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RESEARCH ARTICLE

SOCIAL REPRESENTATIONS OF MOTHERHOOD CONSTRUCTED BY LESBIAN MOTHERS

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ABSTRACT

Objective: to understand the social representations created by lesbians regarding motherhood in the current heteronormative social context.

Method: This is an exploratory descriptive study with a qualitative approach. Data were collected through semi-structured interviews. The sample consisted of eight lesbian mothers between 28 and 46 years of age. The Snowball technique was used for the selection process. The analysis was performed with the help of IRAMUTEQ Software.

Results: social representation was anchored in the experiences about motherhood established from the way lesbian mothers integrated themselves into the social context. The participants' representational content on motherhood was based on issues related to discrimination, prejudice, invisibility and social explusion.

Conclusion: the idea of motherhood has undergone changes throughout the historical process, and with these changes motherhood in the lesbian community can be included, which opposes every pre-existing idea system regarding this phenomenon. It is noticed that even with all the advances that have arisen in the different areas of knowledge, lesbians who seek to exercise their right to reproduce are faced with many complications in the current social context. It is imperative that the knowledge about the addressed subject gains new concepts and they are disseminated in the social and academic environment.

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INTRODUCTION

Motherhood is a unique experience and represents symbolism in a woman's life. The human being has the capacity to be changeable and his connections, established throughout his existence, are dynamic with the environment to which he is inserted; Their beliefs, values and symbols temporarily adapt and modify according to their needs and desires, thus establishing a continuous process of movement and adaptation (Zanatta and Pereira 2015).

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By perceiving the individual as a transient being and motherhood as a milestone which impacts the life of the woman and the individuals with whom she relates to , it must be understood in a particular socio-historical-cultural context. Thus, motherhood is intrinsically related to political and social phenomena, such as constant changes in family arrangements, gender relations, expressions of sexuality and affection (Scavone, 2001). The means of conception by which family arrangements can be constituted are various: legal, affective and biological ties, which can aid the new technologies of human reproduction, however, taboos and prejudices about sexual and reproductive life emerge as an impediment to comprehensive quality care (Pontes, Carneiro, and Magalhães, 2015).

Lesbians who choose to relate their sexuality to motherhood are socially more vulnerable, because for the so-called correct and acceptable social patterns, such practices are socially recognized as incompatible. Motherhood in lesbian is inserted in the context of the revolutionary processes, which throughout history has been taking place gradually in everyday life, providing new demands and desires. In this sense, the Theory of Social Representation (TRS) aims to know and understand such phenomenon from these social relations. TRS provides the possibility to communicate and share a phenomenon of mutual knowledge. Thus, the formation of concepts is provided through the introduction of senses and perceptions to the fact, reproducing their personal and interpersonal relationships in a meaningful way in, in order to allow the leveling of an idea and / or a phenomenon of a certain image (Moscovici, 2012).

MATERIALS AND METHODS

A descriptive-exploratory study with a qualitative approach, anchored in the Theory of Social Representations, held in the city of Recife, capital of Pernambuco, Brazil. The participants who comprised the sample were women who self-identify as lesbians belonging to the age group of 28 to 46 years and who experience or have experienced motherhood. For inclusion in the sample, the women had to be over 18 year of age, living in the city of Recife (PE), Brazil, and have experienced motherhood. Exclusion criteria were those that were separated from the city of Recife (PE), Brazil at the time of collection, due to illness or for other reasons; and those who did not respond to contact (telephone, e-mail and others) during the course of the study. For sample selection development, the "Snowball" chain technique was used, a variant sample for convenience and saturation. Data were collected from April to June 2016, from semi-structured interviews conducted with lesbian mothers in home settings. A total of eight encounters with a maximum duration of 2 hours and 30 minutes were performed. The methodological course was carried out in stages according to the Snowball technique. First contact was made with the coordinator of the LGBT Citizenship Municipal Reference Center, at the time the study was explained and she was asked for her contribution, the chairwoman of the Committee of Lesbian Women (COMLÉS) was contacted and her support for research on the subject was highlighted and reinforced. The members of COMLÉS were invited by the president and one requested participation, being entitled as individual "seed", she was not part of the composition of the sample, having the function to indicate other "wave" participants Each "wave" individual at the end of the interview was asked to suggest other possible participants.

