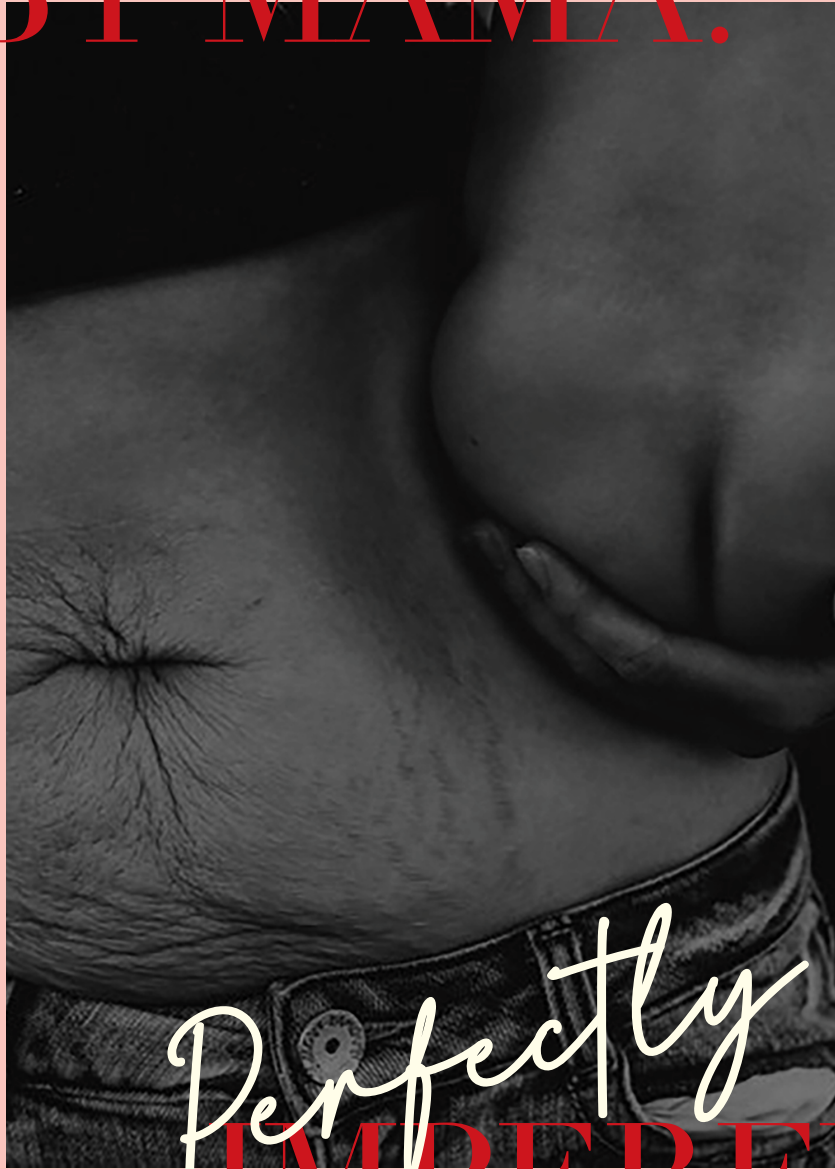


BABY MAMA:



*Perfectly*


IMPERFECT

# Ethics Clause

I confirm that this work has gained a favourable ethics opinion and that I have faithfully observed the terms of the opinion in the conduct of this project.

Signed J.E.Oldnall

Date 27 January 2022



To what  
extent can  
*body neutrality*  
positively  
impact  
new mothers'  
sense of self  
and body  
image?

Jessica Oldnall  
N0839322

Word count: 7631

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One



# INTRODUCTION

# 1.1 INTRODUCTION

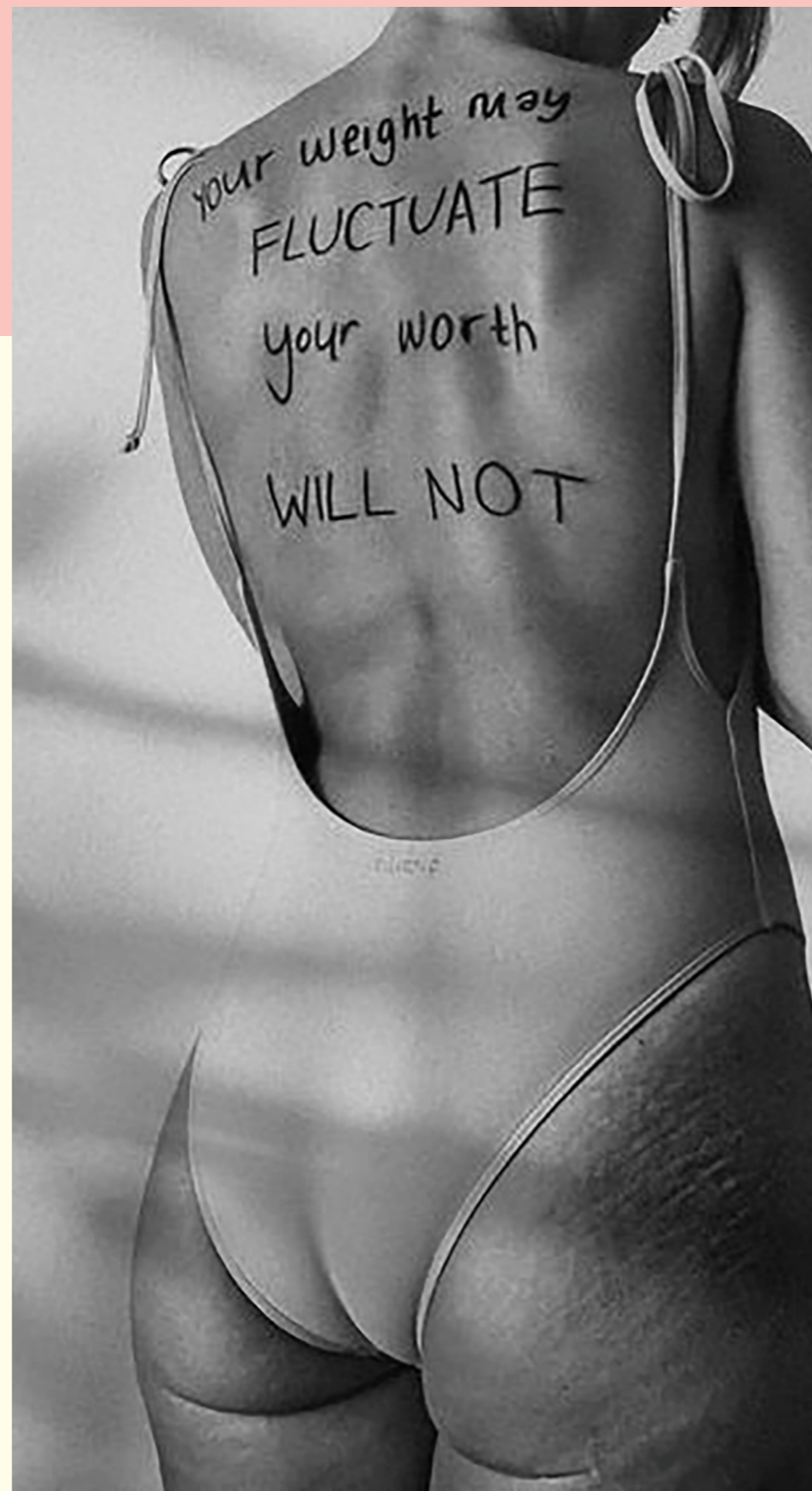
**M**otherhood is a timeless and universal concept (Swerling, 2018). Many attributes of motherhood, from external pressures to self-perceptions, are complex. Mothers-to-be anticipate their impending role to evoke feelings of enjoyment, excitement and pleasure (Harwood, McLean and Durkin, 2007). Still, from adjusting to a new social role to crises of identity, the transition is hard (Sacks, 2017). With society promoting a myriad of paradoxical pressures, from the often celebrated 'bounce-back' to perpetual positivity, new mothers experience inevitable confusion and judgement.

This report critically explores the implications of societal expectations on postpartum and motherhood experiences. Furthermore, it investigates the philosophy of body neutrality and evaluates the extent to which it can improve new mothers' self and body image. Anticipating the contemporary, mass narrative that pressurises constant positivity, it is hypothesised that body neutrality will resonate with new mothers as a way to improve their postpartum experiences. Primary and secondary research findings, with the use of theories and models, respond to the research investigation. A comprehensive evaluation of potential solutions to positively impact new mothers will form the basis of conclusive insights and recommendations.



## 1.2 AIM and

This research explores postpartum experiences and the impact they have on new mothers' self and body image, with the intention of investigating potential solutions, particularly body neutrality, to improve their experiences.



## OBJECTIVES

1.

To explore mind-body connection during pregnancy and postpartum to understand how pregnancy may impact postpartum experiences.

2.

To identify societal and cultural expectations and their impact on new mothers.

3.

To examine the term 'bouncing back' and question the role that fitness and diet may play in achieving this.

4.

To reveal new mothers' feelings and views of their sense of self and body image.

5.

To investigate the positive and negative effects of social media on postpartum women.

6.

To assess the benefits and limitations of practising body positivity and body neutrality for new mothers.



# LITERATURE REVIEW

**T**he exploration and analysis of pertinent literature enabled a deeper understanding of the proposed research investigation. This literature review is categorised into relevant themes that emerged from exploring “current work and perspectives” of credible academics and theorists in fields of expertise relevant to the research aim and objectives (Ridley, 2012 p. 1). A variety of viewpoints was analysed to present a balanced narrative of existing research, whilst identifying a knowledge gap for further investigation.

