

**HOW WOMEN COME TO COMMIT NEONATICIDE: A
CONSTRUCTIVIST GROUNDED THEORY OF CRIMINAL CASES**

By

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Johannesburg, in fulfilment of the requirements for the degree Doctor of Philosophy,
Psychiatry.

Submitted in Johannesburg, 14 June 2021

DECLARATION

I, Amanda Edge, declare that:

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Amanda Edge

14 June 2021, Johannesburg.

Dedicated to my beloved parents,
Sewes and Elize Erasmus,
for believing in me.

PRESENTATIONS ARISING FROM THIS RESEARCH PROJECT

World Psychiatric Congress (WPA), Cape Town, South Africa (November, 2016)

An oral presentation for the symposium on forensic mental health of women offenders entitled: 'The potential of constructing grounded theory in areas of female crime'.

eNCA 'Child Killing in the Spotlight, Johannesburg, South Africa (June, 2019)

News channel interview on perpetrator characteristics of women who take the life of their children (filicide).

Fourth Annual Addressing Filicide Conference for Cross National Dialogue, Melbourne, Australia (November, 2019)

An oral presentation entitled: 'How women come to commit neonaticide: A constructivist grounded theory'.

PUBLICATIONS ARISING FROM THIS RESEARCH PROJECT

Edge, A., Subramaney, U. and Hoffman, D.C.J. (2017) 'Women Who Commit Filicide in the Context of Having a Severe Mental Illness: Current Reflections and Future Directions', *Archives of Psychology*, 1(3), December [Online]. Available at <http://archivesofpsychology.org/index.php/aop/article/view/19>.

It should be noted that the above publication did not directly arise from this thesis. While the study was underway, engagement with the relevant literature together with clinical and research experience in the field, stimulated thought on how the subject could be studied in clinical populations. The article makes recommendations on how to investigate the topic among such individuals.

ABSTRACT

How Women Come to Commit Neonaticide: A Constructivist Grounded Theory of Criminal Cases

by

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Neonaticide, the offspring murder of an infant within its first 24 hours of life, is a complex human phenomenon. Limited literature exists on the conceptual processes, including a mother's thoughts, meanings, understandings, definitions of their circumstances and the foetus, prior to, during and after the commission of the act. Furthermore, limited literature explores a woman's actions and emotional processes, including her emotional experiences and the degree of closeness experienced towards the foetus in this regard. Research is further lacking on how such thoughts, emotions and actions present in accordance to the women's non-neonaticidal pregnancies (N-NP) (pregnancies that were not followed by neonaticide) and their neonaticidal pregnancies (NP) (pregnancies followed by the act of neonaticide) among women who commit the act. The study thus questions: "What are the conceptual and emotional processes as well as actions underpinning a NP and N-NP among women who commit neonaticide?".

The purpose of the study was to provide a substantive theory on how women from criminal populations come to commit neonaticide. An abstract theoretical account is provided on the underpinning conceptual and emotional processes as well as actions that reveal how women come to commit the act. The underpinning processes are revealed via a comparison of the women's thoughts, emotions and actions of their N-NPs and NP. The theory was constructed via constructivist grounded theory (CGT) methods. Initial explorations were sensitised by the symbolic interactionist perspective, focusing on the formation of the women's thoughts, emotions and actions. Data was collected through intensive iterative interviewing (28 interviews) of eight participants from three correctional centres across South Africa, including Kgosi Mampuru II (Gauteng), Westville (KwaZulu-Natal) and Pollsmoor (Cape Town). Participants were all convicted, sentenced and incarcerated for murder, specifically

neonaticide. All women had also experienced one or more pregnancy where they did not take the life of their newborn.

Data analysis involved the techniques of constant comparisons throughout the processes of initial line-by-line coding, focused coding and axial coding. The analysis rendered the construction of various conceptual categories, communicating abstract explanatory ideas about the data. One core category was constructed, namely, docile gestating. Four major conceptual categories were also constructed, including, a) The vicarious mother; b) Vicarious accessing; c) Contexts of security; and d) Degree of engaging with its associated concepts of vicarious actions, misrepresenting actions and phantomising actions.

Docile gestating reveals the different ways in which the women approach pregnancy-related content. The concept refers to a passive approach towards pregnancy-related content, where the women await instruction on how to think, feel and act towards such content. The roles the women enact with respect to 'being' a mother is addressed by the concept, the vicarious mother. The concept reveals how the women enact being a mother via others; or in the absence of others, negate to 'be' mother at all. Vicarious accessing concern the manner in which the women engage with their interpersonal environments and the interaction and communication strategies employed in an attempt to secure support. The consequences of such relating are addressed by the concept, contexts of security, which concerns the extent of support secured. The concept, degree of engaging, concerns the extent to which the women engage with the pregnancy process. The degree of engaging is shown to be attained and maintained by behaviours such as acting through another (vicarious actions), acting towards something other than the foetus and pregnancy (misrepresenting actions), or behaving in a way to render the foetus and pregnancy as being unreal (phantomising actions).

The final theory reveals how the constructed concepts interact over time in accordance to the NP and N-NPs across the pregnancy events of a) Pre-pregnancy; b) Receiving pregnancy news; c) Sharing pregnancy news; d) Physical pregnancy; and finally, e) Labour, birth and afterwards. It shows how the women need to engage in the pregnancy experience via close reliance on another (non-neonaticide). In the absence of such support, the women may refrain from engaging in the pregnancy process and, ultimately, act towards a newborn that never fully existed in their experience and mind (neonaticide).

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CONTENTS

DECLARATION	i
PRESENTATIONS ARISING FROM THIS RESEARCH PROJECT.....	iii
PUBLICATIONS ARISING FROM THIS RESEARCH PROJECT.....	iv
ABSTRACT.....	v
ACKNOWLEDGEMENTS.....	vii
LIST OF ILLUSTRATIONS.....	xviii
LIST OF TABLES.....	xix
LIST OF TEXT BOXES.....	xx
LIST OF APPENDICES.....	xxi
LIST OF ABBREVIATIONS.....	xxii
LIST OF KEY CONCEPTS AND DEFINITIONS USED.....	xxiii
PREFACE.....	xxix
CHAPTER ONE: INTRODUCTION.....	1
1.1 Chapter Introduction.....	1
1.2 Introduction to the Phenomenon of Interest.....	1
1.2.1 The problem of child mortality and homicide matters.....	1
1.2.2 The need to focus on neonaticide research.....	3
1.2.3 The need to focus on neonaticide within the South African context.....	4
1.2.4 The need to Focus on maternal neonaticide.....	6
1.2.5 The need to focus on neonaticide in criminal cases.....	6
1.2.6 Statement regarding the phenomenon of interest.....	6
1.2.7 Broad area of the study.....	7
1.2.8 Summary regarding the phenomenon of interest.....	8
1.3 Nature and Structure of the Thesis.....	8
1.4 Chapter Conclusion.....	14
CHAPTER TWO: PRELIMINARY LITERATURE REVIEW.....	15
2.1 Chapter Introduction.....	15
2.2 Background Literature Analysis and Critique.....	15
2.2.1 Early influential research on filicide.....	15

2.2.1.1	Altruistic filicide.....	16
2.2.1.2	Acutely psychotic filicide.....	16
2.2.1.3	Unwanted child filicide.....	16
2.2.1.4	Accidental filicide.....	17
2.2.1.5	Spouse revenge filicide.....	17
2.2.2	The question of ‘who?’: Considering demographic characteristics...	17
2.2.3	The question of ‘what?’: Considering the actions taken in neonaticide cases.....	18
2.2.4	The question of ‘why?’: Considering reasons for the act.....	20
2.2.4.1	Mental health and psychological functioning.....	20
2.2.4.2	An unwanted child and social circumstances.....	23
2.2.5	Conceptualised understandings and theorisation.....	23
2.2.5.1	The use of generalised theories of offending behaviour.....	24
2.2.5.2	Conceptualising from the viewpoint of existing theory.....	24
2.2.5.3	Conceptualising from existing psychological frameworks..	25
2.2.5.4	The use of grounded theory methods.....	26
2.2.6	Common research approaches.....	28
2.2.6.1	Static descriptions and lack of process information.....	28
2.2.6.2	The lack of in-depth understandings.....	30
2.2.7	Towards a novel approach to researching neonaticide.....	30
2.3	Research Question, Purpose, Aims, and Objectives.....	30
2.3.1	Research question.....	31
2.3.2	Aims and objectives.....	31
2.3.2.1	Initial aims and objectives.....	31
2.3.2.2	Refined aims and objectives.....	34
2.4	Chapter Conclusion.....	37
 CHAPTER THREE: GUIDING PERSPECTIVES TO THE STUDY.....		38
3.1	Chapter Introduction.....	38
3.2	Rationale for Selecting the Theoretical Perspective.....	38
3.3	A Recent Historical Overview of Symbolic Interactionism.....	39
3.4	Blumer’s Basic Tenets of Symbolic Interactionism.....	40
3.4.1	The fundamental organising principles.....	40
3.4.2	Acting towards ‘things’.....	41
3.4.3	Individuals as agentic actors capable of interpretation.....	42

3.4.4	The origin of meaning.....	43
3.4.5	The process of constructing meaning.....	44
3.4.6	Possessing a ‘self’.....	45
3.4.7	Outcomes of the formative processes.....	46
3.4.8	Summary of the formative processes of human action.....	47
3.5	Chapter Conclusion.....	48
 CHAPTER FOUR: RESEARCH DESIGN.....		49
4.1	Chapter Introduction.....	49
PART I: PHILOSOPHICAL ASSUMPTIONS.....		49
4.2	Introduction.....	49
4.3	Era of Science and Research Paradigm.....	50
4.3.1	Postmodern era.....	52
4.3.2	Interpretivist paradigm and social constructionist orientation.....	54
4.3.3	Ontology.....	55
4.3.4	Epistemology.....	57
4.3.4.1	Subjectivity and the reflective process.....	58
4.3.4.2	Reasoning practices.....	59
4.4	Limitations of the Philosophical Underpinnings.....	60
4.5	Part I Summary.....	60
PART II: RESEARCH DESIGN STRATEGIES.....		61
4.6	Introduction.....	61
4.7	Qualitative Research Design.....	61
4.7.1	Selection of a qualitative tradition.....	62
4.8	The Grounded Theory Approach.....	63
4.8.1	An historical overview of grounded theory.....	63
4.8.1.1	The birth of grounded theory.....	63
4.8.1.2	Extensions towards a collection of grounded theory methods.....	65
4.8.1.3	A fundamental move from classical grounded theory.....	66
4.8.1.4	A constructivist turn to grounded theorising.....	67
4.8.2	The affiliation between a constructivist grounded theory design and the research paradigm.....	68
4.8.3	Understanding theory according to a constructivist grounded theory design.....	69