Data analysis was performed with the aid of the Software Interface Rout les Analysis Multidimensionnalles de Texts et de Questionaires (IRAMUTEQ) version 0.7. For the present study, the Downward Hierarchical Classification Analysis (CHD) was used; data was organized in thematic classes. The analyzed elements were illustrated in a dendogram formed by Elementary Context Units (UCE) which are text segments classified according to vocabularies and demonstrated in relations between classes. The classes were named after reading the text segments exposed in color and correlated with the most frequent and significant statements of the text segments from the classes, then the classes were analyzed using he Theory of Social Representations based on the

anchorage and objectivation constructs. This study was carried out after research project approval from the Research Ethics Committee of the Health Sciences Center of the Federal University of Pernambuco, CAEE 53919616.2.0000.5208, and is in compliance with Resolution 466/2012, which follows the ethical precepts of autonomy, non-maleficence, beneficence, justice and privacy.

RESULTS

The interviewees belonged to the age group of 28 and 46 years of age, with an average age of 37.5 years. Five lived in consensual union and three were married. With regards to education, five had a higher education level and three had completed secondary education. It is noteworthy that seven had different types of occupation / professions (social scientist, psychologist, salesperson, teacher, administrator community health agent) and only one interviewee was soley involved in household activities. In regards to monthly family income, all participants survived on an average monthly salary of R\$3748, various religions and beliefs were present, including Candomblé, Catholicism, Kardecist and Agnostic, with a total of 25% representing each group. By using the CHD, the textual corpus analyzed was divided into 122 text segments (ST), relating 1,022 words that occurred 4,083 times. CHD retained 83.61% of total the ST, generating three classes. Thus, from the analysis of the CHD through the corpus, the Software showed this relationship in the classes in the form of a dendogram (Figure 1). To obtain the final classes, partitions of the corpus were performed as shown in this dendogram. According to recommendations, when doing the analysis from left to right, it was observed that in the first division (partition or interaction) which the corpus was subjected, the first division was divided into two sub-corpus: the right one originated from class 1 and then the left sub- corpus was divided into two, giving rise to classes 3 and 2. In this way, vocabularies established according to frequency and their forms, which presented similarities among themselves, were organized in the same class, and then the analyzable words were distributed into three classes as follows: class 1, with 32 text segments, corresponding to 31.37% of the total text segments; Class 2, with 33 text segments, corresponding to 32.35% of the total text segments; And class 3, with 37 text segments, corresponding to 36.27%. In figure 2 it is possible to visualize the results of association of predetermined words regarding motherhood in lesbian mothers.

After analysis, the dendogram shows the words that emerged from the statements of the participants constructed from common sense. The information declared by the interviewees addressed aspects concerning the process of motherhood (meanings, positive and negative experiences). It is noteworthy that by showing such information regarding how lesbians anchor themselves in their lived experiences they still do not refer to their "personal" stories, but to the stories that have meanings formed in and by society. Thus, their experiences present values and meanings according to the way in which these women have integrated themselves in the social context (Moscovici, 2012). In this sense, when characterizing the social representations of motherhood in lesbian mothers, we aim to access the common-sense knowledge regarding the subject, and thus understand its relations with the world. (Jodelet, 2001).