## 2.1

# INTRODUCTION



## 2.2 STEPPING INTO *Motherhood*



### 2.2.1 Managing Matrescence

**M**atrescence, “the transition into motherhood”, is a time when unpredictable hormone shifts and body morphing leads to emotional disturbances and uncertainty on how to assimilate into the world (Sacks, 2017; Hempsey, 2021). The emotional and physical transition of having a baby brings inevitable feelings of joy and happiness (Daley, 2019). However, Harwood, McLean and Durkin (2007) suggest that this transition presents a number of challenges. A woman is forced to re-examine her identity when she becomes a mother (Hempsey, 2021). Though some women experience strengthened identity, many experience the loss of identity (Laney et al., 2015; Upton and Han, 2003). Hodgkinson, Smith and Wittkowski (2014) identified a recurring identity shift amongst postpartum women; a mothering identity. This newfound sense of identity meant re-negotiating their identity, including renouncing being “a sexually

attractive woman”. Society unhelpfully reinforces the perception that once your child is born, everything is sacrificed for them (Hempsey, 2021). The expectation that motherhood will be the most fulfilling lifetime experience exacerbates postpartum body image and mental health struggles. Paige Bellenbaum, founding director of The Motherhood Center, highlights the lack of, and need for, discussion about grieving for the loss of pre-motherhood life (Ayuda, 2021). Yet, postnatal health expert, Dr. Serrallach, encourages acceptance (Mollard, 2021). He posits the analogy of butterfly metamorphosis representing matrescence; celebrating the butterfly rather than mourning the caterpillar. Psychotherapist, Vania Sukola, discourages the mourning of previous selves, instead advocating empowerment through the capabilities of new mothering bodies (Stren, 2019). These insights suggest that the transformational process of motherhood is real, and should be viewed pragmatically and positively.

## 2.2.2 And Action

Goffman (1959) presents a dramaturgical theory that humans routinely engage in self-presentation behaviours to put forth their best appearance in order to be perceived as successful. Motherhood is common ground for practicing this behaviour, particularly online (DeGroot and Vik, 2019). This provides a foundation for comprehending how mothers behave in society, and how the process of “accentuating certain facts and concealing others” (emotional or physical attributes) encourages the construction of identities through forced performance. Collett (2011) discusses the social construction of motherhood, describing how the mothering role transcends birthing and raising a child, to “playing a socially defined, publicly visible role”, which can have a “combined and complex relationship with mental well-being” (Hutchinson and Cassidy, 2020). Douglas and Michaels (2004) suggest that women must devote their entire physical and emotional beings to their children, implying that performing motherhood with “flawless perseverance” is obligatory (DeGroot and Vik, 2019). This irresponsibly discourages the expression, or even acknowledgment, of any personal feelings felt by the mother. Though DeGroot and Vik (2019) argue that many mothers are aware of the unrealism of the “perfect personified mother”, they frequently feel pressurised to conform to “the ideal notion of the perfect mom”.



Many new mothers become subconsciously affected by society's unrealistic expectations of motherhood, often succumbing to the belief that their utmost fulfilment as a happy and strong woman will be achieved by becoming a mother (Regev, 2021). The inevitability of exhaustion and isolation is disregarded whilst new mothers internalise the nuanced emotions that fail to reflect such expectations (Biggs, 2021). Observations of female relatives and women in culture contribute to the expectations of postpartum life (Sacks, 2017). The Myth of Motherhood, postulated by Dr Michal Regev (2021), is a notion underpinned by Douglas' and Michaels' (2004) discovery of the prevalence of “new-momism” - the ideology that all mothering practices require perfection, consequently evoking feelings of guilt and anxiety (Williams, Christopher and Sinski, 2017). Swerling (2018) describes the ‘yummy mummy’ and ‘hipster mum’ as “nauseating clichés”; jargon used to describe attractive, new mothers who have seemingly consummated motherhood and effortlessly snapped back to their prior selves (Prinds, Nikolajsen and Folmann, 2020). The ubiquitous nature of these stereotypes perpetuates the societal problem, wrongly provoking new mothers to believe that is reality (Roth, Homer and Fenwick, 2012). Swerling (2018) encourages new mothers to be mindful of ‘reality’ when motherhood is repeatedly fantasised. Sacks (2017) supports this, claiming that motherhood is ambivalent; it is not good or bad, it is both good and bad.

## 2.2.3 The Myth of Motherhood





## 2.3

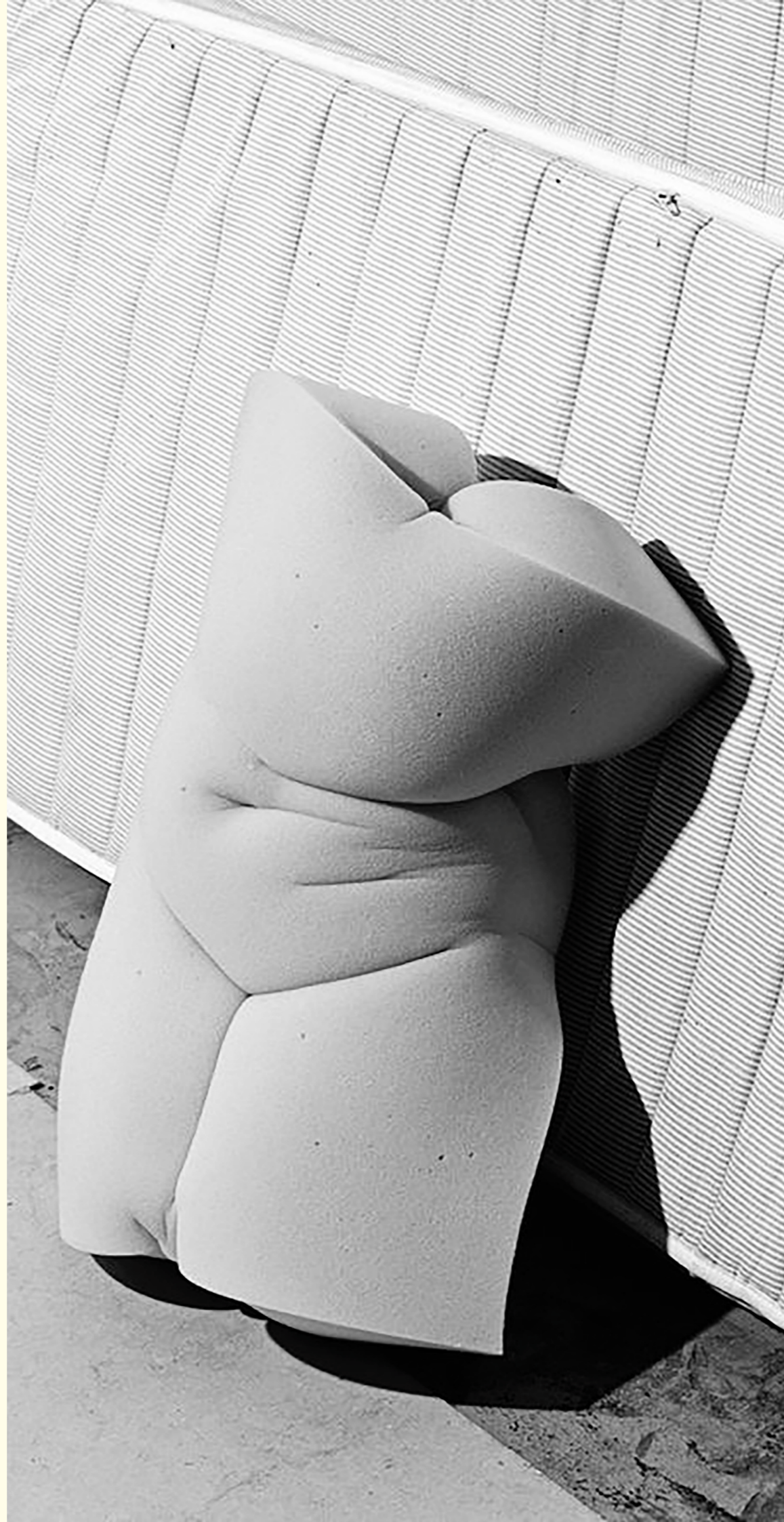
# THE IDEAL *vs* THE *Real*

## 2.3.1 The Embodied Shape of a Mother

**H**an (2013) describes becoming a mother as “an experience of the body”, from carrying and sustaining the foetus, to delivering and breastfeeding the baby, owing to the theory of embodied experience. Embodiment theorists, including Bordo (1993) and Martin (1987), promote the idea that the mutual influence of a woman’s bodily experience and identity shift should motivate a new relationship with her body (Fox and Neiterman, 2015). This is supported by Bailey (2001) who believes new mothers should appreciate their bodies and “achieve a new sense of their embodied selves”. These naive viewpoints underestimate the influential role of culture and media on postpartum women. Many emphasise that women must eradicate all bodily traces of having a baby and retrieve their former bodies (Fox, 2020; Stren, 2019; Biggs, 2021). These cultural pressures fuel the disconnection of women from their motherhood experiences, making acceptance of their new mothering bodies and sense of selves difficult. Founder of Modibodi, Kristy Chong, encourages empowering embodiment in motherhood. Nonetheless, she acknowledges the need for a shift in how authenticity of postpartum is portrayed in society, particularly on social media. Saddened and surprised by the “limited depiction”, Chong highlights the need for a more “holistic, inclusive view” online to better prepare women for the physical and emotional changes that come with the postpartum experience (Ross, 2021; Biggs, 2021).

## 2.3.2 Baby in vs Baby out

Changes that occur during pregnancy can significantly affect a woman's body image. Body image refers to "the multifaceted psychological experience of embodiment" (Cash, 2004). Though not exclusively, one's physical appearance is a significant component of body image (Hodgkinson, Smith and Wittkowski, 2014; Cash, 2004). The physiological transition of pregnancy transgresses the socially constructed ideal of the female body, which in western society is "a slender body" (Thompson et al., 1999). Despite societal stigma towards obesity, salience of weight in pregnancy is often expected and accepted. Rallis et al. (2007) expect pregnant women to become dissatisfied with their body due to departure from this ideal. However, Hodgkinson, Smith and Wittowski (2014) believe that the ability to delineate between fatness and pregnancy excuses pregnant women from this ideal. Clark et al. (2009) suggest that pregnant women positively adapt to their bodily changes due to appreciation of the body's functionality and the belief that such bodily changes are temporary. Though Rodriguez (2019) believes fat shaming exists throughout pregnancy, discussions about body size and shape are more open (Upton and Han, 2003). This rationale becomes concernedly taboo in postpartum, confirming the prevalence of body dissatisfaction in this period. Society expects postpartum women to regain their pre-baby body soon after giving birth. This unhelpfully contributes to progressive weight gain concerns and the belief that women should be in control of their bodies when they are no longer excused by recently giving birth and have lost their visibly pregnant shape (Rallis et al., 2007; Clark et al., 2009). This highlights the need for realistic postpartum body expectations, and societal appreciation of the pragmatic strength and beauty of postpartum bodies.