4.9	Limitations of the Selected Design Strategies.....	69
4.10.	Part II Summary.....	70
4.11	Chapter Conclusion.....	71
 CHAPTER FIVE: RESEARCH METHODS.....		72
5.1	Chapter Introduction.....	72
5.2	Purpose of the Constructivist Grounded Theory.....	72
5.3	Overview of the Grounded Theory Construction Process.....	73
5.3.1	The goal of the theory construction process.....	73
5.3.2	Overview of the research procedures and the theory construction process.....	75
5.4	Beginning with a Broad and Open Enquiry.....	78
5.5	Sampling of Participants and Recruitment Strategies.....	78
5.5.1	Sampling.....	78
5.5.2	Sampling techniques and sample size.....	78
5.5.3	Inclusion and exclusion criteria.....	79
5.5.4	Sample identification techniques.....	79
5.5.5	Sample Recruitment Procedures.....	82
5.5.5.1	Participant characteristics.....	83
5.6	Data Generation and Collection Methods.....	85
5.6.1	Study setting.....	85
5.6.2	Data collection techniques.....	86
5.6.2.1	The use of a face sheet or demographics questionnaire.....	86
5.6.2.2	Conducting intensive interviews, making field notes and transcription	87
5.6.2.3	The interview process.....	90
5.6.2.4	Constructing interview guides.....	94
5.6.2.5	Quality measures in data collection.....	96
5.6.3	Summary of the data collection and generation strategies.....	97
5.7	Data Analysis and Theory Construction.....	98
5.7.1	Data management.....	99
5.7.2	Coding procedures and strategies.....	100
5.7.2.1	Initial line-by-line coding.....	101
5.7.2.2	Initial memo writing.....	102
5.7.2.3	The constant comparative method.....	103

5.7.2.4	Focused coding.....	105
5.7.2.5	Advanced memo writing and theoretical sampling.....	106
5.7.2.6	Axial coding.....	107
5.7.2.7	Theoretical saturation or sufficiency.....	107
5.7.2.8	Memo writing and the construction of the final theory.....	107
5.7.3	Establishing and building trustworthiness and quality of research..	107
5.7.3.1	Credibility.....	109
5.7.3.2	Originality and ‘Work’.....	111
5.7.3.3	Resonance.....	111
5.7.3.4	Usefulness.....	112
5.7.3.5	Dependability.....	113
5.7.4	Summary of data analysis and theory construction.....	114
5.8	Ethical Considerations.....	114
5.8.1	Risk-to-benefit ratio.....	115
5.8.2	Internal review boards.....	116
5.8.3	Prevention of coercion and informed consent.....	116
5.8.4	Participant rights and consequences of participation.....	117
5.8.5	Emergency psychological services.....	117
5.9	Limitations and Delimitations.....	118
5.10	Chapter Conclusion.....	121
 CHAPTER SIX: THEORY CONSTRUCTION AND THE THEORETICAL FRAMEWORK.....		 122
6.1	Chapter Introduction.....	122
6.2	Locating and Reshaping the Research Question.....	122
6.2.1	Serendipity in the research encounter.....	123
6.2.2	Rethinking the study objectives and format of research findings.....	124
6.2.3	Eliciting theoretical potential within the data and the emergence of new questions.....	125
6.3	Rationale for the Presentation of Study Findings.....	126
6.4	Conceptual Elements of the Research Framework.....	127
6.5	Theoretical Constructs of the Research Framework.....	128
6.5.1	Narrative structure: The gestating events continuum.....	128
6.5.2	The core category: Docile gestating.....	129
6.5.2.1	Properties of docile gestating.....	130

6.5.2.2	Relinquishing control via vicarious enacting.....	130
6.5.2.3	Relinquishing control via abdicating.....	131
6.5.3	Major category one: The vicarious mother.....	132
6.5.3.1	Properties of the vicarious mother.....	133
6.5.3.2	‘Being’ through proxy.....	133
6.5.3.3	Un-‘being’ self.....	134
6.5.4	Major category two: Vicarious accessing.....	135
6.5.4.1	Properties of vicarious accessing.....	135
6.5.4.2	Assumptions for accessing.....	136
6.5.4.3	Situational limits to accessing.....	138
6.5.5	Major category three: Context of security.....	139
6.5.5.1	Properties of context of security.....	139
6.5.5.2	Vicarious insecurity.....	140
6.5.5.3	Unconfirmed assumed vicarious security.....	140
6.5.5.4	Vicarious security.....	141
6.5.6	Major category four: Degree of pregnancy engaging.....	141
6.5.6.1	Properties of degree of engaging.....	143
6.5.6.2	Phantomised disengaging.....	144
6.5.6.3	Distorted engaging.....	147
6.5.6.4	Vicarious engaging.....	148
6.6	Schematic Representation of Interacting Concepts.....	150
6.7	Chapter Conclusion.....	153
CHAPTER SEVEN: FINDINGS AND APPLICATION OF CONCEPTS.....		155
7.1	Chapter Introduction.....	155
7.2	Introducing the Participants.....	155
7.2.1	Participant one: Ann.....	156
7.2.2	Participant two: Sam.....	156
7.2.3	Participant three: Ria.....	157
7.2.4	Participant four: Kim.....	157
7.2.5	Participant five: Llyn.....	157
7.2.6	Participant six: Amy.....	158
7.2.7	Participant seven: Tika.....	158
7.2.7	Participant eight: Alex.....	159
7.3	Introduction to the Findings and Application of Concepts.....	159

7.4	Pre-Pregnancy.....	161
7.4.1	Family planning as occurring via vicarious engaging.....	162
7.4.1.1	Vicarious engaging and vicarious actions within pre-pregnancy.....	162
7.4.1.2	Vicarious engaging within vicarious secure contexts during pre-pregnancy.....	163
7.4.1.3	Playing the role of vicarious mother in vicarious secure contexts within pre-pregnancy.....	163
7.4.1.4	Vicarious enacting as a form of docile gestating within pre-pregnancy.....	164
7.4.2	The negation of family planning as occurring via phantomised disengaging.....	164
7.4.2.1	Phantomised disengaging and phantomising actions within pre-pregnancy.....	164
7.4.2.2	Phantomised disengaging within vicarious insecure contexts during pre-pregnancy.....	167
7.4.2.3	Playing the role of vicarious mother in vicarious insecure contexts within pre-pregnancy.....	167
7.4.2.4	Abdicating as a form of docile gestating within pre-pregnancy.	168
7.4.3	Summation of the underlying processes towards N-NP and NP within pre-pregnancy.....	168
7.5	Receiving News.....	169
7.5.1	Consequences to phantomised disengaging when receiving pregnancy news.....	170
7.5.2	The need for vicarious engagement in receiving pregnancy news.....	171
7.5.2.1	Vicarious engagement in recognising and acknowledging a pregnancy.....	171
7.5.2.2	Playing the role of vicarious mother when receiving news.....	172
7.5.2.3	Relinquishing control via vicarious enacting when receiving news.....	172
7.5.3	Maintaining unreality via phantomised disengaging.....	172
7.5.3.1	Phantomised disengaging when receiving news.....	173
7.5.3.2	Playing the role of vicarious mother via not ‘being’	

	when receiving news.....	174
7.5.3.3	Relinquishing control via abdicating when receiving news.....	174
7.5.4	Summation of underlying processes towards N-NP and NP when receiving news.....	174
7.6	Sharing of Pregnancy News.....	175
7.6.1	The need for vicarious accessing.....	176
7.6.2	Vicarious accessing as a process.....	177
7.6.2.1	Assumptions to accessing.....	178
7.6.2.2	Situational limits to accessing.....	186
7.6.3	Contexts of security as outcomes to vicarious accessing.....	188
7.6.3.1	Vicarious security.....	189
7.6.3.2	Unconfirmed assumed vicarious security.....	190
7.6.3.3	Vicarious insecurity.....	191
7.6.3.4	Contexts of security among N-NP and NP.....	192
7.6.4	Playing the role of vicarious mother in the sharing news phase.....	193
7.6.5	Docile gestating in the sharing news phase.....	194
7.6.6	Summation of the underlying processes towards N-NP and NP in vicarious accessing.....	194
7.7	Physical Pregnancy.....	195
7.7.1	Degree of pregnancy engaging.....	195
7.7.1.1	Vicarious security, vicarious actions and vicarious engaging during the physical pregnancy.....	196
7.7.1.2	Unconfirmed assumed vicarious security, misrepresenting actions and distorted engaging during physical pregnancy.....	207
7.7.1.3	Vicarious insecurity, phantomising actions and phantomised disengaging during physical pregnancy.....	211
7.7.2	Summation of the underlying processes towards N-NP and NP.....	229
7.8	Labour and Birth.....	232
7.8.1	The labour and birth of the vicariously engaged baby.....	232
7.8.2	The labour and birth of the distortedly engaged baby.....	239
7.8.3	The labour and birth of the phantomised disengaged baby.....	232
7.8.4	Summation of the underlying processes of a N-NB and NB.....	257
7.9	Summary and Linking of Concepts with the Study Question.....	258

7.9	Chapter Conclusion.....	259
	CHAPTER EIGHT: DISCUSSION AND CONCLUSION.....	260
8.1	Chapter Introduction.....	260
8.2	Summary of the Study Findings and Constructed Concepts.....	261
8.3	The use of Literature Following Data Collection.....	264
8.4	Towards Understanding the Act of Neonaticide.....	264
8.4.1	Towards an understanding of the ‘bigger picture’.....	264
8.4.2	Broadening perspectives on ‘who’ the women are.....	268
8.4.2.1	Considering challenges in exploring ‘who’ the women are.....	266
8.4.2.2	Broadening perspectives on the ‘self’.....	267
8.4.2.3	Broadening perspectives on psychological functioning.....	268
8.4.2.4	Broadening perspectives on personality diagnoses and characteristics.....	271
8.4.2.5	Broadening perspectives on interpersonal relating and communicating.....	273
8.4.3	Broadening perspectives on ‘what’ the women do and actions taken.....	274
8.4.3.1	Broadening perspectives on pregnancy behaviours.....	274
8.4.3.2	Broadening perspectives on the setting of the act.....	280
8.4.3.3	Broadening perspective on the nature of the act.....	280
8.4.3.4	Broadening perspectives on actions taken after the act.....	282
8.4.4	Broadening perspectives on ‘why’ women commit the act.....	282
8.4.4.1	Moving beyond motive.....	283
8.4.4.2	Moving towards new understandings in mentally ill populations.....	286
8.5	Towards Rehabilitative and Prevention Methods.....	288
8.5.1	Towards combatting incidences of neonaticide.....	288
8.5.2	A Starting point towards rehabilitation.....	290
8.6	Summary of the Recommendations for Future Research.....	293
8.7	Quality Evaluation of the Theory.....	294
8.7.1	Credibility.....	294
8.7.2	Originality and ‘work’.....	294
8.7.3	Resonance.....	295

8.7.4	Usefulness.....	296
8.7.5	Dependability.....	296
8.8	Limitations of the Study.....	297
8.9	Study Contributions and Closing Remarks.....	298
8.10	Chapter Conclusion.....	299
REFERENCE LIST.....		300
APPENDICES.....		312