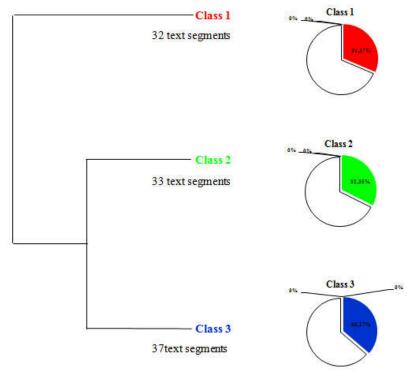


Figure 1: Dendogram of the classes obtained from the textual corpus

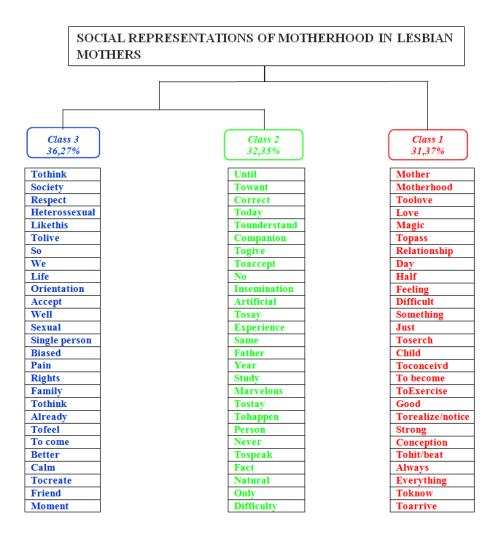


Figure 2. Dendogram of the Social Representation classes on the Maternity of Lesbian Mothers

For analysis and discussion of the results, the partitiond were monitored from left-to-right according to the dendogram, and the classes were named according to their meaning: Class 1: Affective Partner Dimensions; Class 2: Lived Experience of Motherhood; And Class 3: Psychosocial Aspects. These were described following the order of partition and proportion which they represent in relation to the total corpus.

DISCUSSION

Class 3, called "Psychosocial Aspects", refers to the issues that relate the feeling of exclusion generated by the normalization of cultural patterns in the heteronormative context. Heterosexualism standardizes the understanding that society is heterosexual and that any other type of adopted conduct is placed on the margins of society.

My gynecologist does not know I'm a lesbian, I never had the chance to tell her. So she did not instruct me correctly, I do not feel safe to talk about my sexual orientation because she never asked me or talk about it with me. I think she thinks that I am heterosexual, she keeps ordering me to get a boyfriend even if I go to the consultations with my partner ... society does not see us, our rights are not respected. (Interview 02)

If anyone is suspicious of anything, I have never been open to talk about it, I have chosen to live this way a life that society does not fully accept, I believe that being a mother only added maturity and resilience to my life. (Interview 03)

One thing I realize a lot is that many people think that because they are heterosexual they are superior. There is no respect, society is hypocritical we live in a glass curtain, even if there has been revolution, they will never accept us. (Interview 04)

I do not openly talk to society my sexual orientation, first I analyze the environment to avoid discrimination and to avoid creating an embarrassing work climate or with friends or colleagues, because I see, feel and even listen to biased comments about it, but, I have respect ,we are a minority in society and being accepted in society is difficult. (Interview 05)

Prejudice about homosexuality is rooted in and by society and is anchored and imposed by social cultural standards. The statements echo the feelings of exclusion experienced by these women that are bases for the negativist visions shared and disseminated in social relations, which shows that society still has difficulty distinguishing the reproductive rights of women from their sexual orientation, and this reality expands to the health services. International and national studies emphasize that this group of women do not feel accommodated for when accessing health systems, due to the lack of preparation of professionals, such as: lack of qualification and prejudice, expressed by an approach that shows the discriminatory content of services organized due to presumed heterosexuality (Chapman, Wardrop, Zappia, Watkins, and Shields, 2012; Hayman, Wilkes, Halcomb, and Jackson, 2013; Sousa et al., 2014). Class 2 named "Lived Experience of Motherhood" represents the feelings generated about the experience of motherhood involving positive and negative emotional aspects that the birth of a child can entail. Thus, the desire to have a child is sometimes the propelling factor used in order to face the various obstacles, including, the difficulty in conceiving.

Nowadays I want to have another child, my partner and I are seeing how we can do it, because artificial insemination is very expensive, and we don't have the money, SUS requires a series of criteria that we don't meet ... Maybe, we will do it in the traditional method with a friend of ours, but it is complicated for her to accept me with another person ... Even with all the technological advances in health, they don't help homosexual couples. (Interview 02). I saw myself as a mother when I conceived my two children, I was very happy to have them ... after assuming my sexual orientation, it's a little difficult to exercise my role as mother, after they are older, they could feel ashamed that I am a lesbian, they won't recognize the difficulties I had to face for them to come into the world. (Interview 05). The process of motherhood was not easy, I went through many difficult and painful processes until I was able to conceive my daughter. The public policies that exist in our country, most of the time, only work on paper because in reality it is full of complications, my partner and I face and still continue to face rejection because we are lesbians. (Interview 06). My experience as a mother was wonderful, but my family did not accept it well, they asked why I was with a woman if I wanted to have a child. They did not understand that it had nothing to do with me being with a woman and wanting to be a mother. (Interview 07)

