Maternal Parenting – Between the Prescribed Role and the Played Role

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Abstract

The paper focuses on the maternity, as social status-role, from the perspective of parenting, for a better and deeper understanding of the phenomenon of motherhood, especially the ways it manifests within the women social category, whose existence is determined by the coordinates prescribed by the gender identity and, perhaps to a greater extent, by those imposed by the professional identity, in the context of a "pseudo-modern" Romania or manifesting a “trendy modernity” (Schifirneț, 2009). If the mother status is timeless, meaning that, once obtained, it cannot vary with the passage of time (and consequently with the mother's or child's age), the maternal role is strongly influenced by the passage of time and by the social context in which it manifests. The paper performs an analysis of the maternal role from the perspective of the role prescriptions and the role conduct, emphasizing the condition of negotiation between those two for the success of motherhood and also, for the women integration in the society and the construction of the her identity, especially under the increasing impact of the "professionalization" of motherhood. The specialization in the accomplishment of the maternal conduct is imposed not only by the social institutions related to the maternity (medical/educational/social protection institutions), but also by the mother herself, in the context of the motherhood culture developed in the last decades and the use of information technology.

Keywords: parenting, maternal role, motherhood culture, women social identity, gender equality;

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1. Introduction

Maternity, viewed as the quality of being a mother, is multidimensional. If the biological dimension is conferred hereditarily, by species specificity, to female gender, the psychosocial dimension is elaborated socially and temporally (epochal), by the specificity of the organization and functioning of social life, and is conferred either to the woman or to other social actors (person, group or social institution).

The parental function of the mother, respectively of the motherhood (of raising, caring, educating the child), can be performed by both female and male persons (in this case speaking of the equivalent of the term mother, respectively father, from the perspective of parenting), but also from specialized institutions (neonatology and pediatric sections - for the first weeks / months of the child's life, nurseries, kindergartens with weekly program, or other alternatives within the child protection and care systems). However, at least statistically speaking, the main person, or even the only one, in most societies, which deals with the care, growth and education of the child in a family system, especially in the first years of the child's life, remains the woman, respectively the mother. The cases in which, for the functions of care and growth, the mother is substitute by other social agents are some exceptions, and within the social customs or laws specific to a community are specified rules and norms of action for the situations in which the woman who gave birth to the child cannot handle her or his care and growth. In recent years, due to efforts to support women to participate more in extra-family economic activities, the policies in the field have also provided for the father the possibility of taking over the role exclusively granted to the mother up to recent years, namely the paternity leave for raising and child care in the first months of life. Moreover, for almost six years, paternity leave is an obligation for the father for one month (a fact that in other EU countries - such as the United Kingdom, Finland, Norway is already common), not with the presence of the mother in the house, but as an alternative to her role of caring the child. One can also note here the attempt to equalize gender roles.
Obtaining, assuming and manifesting maternal status-role by a woman is the result of a combination of social factors (cultural, economic, historical, political), psycho-social (perceptions, representations, attitudes, interactions, communication), psychological (temperament, level of intellectual and socio-affective development, personality structures, etc.) and biological.

If the last two categories of factors are necessary conditions for obtaining and manifesting the maternal status-role, the social and psychosocial factors are the ones that determine the form of assuming and exercising the motherhood, respectively the construction of the maternal identity in the social category of women.

2. The maternal parental role

Parentality is a concept superordinated to that of motherhood, designating "the social roles (responsibilities and rights) of parents, regardless of their gender, in relation to children" (Turliu, 2004).

The choice of the phrase "maternal parenting" was made to emphasize precisely the social dimension of motherhood, namely the set of roles played by the woman occupying the social position of mother, in relation to her children, in a certain context and social space. At the same time, it was sought to emphasize the difference between motherhood as an attribute of the feminine and motherhood as an element of social structure. Under the impact of discourses on gender equality, there is a tendency to approach the roles of mother and father from the perspective of parental functions (raising, caring, educating and socializing the children), and less from the perspective of the role-specific behavior of a mother, respectively a father.

To these issues are added the speeches related to parental competences, levels or degrees of performance in the exercise of the parental role, especially the maternal one. This fact generates multiple tensions related to assuming and exercising the status of mother, especially in post-modern communities.

Moreover, the research of the maternal role allows us to understand the links between the institutional structures (which
contribute to the control and regulation of motherhood) and the personal experiences, of the mother, as a social actor.