LIST OF ILLUSTRATIONS

Figure 2.1 Visual representation of the study aims and objectives.....	33
Figure 2.2 Visual representation of the refined study aims and objectives.....	36
Figure 3.1 Visual representation of the formative processes of human action.....	48
Figure 4.1 Summary of philosophical underpinnings.....	51
Figure 4.2 Summary of approaches to theorising.....	71
Figure 5.1 Visual representation of emergence and substantiation.....	74
Figure 5.2 Visual representation of raising analytical levels.....	74
Figure 5.3 Visual representation of the constructivist grounded theory process.....	77
Figure 5.4 Visual representation of the interview process.....	91
Figure 5.5 Examples of visual aids employed in data analysis.....	99
Figure 5.6 Visual representation of the data analysis process.....	101
Figure 5.7 Visual representation of grounded theory quality criteria in qualitative research and constructivist grounded theory, in particular.....	108
Figure 6.1 Visual representation of the core category.....	130
Figure 6.2 Visual representation of major category one.....	133
Figure 6.3 Visual representation of major category two.....	136
Figure 6.4 Visual representation of major category three.....	140
Figure 6.5 Visual representation of major category four.....	144
Figure 6.6 Schematic representation of interacting concepts.....	153

LIST OF TABLES

Table 5.1 Summary of the number of pregnancies among the study sample.....	83
Table 5.2 Participant initial interviews and focused interviews.....	92
Table 5.3 Data collection techniques to attain the purposes of the pursued theory...	98
Table 5.4 Data analyses techniques to attain the purposes of the pursued theory.....	114

LIST OF TEXT BOXES

Text Box 5.1 Example of initial line-by-line coding..... 102

Text Box 5.2 Example of comparing data with data..... 103

Text Box 5.3 Example of comparing data with code..... 104

Text Box 5.4 Example of comparing code with code..... 104

Text Box 5.5 Example of comparing concepts with categories of concepts..... 105

Text Box 5.6 An Example of focused coding within the study..... 106

LIST OF APPENDICES

Appendix one: Participant recruitment letter.....	312
Appendix two: Participant characteristics and demographics questionnaire.....	314
Appendix three: Initial interview guide.....	315
Appendix four: Human research ethics committee (medical) clearance.....	316
Appendix five: Human research ethics committee (medical) clearance amended...	317
Appendix six: Department of correctional services research committee clearance..	318
Appendix seven: Participant information sheet and consent form.....	322
Appendix eight: Psychological services support letter.....	327
Appendix nine: Referral letter for emergency services.....	330
Appendix ten: No-suicide or no-homicide contract.....	331
Appendix eleven: Editing certificate.....	332
Appendix twelve: Turnitin originality report.....	333

LIST OF ABBREVIATIONS

CAQDAS	- computer-assisted qualitative data analysis software
CGT	- constructivist grounded theory
CPA	- Criminal Procedure Act
DCS	- Department of Correctional Services
DSM 5	- Diagnostic and Statistical Manual of Mental Disorders Fifth Edition
GT	- grounded theory
HREC	- human research ethics committee
SDGs	- Sustainable Development Goals (of the United Nations)
SI	- symbolic interactionism
TOP	- termination of pregnancy
UN	- United Nations
WITS	- University of the Witwatersrand

LIST OF KEY CONCEPTS AND DEFINITIONS USED

Abductive heuristic	- An interplay of inductive and deductive reasoning (Charmaz, 2014).
Actions	- Patterns of behaviour (Charmaz, 2014).
Axial coding	- A type of coding where a category is used as an axis around which variant relationships and dimensions of the category are delineated (Charmaz, 2014).
Coding	- Labels attached to segments of data that depict what each segment is about (Charmaz, 2014).
Conceptual categories	- Abstract categories of concepts that have explanatory power (Bryant, 2018).
Conceptual experiences/processes	- A term used within this thesis to refer to cognitive activities and thoughts, such as the constructed and negotiated understandings, meanings, perceptions and definitions around a variety of experiences. It also concerns the processes involved in arriving at such thoughts.
Constant comparison	- A method used to make comparisons between data to build systematic checks and refinements of the theoretical concepts and categories constructed (Charmaz, 2014).
Constructivism	- The viewpoint that data collection and analysis is a co-construction between the researcher and data, and that these constructions are located in a specific temporal, social and cultural context (Bryant and Charmaz, 2007a).
Constructivist grounded theory	- A method and result proposed by Professor Kathy Charmaz (2014). The product is considered a substantive theory and a co-construction between the viewer and the viewed. The theory is an abstract rendering of specific social phenomena that are grounded in data (Charmaz, 2014).
Core category	- The most abstract theoretical construct (Bryant, 2018). It has the most explanatory power.

Credibility	- The extent to which the findings are believable, or the extent to which the theory is considered plausible (Lincoln and Guba, 1985).
Data mining	- Forcing preconceived ideas on data and asking loaded questions that would lead responses to fit with what one might expect to find (Charmaz, 2014).
Deductive logic	- The act of identifying variables of possible experiences beforehand and ‘testing’ their accuracy. Deductive logic starts with general or abstract concepts and moves towards more specific instances (top-down approach) (Proctor and Capaldi, 2006).
Dependability	- The extent to which the research has followed the prescribed process of the selected methodology (Lincoln and Guba, 1985).
Emergence	- Inductively derived data (Charmaz, 2014).
Epistemology	- Refers to questions asked about, “How do I know what I know?”; and “How do I know that what I know is correct?” (Weed, 2009).
Emotional processes	- The variant feelings experienced and how they come to be experienced.
Filicide	- The offspring murder of a child (Resnick, 1969).
Fit	- The generated categories are indicated by data and can also be led back to data (Birchmann and Sollie, 2014).
Focused coding	- Using the most significant or frequent earlier codes to sift through large amounts of data (Charmaz, 2014).
Focused interviewing	- Directing interviews to focus on the identified main codes and categories (Charmaz, 2014).
<i>Geisteswissenschaft</i>	- An approach to science that emphasises the empathic understanding of individual and social action (Neuman, 2006).
Gerunds	- A heuristic devise that uses verbs as nouns (Wilson, 2012).
Grounded theory	- A theory that is inductively obtained (derived from data) and sustained by the data (illustrated by examples from the data).

Identity/sense of identity	- A person's own view of how they believe others perceive them.
Inductive logic	- The extrapolation of patterns and ideas from in-depth data (bottom-up approach) (Charmaz, 2014).
Infanticide	- The offspring murder of a child up to one year of age (Resnick, 1969).
Initial interviewing	- Exploring the broad identified study aims and objectives (Charmaz, 2016).
Interpretivism	- A philosophical orientation concerned with the internally experienced sense of reality of the individual as it is obtained through interaction, language and conceptualisation (Neuman, 2006).
Interview	- A gently guided and directed, one-sided conversation to explore an experience about which the participant has deep first-hand knowledge (Charmaz, 2016).
Iteration/iterative processes	- Moving back and forth between data collection and analysis (Charmaz, 2014).
Line-by-line coding	- Labelling each line of the data (Charmaz, 2012).
Memo writing	- Writing informal analytic notes about the data, where the researcher begins to theorise about the relationships between data, its characteristics, connections and differences (Charmaz, 2014).
Negative case analysis	- Seeking out information and data that not only confirms and expands on the constructed properties and categories but also contradicts the findings and points to alternative experiences, understandings and variances (Lincoln and Guba, 1985).
Neonaticide	- The offspring murder of a newborn within its first 24 hours of life (Lambie, 2001).
Non-neonaticidal pregnancy	- A pregnancy that does not result in the act of neonaticide.
Neonaticidal pregnancy	- A pregnancy that results in the act of neonaticide.
Ontology	- Referring to questions regarding the nature of reality (Grix, 2010).

Originality	- A concept referring to whether the research offers new insights (Charmaz, 2006).
Paradigm	- A conceptual framework, or system of thinking, accepted by a research culture; one that encompasses specific interrelated values, assumptions, patterns and structures for observing, understanding and solving research problems (Babbie, 2005).
Postmodernism	- An era of science yielding that reality is multiple, fluid, varied and holistic and that knowledge is created and obtained by interaction.
Postulate of adequacy	- Explanations are sufficient when they convey a deep understanding of phenomena (Neuman, 2006).
Processes	- Unfolding temporal sequences revealing the links of chronological sequences with starting and end points. Processual knowledge reveals information about how characteristics relate, interact, connect and change in accordance to certain contexts or conditions. Furthermore, processual data may reveal variances, relations and dimensions of the varied human experience. (Charmaz, 2006).
Prolonged engagement	- The extent to which the researcher engaged with participants in order to effectively establish trust and rapport to elicit relevant responses from participants (Lincoln and Guba, 1985).
Qualitative research	- A research design that concern interpretive, material practices that make the world visible (Denzin and Lincoln, 2000).
Reflexivity	- The act of making the co-constructed nature of research data and the context of interpretations explicit (Hurd, 1998).
Relativism	- The view that social reality is relative to some particular frame of reference, and if this is to a specific time frame, context, culture, history or language, among others (Denzin, 2001).

Resonance	- Enquiring if the theory makes sense to and resonates with participants (Charmaz, 2006).
Sensitising constructs	- A broad term without absolute qualities that sparks the researcher's thinking about the phenomenon of study (Charmaz, 2014).
Social constructionism	- A philosophical orientation that denotes reality is socially constructed through language and social engagement (Proctor and Capaldi, 2006).
Subjectivity	- An epistemological viewpoint that denotes reality cannot exist independently from the mind of the knower (Denzin, 2001).
Symbolic interactionism	- A perspective concerned with ascribing meaning to and the process of interpretation within social contexts (Blumer, 1969).
Theoretical adequacy/saturation	- Theoretical coverage of the research area, meaning, ensuring that theoretical categories are robust (Charmaz, 2014).
Theoretical framework	- An abstraction that focuses on some specific aspect of the research context (Bryant, 2018). It consists of variant concepts that communicate several ideas about the data.
Theoretical sampling	- Sampling for information or additional data from participants to refine ideas and to extend the theoretical properties and boundaries of the category or set of categories (Charmaz, 2006).
Theory verification	- Hypothesis testing.
Transferability	- The extent to which the findings can be transferred to other settings and populations (Lincoln and Guba, 1985).
Roles	- Shared behavioural expectations.
Relevance	- The extent to which the theory pertains to the real concerns of the individuals involved (Weed, 2009).
Self/sense of self	- A person's evaluation of their own attributes, values and judgements.
Substantive theory	- A constructivist grounded theory that constitutes an abstract rendering of the phenomenon under investigation

and which is grounded in data obtained through an interactive process with the viewed (Charmaz, 2014).

Usefulness

- Enquiring whether the theory contributes to knowledge (Charmaz, 2008a).

Verstehen

- Understanding of the lived experience of individuals (Neuman, 2006).

Voluntarism

- The belief that individuals have the capacity to reflect, to have self-awareness, to learn, to have free choice, to have volition, and possess motives for engaging in certain behaviours (Neuman, 2006).