## 2.3.3 Bouncing Back and Compulsive Comparisons

Messages about the postpartum body are contradictory. Whilst medical professionals stress the importance of breastfeeding and rest, the mass narrative of 'bouncing back' is pervasive (Fox and Neiterman, 2015; Daley, 2019). Society portrays the postpartum body "as a project to be actively worked on" and "controlled to get back to normal", with celebrity experiences in popular media often compounding postpartum perceptions (Hodgkinson, Smith and Wittowski, 2014; Roth, Homer and Fenwick, 2012). This aligns with objectification theory proposed by Fredrickson and Roberts (1997), suggesting female bodies are constructed within sociocultural contexts and treated as objects that "can be used, manipulated [and] controlled" (Calogero, 2012; Appendix 9.10). These sociocultural viewpoints become normalised, instilling a self-objectified mindset in new mothers to attain a body that meets socially constructed "thin and toned" ideals (Raspovic et al., 2020). The pervasiveness of diet, exercise and bounce-back culture suggests postpartum women must "look a certain way" which is damaging to new mothers (Pollack, 2021; Ayuda, 2021). Brown (2016) validates postpartum women by promoting the normalisation of weight gain and bodily changes. However, the constant focus on bodily appearance contributes to body dissatisfaction and self-blame when postpartum women try, but fail, to distance themselves from idealised beauty standards (Holland and Tiggemann, 2016; Prinds, Nikolajsen and Folmann, 2020). Rallis et al. (2007) predicted physical appearance comparisons as a factor in postpartum body dissatisfaction, also confirmed by Nagl et al. (2021). Brown (2016) supports and modernises this, finding that social media fuels comparisons, increasing body dissatisfaction amongst pregnant and postpartum women.



## 2.4 BODY POSITIVITY AND *Body Neutrality*

### 2.4.1 Bo-Po or Bo-No

Research confirms the relationship between social media use and adverse body image mediated by appearance-comparisons (Cohen, Newton-John and Slater, 2020; Makwana et al., 2018). The emergence of the social media-led movement, body positivity, aims to combat the body dissatisfaction that promotion of unrealistic beauty standards engenders (Cohen, Newton-John and Slater, 2020). Despite the narrow ideals dominating photography-based platforms, body positivity appreciates unique bodily features, accepts the reality of inconsistently reflecting such ideals, and broadly defines beauty (Sastre, 2014; Tylka and Wood-Barcalow, 2015). This movement contributes to “boosting self-esteem and confidence” (Radin, 2020). Sastre (2014) believes body positivity extends from solely focusing on the body’s appearance, to appreciating its health and functionality. Many experts disagree and express modern concerns; it disregards the medical complications that come with obesity, it glorifies unhealthy habits and it reinforces a focus on appearance (Nomi, 2018; Webb et al., 2017). Despite negative interpretations of the movement slowly penetrating the mainstream, there is evident need for a realistic, balanced perspective towards bodies that is less focused on physical body image, so as to reassure those who find unequivocally loving their bodies, 24/7, impossible (Natfulin, 2020).

## 2.4.2 Pressure to be Positive

**F**redrickson (2001) recognises the limitations of negative thinking which can foster a fearful mind and limit action, compared to positive emotions which “serve as markers of flourishing, or optimal well-being”. Body positivity often pressurises women to cultivate loving relationships with their bodies (Oltuski, 2017). Whilst this promotes self-love, it often evokes feelings of frustration and guilt when individuals “fail to stay in a perpetually positive mindset” (Park, 2020). This applies to maternal body image, instilling feelings of failure if any negative bodily thoughts are admitted to (Thompson, 2021). Psychiatrist, Elizabeth Wasenaar, outlines the danger of being overly invested in body image, explaining that you “can’t ever change your body enough to make yourself happy” (Natfulin, 2020). Dr. Shweta Sharma believes

this toxic positivity is the conscious practice of forcing positive thoughts to disguise or minimise “pain and actual reality” (Kohli, 2021). Psychotherapist, Elizabeth Beecroft, suggests increased social media use - commonly described as a ‘highlight reel’ that pressurises users to only share positive posts - fuels this mindset (Radin, 2021). This toxicity is eminent in postpartum, with motherhood often falsified on social media. New mothers are heavily impacted, yet subconsciously exacerbate the problem (Appendix 9.8). Though there are negative correlations between social media and mindset, social feeds can be curated to make users feel happier (Oakes, 2019). These opposing viewpoints evidence the need for society to normalise the expression of particular feelings and behaviours, and lessen the pressure to be perpetually positive.

## 2.4.3 Cue Body Neutrality

**I**t is assumed that empowerment by “looking and feeling sexy” is not viable or desirable for all women (Darwin and Miller, 2021). For those that find loving their bodies hard, a self-acceptance directive may be more welcome and attainable than self-love. Body neutrality encompasses “moving beyond the reflex” of continually judging ones own appearance (Oltuski, 2017; Your Fat Friend, 2020). This moderate approach encourages decentralising the body as an object and alternatively recognises and values its abilities, strengths and nonphysical characteristics (Thompson, 2021; Raypole, 2021). This neutral perspective is considered a safe and manageable approach to establishing a healthy relationship with the

body (Resnick, 2021). Unlike many who view body neutrality as a body positive alternative, Connie Sobczak, founder of The Body Positive, views it as a crucial part of body positivity (Oltuski, 2017). She emphasises the importance of our bodies and supposes that they need love, attention and care. She believes that body positivity “is not about being positive all the time”, hinting that body neutrality is a tool to navigate bad days. Some highlight the challenge of adopting this perspective since women’s flaws and physicalities are constantly scrutinised within society (Cohen, Newton-John and Slater, 2020). Nevertheless, the movement’s intentions can be highly praised, and it has the potential to positively influence the self and body image of new mothers.

“  
YOU’RE NOT  
REQUIRED  
TO  
*love your body*  
AS AN  
ANTIDOTE  
TO  
*loathing it*  
”

Self-love Coach, Anastasia Amour (Oltuski, 2017).



## 2.5 RESEARCH *Gap*

**W**hilst the literature review has aided understanding of motherhood, pregnancy and postpartum, it has identified opportunities for supplementary exploration. Existing literature highlights the dominance of pressure and negativity associated with the postpartum period. Furthermore, the limitations of the body positivity movement have been acknowledged, thus fuelling the body neutrality movement. There is limited academic literature on body neutrality, let alone the beneficial role that it could play on postpartum women. Therefore, further research will be conducted to explore the extent to which body neutrality can positively impact new mothers' sense of self and body image, whilst uncovering other possible solutions. The themes identified from the literature review will be integrated with primary research to uncover insights that will enable an effective response to the project investigation.



*Three*

METHODOLOGY

# 3.1 OVERVIEW

To provide a comprehensive response to the research question, an extensive range of primary and secondary research was conducted. A mixed-methods triangulation approach was adopted, to collect quantitative and qualitative data (Patton, 1999; Appendix 9.10). The Hutter-Hennink qualitative research cycle was applied to further support the strategy (Figure 1). The first component, the design cycle, helped form “the conceptual design phase” which involved formulating a research question and objectives, and reviewing existing literature (Section 2) (Hennink, Hutter and Bailey, 2020, p. 4). Thereafter, data collection and analytic cycles deepened understanding of “the phenomenon of interest”, uncovering insights (Sections 4 and 5) (Hanson et al., 2005). This mixed methodology enabled rigorous analysis, strengthened the validity of findings, and permitted “more trustworthy results” (Green and McClintock, 1985; Harrison and Reilly, 2011). Each method was strategically chosen and executed to fulfil all research objectives (Section 1).

