

## **DOUBLY DAMNED: THE EXPERIENCE OF HIV-POSITIVE MATERNITY**

Long, Carol (2009) **Contradicting maternity: HIV-positive motherhood in South Africa**. Johannesburg: Witwatersrand University Press. ISBN 978-1-86814-494-5 pbk. Pages vii + 231.

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In **Contradicting maternity**, Carol Long argues that being both HIV-positive and a mother is a profoundly contradictory experience as the affirmative, idealised identity of mother collides with that of denigrated infected woman. She contends that the public portrayals of HIV-positive motherhood, which result in profound discomfort and negativity, have produced a caricature of maternal HIV that does not capture the complexity of the experiences of those who find themselves in this position. A major aim of the book, therefore, is to convey the complex and contradictory experiences of mothers who are HIV-positive and, importantly, to explore the topic from the point of view of the women themselves. It is based upon the experiences of “Black” South African HIV-positive mothers and mothers-to-be, many of whom discovered their status at the same time as hearing the news that they were pregnant. Long shows how these women’s personal responses to both their pregnancy and diagnosis intertwine with powerful public discourses around motherhood and HIV, as the spectre of the HIV-positive mother looms always as an abject, maligned, and marginalised identity.

In an attempt to capture women’s experiences, Long addresses the general tendency to efface HIV-positive mothers while simultaneously prioritising children and their wellbeing. This tendency is strikingly illustrated in the introductory chapter where Long presents a series of published photographs by acclaimed photographers that deal with the subject of HIV-positive maternity. In some of these images, the mothers themselves are rendered marginal in comparison to their (often suffering) children, or their faces and identities are obscured. In others, mothers are notably absent. The implication is that the HIV-positive mother is an absent presence that haunts many of these images. Importantly, however, Long argues that the marginalisation of mothers with HIV amplifies the experience of *all* mothers. Mothers in general are routinely placed second to children’s interests and needs. No mother can ever fully live up to the idealised cultural image of sacrificial Motherhood, and so all mothers tread the fine line between the subject positions of “Good Enough Mother” and “Bad Mother” (Nanako Glenn, 1994). Yet, for a mother who is HIV-

positive, the maternal experience is publicly and privately mediated by “fantasies of abjection, infection, blame, and guilt” (Long, 2009: 18).

The aim of foregrounding and exploring maternal experience is interwoven throughout the book and realised in various ways. In chapter one, Long draws attention to the absence of the HIV-positive mother and in subsequent chapters reinserts this absent presence, calling attention to it in various ways. Continuing with this project of “facing the HIV-positive mother” in chapter two, Long contextualises her study and introduces readers to some of the participants and it is their voices that frame what is to come. She describes her participants as “Black” women, aged 21 to 38, most of whom were unemployed, with some level of formal education, and had discovered their HIV status after falling pregnant. The work therefore draws attention to poorer “Black” women’s experiences and sense-making in relation to being both HIV-positive and mothers (or mothers-to be) within a particular discursive setting, showing how public discourses come to bear upon their personal accounts.

Changing tack somewhat, chapters three and four are scholarly and deal with the academic literature on motherhood. Chapter three includes a review of feminist, psychodynamic, and South African perspectives on motherhood, while chapter four focuses more specifically on South African research on HIV-positive maternity. In chapter three, Long takes a critical stance, presenting HIV-positive mothering as one particular instance of motherhood, albeit overshadowed by illness. Chapter four consists of two parts. Part one concentrates on how this particular variety of motherhood has been dealt with in the small body of South African research. She reads this work through a psychodynamic and discursive lens, highlighting the common trend in research to concentrate on the negative or damaging influence that mothers with HIV have on their children. In reading this literature, Long employs a psychoanalytic frame, in her own words, “listening for slips of the tongue . . . with an eye to gaps and points of irrationality in order to understand the specific anxieties that the figure of the HIV-positive mother evokes in the scientific imagination” (p 21). Long highlights slippages in the research and, with varying degrees of success, uses an alternate font to comment on these. Part two of this chapter includes an exposition of the theoretical and methodological framework which Long used to analyse her interview data. Her infusion of discourse analytic methodology with psychoanalytic insight is done with finesse and careful consideration. This is reflected in Long’s analysis.