PREFACE

I am a clinical psychologist, working in a forensic psychiatric setting. This work was inspired by my role as clinician in an evaluative as well as therapeutic/rehabilitative capacity at Sterkfontein Hospital, Krugersdorp, in South Africa.

At Sterkfontein, I work as part of a multidisciplinary team, where we receive instruction from the courts to evaluate accused persons' fitness to stand trial and criminal responsibility on the basis of mental illness. The findings are presented in the form of a report and serve as expert evidence in a court of law. We may further receive instruction to complete a pre-sentencing forensic risk evaluation on a convicted individual awaiting sentencing. Moreover, for those individuals who are deemed not fit and/or not responsible on the basis of mental illness, we receive instruction from the court to provide a comprehensive multidisciplinary rehabilitative intervention to prevent future offending risk.

I have a special interest in the evaluation and treatment of female forensic mental health care users. Furthermore, I am passionate about the development of psychotherapeutic programmes aimed at the prevention and rehabilitation of forensic risk within the community, correctional centres and forensic psychiatric settings. In my professional capacity, I have received a significant amount of referrals for the evaluation and treatment of women who take the life of their children. As we aim to provide appropriate treatment recommendations to the court; or to develop and provide the said therapeutic services, such approaches must first be well informed by scientific findings. It is such sentiments that motivated this research undertaking.

CHAPTER ONE: INTRODUCTION

1.1 Chapter Introduction

This thesis is a response to the United Nation's (UN) Sustainable Development Goals (SDG) as well as the world leader's 2030 vision for humanity; to address the problem of child mortality and homicide matters (United Nations, 2016; You et al., 2015). In line with this vision, the research is specifically concerned with the phenomenon of maternal neonaticide (i.e. the offspring murder of a newborn) in criminal cases and within the South African context. In addressing this grave social issue from a mental health perspective, the value of understanding the individuals who commit such offences is deemed to be of central importance. It is envisaged that only then would those working in the field of forensic mental health be able to establish scientifically informed and appropriate prevention and rehabilitation programmes to curb the occurrence of neonaticide.

As an introduction to the thesis, the sections that follow introduce the phenomenon of interest and orientate the reader to the nature and structure of the thesis. While some concepts used are defined within the introductory chapter, most concepts briefly referred to in this thesis will be defined and described within the relevant chapters concerned. However, the reader is encouraged to consult the 'List of Key Concepts and Definitions Used' to aid with the reading of the introduction and thesis.

1.2 Introduction to the Phenomenon of Interest

Within this section, the problem of child mortality and homicide is introduced. The discussion exposes the importance of researching the phenomenon of neonaticide. It specifically reveals the necessity to focus on mothers who commit the act among criminal populations and within the South African context. The reader is then briefly introduced to the phenomenon of interest and then the broad area of study is described. Finally, the nature and structure of the thesis is provided.

1.2.1 The problem of child mortality and homicide matters

Reducing the rate of child mortality is a grave social concern and high priority of the United Nations' SDGs, and world leader's 2030 vision for humanity (United Nations, 2016; You et al., 2015). The matter is specifically related to the SDG3, concerned with good health and well-being, as well as SDG16 and its emphasis on peace, justice and strong institutions. According to statistics, it is estimated that approximately 5.9 million children below the age

of five die every year (You et al., 2015). In 2009 alone, it was estimated that 454 children below the age of five had been killed in South Africa (Abrahams et al., 2016). Among other events, including infections, intrapartum events and pre-term births, child homicide is one of the leading causes of death in young children (Abrahams et al., 2016; Devakumar and Osrin, 2016).

According to Abrahams et al. (2016) the under five-year age group of children constitutes the second largest homicide age group, after children ages 15 to 19 years. However, young children are considered to be far more at risk of being killed by their own parent (Ciani and Fontanesi, 2012; Marks, 2008). Due to its multifaceted and unique nature, infant offspring killing, especially that of young children, is a crime set apart from other forms of homicide; and deserves special consideration (Koenen and Thompson, 2008; Krischer et al., 2007; Putkonen et al., 2009).

Offspring killing is broadly referred to as filicide (Resnick, 1969). Variant categories of filicide exist, and it is differentiated according to the age of the child when killed by their parents (Resnick, 1969; Resnick, 1970). Resnick (1969) categorises the killing of a child older than one year as filicide, the killing of a child up to one year of age as infanticide and the killing of an infant just after birth or very close to the time of birth as neonaticide. Variances in definitions of neonaticide exist. The current medically accepted category includes neonates up to the age of one month. However, it is also common practice to define neonaticide as the killing of an infant by their parent/s within the first 24 hours of its life (Lambie, 2001; Putkonen et al., 2007; Vellut, Cook and Tursz, 2012). The latter definition is accepted within the current thesis.

In conjunction with the importance of protecting a young and vulnerable life, the phenomenon of filicide requires attention because of its devastating emotional and psychological impact on surviving and remaining family members as well as society at large (Ciani and Fontanesi, 2012; Shackleford, Weeks-Shacklefords and Beasley, 2005). The circumstances around the phenomenon are regarded as tragic when considering aspects related to the emotional burden and pressures that result in parents, whether it be wilful or unintentional, that end the life of a child (Devakumar and Osrin, 2016). This also includes the long-term traumatic consequences that arise for children who survive attempted homicide (ibid).

Despite the alarming findings on the occurrence of filicide and the consequences thereof, research on this topic remains scarce (Abrahams et al., 2016; Putkonen et al., 2009). As a result of the gaps in scientific literature, reproductive, mental health and social services are failing to identify parents vulnerable to committing infant offspring killings in South Africa and abroad (Abrahams et al., 2016). A lack of appropriate knowledge on the subject further hampers the establishment of appropriate prevention and rehabilitation interventions (Edge, Subramaney and Hoffman, 2017). In an effort to comply with the UN's Sustainable Development Goals, more mental health research is needed on the topic of infant offspring killing. In this regard, research on neonaticide is deemed necessary to stimulate academic debates on possible avenues of intervention and prevention. By understanding the women who commit the act and the underlying processes involved in the act, efforts to curb incidences of neonaticide and, thus, child homicide, can be initiated or improved upon. Sustainable Development Goal 3 may then be addressed as informed efforts can be made to ensure optimal psychological functioning (good health and well-being) among the women concerned. Sustainable Development Goal 16 may be addressed as informed intervention and prevention techniques can facilitate peace, justice and the establishment of strong institutions (correctional and mental health facilities amongst others) aimed towards such intervention efforts.

1.2.2 The need to focus on neonaticide research

Although all classification categories of filicide require scientific investigations, narrowing down the research focus to specific incidences of offspring killing was deemed necessary. This is especially motivated in the context of variances observed in perpetrator characteristics among the variant categories of filicide. Literature on the subject typically emphasises the unique nature of the phenomenon of neonaticide by revealing the characteristics that separate such offences from other offspring killings (Ciani and Fontanesi, 2012; Manchester, 2003; McKee and Egan, 2013). The characteristics are discussed in the next chapter's preliminary review of the literature.

The pertinence of giving scientific consideration to neonaticide is further motivated by the prevalence rates thereof, in comparison to other forms of filicide. A study by Ciani and Fontanesi (2012) collected data across 34 years and revealed that the frequency of neonaticide is highest among the three categories of filicide, infanticide and neonaticide. For these authors, the higher frequency of neonaticides, compared to other forms of filicide, is

interpreted as confirmation that a child is far more at risk of being killed during the first 24 hours of their life (ibid).

1.2.3 The need to focus on neonaticide within the South African context

Neonaticide is considered a 'rare phenomenon' in the literature (Putkonen et al., 2007; Putkonen et al., 2009; Friedman and Resnick, 2009). However, a retrospective cross-sectional mortuary-based national study of child homicides committed in 2009, by the South African Medical Research Council, estimates South African rates of neonaticide to be significantly higher than those reported in developed countries (Abrahams et al., 2016). According to Abrahams et al. (2016) the estimated rates for neonaticide (defined in their study as killing a child within the first 28 days of its life) were considered to be 19.6 per 100,000 live births. Most of the infants within the neonate sample died within the early neonatal period, with a mere eight out of 241 neonates being more than six days old around the time of death. Abrahams et al. (2016) compared such findings to that of developed countries, yielding incidents of infanticide and neonaticide to range from estimates of 2.1 to 6.9 per 100,000 live births.

Devakumar and Osrin (2016) warns that global estimates should be interpreted with caution and that rates of neonaticide may actually be underestimated due to a number of factors. Influences in data, such as the use of different classification systems for filicide, and incomplete data may account for this (ibid). Furthermore, rates of neonaticide are often underestimated due to homicides being underreported and due to lack of coverage of birth registration (Devvakumar and Osrin, 2016; Tursz and Cook, 2011). Research points to concealment of birth and giving birth outside of institutions in neonaticide cases which further results in the birth not being registered (Devakumar and Osrin, 2016; Manchester, 2003; Vellut, Cook and Tursz, 2012). Neonates' death, as a result of neonaticide, may further be undiscovered; the cause of death not accurately determined and incorrect rulings of accidental death in actual homicide cases may further deflate estimates of neonaticide (Friedman and Resnick, 2009; Tursz and Cook, 2011). Actual homicidal deaths may be attributed to stillbirths, malnutrition, seizures or sudden-infant-death syndrome (Malmquist, 2013). A retrospective case audit of abandoned newborn babies and fetuses admitted to the Pretoria Medico-Legal Laboratory in South Africa, during 2004 until 2008, concluded that 35% of the bodies admitted had been in a decomposed state (du Toit-Prinsloo, Pickles and Smith, 2015). According to the authors, causal inferences of death are compromised by partially decomposed bodies. Finally, there appears to be problems with successful prosecution in

cases of neonaticide, particularly within the South African context (ibid). While a substantial percentage of abandoned infants revealed signs of life after birth, denoting a homicidal cause of death or death by abandonment, the cases had been shelved (ibid).

The estimates raise particular concern, as South African abortion laws are deemed liberal and services are available and accessible within the public health care sector (du Toit-Prinsloo, Pickles and Smith, 2015). Devakumar and Osrin (2016) rightfully question whether such inflated rates of child homicide are a product of South Africa's elevated aggregate homicide rates of 31 per 100,000. Irrespective, the estimated higher incidences thereof point to the necessity of understanding the phenomenon within the South African context.

Not relating specifically to neonaticide, there is a South African scholarship that provides informative analyses on the social, structural and institutional contexts of incarcerated women and their pathways to imprisonment: For instance, Nagdee et al.'s (2019) research that describe a population of women offenders referred for psycho-legal evaluations who present with backgrounds of adversity in terms of socio-demographic and socio-economic challenges, histories of abuse, high rates of mental illness and alcohol abuse. Artz et al.'s (2012) research reveal the histories of family discord, traumatic events, contexts of poverty and crime, histories of abuse and domestic violence and addiction as pathways to crime. Africa's (2016) research reveals the narratives of eight women incarcerated for violent crime and reveals the wider societal discourses that shape perceptions of the women as 'bad'. It is seen as being attained on the basis of stereotypical femininity and ascribing violence to a masculine domain.