## Hutter-Hennink Qualitative Research Cycle

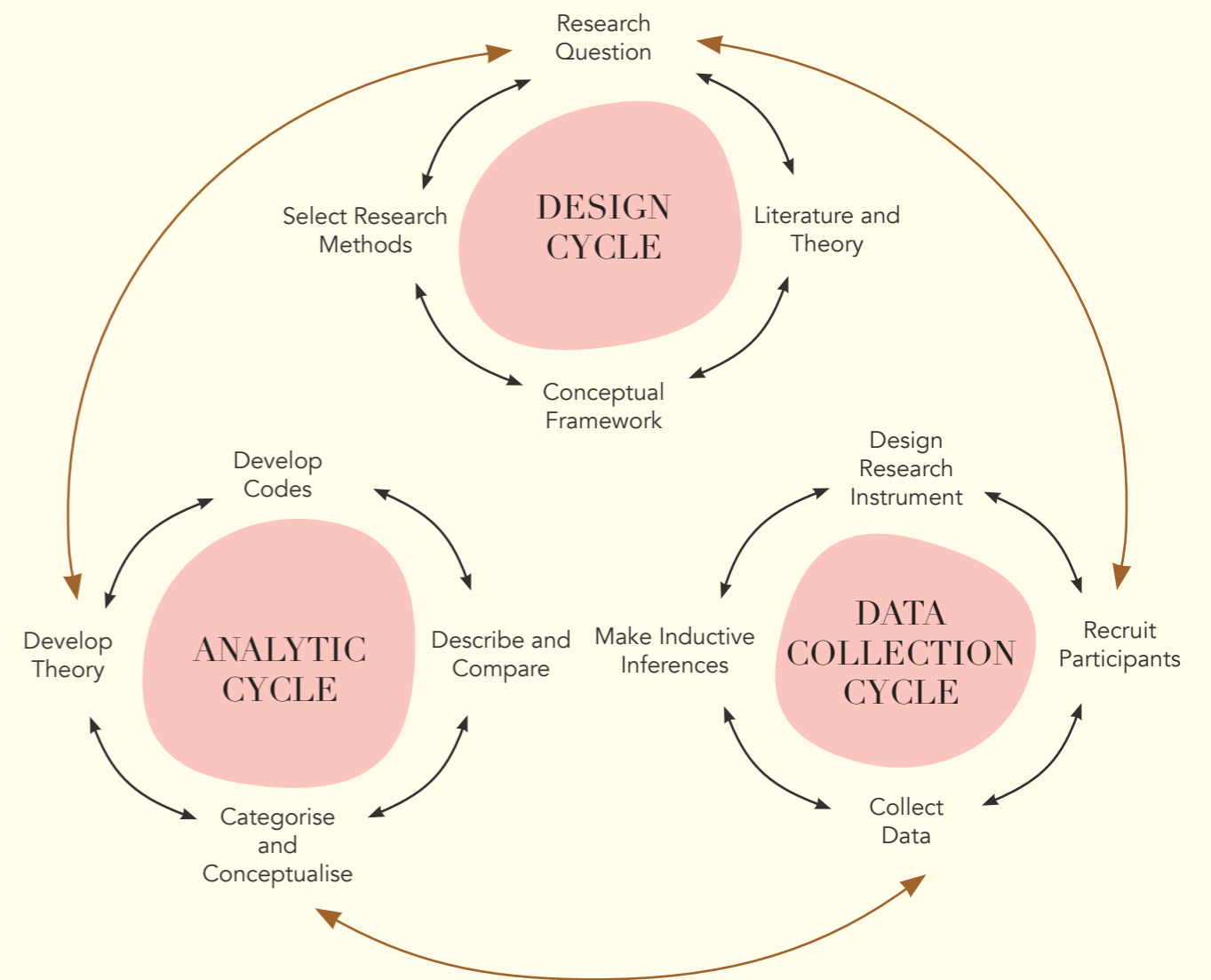


Figure 1

## 3.2



## SAMPLE

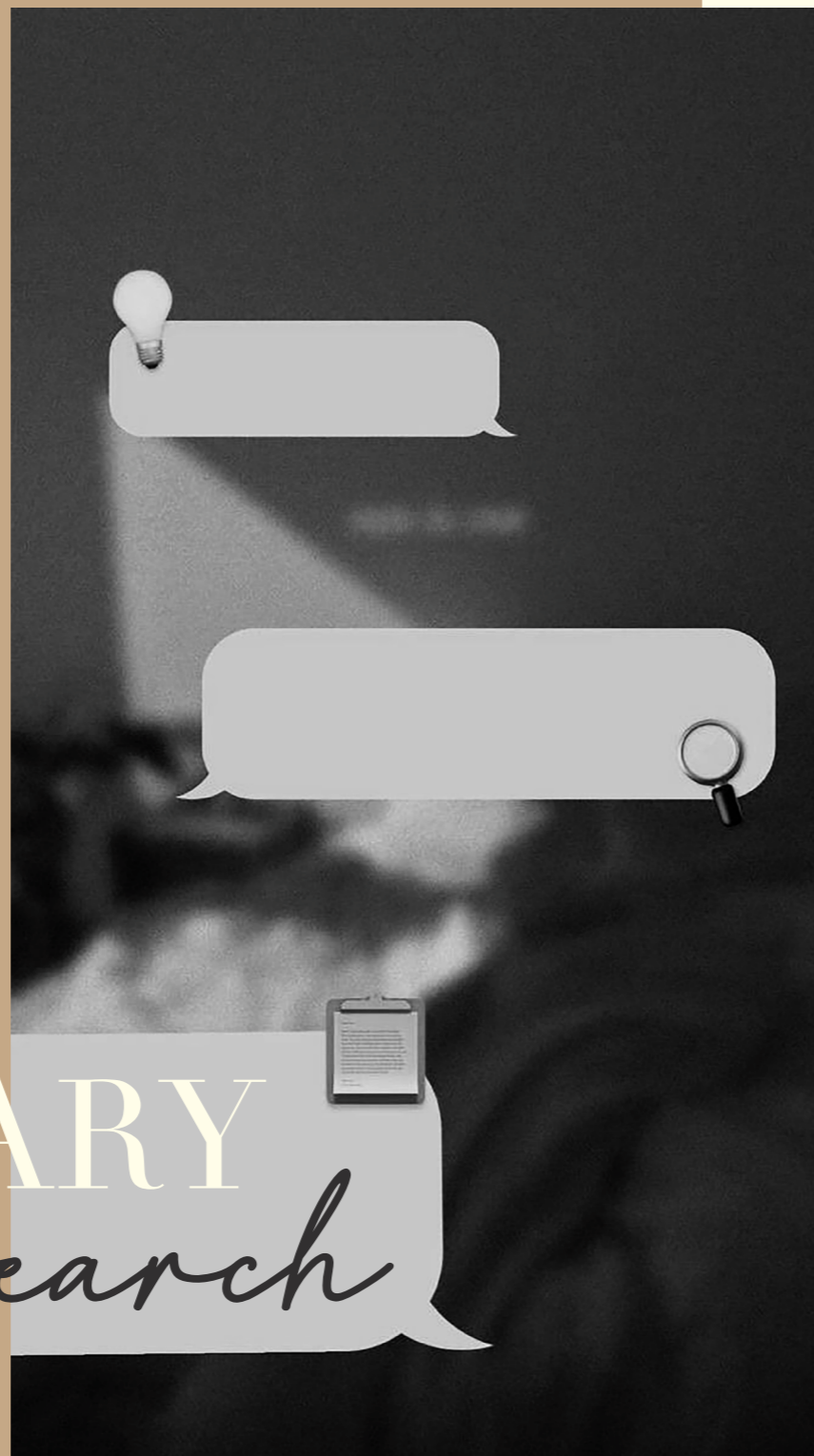
To address the research investigation encompassing the demographic of new mothers, the primary research sample was primarily women in the postpartum period of five years or less. Contributions from three pregnant women provided qualitative insights into pregnancy, allowing for comparison with others' postpartum experiences. However, to gain deeper insight, other samples were utilised. Industry experts added value due to their specialist knowledge. An initial online survey targeted all female demographics regardless of motherhood status. Purposive (deliberate) sampling was key to identifying industry experts and individuals meeting the pregnant or postpartum criteria. Snowball (chain) sampling was used to source participants due to limited personal reach (Bhardwaj, 2019; Hennink, Hutter and Bailey, 2020). There are bias concerns about these non-probability methods due to potentially inaccurate representations of the population (Meyer and Wilson, 2009; Farrokhi and Mahmoudi-Hamidabad, 2012). Ensuring geographic and other demographic variation through social media and email networking overcame this limitation and aided participant recruitment, limiting costs and expanding reach (Topolovec-Vranic and Natarajan, 2016).

## 3.3 SECONDARY *Research*

Secondary sources were collated, reviewed and presented in the form of a literature review. Referring to Hutter-Hennink's design cycle, incorporating theory was imperative to demonstrate understanding and engagement with pertinent written dialogue. A systematic approach was adopted with an architectural framework encouraging the establishment of succinct themes (Booth, Sutton, and Papaioannou, 2016; Ridley, 2012). Secondary sources consisted of credible books, academic journals, online reports, articles and studies. Examining these sources was fundamental for exploring a broad scope of "current work and perspectives" to contextualise further primary research (Ridley, 2012 p. 1). Critical judgement was applied to ensure academics' reliability and credibility (Machi, 2016; Saunders, Lewis and Thornhill, 2016). Acknowledging the bias of a particular viewpoint encouraged exploration of other viewpoints to provide a balanced perspective whilst accounting for personal opinion (Denney and Tewksbury, 2013). Although subjective and lacking academic credentials, social media posts and blogs became relevant by addressing social and cultural issues impacting new mothers.



## 3.4 PRIMARY *Research*



### 3.4.1 Online Surveys

Two online surveys were constructed to collect data through respondents answering the same set of questions “in a predetermined order” (Saunders, Lewis and Thornhill, 2016, p. 437). They captured quantitative data and helped enumerate “the frequency of occurrence of opinions, attitudes, [and] experiences” (Rowley, 2014). The first survey (142 responses) targeted views of all women on body image, mindset, and societal and cultural expectations, serving as a research foundation. As the research project progressed, a second, targeted survey (103 responses) explored new mothers’ feelings and experiences of pregnancy, postpartum and motherhood. Social media and snowball sampling fuelled the surveys’ distribution, increasing the number of responses. Both surveys predominantly adopted closed-ended questions for ease and speed of response (Hyman and Sierra, 2016). Likert scales were useful to make comparisons (Walliman, 2014).

### 3.4.2 Diary Entries

Diary entry completion was an exploratory phase of the research design, falling under the methodology of ethnography capturing “social meanings and ordinary activities” (Brewer, 2000, p. 10). This method gained an insider perspective into pregnant and postpartum women’s real-life “feelings, cognitions, behaviour and social context” (Bell, Bryman and Harley, 2019; Janssens et al., 2018). Diaries were completed by three pregnant and four postpartum women, covering the short timeframe of a week. There was notable risk of participants failing to commit “to the regular observation and reporting of certain phenomena” (Hyers, 2018). Though this did not occur with diary completion, some participants omitted to photograph their everyday clothing choices as requested, therefore hindering subsequent thematic analysis. Nonetheless, the written diary study was successful due to the “relevance of [the diarists’] entries” (Hyers, 2018).

### 3.4.3 *In-depth* Interviews

**F**urther qualitative data was gathered from diary participants through semi-structured interviews, using “a verbal stimulus to elicit a verbal response” (Brewer, 2000, p. 63). Such interviews provided deeper insight into the “behaviour, meanings, attitudes and feelings” of pregnant and postpartum women (Brewer, 2000, p. 63). Due to a wide geographical spread, interviews used conferencing software, either Zoom or Microsoft Teams. Though considered cheaper and more efficient than in-person interviews, occasional technical issues such as time-lags and social interruptions affected the flow of discussions (Krouwel, Jolly and Greenfield, 2019). The research topic resonated with all interviewees, stimulating a passionate and sincere conversation. The use of visual cues such as nodding and smiling compensated for inaccurate eye contact and encouraged detailed responses (Walliman, 2014; Krouwel, Jolly and Greenfield, 2019).

### 3.4.4 *Industry* Interviews

**F**our industry interviews were conducted with experts from a variety of fields to enhance the research. These interviews explored institutional narratives, focusing “less on personal issues” (Hennink, Hutter and Bailey, 2020, p. 118). The interview with perinatal-trained personal trainer, Tia Purewal, emphasised the importance of fitness and diet during pregnancy and postpartum, supported by yoga expert, Laura Clayton. Laura provided a holistic, mind-focused perspective whilst drawing on her own maternal experiences. Midwife, Jade Phillips, and perinatal mental health nurse, Caroline Hadley, discussed their significant roles in supporting women through this life-changing milestone. Each interview adopted a similar structure; posing a mix of identical and tailored questions. This permitted methodological analysis whilst revealing valuable industry insights.

