. *Action Research Journal, 12(3), 239-314.*

AWARDS AND HONOURS

Western Graduate Scholarship	2011-2015
Faculty of Health Sciences Graduate Student Travel Award	2012
Doctoral Scholarship Action Research Intensive, Gothenburg Sweden	2011
Mrs. Elsa Hevenor Award University of Guelph: Top Academic Achievement in final two years of study	1998

INVITED TALKS

Mindfulness and Rehabilitation, SJHC	2016
Mindfulness and Professional Practice, Fanshawe College	2014
Invited expert speaker Stroke Recovery Association Sarnia	2010-2011
Invited expert Concurrent Disorders Program RMHC London	2011
Invited expert New Directions Drug and Alcohol Addiction Owen Sound	2010
Invited Guest Lecturer	2007-present

Western University:
Designed and taught over 25 lectures:
Ethics and Ethical Practice, Environmental Design and
Adaptation, Caregiving with a Disability, Mindfulness for children
and adults, ABI and Return to Work/School, Adaptive Technology in
practice, Employment and ABI, Ethic of Care
Evidence-informed Practice, Power Dynamics in Practice

CONFERENCE ACTIVITY

- Durocher, E., Kinsella, E.A., McCorquodale, L., & Phelan, S. (2016). Ethical tensions related to systemic structures : Implications for therapists' enactment of an ethic of care., *COTEC-ENOTHE Congress,* Galway. *June 15-19.*

- Kinsella, E.A., Durocher, E., McCorquodale L., & Phelan, S. (2016). A diversity of ethical tensions in practice: An examination of competing allegiances, *COTEC-ENOTHE Congress,* Galway. *June 15-19.*

- Kinsella, E.A., Durocher, E., McCorquodale L., & Phelan, S. (2016). Enacting care amidst systemic constraints: Ethical tensions and practice implications. *Canadian Association of Occupational Therapy Annual Conference,* Banff. *April 22.*

- Kinsella, E.A., Durocher, E., Phelan, S. & McCorquodale L. (2016). Navigating ethical tensions in practice: What do therapists do? *Canadian Association of Occupational Therapy Annual Conference,* Banff. *April 21.*

CAOT poster presentation Mindfulness and its potential for working professionals (Fredericton, NB)	May, 2014
CAOT paper presentation Ethical tensions in professional practice: An occupational therapy exemplar (Fredericton, NB)	May, 2014
CSSE paper presentation Our Way(s) to Action Research: Doctoral Students' International & Interdisciplinary Collaboration (Waterloo, ON)	May 28, 2012
CAOT paper presentation Mindfulness and its potential for working women, (Victoria, BC)	June, 2012
Attendance Holistic Educators Group OISE, University of Toronto	2012
Attendance SSO: USO, Portland Oregon	2012
Intensive Course in Professional Education, Paper Presentation, Mindfulness in Professional life	2011
Attendance OSOT Annual Conference	2010
Brain Injury Okanogan Conference Paper Presentation: Client and Family Perspectives of Successful Outcomes after Acquired Brain Injury: Selecting Outcomes that Matter	2008

TEACHING EXPERIENCE

Professor

Jan 2014-Present
Fanshawe College, Faculty of Human Services,
ECED 3018 Inclusion: Issues and Implementation (F14; W15)
HLTH-7002 Wellness and the Young Child (W 14; W15)
MGMT-7005 Managing Projects (W14)
COOP-ECL 1W (S14)
ECED-7017 Advocacy (W15)
Independently developed and taught course material

Instructor, School of Occupational Therapy   Sept 2014-April 2015
Western University, Faculty of Health Sciences,
OT 9612a Ethics and Professional Practice in Context
OT 9695a Mindfulness Intensive

Instructor, Rehabilitation Sciences   Sept 2012-May 2013
Western University, Health Professional Education
Seminar Series Health Professional Education

Teaching Assistant, School of Occupational Therapy   Sept 2012-May 2013
Western University, MSc OT Year 2 Course,
OT9612 Ethics and Professional Practice in Context
Instructor: Dr. Shanon Phelan

Co-Instructor, School of Occupational Therapy   May-July, 2011
Western University, MSC OT Year 2 course
OT9613 Consolidation of Practice, On-line instruction

Teaching Assistant, School of Occupational Therapy   Sept-Dec, 2011
Western University, MSc OT Year 2 Course,
OT9641 Enabling Occupation Through Assistive
Technology and Environmental Adaptation
Instructor: Professor Sandra Hobson and Professor Jessie Wilson

Mentor, School of Occupational Therapy   Sept 2002-July 2011
Western University, MSc OT Year 1 and 2 course
Professionalism 1, Professionalism 2
Instructor: Professor Lisa Klinger

Supervisor, MSc OT Supervised Research in Occupation   2008-2010
School of Occupational Therapy, Western University
Research Project: Client and Family Perspectives of
Successful Outcomes after Acquired Brain Injury: Selecting
Outcomes that Matter