However, an extensive literature search yielded but a handful of studies conducted within the South African context that pertain to infant offspring killing and neonaticide specifically. This includes the cross-sectional study of child homicides by Abrahams et al. (2016), the retrospective case audit of abandoned newborn babies by du Toit-Prinsloo, Pickles and Smith (2015), the perspective piece by Devakumar and Osrin (2016), and the historical examination of infanticide and the concealment of birth in Natal from 1980–1935 by Badassy (2011). There are also a few studies on other forms of filicide, including the case study on infanticide by Berg (2019) and Moodley, and Subramaney and Hoffman's (2019) qualitative study of mentally ill women who commit filicide in Gauteng. Nevertheless, the scarcity of research focusing specifically on neonaticide in South Africa is resulting in an over-reliance on international research from developed countries. It is unfortunate, though, that scientific

investigations and conceptual understandings on the topic are also limited internationally, based on the rarity of the phenomenon and barriers to identifying relevant cases as discussed above (Putkonen et al., 2009). Subsequently, this is seen to have consequences to informing appropriate intervention programmes within the South African environment and abroad.

1.2.4 The need to focus on maternal neonaticide

Of special interest in the realm of neonaticide research are the investigations of maternal neonaticide. The main reason for this approach is that most of the documented cases of neonaticide have been committed by the mother of the newborn (Marks, 2008; Riley, 2005). This is also indicated in Abrahams et al.'s (2016) South African sample, with mothers being perpetrators in approximately two-thirds of filicide cases. Furthermore, it is understood that maternal neonaticide should be studied separately from paternal neonaticide, as the circumstances, motivations, actions and psychological processes are viewed different according to the respective gender (Liem and Koenraadt, 2008).

1.2.5 The need to focus on neonaticide in criminal cases

A further important finding is that neonaticidal mothers rarely present with an acute mental illness (Marks, 2008; Nau, McNiel and Binder, 2012; Shelton et al., 2011), with the exception of personality disorders (Putkonen et al., 2007). Based on these findings, it is evident that research should focus on women who commit neonaticide in the context of criminal cases.

1.2.6 Statement regarding the phenomenon of interest

The aforementioned sections introduce neonaticide as a serious social issue within the South African context and abroad. Researching the phenomenon of neonaticide within criminal cases is deemed important in rendering knowledge that could be used to inform the development of prevention and rehabilitation programmes from a mental health perspective.

The next chapter provides a critical analysis of existing literature and reveals the variant avenues in need of further scientific investigation. It is argued that on the basis of the nature of research approaches and types of research questions asked, knowledge on the subject lacks theorisation and conceptualisation. In other words, the findings lack processual information that provide abstract renderings about how the researched characteristics connect, relate, interact, and are influenced by the women's unique perspectives and world view.

Specifically, it is argued that existing research lacks processual knowledge on the women's conceptual experiences. Meaning, the literature lacks information on the women's personal constructed thoughts, understandings and meanings in response to the physical experience of the pregnancy and their definitions and perceptions of the pregnancy situation and the foetus. It further lacks understanding on how and when such conceiving occurs, and if at all. It is further argued that research is deficient in providing a perspective of who the women are and how they think of themselves. This is enquired regarding what roles the women believe they ought to be playing, and how they negotiate their sense of self (evaluation of one's own attributes, values and judgements) or identity (evaluation of how they believe others perceive them). Or alternatively, how such questions may reveal further insights on the women as actors within their own experience, or what the nature and processes of them 'being' a mother is. It is further argued that literature lacks understanding regarding the women's emotional experiences in response to the foetus and pregnancy and the processes by which such emotional experiences occur. Finally, the literature has been unsuccessful in describing how the actions (patterns of behaviour) that emerge during the pregnancy and the eventual act of neonaticide relate to such aforementioned conceptual and emotional involvements.

On the basis of the lack of such processual knowledge, research has failed to provide the 'bigger picture' regarding neonaticide. It is only with such knowledge that clinicians would be better equipped to identify opportunities for intervention and to establish prevention and rehabilitation programmes appropriate to addressing neonaticide. Thus, in order to respond to the United Nation's Sustainable Development Goals as well as the world leader's 2030 vision for humanity, research that would provide an analytic product (abstract understandings) regarding the processes and actions that underpin neonaticide is needed.

1.2.7 Broad area of the study

In order to contribute to the above purposes, the research initially questioned "What are the underlying conceptual and emotional processes as well as actions that underpin the act of neonaticide?" It must be mentioned, that by way of the application of the research methods and serendipity in the research encounter described in further sections (see Section 2.3.1 and Section 6.2), the research question evolved and was refined. In order to understand the underpinning processes of neonaticide, it was thought best to consider the women's unique conceptual and emotional processes as well as actions within their neonaticidal pregnancies (NP) as it compares to their non-neonaticidal pregnancies (N-NP) among the same group of women concerned. The refined research question enquires "What are the conceptual and

emotional processes as well as actions underpinning a NP and N-NP among women who commit neonaticide”

The question is addressed via the construction of a substantive theory, in other words, an abstract rendering of the phenomenon, which is grounded in data obtained through an interactive process with the viewed (Charmaz, 2014). Constructing an abstract theoretical account on how women come to commit neonaticide is, thus, the purpose of this study. The methods and approaches of Kathy Charmaz’ (2014) constructivist grounded theory (CGT) were relied on to arrive at such a theory. Ultimately, the substantive theory offers an understanding on ‘how’ women from criminal populations come to commit neonaticide.

1.2.8 Summary regarding the phenomenon of interest

The aforementioned sections introduce neonaticide as a serious social issue within the South African context and abroad. It highlights the opportunity for mental health services to intervene with the establishment of appropriate prevention and rehabilitation programmes. Such interventions are understood to require relevant mental health research. This study contributes towards the body of knowledge by providing a substantive theory on ‘*how*’ women from criminal populations come to commit neonaticide via consideration of the variant conceptual and emotional processes, as well as the actions that underpin the act.

1.3 Nature and Structure of the Thesis

This thesis illustrates the systematic and logical processes of enquiry employed to address the research question and to construct the substantive theory. The contents of the thesis reflect the variant constituents required to construct a theory according to the CGT method.

CGT is both a method and result (Charmaz, 2014). This approach to constructing a grounded theory differs from that of a traditional grounded theory, as the subjective position of the researcher is acknowledged and the final theory is considered a co-construction between the viewer and the viewed (Charmaz, 2014; Weed, 2009). In this vein, the thesis is written in such a way so as to reveal in a detailed in-depth reflexive manner all the elements that played a part in the construction of the final theory. This concerns the elements from participants as well as me, as the observer and co-constructor. Throughout the thesis, I reflect critically on myself as both enquirer and respondent and how I was coming to know myself and my own taken-for-granted assumptions regarding the phenomenon (Lincoln and Guba, 1985).

The thesis is divided into eight chapters. While this chapter serves as a broad introduction to the problem of interest and also the thesis, Chapter Two consists of a preliminary review of the literature concerning neonaticide. Firstly, it should be mentioned that the use and review of literature in grounded theory (GT) studies remains a contentious issue among GT approaches (Charmaz, 2016). The directive of traditional grounded theory is to resist relying on previous literature to direct the research (Glaser and Strauss, 1967). The concern in consulting the literature is that researchers would identify variables and relationships that would be included into the research frame (ibid). Seeing that grounded theory is established as an emergent and, therefore, inductive, or rather, an abductive heuristic, it is important to guard against lapsing into theory verification (hypotheses testing) over ‘discovery’ (Charmaz, 2014; Glaser, 1978). However, more contemporary grounded theory researchers denote that entirely avoiding a review of the literature may be impossible (Bryant and Charmaz, 2007b). Corbin and Strauss (2008) reveal how this is particularly true to individuals who may have previous interest and employment exposure to the topic. While still adhering to an emergent and abductive logic, I engaged in a critical preliminary review of the literature (prior to data collection). The aim was to determine the gaps in the literature and, resultantly, identify the need for abstract renderings regarding the phenomenon, to orient and frame the study, and finally, to broadly establish the research question (Bryant and Charmaz, 2007a; Corbin and Strauss, 2008; Mills et al., 2006).

Chapter Two concludes with a delineation of the initial study objectives, describing the women’s conceptual (thoughts) processes that underpin the act by describing: a) The women’s meanings and understandings in response to the physical experience of the pregnancy; b) How the women define the pregnancy situation; c) The women’s understanding of their roles to be played in society; d) Negotiation of their sense of self; e) How they negotiate their identity; and, f) The perceptions of their foetus. A further objective is to describe the women’s emotional (feelings) processes via describing their emotional experiences during the pregnancy and feelings of closeness experienced towards the foetus. The final objective is indicated as describing the women’s actions by describing the patterns of behaviours that emerged during her pregnancy, the act of neonaticide and shortly after the act.

With the evolution of the study and refinement of the research question and objectives, the refined aim of the study came to be to construct a theoretical account on the processes involved in how the women come to conceptually, emotionally and behaviourally act towards

their NP and N-NPs. The refined objectives include describing: a) How the women approach pregnancy and mothering-related content or experiences, by describing the nature of the women's gestating; b) Who the women are and how they engage in role playing as mother, by describing how the women come to think, feel and act towards mothering-related content; c) How the women interact with and engage with their environment, by describing the women's assumptions at play that influence interaction with others as well as their communication strategies used and the interpersonal responses that influence interaction with others; d) The consequences of the women's interactions, by describing different levels of support that may be experienced; e) The variant behavioural outcomes that may occur in the context of the women's interaction with their environment, by describing the extent to which women may engage in thoughts, feelings and behavioural actions towards pregnancy-related tasks; and finally, f) What the forces or types of actions at play are through which the above outcomes are attained or maintained by, describing specific thoughts, feelings and actions experienced towards pregnancy content, as well as the nature of it.

In acknowledging my own subjectivity within the research process, Chapter Three delineates the study's guiding, or sensitising perspectives. Here, I reveal how the gaps identified within the literature and the questions that subsequently arose are largely informed by my own theoretical perspective to exploring and understanding human behaviour. This relates to my perspective as being both researcher and clinician. The chapter introduces the symbolic interactionist (SI) perspective and reveals how such standpoints contributed towards the initial identification of the variant tentative and broad sensitising constructs. The sensitising constructs included concepts such as the need to explore the women's thoughts, understandings, meanings, definitions, perceptions, roles, sense of self, negotiation of identity, emotions, and actions. The sensitising focus, concerning an emphasis on process and how such conceptions and emotions are arrived at, was further informed via symbolic interactionism. Note that the nature of these sensitising constructs employed are broad and merely pointed to areas that had needed to be explored. It did not denote what would be found. In this manner, I was able to resist lapsing into theory verification over emergent theory construction (Charmaz, 2008b; Charmaz, 2014; Glaser and Strauss, 1967).