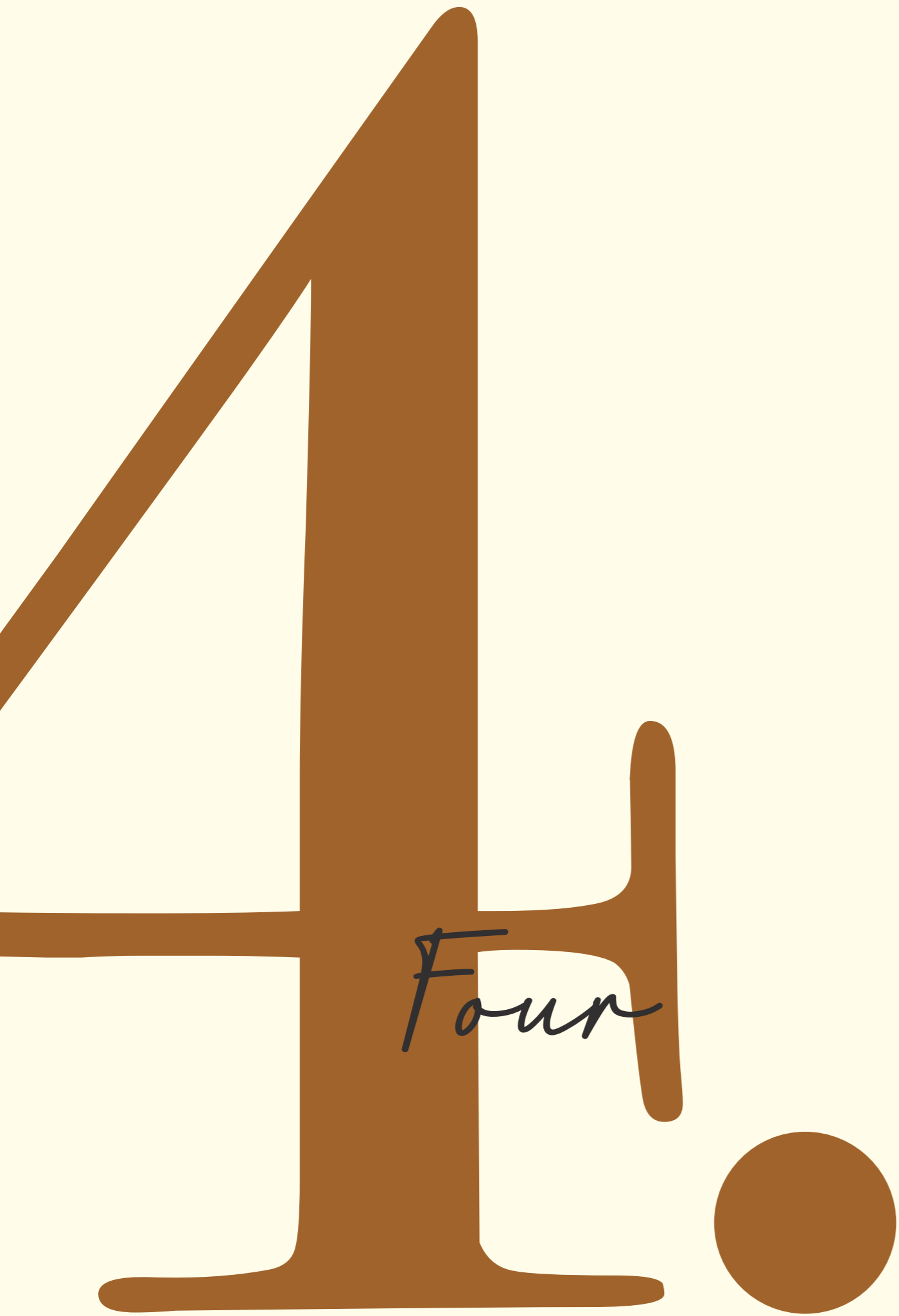
### 3.4.5 Netnography

Netnography was a prominent research methodology relying on “human presence and personal connections online” (Costello, McDermott and Wallace, 2017). Nonparticipatory netnographies were applied across different platforms to systematically observe, record and interpret online behaviours (Hennink, Hutter and Bailey, 2020). Recent conversations about postpartum and motherhood on internet forum ‘Mumsnet’ were observed by “lurking”, deepening insight into issues faced by new mothers (Saunders, Lewis, and Thornhill, 2016, p. 374). Social media and blog posts were examined discussing, in particular, the role of body neutrality. This made it possible “to apply observational techniques to secondary data as well as to collect primary data” (Saunders, Lewis and Thornhill, 2016, p. 355). Thematic analysis was adopted to identify, analyse and report patterns within the findings (Braun and Clarke, 2006). This analysis method lacks a theoretical underpinning and has potential risk of bias, but was validated by its flexibility and straightforwardness (Nowell et al., 2017; Javadi and Zarea, 2016).

### 3.4.6 Focus Group

A virtual focus group was conducted with six mothers of young children, providing valuable insights into “research questions via participant discussion and interaction” (Del Rio-Roberts, 2009). This method further explored motherhood experiences and postpartum feelings. The discussion topic resonated with participants, encouraging complementary, passionate and disruptive interactions, despite geographical differences (Bell, Bryman and Harley, 2019). Unfortunately, the number of participants eventually reduced to three due to technical issues and social interruptions from children, lessening sufficient discussion (Del Rio-Roberts, 2009; Krouwel, Jolly and Greenfield, 2019). Semiotic analysis enhanced engagement through exploration of selected images (Greenwood and Pound, 2020; Penn, 2000). Unlike individual interviews, the focus group enabled probing questions, adding interest (Bell, Bryman and Harley, 2019).





# CHAPTER ONE:

## The Problems



# 4.1 PRAGMATISM:

*Pregnancy vs Postpartum*

The preceding literature review identified that discussions about pregnancy body image are more prominent than postpartum (Upton and Han, 2003). Pregnant women are generally excused from transgressing socially constructed ideals of the female body, despite salience of weight. This societal acceptance allows pregnant women to view their bodies pragmatically and appreciate its functionalities (Clark et al., 2009). This was evident in an interview with Karen (28 weeks pregnant) who expresses her love for being pregnant, despite discomfort and immobility (Appendix 9.3). Yoga expert, Laura Clayton, reflects on her experiences stating, **"I have never felt more body proud than when I was pregnant. I was huge and I loved it"** (Appendix 9.4). She suggests that this was potentially due to it being a time "that being thin wasn't applauded". Midwife, Jade Phillips, poses the ideology that "a degree of focus" is needed to appreciate the physiological process of growing a baby, particularly if experiencing negative side effects of pregnancy such as sickness (Appendix 9.4). Kristen (31 weeks pregnant) contextualises this, explaining that valuing the functionality of her body is hard when, "from the outside, you don't look any different" (Appendix 9.3). This propounds the theory that body neutrality (valuing the body's abilities and strengths) is more easily practised by pregnant women with visible bumps.

The literature review suggested that this rationale does not extend into postpartum. This was apparent in the Postpartum Women online survey where participants expressed collective feelings of **shame, disappointment and embarrassment** when asked to describe their postpartum body image feelings (Appendix 9.1). Nonetheless, primary research uncovered that some new mothers embrace the initial weeks and months of postpartum, resisting conforming to societal pressures for a short period. For example, Kristen describes a "'grace' period" and Kirstine reveals, **"I did quite like the excuse to just not care about my appearance. That was very nice for a long while"** (Appendix 9.5).

Further, Laura explains that she was in "awe and wonder of the female body" during breastfeeding and birth recovery. However, once breastfeeding had stopped, the mass narrative of 'bouncing back' affected her ability to love her body in the same way, leaving her feeling "disconnected". Scarlett (35 weeks pregnant) also expresses her worries about "getting back in shape" (Appendix 9.3). This highlights the range of emotions experienced by new mothers, whilst evidencing difficulty for postpartum women to practise body neutrality.

## 4.2 SOCIETY

### *Sucks*

Primary research built upon the comprehension of societal expectations impacting new mothers' self and body image, as evaluated in the literature review. The literature review revealed that Fox and Neiterman (2015) acknowledge the conflicting messages about postpartum. Industry expertise from perinatal mental health nurse, Caroline Hadley, emphasises the importance of rest and support. Caroline states, **"There's no rush to get your jeans back on"** (Appendix 9.4). She further corroborates that, "It's really common in the first couple of weeks to feel out-of-sorts after giving birth". Though new mothers understand the importance of rest, all focus group participants agree that motherhood is affected by external pressures and fear of judgement from "everybody", including midwives (Appendix 9.5). When asked what words come to mind about postpartum and motherhood, words such as **"unexpected"** and **"unknown"** were selected, implying that the false depiction of postpartum in society ill-prepares new mothers for this time where "their life is changing beyond recognition", as affirmed by Caroline. Sarah states, **"I think we put a lot of pressure on ourselves to be 'supermum'"** (Appendix 9.5). Lizzie adds, **"And the whole competition that is probably not even there"**. This authenticates Goffman's (1959) impression management theory whereby new mothers wish to perform motherhood flawlessly, despite awareness of the "perfect personified mother" (DeGroot and Vik, 2019). The Postpartum Women survey reinforces this, identifying that postpartum women feel pressure in various ways (see right; Appendix 9.1).

Do you feel pressure to LOOK a certain way because of societal and cultural expectations e.g. what you see in the media, who you follow/see on social media, what your friends and family say/expect etc?

# 83.5%

YES ALWAYS, YES SOMETIMES

Do you feel pressure to THINK positively about your postpartum body because of societal and cultural expectations e.g. positive thinking/body positivity is key, it is good for your mental health, people on social media always seem to be positive etc?

# 76.7%

YES ALWAYS, YES SOMETIMES

Do you feel pressure to be a 'PERFECT MOTHER' because of societal and cultural expectations?

# 86.4%

YES ALWAYS, YES SOMETIMES



The first survey reveals that **88% of females strongly or somewhat agree that toxic positivity is a concept within today's society** (Appendix 9.1). Elizabeth Beecroft's proposition that social media catalyses toxic positivity is supported by Lauren Hill who explains, "Representations of motherhood on social media are definitely some of the most detached from reality that I've seen" (Scott, 2020). Michelle contextualises this by stating, "Everybody expects you to be happy" (Appendix 9.5). These insights signify the paradoxical state of mind from which new mothers suffer which influences their way of being, underpinning Dr Michal Negev's (2021) postulation of The Myth of Motherhood. Laura strongly believes that "holistic mindset is everything" (Appendix 9.4). Whilst she acknowledges the pressures that dominate the postpartum period, she flags the significance of holistic mindset education for pregnant and postpartum women, because without it, she says, "I can't imagine I would have deepened my connection to self".