Motherhood is a unique milestone in a woman's life that brings anxiety, insecurity and expectations for the mother and everyone around her. Thus, it is understood that the process of motherhood experienced by these women is anchored in the feelings which are triggered by the desire to be a mother. It is perceived that the whether the difficulties experienced by them are positive or negative, their desire to have a family is undervalued and the "social anonymity" of the couple's sexuality is restricted to the scope of social requirements. The obstacles encountered in this category are corroborated by research conducted in Australia and the United Kingdom that denote the various difficulties they face: what service to access service, the method of conception, pregnancy and childbirth best suited to the couple, as well as family acceptance (McKelvey, 2014, Lee, Taylor, and Raitt, 2011).

Class 1, titled "Affective Partner Dimension" shows participants' reports of what motherhood represents to them. The idea of motherhood, as it is conceived, becomes a unique time-frame in a woman's life. Thus, a set of feelings particular to each woman emerges, which elaborate meanings of being a mother. The statements express how much the meaning of motherhood is unique in the lives of these women and reaffirms the responsibility and commitment to the child.

Being a mother is everything, being a mother is good! I have a daughter and I intend to be a mother again, seeing the child so fragile totally dependent on your care is very good. It is through motherhood that you can teach and pass on your values and beliefs. (Interview 02). Motherhood for me is my life in another being, it is being everything, it is incredible, it is everything, there is no other description. The feeling of motherhood for me arises in the sense of giving continuity or passing values and principles on to others. Motherhood is something transcendental. (Interview 03)

For them, being a mother is associated with the role of being a provider of love, care, attention, and zeal towards their children; these characteristics appeared to be the key elements in the definition of lesbian motherhood. In this way it is anchored in the (re) signification of motherhood, whose children became the reason for their efforts. Thus, this group of women aims at motherhood in a romanticized (pure and full) way, the children congregate an ideal, the possibility of continuity of existence. The same sense was expressed in other studies (Mckelvey, 2014; Martinez and Barbieri, 2011), in which the "role of mother" is centered on care and a divine feeling. This fact is explained by the Winnicottiana psychoanalytic approach, which states that motherhood can be accompanied by increased maternal sensitivity, while it tends to become more and more responsible for the child, an important aspect for the formation and strengthening of the mother and child bond (Simas, Souza, and Scorsolini-Comin, 2013).

Conclusion

Throughout the course of history, motherhood was formed by different discourses and visions as society evolved. Thus, one can understand motherhood as a biopsychosocial phenomenon impregnated with power relations involving social constructions of gender and sexual orientation. In view of the material presented, it is possible to observe that the representational contents of the participants of the present study were anchored in the concepts constructed and shared by them through the establishment of their social relations, i.e., they were organized from lived experiences from the outside world, be they individually or interpersonal. The experience reported by the participants regarding motherhood in lesbians highlights the obstacles that these women face in order to be a mother. It should be emphasized that the representational content on lesbian motherhood is objectified in the negative socio-cultural repercussions due to the prejudice and stigmatization generated by a heterosexist society. The experiences of this group of women in the collective sphere were permeated with moralistic and imposing views on the phenomenon studied. It is believed that such behavioral views which put lesbian maternity aside from social dynamics is due to the fact that there is only one model that our society identifies with and that is strongly related to the model of extreme binarisms (male / female and father / mother); However, it is important to emphasize that motherhood does not correspond to a purely biological event, but rather it is linked to care and affective ties, putting the biologistic view in question. In the face of such a situation lesbians becomes more vulnerable, therefore it is imperative that these woman gain visibility so that their rights to reproduction are guaranteed and respected, whether in the social or health area. As far as health is concerned, it is necessary for professionals, especially doctors and obstetrician nurses, who attend to the woman in this specific period of the life cycle, to be free of any judgment in order to guarantee complete and holistic quality care, considering and highlighting the specifics of these women in question. Thus, it is important that knowledge regarding the subject matter is (re) elaborated and shared in social groups and academic circles, as it influences the construction of attitudes and behaviors.

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