Chapter Four is written in two parts. Part One describes my guiding philosophical assumptions as a researcher. These suppositions inherently underpin my approach to viewing reality and, thus, further informed the questions asked within the research as well as the approaches that were deemed necessary to address such questions. This section of the thesis

unpacks the implicit nature of the research question and, thereby, reveals the underlying philosophical assumptions at play. The relevance of the variant philosophical assumptions are revealed and justified. My connection to the postmodern era is introduced, communicating my belief about reality as being multiple and fluid (Neuman, 2006). My acceptance of the interpretive paradigm is shown to reveal my concern with the internally experienced sense of reality of the individual as it is obtained through interaction, language and conceptualisation (Neuman, 2006). The chapter reveals my alignment with the social constructionist orientation advocating that reality is socially constructed through language and social interaction (Proctor and Capaldi, 2006). Moreover, an ontology of relativism, yielding that reality is relative to a specific frame of reference, time and context and epistemology of subjectivism, denoting that reality does not exist independent from the mind of the knower is indicated (Neuman, 2006). Part Two of Chapter Four discloses the design strategies selected for the study. It flows from Part One as it is shown how the choice for the use of the selected strategies are indirectly informed by the study's philosophical assumptions. Here the appropriateness of a qualitative research design, along with the CGT tradition in answering the research question, is motivated.

Chapter Five discusses the CGT methods and procedures employed to construct the substantive theory. The chapter discusses how data was collected from eight women from three correctional centres across South Africa, including Kgosi Mampuru II (Gauteng), Westville (KwaZulu-Natal) and Pollsmoor (Cape Town). It reveals that all participants were convicted, sentenced and incarcerated for murder, specifically neonaticide. All women had also experienced one or more pregnancy where they did not take the life of their newborn. The variant elements involved in the research process are highlighted in this chapter, beginning with the broad and open enquiry, moving on to the sampling of participants and recruitment strategies, towards the data generation and collection methods, followed by descriptions of the data analysis and theory construction process. With respect to sampling, the methods of purposive sampling were employed. Concerning the collection of data, 17 initial interviews and 11 focused interviews were conducted. Interviews were mostly unstructured, commencing with the question "Tell me your life story leading up to the events that led to your incarceration here". A semi-structured interview guide pertaining to broad questions exploring the women's thoughts feelings and actions in relation to pregnancy content was kept at hand and referred to and incorporated when relevant. I audio recorded and transcribed the data. The data was analysed via the techniques of constant comparisons throughout the processes of initial line-by-line coding, focused coding, axial coding and

facilitated by memo writing and the use of visual aids. Quality measures to protect the integrity of the data are discussed throughout the chapter, while an exposition of ethical considerations in the study are presented towards the latter end of the chapter. Throughout Chapter Five, the appropriateness of the methods selected are argued on the basis of several factors, including: a) its ability to ensure that variant conceptual and emotional processes as well as actions that underpin the act of neonaticide were elicited; b) because it warranted the construction of more abstract understandings regarding the phenomena; c) because it ensured the attainment of data that exposed variations, relations and dimensions pertaining to the act of neonaticide; and finally, d) because it ensured that the theory constructed was emergent and grounded in the data (sustained by the data).

Chapter Six briefly reveals my workings with the data and how this led to the construction of variant concepts and conceptual categories of concepts and, ultimately, a theoretical framework. It serves as a bridging chapter between the methods employed to construct the theory and the findings and applications presented in Chapter 7. Although I initially relied on some guiding interests, sensitising concepts and disciplinary perspectives as points of departure, that was merely the start. True to the grounded theorising form, the chapter reveals how new questions emerged from the data via the research process (Bryant, 2018).

Additionally, it is shown how, through serendipity in the research encounter, I was able to incorporate a comparative analysis of each woman's neonaticidal pregnancy as well as two or more of their other non-neonaticidal pregnancies. Moreover, the chapter introduces the theoretical framework constructed, with a brief introduction to each of the concepts, category of concepts and their properties, dimensions, relations and variations. The chapter serves to define the constructed concepts which function as a frame in providing structure to the following chapter. The construction of various conceptual categories are introduced, revealing one core category, namely, docile gestating and four major conceptual categories including, a) The vicarious mother; b) Vicarious accessing; c) Contexts of security; and d) Degree of engaging with its associated concepts of vicarious actions, misrepresenting actions and phantomising actions. The chapter concludes with a schematic representation of constructed concepts and introduces how the interaction among the theoretical constructs may be employed to reveal the plausible underpinning pathways towards neonaticide.

Chapter Seven serves to present the findings and also reinforce and bolster the conceptual categories of concepts constructed within the study, as well as their properties, dimensions, relations and variations. The constructed concepts are considered to link with the research

objectives. Docile gestating addresses the question about how the women approach content related to their pregnancy and baby. The concept refers to a passive approach towards pregnancy-related content, where the women await instruction on how to think, feel and act towards such content. The women either relinquish control by having others dictate how to think feel or act, or relinquish control by abdicating responsibility and negating to think, feel and act towards such content. The vicarious mother describes the role the women enact with respect to 'being' a mother; The concept reveals how the women enact being a mother vicariously through others; or in the absence of others, negate to 'be' a mother at all. Vicarious accessing reveals how the women engage with their interpersonal environment regarding pregnancy- and baby-related content. It concerns the manner in which the women engage with their interpersonal environments and the interaction and communication strategies employed in an attempt to secure support. Contexts of security discuss the consequences for the nature of their interactions (vicarious accessing), revealed as the extent of support secured. Degrees of engaging describe how the women behave in response to the established contexts of security, thus revealing the behavioural outcomes. The concept concerns the extent to which the women engage with the pregnancy process. Vicarious actions, misrepresenting actions and phantomising actions reveal the behaviours that determine the nature of and degree of engaging, revealing the forces at play by which the behavioural outcomes are attained or maintained by. The degree of engaging is shown to be attained and maintained by behaviours such as acting through another (vicarious actions), acting towards something other than the foetus and pregnancy (misrepresenting actions), or behaving in a way to render the foetus and pregnancy as being unreal (phantomising actions). Within the chapter, the concepts are organised according to, and presented and shown to occur, recur and interact over time across the gestating events continuum, namely, a narrative structure referring to the pregnancy events of a) Pre-pregnancy; b) Receiving pregnancy news; c) Sharing pregnancy news; d) Physical pregnancy; and finally, e) Labour, birth and afterwards. It is through these interactions that the different plausible pathways towards a non-neonaticidal and neonaticidal pregnancy is demonstrated among this population of women. The N-NPs shows how the women need to engage in thoughts, feelings, actions and ultimately the pregnancy experience via close reliance on another. In the absence of such support, the NPs show that the women refrain from engaging in the pregnancy process and, ultimately, act towards a newborn that never fully existed in their experience and mind.

Chapter Eight provides a summary of the main findings and concepts constructed. Moreover, it provides a discussion on the findings and their implications for understanding the

phenomenon as well as for clinical practice. At this point, literature from the preliminary literature review is reintegrated and new and relevant theoretical literature is integrated into the constructed theory. The purpose of this is to reveal how the theory may be extended via the integration of relevant theoretical work. It also serves the purpose of revealing how the theory can broaden previous perspectives on 'who' the women are as mothers, 'what' they do concerning actions related to neonaticide, and 'why' they do it. By addressing the question of 'how' women come to commit neonaticide, it is shown how the constructed theory may serve as a golden thread that connects previously identified variables and static descriptions on the phenomenon. By considering the plausible underpinning pathways towards neonaticide, recommendations are made regarding possible prevention and rehabilitation interventions. Furthermore, recommendations towards future research are made. The final aspects of the chapter evaluate the quality of the theory and reveal the limitations. Finally, the chapter also serves as a conclusion to the study.

The thesis contains various illustrations and images to aid in the explanation and understanding of ideas presented. Furthermore, a list with definitions of key concepts used and also a list of abbreviations is provided in the early sections of the thesis to aid in the reading of the document. Finally, the appendix contain supplementary information relevant to the thesis and is referred to at the relevant and respective sites throughout the thesis.

1.4 Chapter Conclusion

Within this chapter the importance of addressing the issue of maternal neonaticide within criminal cases and from a mental health perspective was deemed crucial towards responding to the UN Sustainable Development Goals, and world leader's 2030 vision for humanity (United Nations, 2016; You et al., 2015). The importance of constructing a substantive theory that would focus on the conceptual and emotional processes and actions that underpin the act was introduced. Finally, the outline and description of the chapter contents presented orientates and prepares the reader for how they will be guided towards understanding the construction of the final theory in the chapters that follow.

CHAPTER TWO: PRELIMINARY LITERATURE REVIEW

2.1 Chapter Introduction

This chapter offers a preliminary review of previous literature on the chosen subject. The literature presented here is primarily expository and describes the literature reviewed prior to commencing data collection and analysis. Through engaging with the variant aspects of the literature, the reader is guided towards the research question, aims, and objectives, as presented towards the latter part of the chapter. Moreover, a critical look at existing research in this chapter point to the gaps in the current scientific knowledge base, which ultimately motivates the need for the research undertaking with its associated research question, aims, and objectives.

2.2 Background Literature Analysis and Critique

This section critically reviews the available literature on neonaticide. The reader is firstly introduced to the early influential research on filicide. Thereafter, more recent research is considered as it reviews the characteristics of neonaticide perpetrators and offences according to the common domains typically investigated. This concerns questions around ‘who’ typically commit such offences, followed by ‘what’ actions may be taken and finally, ‘why’ such actions may be taken. The lack of abstract theoretical understandings pertaining to such research findings is indicated, which further leads to a consideration of the limitations of current conceptualised understandings relating to the phenomenon. An argument is presented on how this results in failures to see the ‘bigger picture’ concerning neonaticide. A critical discussion attributing the limitations of the nature of previous findings to common research approaches in neonaticide cases is presented. Here, the need to adopt an in-depth exploratory and inductive approach with an interrelated processual and action focus is motivated.

2.2.1 Early influential research on filicide

As early as 1927, filicide was described as occurring as a response to severe stress caused by birth and lactation which was deemed to result in ‘insanity’; now more appropriately referred to as mental illness (Hopwood, 1972). In accordance to such conceptualisations, women who commit the act are seen to suffer from lactating psychosis (ibid). The research divide the women in two groups, those who perpetrate the act while lactating and those who do so post lactation (ibid). Later, a 1957 study suggested two groups of mothers who take the lives of their infants; the ‘good’ versus ‘bad’ mother (Hirschman and Schmitz, 1958). The former

group consists of women who are deemed young, immature, suggestible to sexual advances with no forensic history while the latter refers to women with limited 'ethical restraint' (ibid).

The most seminal work occurred in the 1970's, when Philip Resnick, a forensic psychiatrist, proposed a classification system based on motives for committing filicide (Resnick, 1969; 1970; 1972). Resnick (1969; 1972) identified five categories within the classification system, namely: a) Altruistic filicide; b) Acutely psychotic filicide; c) Unwanted child filicide; d) Accidental filicide; and e) Spouse revenge filicide. D'Orban (1979) further extended and refined the categories. This authors' work is integrated in the definitions and description of Resnick's (1969; 1972) classification system described below.