3. **Motherhood - a permanent negotiation between the prescribed role and the played role**

The maternal role, complementary to the mother status, encompasses both effective behaviors of the mother fulfilling duties and rights associated with the status of mother (what we can call role performance), as well as the behaviors that others (individuals, groups, institutions) expect from the mother, respectively normative social prescriptions regarding the role of mother. Assuming the maternal role implies for the mother-woman the knowledge of the social prescriptions regarding the accomplishment of the tasks (or behaviors) necessary to fulfill the functions of the mother-status, as well as the decision to perform the role tasks. Also, assuming the role requires the existence of the desire to be a mother and / or a favorable social (family and societal) context. Exercising the role may or may not be consecutive to assuming it, as there is the possibility that these two stages of exercising the maternal role may be concomitant, interweaving and inter-conditioning (for example, when the woman finds that she is pregnant when the pregnancy is advanced for her to have an abortion option, and the decision to keep the child is taken as the woman performs tasks related to the health of her unborn baby or tasks related to the care of the newborn). At the interface between the prescribed maternal role (or, under a more general name, the maternity institution) and the role played (representing the behaviors specific to the maternal role), the mother identity develops, as a role identity, or a social identity. The appreciation or enhancement of the role conduct (and implicitly of the maternal identity) is dependent on the consensus of the social group or of the community that "issues" the expectations regarding the maternal role. Thus, the "good mother", respectively, positive maternal identity, are the mothers whose role behaviors are congruent with, what Newcomb called, "essential role behavior", (i.e. behaviors with which the vast majority of group members agree that it is appropriate for a certain role) (Lemay, 1999). *In addition to compulsory behaviors, role prescriptions also include desirable*
behaviors (ones that can be fulfilled but are not essential for the role, such as playing with children or performing homework with children), prohibitions (behaviors not allowed by the group for the specific role; the oldest prohibition, in the frame of institutionalization the parental role, is the incest,) as well as indifferent behaviors in relation to the social role (such as watching cartoon films).

In general, at the level of the common sense, the prescriptions of the maternal role do not have a high degree of specificity (comprising in a very large extent the obligatory behaviors and the prohibitions). At the level of the institutionalized social discourse (within the medical, educational, social and academic institutions) the maternal role, respectively the role conduct, is more intensely defined by reference to the type and level of parental skills necessary for the safety and well-being of the child. The "specialized" discourse regarding parental skills and especially the essential and desirable maternal role behaviors, is, for about ten years in Romania, intensively promoted by the media, through magazines and websites dedicated to motherhood. This fact can lead to an intensification, and more clear specification of maternal role prescriptions at the common sense level, especially in communities with greater access to electronic information. But more than the expectations of others regarding role behavior, mothers' own expectations of their actions as a mother are more important for the functionality of motherhood (thus understanding not only the successful fulfillment of role tasks, but also the satisfaction associated with them, the well-being generated by the exercise of the role). Given that maternal status-role is a main role in the life of the women (not always a priority, or most important), the concordance between the maternal role prescriptions (or the perceived prototype of the role) and the role behavior is a condition for integrating the personality and building the self-identity of these women.

The role requirements, reflecting the culture of the societies that generate them, are different not only from one historical epoch to another and from one type of society to another, but also in relation to

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2 It is interesting to note in this context that from the Middle Ages until the beginning of the 20th century, the maternal role did not include tasks of care (hygiene, food) and sometimes even of educating the children, for the mothers of the upper social classes. These tasks were
the forms and levels of the social structure. The social expectations associated with the role of mother vary, depending on the social practices, between the family (where they can be more subject to interpersonal negotiations and can overcome gender segregation) and society (where, at least in the case of Romania, they are largely encompassed with traditional perceptions of the female gender), between the urban (where the environmental resources and opportunities are higher) and the rural (where the environmental resources needed to raise, care and educate the children are less), between the ethnic groups (especially between the Roma and the Romanian or Hungarian).

4. The professionalization of maternal parenting

The greater variability of the role is found in the level of the role conduct, which bears the imprint of the mother-woman personality, not just the social space in which she assumes and plays the role. However, today we are witnessing a uniformity and standardization of parenting in general, and maternity in particular, in terms of parental skills favorable to the development of children and their effective childcare practices. We can even speak of the tendency to professionalize the maternity / parenting, in the sense that the "job" of the mother / parent requires training, qualification, which implies information and structuring of the conduct in relation to the respective information. The "good parent" outlined at the level of academic discourse or social institutions, at the beginning of the twenty-first century, involves traits as responsibility, the ability to identify and meet the needs of his child, the knowledge of his rights, positive discipline skills, the ability to represent interests of the child in the community, etc. (Cojocaru and Cojocaru, 2011). Also, on the line of motherhood professionalization we can talk about replacing the maternal role by other social actors (individuals - nanny / baby-sitter, etc., or institutions - nurseries, day centers, kindergartens with