## 4.3 BEWARE the *'Bounce-Back'*

Primary research explored the term 'bouncing back' and its influence on pregnant and postpartum women's self and body image. As evidenced in the literature review, society normalises and fuels bounce-back culture, evoking new mothers' body dissatisfaction and self-objectification. Roth, Homer and Fenwick (2012) examined media celebrity portrayal of "the childbearing body", identifying the need for healthy and realistic depictions of postpartum bodies. The Postpartum Women survey identifies body image comparisons with friends/family as the social comparison most negatively affecting new mothers (Appendix 9.1). This disproved the speculation that new mothers would be most negatively affected by body image comparisons with celebrities due to societal pressure to bounce back, commonly associated with celebrity culture. A focus group discussion, stimulated by an image of an unfiltered postpartum body, evidenced that most new mothers are aware of the realities of postpartum bodies opposed to the media portrayal thereof. For example, Michelle jokingly states, "How did they get that picture of me?", followed by Lizzie, "I was gonna say it's like looking in the mirror!" (Appendix 9.5). Sarah expands on this by suggesting, "You focus on different things [in the image]... than obviously the belly and the stretch marks... as a mum", supporting Roth, Homer and Fenwick (2012) and indicating the need for more authentic postpartum information.

Primary research participants were asked to express their thoughts on the statement: **"Celebrities are often celebrated for 'bouncing back' very soon after giving birth, often pressurising day-to-day pregnant / postpartum women into thinking they need to do the same"**. The majority rationalised that celebrities are seemingly able to bounce back for reasons such as having more money, time, and support. Personal trainer, Tia Purewal, recognises two motives behind celebrity bounce-backs, of which she reminds her clients; "[they] paid for liposuction... and... they have a very different lifestyle" (Appendix 9.4). Kristine suggests, "It's not naturally possible" (Appendix 9.5), and Caroline believes, "People have maintained that body for them" recognising "There's a lot of pressure" (Appendix 9.4). Furthermore, thematic analysis of recent 'Mumsnet' conversations unveiled that it is not unrealistic for some bodies to bounce back due to biology, yet women are often shamed if they do (Appendix 9.6). These findings highlight the necessity of better postpartum education, consequentially allowing new mothers to embrace the bodies "that brought life into this world" (King, 2021).



**WARNING:**

**Reflections in this mirror may be distorted by socially constructed ideas of 'beauty'**

## 4.4 BUT LOOKS MATTER

**F**redrickson and Roberts' (1997) objectification theory, suggesting that female bodies are objectified within society, was contextualised through primary research referencing pregnant and postpartum women. The first survey evidences that the majority of females feel pressure to conform to a particular body shape for the purpose of being attractive to men (Appendix 9.1). Known as "the male gaze", this is a phenomenon which feminist Florence Given (2020) believes exists widely in society. Sarah expresses, **"A woman shouldn't be judged on [her physical appearance], because a man wouldn't be judged on his physical appearance"** (Appendix 9.5). Kirstine supportingly states, "If men were damaged through the process of giving birth, there would be a lot more talked about it", indicating the stark difference between men and women in society. However, pregnant and postpartum women evidently care about their physical identity and enjoy validation from remarks about their appearance. On day seven of Karen's pregnancy diary, she discloses, "It has been nice for [my friends and family] to say such positive things about my pregnancy body" (Appendix 9.2). On day one of Laura's postpartum diary, she admits, "I feel bad that I don't make enough effort to be attractive for my husband", supporting Hodgkinson, Smith and Wittowski's (2014) finding of postpartum departure from being "sexually attractive". Moreover, Denise reveals, "It made me feel good at the time" (Appendix 9.3); when people commented on how she bounced back after her first pregnancy.

It was assumed that postpartum women would opt for comfortable, slouchy clothes due to sensitivity about their bodies. However, most diarists revealed the importance of occasionally dressing up and wearing makeup to feel more comfortable with themselves. Despite "just [liking] to look good", as Liz states (Appendix 9.3), this suggests subconsciously conforming to societal expectations that remain heavily preoccupied with how people look. The Postpartum Women survey reveals **70% of respondents being mostly familiar with the term 'body positivity', compared to 78% being mostly unfamiliar with the term 'body neutrality'** (Appendix 9.1), suggesting that if the latter term were more widely known, new mothers might worry less about their appearance. However, these discoveries indicate that new mothers achieve a greater sense of self when they beautify their physical selves. Hazel suggests, "[Body neutrality is kind of disregarding the physical side of, you" and Michelle states, "You're not embracing the whole of you" (Appendix 9.5), suggesting that being wholly body neutral is not possible or desirable for postpartum women, supporting Connie Sobczak (Oltuski, 2017).

“You're *not* embracing the *whole* of you”  
- Hazel (Appendix 9.5).

“[Body neutrality] is kind of disregarding the *physical* side of, you”  
- Michelle (Appendix 9.5).



## 4.5 Key INSIGHTS

1.

Pregnant women are excused from departing from the socially constructed ideal of the female body, thus improving their self and body image, in stark contrast to postpartum women.

2.

New mothers believe societal pressures and expectations are toxic but prominent, fuelling negative feelings about their postpartum experiences, such as judgement and shame.

3.

Postpartum women value their physical identity to improve their sense of self.

4.

Postpartum women lack awareness of body neutrality compared to body positivity.

5.

The basic premise of body neutrality does not wholly resonate with postpartum women, despite recognising the importance of valuing their bodies beyond its physical appearance.



The Solutions

# CHAPTER TWO:



**L**iterature highlighted the recent emergence of the body positivity movement that aims to combat body dissatisfaction. Criticism of the movement is slowly penetrating the mainstream. Primary research identified wide recognition of its criticisms such as that it can disregard medical complications, with most participants, from industry experts to new mothers, understanding the significance of keeping active and maintaining a healthy diet.

Tia's expert fitness knowledge stresses the importance of nutrition "to make sure the baby develops healthily" during pregnancy and when breastfeeding (Appendix 9.4). Many postpartum women restrict their diet as a mechanism to bounce back. However, Tia stresses postpartum "isn't a time for weight loss". She explains that, if breastfeeding, "A lot of women don't realise they need to be eating more" and that eating for two in pregnancy (doubling calorie intake) is "a big misconception". Jade's midwifery expertise supports this, saying it's "mythical" (Appendix 9.4), implying quality of diet is more important than quantity. The Postpartum Women survey reveals the most popular reason for working out after giving birth is weight loss (46.6%) (Appendix 9.1). This misinformation and confusion evinces the need to disseminate more accurate information to ensure optimum health for new mothers.

Laura provides a holistic stance on fitness and health, emphasising the incredible connection between physical and mental health that yoga can optimise; "Mental health is always the most important. Physical benefits are incredible by-products" (Appendix 9.4). After three years of wondering "What's the point?", Denise has adopted a pragmatic mindset. She declares,

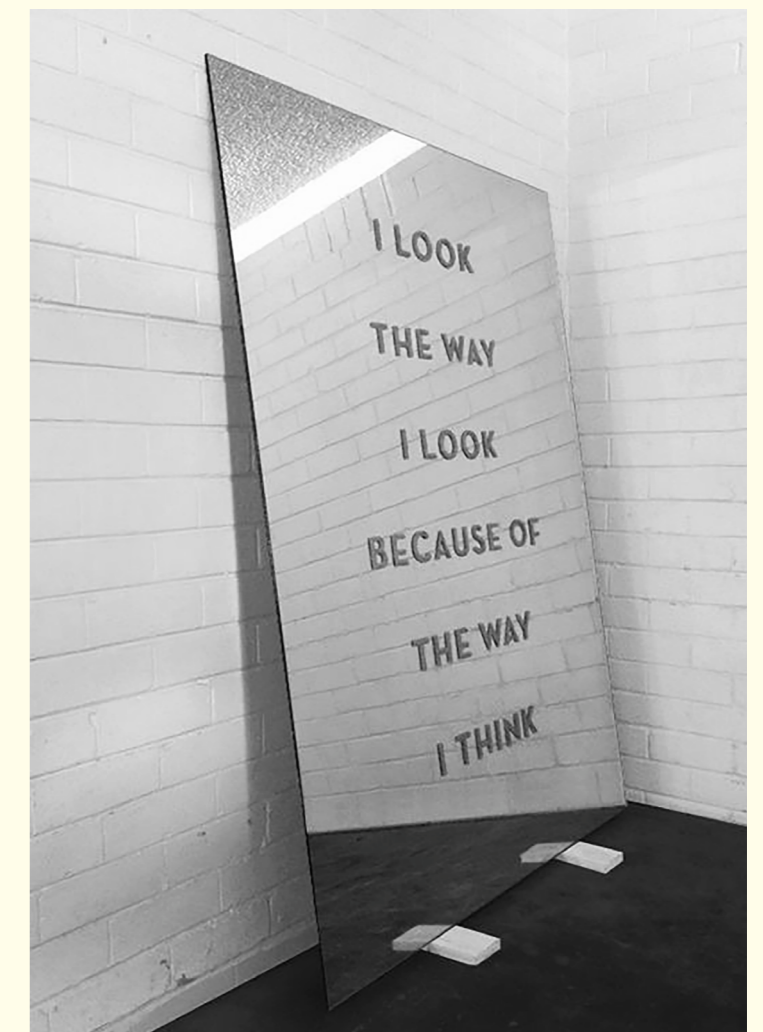
**"It's all about being the best version of myself that I can be. So it's more to keep my mind and my body healthy for my kids, probably more so my mind than anything else. Because I think if you feel happy and confident in your mind then that energy is going to come out of you all the time and pass on to the children hopefully"** (Appendix 9.3).

Kristine provides further insight, claiming,

**"All I care about now is feeling strong and feeling healthy. It's less, very much less, about what I look like and more about, 'Am I going to be alive and healthy and well for when my kids need me?'"** (Appendix 9.5).

Liz also states, "I just want to be as fit and healthy as I can possibly be, to set the best example... Bottom line, if you're happy and healthy, you're covered, look however you want to look" (Appendix 9.4). Notably, all three women have two children, hinting that this rational mindset of exercising for happiness and health takes time to adopt, compared to initial postpartum where mothers can only think about "survival" (Appendix 9.3; Appendix 9.5). These insights demonstrate the applaudable role that body neutrality could have to influence health and happiness for new mothers, depending on their stage of postpartum.