2.2.1.1 Altruistic filicide

Resnick's (1969; 1972) first category concerns individuals who commit filicide as a result of beliefs regarding the family or child's imminent and inescapable tragedy and may also be associated with the parent's own suicide (filicide-suicide). D'Orban (1979) regards this as mercy killing, where a mother may believe she is stopping or preventing a child's actual, imagined, perceived or predicted suffering. Resnick (1969) explains that this may be associated with a depressive episode with or without associated psychotic features or delusions associated with another psychotic disorder, such as schizophrenia.

2.2.1.2 Acutely psychotic filicide

The second category concerns individuals who kill their offspring as a result of a major psychiatric disorder, most commonly a psychotic disorder (D'Orban, 1979; Resnick; 1969; 1972). In such instances, the women may be deemed to be detached from reality and unaware of their actions or the wrongfulness thereof.

2.2.1.3 Unwanted child filicide

The category of 'unwanted child filicide' represents parents who kill their offspring as a result of not wanting the child (Resnick, 1969; 1972) or rejecting the child (D'Orban, 1979). This category is most often associated with neonaticide and is discussed in further depth in Section 2.2.4.2 below (Lambie, 2001).

2.2.1.4 Accidental filicide

According to Resnick (1969; 1972), the category of ‘accidental filicide’ represents children who die at the hand of their parents without the parents intending to do so. Such cases may be particularly relevant to ‘battered child syndrome’, where the parent was a victim of childhood neglect themselves (Lambie, 2001). D’Orban (1979) explains that this category may also relate to the phenomena of ‘battering mothers’, where their child died as a result of excessive fatal and violent punishment or maltreatment and may include the ‘shaken baby’ syndrome.

2.2.1.5 Spouse revenge filicide

The final category concerns parents who take the life of their children as a result of retaliation against their partner or spouse (D’Orban, 1979; Resnick, 1969; 1972).

Following the pioneering research by Resnick (1969) and D’Orban (1979), subsequent researchers have attempted to expand on the knowledge base regarding neonaticide by addressing questions of, ‘Who?’, ‘What?’, and ‘Why?’. The following sections will focus on such characteristics.

2.2.2 The question of ‘who’?: Considering demographic characteristics

A common trend in the research concerns questions around ‘who’ the women are that commit such offences. The question is often addressed by retrospective case analysis of police reports regarding the demographic characteristics of the women. Domains typically investigated include their socio-economic circumstances, level of education, marital status, mean age of the women, questions about the number of pregnancies they had prior to the offence, and any documented history of physical or sexual abuse.

Regarding the aforementioned demographic characteristics, trends in the research suggest that the mothers frequently present with socio-economic difficulties and low levels of education (Ciani and Fontanesi, 2012; Stanton, Simpson, Wouldes, 2000). Mendlowicz et al.’s, (1998) sample reveal that most of the women who committed such offences are illiterate or have received only basic instruction. Furthermore, the women are typically regarded as young and are often unmarried (Ciani and Fontanesi, 2012; Manchester, 2003; Stanton, Simpson and Wouldes, 2000). Resnick’s (1969) study states that 89% of the neonaticidal mothers in his sample are younger than 25 years of age and that 77% of filicidal women are older than 25 years. A study by Mendlowicz et al. (1998) indicates a mean age of neonaticidal mothers of 22.5 years, which is interpreted in the study to suggest that neonaticidal women tend to be

younger than the “... normal parturient population” (p. 216). It is further indicated that neonaticidal mothers are generally nulliparous (Marks, 2008; Mendlowicz et al., 1998). Finally, a history of physical and/or sexual abuse are frequently reported (Malmquist, 2013).

Although such demographic data may very well be useful in narrowing down the population of individuals considered to be most at risk of committing neonaticide, standing alone, the information lacks conceptualisation and fails to provide the ‘bigger picture’ and understandings regarding the phenomenon. The need for further conceptualisation is indicated on the basis that not all women who present with such characteristics go on to commit neonaticide. The foundation of this knowledge is conceived as useful contextualising information regarding women who commit the act, but what is needed in the research is efforts to understand how such characteristics connect, relate, interact, and contribute to the varied human experience of those who go on to commit the act.

2.2.3 The question of ‘what’?: Considering the actions taken in neonaticide cases

Another trend in addressing the phenomenon of neonaticide is to question ‘what’ the women do that results in the death of the newborn. Questions are generally briefly concerned with pregnancy behaviours, setting of the murder and the nature of the act, such as whether it had been direct or indirect action and finally, behaviours observed after the act.

Several studies reveal certain common behaviours during the pregnancy (Krischer et al., 2007; Lindquist, 2008; Marks, 2008). This involves the concealment of the pregnancy, denying the pregnancy, failing to inform others that they are pregnant, and failing to register the pregnancy or seek prenatal care (Friedman and Resnick, 2009; Manchester, 2003; Shelton, Mirhead and Canning, 2010; Stanton, Simpson and Wouldes, 2000; Tighe and Lalor, 2015; Vellut, Cook and Tursz, 2012).

With reference to the birth, many of the women report having given birth in an isolated setting or at home (Friedman and Resnick, 2009; Manchester, 2003). After giving birth, it has been found that actions taken on behalf of the mother include either direct or indirect actions that result in the death of the infant (Razali et al., 2014). Direct action concerns the intentional killing of an infant soon after delivery in the form of violence, such as acts of suffocation, drowning or assault of the infant (ibid). Indirect action concerns the act of infant abandonment, specifically the discarding of an infant or passive neglect, defined as the act of leaving an infant at an inappropriate site without supervision, protection, and care; which

results in its death (Friedman and Resnick, 2009; Razali et al., 2014). In such instances, the cause of death may be that of exposure, dehydration, or starvation of the infant (Razali et al., 2014).

Following the act, attempts are usually made to hide the victim's body (Ciani and Fontanesi, 2012). According to McKee and Egan (2013), the behaviour of the mother after the act suggests that she may maintain a detached attitude to the infant and appear to live life as she had done before maternity. Furthermore, the women do not engage in suicidal acts after the killing of the newborn, as what may be observed in some of the other offspring killings (Ciani and Fontanesi, 2012).

What appears to be missing in the literature is an in-depth understanding of the mother's personal thoughts, meanings, and perceptions regarding the foetus and her pregnancy that underpin such actions. Although differences have been observed in the manner of the killing, whether it be direct or indirect, information is required regarding the women's experiences that relate to the variances observed in such actions.

Along similar lines of enquiry, one might question what the women's emotional experiences are, that underpin the pregnancy behaviours and act of neonaticide. Some studies deduce that the mothers may experience conflicting feelings of desire and rejection of the foetus throughout the course of their pregnancy (McKee and Egan, 2013; Vellut, Cook and Tursz, 2012). The study of McKee and Egan (2013) proposes that neonaticidal mothers can be divided into two categories; that of reluctant or detached. In the former, the mother may have wanted to keep the child, but because of her circumstances may believe that the option of being a "mother to the child was not available ... [to her]" (p. 757). Reluctance of parting with her infant is indicated in this study by "behaviours such as the time taken to dispose of the body, photos taken of the baby and revisiting the site where the baby was left" (p. 757). With reference to detached mothers, McKee and Egan (2013) indicate that such mothers had not bonded with their newborn and continued to act in a detached manner once the infant was born and were possibly more inclined to act violently in causing its death.

The aforementioned emotional experiences are deduced from observing the women's behaviours around committing the act of neonaticide. Although such research points to the importance of considering the women's emotional experiences and degree of closeness experienced to the foetus in conceptualising neonaticide, understanding such experiences

from the perspective of the women remains unexplored. It is evident, that research that would explore the women's emotional experiences as related directly by the women is needed.

In summary, it is implied that in aiming to understand the variant actions and behaviours taken throughout the course of pregnancy and the act of neonaticide, research is needed that would explore the women's thoughts, understandings, perceptions, experiences, and emotions directly from the women, themselves.

2.2.4 The question of 'why?': Considering reasons for the act

It is evident that most of the earlier work by Resnick (1969) and D'Orban (1979) have attempted to surmise the reasons 'why' some women kill their newborn babies. Other studies have followed suit in describing possible reasons for the act, ranging from concerns around mental health and psychological functioning to social circumstances and pressures.

2.2.4.1 Mental health and psychological functioning

The act of neonaticide often leaves people feeling confused and with a sense of abhorrence as their typically perceived taken-for-granted role of a woman as a child nurturer is contradicted (Manchester, 2003; Mendlowicz et al., 1998). It is, thus, common practice for society to deal with such uncertainty and horror by assuming or ascribing such behaviour to mental illness (Frigon, 1995; Manchester, 2003).

Within the South African context, women who commit the act are often referred by the court for a 30-day psychiatric evaluation in terms of the women's fitness to stand trial and criminal responsibility according to section 77, 78 and 79 of the Criminal Procedure Act 51 of 1977, as amended (CPA) (Republic of South Africa, 1977). Incidentally, the women are referred on a charge of murder. The evaluations are comprehensive and include members of the multidisciplinary team including psychiatrists, psychiatry registrars, clinical psychologists, social workers, occupational therapists and professional nurses to determine the women's ability to stand trial and accountability on the basis of mental illness. It is my experience that particular emphasis is placed on ruling out ante- and postnatal disorders, such as a psychotic or severe depressive disorder with a peripartum onset in referred cases of neonaticide. However, as indicated previously, in comparison to other forms of offspring killings, the presence of an acute and severe mental illness is considered less common in women who commit neonaticide (Marks, 2008; Nau, McNiel and Binder, 2012; Shelton et al., 2011). Had the women experienced a serious mental illness at the time of the commission of the offence,

they would have been considered incapable of appreciating the difference between right and wrong and/or being incapable of acting on such knowledge. However, in most cases, the women are diagnosed with a personality disorder, particularly that of a borderline or antisocial personality (Putkonen et al., 2007). Within the South African context, the presence of a personality disorder does not denote the absence of criminal liability according to the CPA and are, therefore, referred back to the courts to proceed with trial. Furthermore, in cases where depression is deemed the primary diagnosis, it is often not deemed significant enough to impact on criminal liability. In this regard, the case is considered a criminal case and not a mental health case. It is important to bear in mind that this does not necessarily denote optimal psychological and personality functioning on behalf of the accused.

In my experience, after a thorough diagnostic interview, clinicians in the psychiatric setting may attribute and explain the women's behaviour of committing the act to that of borderline or antisocial personality disorder in the absence of a severe mental illness. This is a common diagnosis and finding among neonaticidal populations in the literature (Putkonen et al., 2007). The Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM 5) defines a personality disorder as "an enduring pattern of inner experience and behaviour that deviates markedly from the expectations of the individual's culture" (American Psychiatric Association, 2013, p. 646). The "enduring pattern is inflexible and pervasive across a broad range of personal and social situations ... and leads to clinically significant distress or impairment in social, occupational, or other important areas of functioning" (ibid, p. 646). The DSM 5 (American Psychiatric Association, 2013) describes a borderline personality disorder as "a pattern of instability in interpersonal relationships, self-image, and affects, and marked impulsivity" (p. 645). While an antisocial personality disorder is defined as "a pattern of disregard for, and violation of, the rights of others" (ibid, p. 645).