fulfilled by the babysitter. The maternal role was reduced to the birth of the children, the "overview" of their growth and, possibly, the provision of social and emotional support. Although in the contemporary era there is still the practice of hiring babysitters in higher income families and / or demanding professional status of the mother, they do not entirely replace the role tasks regarding feeding, bodily hygiene and education of the child.
extended program). These are prepared, gaining specific skills, either by completing formal education programs, or by acquiring this skills based on "work experience", in order to fulfill the tasks and responsibilities of parenting. A special category of professional mothers is maternal assistants (foster parents in Romania), respectively persons who attend training courses, are evaluated and accredited as maternal assistants by the County Commission for Child Protection. For these women, the status of the mother role of their own children is added to the status of the social mother role for the children they care for (through the placement of a foster family). Being a professional role (the maternal assistants are employees of the County Departments of social assistance and child protection-DGASPC), its functions are defined institutionally and legally (H.G. 679 of June 12, 2003), and the assessment of the maternal assistant is performed in relation to the fulfillment of these functions. However, there is an “ambiguity of institutional discourse” (Cojocaru 2008, p. 164) regarding the social and professional role of the maternal assistant. The perception and social representation of this professional category, either among the general population or among other professionals in the field of child care, education and protection, is largely dependent on the maternal role (idem). Perhaps the most delicate and difficult to achieve and manage element of the status of maternal assistant is the attachment between her (most of the maternal assistants are female) and the child received in the care. Viewed from the perspective of the mother role, the attachment developed between the foster mother and the child is crucial for the development of the personality and self-identity of both her and the child. From the perspective of the professional role, a strong emotional attachment between the maternal assistant and the child in placement is undesirable, especially due to the possible negative effects of the separation of the child from the surrogate family (because the measure of placement with the maternal assistant is a temporary form of child protection). The professionalization of parenting, respectively of maternity, leads to a limitation of privacy within the family environment and regarding relations between family members, especially between parents and children, through a “process of modeling the experiential structure of domestic private space by public discourse and public debate.
(Holstein and Gubrium 1995, apud. Cojocaru 2008, p. 138), (…) with the help of various medical, social, legal and educational vocabularies” (Cojocaru, 2008). Thus, the prescriptions of maternal role are generated not only in the traditional way, by assimilating the maternal practices that influenced the experience of the future mother, but especially on the institutional level, by assimilating the specialized discourse produced from the interaction with the institutions and the professionals of these institutions involved in the development, care and the education of the child (family doctors and pediatricians, teachers, psychologists, sociologists, social workers, nutritionists, etc.). On the other hand, the limitation of privacy in exercising the maternal role is also determined, in the last years, by the increasing virtual communication practices used among several social classes and categories, especially among the urban female population between 20 and 45 years. Thus, online social networks such as Facebook, Twitter, Google +, or online communication software such as messenger, blogs or chats, make it easier to convey ideas and models of action related to the fulfillment of the maternal role in a public space (or at least beyond the private space).

Today we are witnessing the development and promotion of a culture of motherhood, especially via the media, which accentuates, even norms the mother-child interaction for the benefit of both, but especially of the child. Role prescriptions are more numerous, varied and more restrictive of the maternal conduct, even in the intimate environment of the family, precisely by the existence in the parents' awareness of the norms, values, behavioral models of the "good parent" promoted at social level. The new culture of motherhood, specific to postmodernity, is not only very rich in concepts, paradigms and art-facts, compared to that specific to traditional societies, but also in ways of expressing and communicating them. On the other hand, variety is no longer accompanied by the principle "everything is relative, there is no absolute truth", but it is regulated by the principle of the rights of the child, of his or her/his best interests. The phenomenon of regularization of childhood specific to the twentieth century has gradually led to the institutionalization and professionalization of parenting, especially maternal parenting, through its actions to conform to the standards required by child
related institutions. Professionalization is supported in an almost formal manner by parenting education programs offered by various NGOs or informal, by the media. At the same time, we are witnessing an "increase in the degree of parental supervision (...) [and] the degree of their participation in the specialized care of children" (Cojocaru 2008, p. 218).

**Conclusions**

Assuming and exercising the maternal role in the contemporaneity constitutes a process of integrating and harmonizing the increasingly scientific role prescriptions in all the perceptions and representations regarding the maternity of the future and / or already in the role mother.

The exercise of the maternal role is expressed in the mother daily action of raising, caring and educating the children, which dependents, on the one hand, on the development of certain role competences, and on the other, on the existence in the woman social space of the resources required to perform the role tasks. Unlike the professional roles, which are better defined socially and for which the person is prepared through the years of general education and subsequently through the initial and continuous specialized training programs, the parental roles are less defined socially, more subject to the stereotyping and subjectivity of the people who define them, and the adult is not prepared by any kind of educational program designed to develop the skills needed to fulfill the role. In addition, the cultural, social and economic context of the last decades brings important changes not only in the process of socialization (having as a result the acquisition of the social status-roles), but also in the process of general education, of developing the personality and identity of an individual. Increased access of women to the labor market, with the consequences of individual financial gains, the diversification of social relations, the change of women's vision of themselves and the world, culminating with the increasing development of the feeling and attitude of power and independence, led to changing the way of building and recognizing the social identity of the woman. We are talking about a radical change, from the maternal identity - as a social identity of the
woman, defined by the mother-role status, to the maternal identity as a personal identity, which could be less important for the social valorization of the woman than the professional identity.

References