# 5.1 FITNESS, HEALTH AND *Happiness*



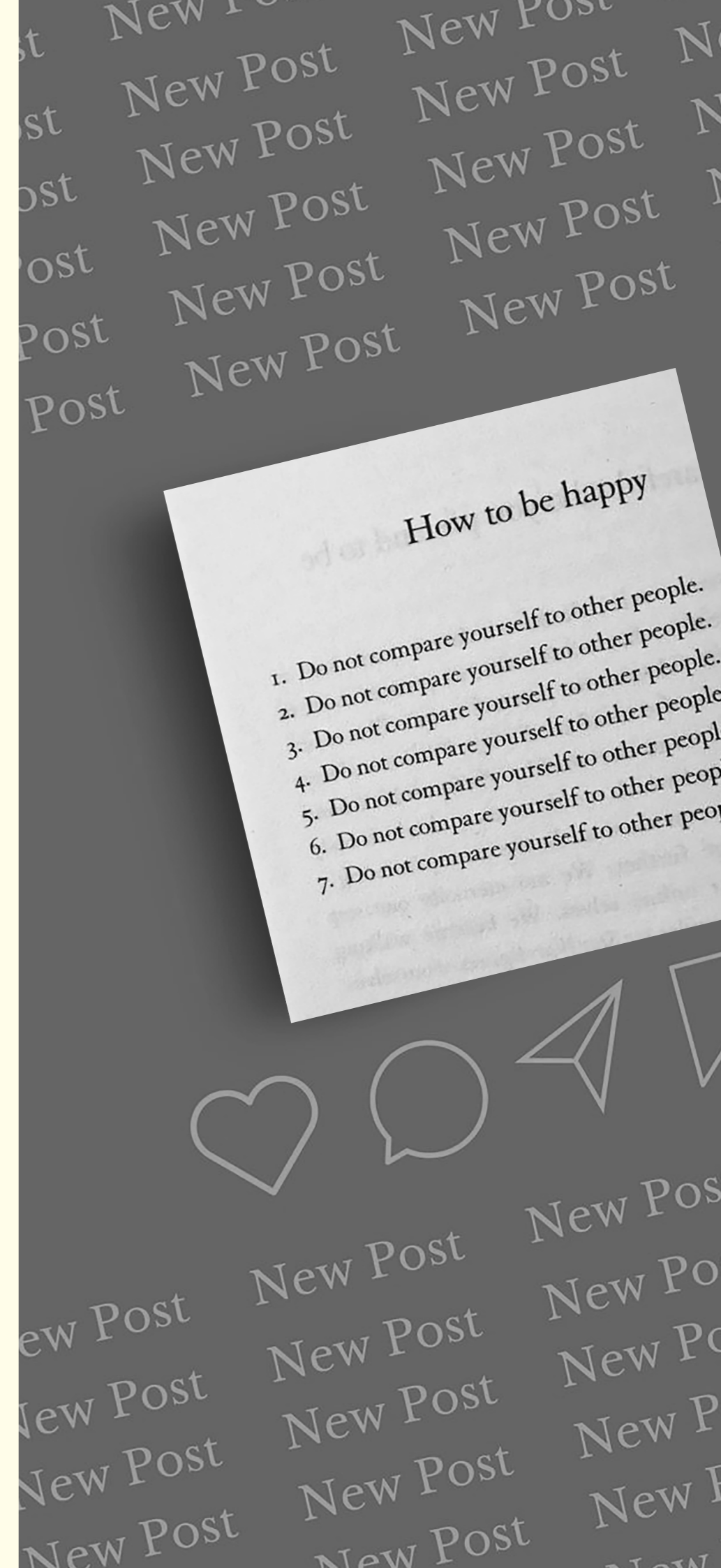
## 5.2

# Mama, IT'S UNDER YOUR CONTROL

As identified in the literature review, physical appearance comparisons contribute to postpartum body dissatisfaction. Brown (2016) theorises that the social media “constructed highlights of people’s lives” fuels such comparisons. Primary research assessed the positive and negative effects of social media on new mothers. The findings uncovered social media often influencing negative feelings amongst postpartum women, as identified on day six of Denise’s postpartum diary where she expresses feeling overwhelmed and that she **“could do with a social media break”** (Appendix 9.2). Laura comments on day one of her diary; “Usually it makes me feel worse as I see other people’s fun lives and feel rubbish about myself”, confirming the damaging consequences of social comparison. Though this partly proves the dark side of social media being apparent in motherhood (Appendix 9.8), a common theme emerged from primary research regarding the ability to control exposure to harmful content, thus preventing comparisons. Sophie-Jo explains that she feels “quite good” about social media due to following “inspiring accounts” (Appendix 9.3). Scarlett finds social media **“a nice escapism”** and encourages people to “disconnect” themselves from content that can be unrealistically positive (Appendix 9.3). This is supported by ‘Mumsnet’ netnography that disclosed rational remarks such as “delete the app” and “start following a more balanced group of people” (Appendix 9.6). Increased authenticity and the promotion of more realism is acknowledged and valued by some, with Kristen commenting that “people seem to have gotten more real” (Appendix 9.3). However, Laura states,

**“I can see these trends on Instagram now of women grabbing their fat and showing their cellulite to try and sway the trend, but for me that’s just another emphasis on body. I don’t think it should be about thin or fat, it should just be about happy!”**  
(Appendix 9.4),

Kristen believes that this puts pressure on people to love the physicality of their bodies, and questions, “Well, what if you don’t?” (Appendix 9.3), indicating a need for increased body neutrality awareness. She suggests that such content can be “information overload”, and Karen comments, “You cannot help but be drawn into different things, and we all know what algorithms and things like that are like!” (Appendix 9.3). However, it is generally possible for postpartum women to curate their social feeds in ways that will positively influence their self and body image, directly supporting Oakes (2019).



## 5.3 OUT WITH THE *Old*,

**E**mbodiment theory, discussed in the literature review, aided understanding of the embodied experience of matrescence. Bordo (1993), Martin (1987) and Bailey (2001) collectively believe that a woman should embrace a new sense of embodied self. However, primary research unveiled an embodiment paradox, highlighting that achieving a new sense of embodied self is complicated. This is supported by the contrast identified through images of diarists' daily clothing choices ranging from clothes for comfort to clothes for appearance. Additionally, most postpartum women in the interviews and focus group showed appreciation of their bodies' achievements. Sophie-Jo admits she likes her shape better now; "Maybe it's more to do with the fact that my body had done something so amazing" (Appendix 9.3). Liz vocalises, "I'd rather have the body I have and have two children" when asked to describe her relationship with her postpartum body (Appendix 9.3). However, as much as she is proud, Lizzie confesses, "I'm still not going to show my stretch marks, and I'm still going to want to cover up the saggy belly" (Appendix 9.5). This reluctance to embrace the new self was pervasive. Denise describes the worst thing about her postpartum experience;

**"You almost grieve for the body that you had before you had children. So you go through a phase where you're kind of mourning because you can't fit into your clothes in the same way"** (Appendix 9.3).

*I'd rather have the body I have and have two children*

- Liz (Appendix 9.3).



**"No man's land"**  
- Hazel (Appendix 9.5).

Michelle metaphorically claims, "It's like walking again", followed by Kristine, "It's like a brand new human you're getting used to" (Appendix 9.5). Through her pregnancy yoga classes, Laura encourages "letting go of the old self and embracing the new" (Appendix 9.4). Finding acceptance difficult herself, she empathises with individuals who struggle. Furthermore, through observation of 'Mumsnet' conversations, the theme 'Wardrobe Talk' emerged, encapsulating a common desire to fit back into old clothes and frustration when this was not possible (Appendix 9.6). Holding onto old, unfit clothes is not uncommon, with Hazel describing postpartum as "no man's land" for clothing choices (Appendix 9.5). Karen supportingly reveals,

**"As an expectant mother and as an existing mum, you're very conscious of losing yourself, you become this role, you become this mum figure, which can have an impact on your clothing and how you perceive yourself in the mirror. You feel detached from who you really are. And I think clothing is a really important part of that"** (Appendix 9.3).

Whilst this highlights the influence that sociocultural expectations continue to have on postpartum women's sense of self and body image, it presents opportunity for more holistic viewpoints encouraging postpartum women to be empowered by motherhood embodiment.

## IN WITH THE *New*

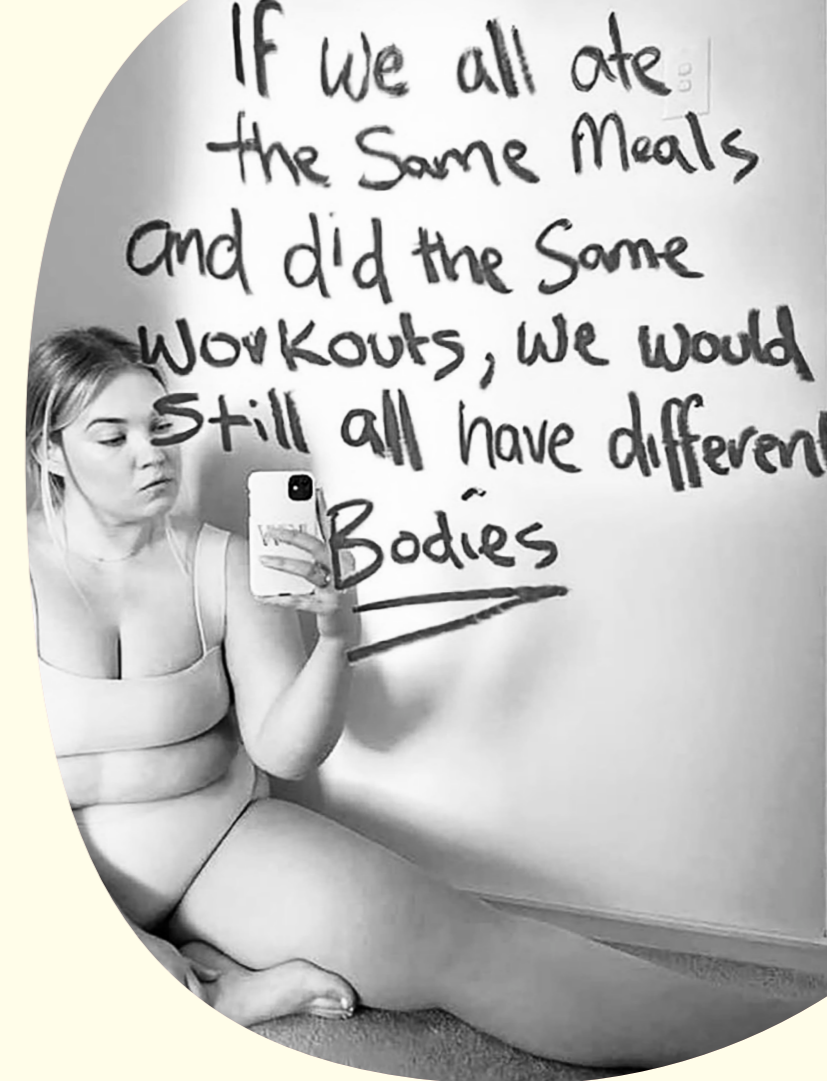
## 5.4 NORMALISING *Normal*



The literature review provided insights into the complexity of motherhood. Primary research expanded on this whilst identifying a rational solution of normalising normal to improve new mothers' self and body image. Tia emphasises the necessity of more discussion about issues facing pregnant and postpartum women, encouraging "trying to break the taboo" (Appendix 9.4). Jade corroborates the frequency that she sees women express body image concerns, stating, "I hear comments about it every time, every shift" (Appendix 9.4). This evidences the purposeless power of society's mass narrative, indicating the requirement for normalising postpartum bodies. Jade vindicates the commonality of stretch marks and excess fat after women give birth;

**"You're still going to have those little pockets of fat, but they're there to help you have enough energy... There's stretch marks there, that's because your baby was there, and it grew there happily and healthily".**

The drive for greater acceptance is vital to encourage postpartum women to view their bodies pragmatically, whilst valuing their physical identity. The different interpretations of bounce-back culture need to be normalised since celebrity bounce-backs are often unrealistic, and some women achieve their pre-baby bodies due to biology. The majority of primary research participants could accept that bodily changes that come with growing a baby are permanent. For example, Denise admits that her postpartum experience "matured [her] thinking in terms of, 'Everyone's different and every woman's got a different-shaped body'", supported by Liz who rationalises, "it is what it is", and Sophie-Jo who states, "It's just part of the deal that your body's going to change" (Appendix 9.3).