RESEARCH EXPERIENCE

Researcher

Western University, University of Gothenburg,   2011-2014
Chinese University of Hong Kong
Research Project: Our way(s) to action research:
An interdisciplinary and interprofessional collaboration –
Supported by InSPIRE Western University and
RIPPLE Group Waga Waga University, Faculty of Education

Co-Researcher   Nov 2013-present

Dr. Elizabeth Anne Kinsella and Dr. Shanon Phelan
Department: School of Occupational Therapy Western University
and University of Alberta
**Research Project: Ethical Issues in Occupational
Therapy Practice – A National Study**
CIHR funding - Applied (Commenced Nov, 2013)

PROFESSIONAL EXPERIENCE

Occupational Therapist/Professional Practice Leader   2001-present

Parkwood Institute, SJHC London:

Clinical Consultant/Occupational Therapist:
- Innovative transdisciplinary role providing adjustment counseling to those with illness/injury causing auditory, visual, physical, cognitive or emotional challenges
- Client-centred individual and group treatment focusing on lifestyle counseling, building mindfulness, and stress management
- Particular interest in strengths-based treatment, developing resiliency and narrative understanding of illness/injury
- Consult and coach community partners on universal design, environmental adaptation, learning styles and instructional adaptation for youth and adults living with brain injury, mental health challenges, and or substance misuse with a variety of challenges (e.g. auditory, visual, physical, cognitive, emotional, social)
- Successfully facilitate return to productive roles including school, parenting, employment and volunteer work
- Provide informative workshops and offer expertise to community agencies to build capacity in the region

Occupational Therapist:

- Work in third party setting to support adults to learn to drive/re-learn to drive after an illness or injury
- Created the 'New Driver Program' to enable new drivers with cognitive or physical differences the opportunity to drive using a variety of learning styles and strategies, as well as task adaption to ensure success

Professional Practice Leader:

- Provide professional expertise in a leadership role for the professional of Occupational Therapy, with most of my responsibilities to the Mental Health Site of Parkwood Institute
- Active on various committees and key organizational initiatives including the implementation of Psychotherapy, Student Placement Coordination, and

Electronic Health Record

Occupational Therapist   2002-present

Self-employed
London, ON and Surrounding area

Clientele:
- Offer psycho-educational workshops introducing mindfulness and stress reduction to build resilience and wellness for those under stress
- Provide intensive case management for young Canadian Armed Forces veterans with mental health challenges (trauma, anxiety, depression)
- Effective Job coaching and reintegration into school and employment settings
- Create effective crisis planning

Occupational Therapist   2000-2002

COTA Health, Pediatric/Adult Physical and Mental Health
Greater Toronto Area
Clientele: Clients and their families ranging from birth to end of life care in a community setting. Primarily worked with people living with anxiety, depression and neurological conditions.

Day program Facilitator   1997-1999

St. Joseph's Hospital, Guelph ON
Provided leadership and innovative programming for youth and adults with a variety of physical and developmental disabilities.

RELEVANT TRAINING

- Non-violent Crisis Intervention (PICS)   2005
  SJHC, London ON

- Behavioural Management   September 2007
  Dr. Cheryl Hartridge, Sarnia ON

- Cognitive Assessment and Rehabilitation   June 2008
  Dr. Jane Toglia, Peterborough, ON

- Being and Doing Phenomenology   April, 2011
  Fanshawe College, Patricia Munhall

- Action Research in Professional Education   October, 2011
  Gothenburg, Sweden

- Working with Persons with Personality Disorders   Jan-May, 2011
  SJHC, London ON

- Interpersonal Neurobiology   Jan-May, 2012
  Dr. Daniel Siegel, University of San Diego

- Addiction Assessment and Treatment   Jan-May, 2012
  Larry Lalonde, SJHC London ON

- Mindfulness-Based Group Practice   Sept-Dec 2012
  Mount Sinai Psychotherapy Institute, Toronto ON

- Mindfulness Practice with Youth   May-June 2014
  University of Toronto

- Mindfulness-Based Stress Reduction Professional Training   February 2014
  Jon Kabat-Zinn, Watsonville California

- Mindful Schools, K-grade 12, On-line training   May-June 2014

- Crucial Conversations, SJHC London   April-May 2014

- OSOT seminar series   Fall 2014
  (psychotherapy and supervision, Mindfulness, CBT)

- Working Better…Together Innovation Conference   Sept 26, 2015

- Winter Nature Play, London ON   Jan. 9, 2016

SERVICE AND COMMITTEE WORK

Invited Editor   2009
Journal of Reflective Practice

Clinical Mentor, Professional Practice   2002-2011
Western University, School of Occupational Therapy

RELATED PROFESSIONAL SKILLS

- Member CAOT and OSOT   1998-present

- Member in good standing with COTO   2000-present

- Member of the Ontario chapter of ADED   2005-2012

- Member Veterans, Stroke and ABI Program Council at SJHC   2002-2013

- ADP Authorizor   2003-present

- Certified Chedoke McMaster Stroke Assessment and   2005
  Bobath Normal Movement course (3 day)

- Member OSOT interest group – Psychotherapy   2014-present