Each analysis chapter foregrounds the mother. In these chapters, Long investigates mothers’ interactions with their child’s body and their fantasies and fears that centre on the child’s body (chapter 5); the mother-infant dyad and selflessness in relation to maternal care, especially breastfeeding (chapter 6); the mother’s subjectivity in relation to maternal embodiment (chapter 7); and maternal identity from the mother’s viewpoint, paying particular attention to mothers’ voices (chapter 8). The particular strength of this work lies in the complexity of the analysis, which is rich, multi-layered and provides a nuanced account of the experience of being a mother who is HIV-positive. In particular, the combination of discourse analysis and psychoanalytic theory allows for a reading of the interview data that is cognisant of women’s agency and their active negotiation within their particular discursive context. For instance, the analysis shows how discourses of

motherhood shape the participants' narratives, particularly of their maternal practices, in which their child's wellbeing is made central and care-taking is described as dedicated, meticulous, and obsessive even. This clearly shows the force of the powerful and broad-ranging discourse of idealised intensive motherhood. At the same time, however, attention is drawn to accounts of maternal pleasure. Included in the analysis are women's descriptions of the enjoyment and satisfaction that they derive from the fastidious and focused care-giving. Long suggests that these accounts then are as much about women's own needs as they are about their child's.

Long ends by synthesising her findings and examining their implications for HIV-positive maternal subjectivity. She makes no grand pronouncements to neatly sew up this issue, however, preferring instead to allow her readers to "encounter the book through their own subjectivity" (p 20) and for each one to "find his/her own way to read the book" (p 21). It is for this reason, perhaps, that she herself does not explicitly discuss the politics of hetero/sexual reproductive partnerships. Mention is made of male partners and presumably the women interviewed are heterosexual. Such silence around sexual orientation could be seen as part of a general heterocentric tendency in research literature (where sexual orientation is only made explicit if it is not heterosexual); however, Long does deal with the issue of sexuality elsewhere (see Long, 2009a).

Taking up Long's invitation to encounter the book in various ways, what is apparent to me is that if HIV-positive mothers are virtually invisible, as Long contends, then fathers—HIV-positive or otherwise—are practically non-existent. Long makes this explicit in the first chapter where she points out that men and fathers are not portrayed in the images which she presents, "despite their crucial role in the family drama of HIV/AIDS" (p 18). This is borne out in the stories told by Long's participants. On one hand, the mother-child dyad is central to most accounts; men/fathers are largely absent. On the other hand, when male partners are mentioned by the participants, it is often in relation to the sexual double standard, where male infidelity is tolerated and goes unpunished, or in relation to the abandonment and recrimination of female partners. This drives home the fact that it is mothers who most often bear the greater burden of parenting and, furthermore, who are stigmatised as vectors of dis/ease. It is *mothers* who are the centre of scorn, blame, shame, and intervention as they are directly implicated in (at least the *possibility* of) transmitting infection to the unborn. This is captured by the stigmatising term "mother-to-child transmission"—rather than simply "vertical transmission"—implying "that mothers are the source of the virus, rather than the latest link in a long chain of transmission" (Lewis & Donovan, 2009: iv). Women are, therefore, doubly damned, since infecting their child is at odds with the maternal mandate, while the men who should be part of this picture, many of whom purportedly infected their partners, are invisible.

Whether the book is indeed accessible to the general reader, as Long suggests, is up for debate. The work is scholarly, presenting a thorough academic treatment of the subject, but it is also highly engaging as the voices of pregnant women and mothers are allowed to speak. **Contradicting maternity** makes a fine and much-needed contribution to South African literature on motherhood, highlighting that for these particular women, parenthood is more complicated and multi-layered than allowed by dominant discourses of HIV-positive maternity, and the disempowering caricatures they create. It will certainly be of

interest to scholars working on the topics of motherhood, family studies, HIV/AIDS, and gender studies.

## REFERENCES.

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