However, for all new mothers to achieve this realistic state of mind, it must filter into broader society. Michelle challenges, **"But until you have social media and the media itself on board with the whole situation, nothing is going to change"** (Appendix 9.5). Kirstine openly reveals that she has to remind her partner that she is "not the same" and "cannot do the same" due to the irreversible changes caused by growing and birthing a child. Other focus group participants admit to wishing they had known more about what to expect from early postpartum. Such findings reinforce that negative postpartum experiences are internalised, hindering the potential for postpartum women to fully embrace their embodied selves, and to seek help if necessary. There is a need for improved resources and authentic depictions of postpartum, through social media and medical perspectives, to better prepare women for the physical and emotional changes of postpartum.



## 5.5 *Key* INSIGHTS

1.

Fitness and diet for happiness and health is most significant for mothers who are later in postpartum or with more than one child.

2.

Prioritising a holistic mindset over toxic diet and workout habits leads to physical benefits as a by-product.

3.

Social media influences individuals' self and body image in different ways depending on choice of content exposure.

4.

New mothers struggle to let go of their old selves and embrace their new, embodied selves, contributing to them feeling lost.

5.

Pregnancy-related body changes are often permanent, yet new mothers are reluctant to view their bodies pragmatically due to societal pressures.



RECOMMENDATIONS

# 6.1 SCENARIO *Planning*



This scenario plan (Appendix 9.9), informed by insights and a PESTLE analysis (Appendix 9.8), explores four possible futures with varying impacts on new mothers’ postpartum and motherhood experiences. Scenarios from worst to best outcome are outlined to aid the development of three recommendations for brands to consider.



## 6.2 RECOMMENDATIONS

### 6.2.1 Beauty Within

With postpartum women valuing their bodies beyond physical appearance, brands should focus on inner, holistic health. Brand marketing efforts would prosper from emphasising the mental benefits of their products to improve wellbeing. Consequently, if postpartum women recognise that brands are not solely focused on the external body, their sense of self will improve, encouraging them to let their prior selves go.

### 6.2.2 Intention Matters

The findings herein evidenced social media influencing new mothers in different ways depending on what they follow. For brands to resonate with their consumers, they must adapt to the increasing demand for realism, becoming aware of the “consciousness shift” (Appendix 9.8). There is a rise in marketing using marginalised communities, yet postpartum and pregnant women are rarely considered. Attracting consumers wishing to engage with positive, realistic content will fuel brands’ success.

### 6.2.3 Breaking the Taboo

Brands will succeed if they use their platforms to challenge society’s misconception of pregnant and postpartum bodies. Brands currently adopt body positivity in an attempt to normalise different body types, yet postpartum forms of the female body are rarely realistically represented. With new mothers often feeling lost and confused about their postpartum identity, brands need to be supportive through open discussion and fair representation of realistic body types. Communities will be built and empowerment will be encouraged, combatting postpartum feelings of judgement and shame.

A large, stylized number '7' in a light cream color, set against a solid light pink background. The '7' has a thick, rounded vertical stroke and a diagonal stroke that tapers to a point.

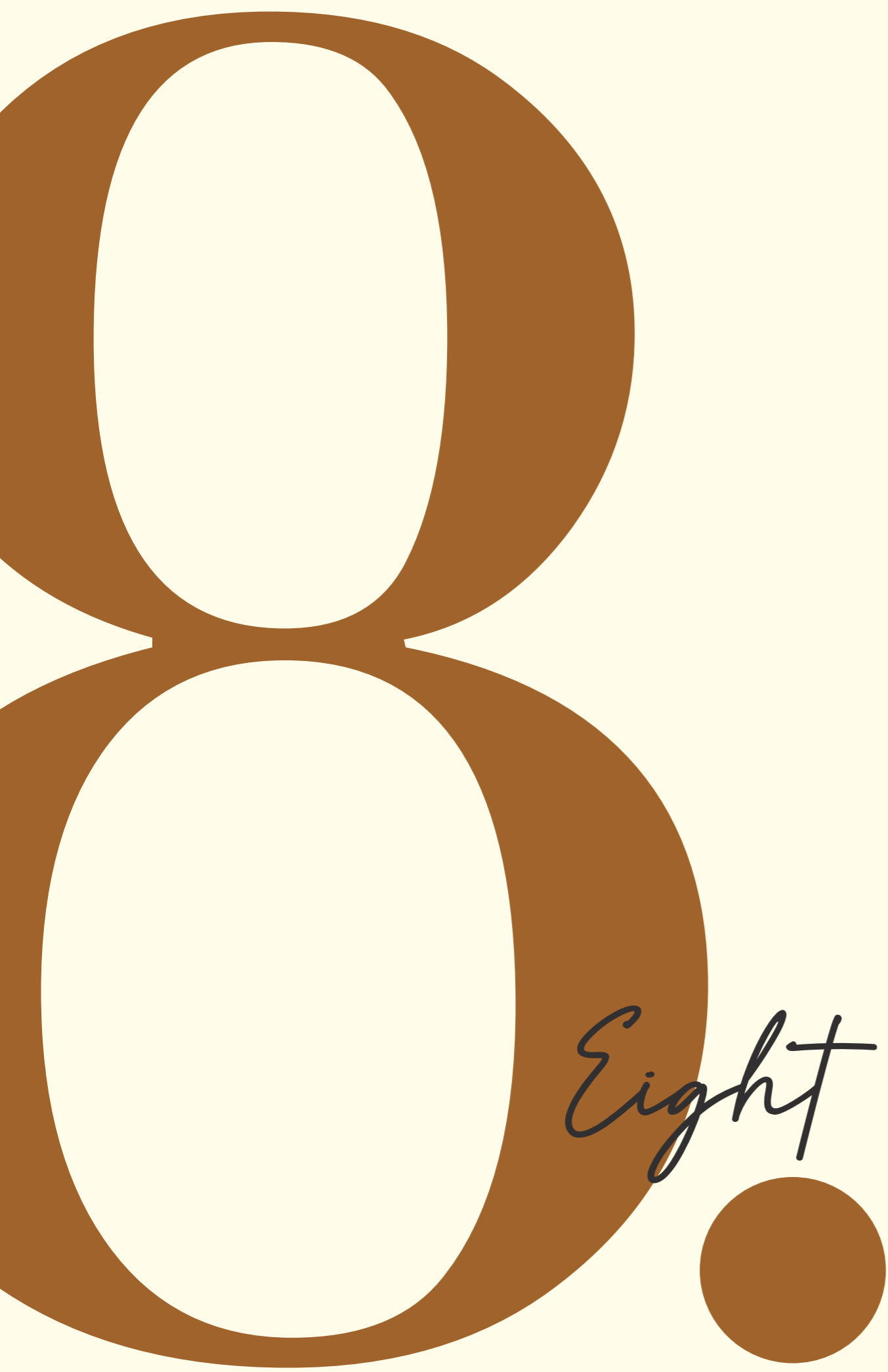
*Seven*

CONCLUSION

Extensive primary and secondary research provided a comprehensive insight into complex postpartum experiences and the factors impacting new mothers' sense of self and body image. The extent to which body neutrality could positively impact new mothers was explored, but the hypothesis that this would resonate was subsequently disproved. The many facets of body neutrality resonated with postpartum women in different ways, with some not recognising its validity at all, highlighting the movement's complexity and likelihood of misinterpretation. This investigation conclusively evidences that body neutrality, as a possible solution, is not clear-cut. Whilst postpartum women accept and appreciate their bodies' amazing achievements, they still value physical appearance. Though there have been improvements, there is evidently a long way to go for mass societal acceptance of postpartum. There is no clear solution to achieving optimum positive body image and sense of self for new mothers as the compartmentalisation of feelings is complicated. Nonetheless, the aim of investigating potential solutions to improve postpartum experiences was accomplished, of which the need for more education, authenticity and normalisation was identified. The proposed recommendations will be subject to further research to strive for successful concept development during Stage Two.

## 7.1 CONCLUSION





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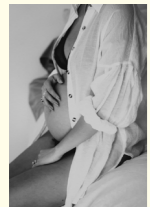
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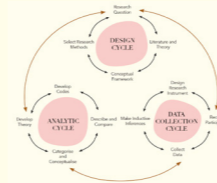
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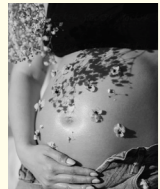
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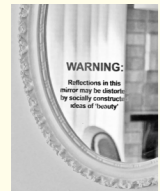
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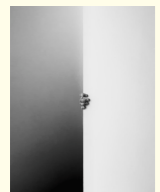
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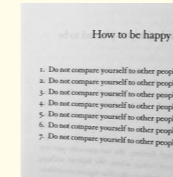
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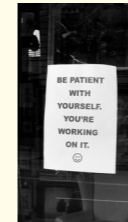
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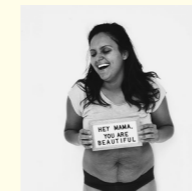
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