Although such disciplinary diagnostic labels may deductively expedite understandings regarding the women's interactional style with their environment and with others, clinicians should be cautious to assume that the label explains the complexity of their emotional experiences as well as understandings and perceptions within the context of committing the act. Furthermore, the practice of applying such labels runs the risk of dismissing the exploration of the variances of experiences among individuals, as the already existing taken-for-granted universal disciplinary labels may create the perception of adequately explaining the women's behaviour in and of itself. Therefore, research is needed that would facilitate

conceptualisations beyond diagnostic labels to that of in-depth understandings regarding the women's experiences and the variant factors that may underpin such actions.

Related to the aforementioned argument, it should be considered that the clinical practices and diagnoses regarding the women's personality functioning are deduced from a top-down approach (clinician applying a label based on former knowledge), while failing to consider the women's sense of self and sense of identity from their own perspective (bottom-up approach). A significant gap in the literature exists around the women's sense of self, as based upon their own evaluation of their attributes, values and judgements. In a similar vein, literature is needed that would explore the women's perceived roles to be played in society and to reflect on their meanings around motherhood in this regard. A further gap exists around their sense of identity, meaning their perception of how they are viewed by others. It is questioned how the women's sense of self and perceived identity is constructed and negotiated throughout their pregnancy experience and how this pertains to the act of neonaticide specifically. Clinicians should, thus, be cautious to attribute the act of neonaticide to personality functioning without such in-depth understandings.

Other disciplinary labels that have been employed to describe the women's personality functioning and coping resources include that of immaturity, dependency, passivity and low self-esteem (Vellut, Cook and Tursz, 2012; Resnick, 1970). Furthermore, an absence of effective support, psychological isolation and poor communication with partners are typically indicated (Vellut, Cook and Tursz, 2012). Other studies have also reported the women's difficulty in coping with social stress and as experiencing frequent feelings of powerlessness (Friedman et al., 2005; Krischer et al., 2007; Spinelli, 2003). The literature suggests that women commit the act based on such personality characteristics and lack of adequate coping resources. However, it fails to provide in-depth understandings of how the characteristics manifest in the context of committing the act.

Again, it should be noted that not all women with such characteristics and coping resources go on to commit neonaticide. Research is needed that would consider the individual within their unique context. The aforementioned descriptions should, thus, be contextualised within their world views, from their own perspective, and within their cultural and historical milieu, as it manifests within the background of committing the act. Simply attributing blanket and static descriptions of personality functioning and coping resources is not sufficient to inform prevention efforts.

2.2.4.2 An unwanted child and social circumstances

Studies describing the reasons why women commit the act indicate that the pregnancy is often unintentional (Marks, 2008) and the most prominent reason for the act is that it is an unwanted pregnancy and child (D'Orban, 1979; Friedman and Resnick, 2009; Krischer et al., 2007; Resnick, 1970). Other studies attribute the reason for taking the life of the infant to an effort taken on behalf of the mother to avoid the social and parental pressures against illegitimate children (Ciani and Fontanesi, 2012; Friedman and Resnick, 2009; Manchester, 2003; Mendlowicz et al., 1998).

Lambie (2001), Bourget and Gagne (2002), as well as Haapasalo and Petaja (1999), emphasise that the social reasons for not wanting the child may be endless and that the motivations for the act may vary significantly from one individual to another. Thus, addressing the question of 'why' serves little clinical value in informing prevention and rehabilitation programmes. Rather, the question of 'how' women come to commit the act could provide insight into the conceptual and emotional processes that underpin the act and, thereby, offer better identifiable opportunities for intervention. The literature search conducted did not yield any study that explores any such potential processes that underpin how women come to commit neonaticide.

2.2.5 Conceptualised understandings and theorisation

Although clinical knowledge regarding neonaticide has continued to develop since the first landmark study by Resnick (1970) about four decades ago, a considerable lack of theoretical progress and development has been indicated (Malmquist, 2013; Mariano, Chan and Myers, 2014). The scientific gaps discussed in the aforementioned literature identify the need for research to conceptualise data pertaining to neonaticide. It reveals the need for more abstract renderings and explanatory generalisations of the relationship between the various concepts and characteristics identified in studies concerned with neonaticide. In this manner, the need to seek the 'bigger picture' is indicated. This section considers the availability of variant modes of theorisation around the phenomenon of neonaticide, with its associated limitations. It further directs the reader towards the identification of the research problem, aims and objectives. The theoretical modes discussed include: a) The use of generalised theories of offending behaviour; b) Conceptualising from the viewpoint of existing theory; c) Conceptualising from existing psychological frameworks; and, d) The use of grounded theory methods.

2.2.5.1 The use of generalised theories of offending behaviour

Islam, Banarjee and Khatun (2014) indicate that the theorising around criminality has predominantly been focusing on males and that theorising around female crime has significantly lagged behind. The authors highlight four of the major theories around female criminality accepted currently, including: a) Masculinisation theory; b) Opportunity theory; c) Marginalisation theory; and finally, d) Chivalry or paternalism theory.

Masculinisation theory suggests that women who are more masculine and, hence, empowered are more likely to be involved in more serious violent crime (ibid). As a consequence, women may be perceived to be more likely to engage in criminal behaviour which they perceive to signify masculinity (ibid). Alternatively, the authors state that opportunity theory suggests that women are more likely to engage in criminal activity once they are exposed to more opportunities that would allow their involvement in the act (ibid). Marginalisation theory, as indicated by Islam, Banarjee and Khatun (2014), presumes that women may be more likely to commit crimes based on reasons of economic insecurity as a result of being marginalised in the labour market. Finally, the authors denote that the chivalry theory suggests that rates of female criminality appear lower due to the more lenient sentencing and treatment of female offenders. It is evident that the aforementioned theories are overly broad, gender-biased and do not account for specific crimes or specific processes involved in the complex act of neonaticide. Consequently, they serve little value in informing practices of preventative interventions in cases of neonaticide. The limitations suggest that science should rather construct theories that are specific to the various complexities of specific offending behaviours, such as that of neonaticide.

2.2.5.2 Conceptualising from the viewpoint of existing theory

It would appear that some attempts have been made to draw from existing theory to explain possible reasons for the phenomenon of neonaticide. Ciani and Fontanesi (2012), as well as Friedman et al., (2005) apply the understanding of Daly and Wilson's (1988) evolutionary theoretical perspective of maternal offspring killings to that of neonaticide. Daly and Wilson (1988) suggest that mothers have evolved certain motivational patterns that drive them to take the life of their offspring. The mothers are perceived to be young with sufficient reproductive potential and that evolutionary forces, similar to that of other animal species, interrupt breeding during times of economic and social distress. Daly and Wilson (1988) suggest that the mothers take the life of their offspring in an attempt to resume investing in their own

survival. In such cases, the mothers act in this manner in order to improve future breeding chances under improved economic and social conditions.

Although the theory may provide a plausible account for why a young mother may not want to keep a child in unfavourable circumstances, it does not necessarily explain the choice of taking the life of the infant over more socially accepted means of withdrawing care from a child; such as that of abortion or adoption. It further seems to emphasise the animalistic and instinctual forces at play as accounting for the act, while ignoring the function that higher order cognitive abilities such as judgement and reason (separating humans from animals) would play in carrying out the act.

A further problem with this understanding and, more specifically, with employing existing theory to conceptualise phenomena, is that it offers little new theoretical insights, as neonaticidal behaviours (data) are forced to fit into an existing theory (Charmaz, 2014). In this way, knowledge produces more of what is known already and less of what remains to be discovered (Engdahl, 2016). The problem calls for research that would explore the matter first hand directly from the population concerned.

2.2.5.3 Conceptualising from existing psychological frameworks

Although some research may explore the phenomenon directly from the women who have committed the act, the findings are similarly limited, based on deductively exploring and conceptualising themes from the viewpoint of existing psychological theoretical frameworks. It is typical for psychotherapists to conceptualise new psychotherapy cases and also human behaviour research according to existing psychological theoretical frameworks. This may include, among many others, cognitive behavioural therapy approaches (CBT), psychodynamic approaches, object relations or attachment therapeutic approaches, system theory, or narrative therapy.

The South African study by Gous (2004) is one study that has explored the experience of a woman who committed the act of infanticide from an in-depth qualitative perspective in a single case study design. The study provides rich descriptions of a depressed woman's representations who took the life of her infant after a few months of its birth. Gous (2004) employed the use of Stern's (1995) attachment theoretical perspective of 'the motherhood constellation' as a backdrop to explore the case. This concerned an analysis of the woman's

representations of her mother as ‘mother-of-herself-as-child’; ‘herself-as-mother’; and her representations of her children (Gous, 2004).

Gous’ (2004) study reveals the negative perceptions the woman experienced about herself as a mother, about her own mother’s capacity for mothering towards her when she was a child and now adult. Gous (2004) further reveals the woman’s ill feelings towards the child whose life she took. The study denotes the negative impact depression had on the woman and her representations of herself, and suspects that this may be greater in cases where pregnancy is unplanned or unwanted (ibid). Gous (2004) deduces in her study that “if the woman’s representation of her mother as mother-of-herself is pathogenic, it might influence her representation of herself-as-mother negatively” (p. 179). Overall, the study emphasises the importance of considering the past history of mothers as it affects their mothering of a new baby (ibid). It also points to the importance of exploring the women’s perspective regarding the mothering role and foetus in filicide research.

Gous (2004) admits that “the conclusions that this study brings to the fore are not all new” (p. 178). She further states “the purpose of the study included putting this specific theoretical framework to the test to see if it is a useful way to understand the raw material” (ibid, p. 183). Again, this raises the concern that commencing with and applying existing theoretical frameworks to qualitative endeavours allows little new information to come to the fore. This emphasises the need to move further away from such deductive logic and more towards inductive and emergent approaches if new unexpected information on research topics may be sought (Charmaz, 2014). It calls for a theory to be ‘grounded’ in the data obtained and not manipulated in some way to serve as evidence for existing theory (Charmaz, 2014; Engdahl, 2016).

2.2.5.4 The use of grounded theory methods

It is evident that grounded theory methods (see Section 4.8.3) would be the most appropriate means to overcome the limitations of the aforementioned approaches to theorising. The reason for this is that it constructs and delivers middle-range theories (substantive theories) that afford abstract renderings and conceptualisations of in-depth data obtained directly from the population concerned (Charmaz, 2014). The literature search yielded only one study, namely that of Riley’s (2005), that has attempted to derive a theory on neonaticide through primary data obtained from a research endeavour involving participants in the enquiry.

Riley's (2005) study reveals "a constellation of behavioural and psychological responses common to each of the nine participants' experience of neonaticide ... beginning with the discovery of an unplanned pregnancy ... this was followed by fear, concealment of the pregnancy, emotional isolation, denial, dissociation, panic, and finally, the act of neonaticide" (p. 1). The author's conclusions reveal that women with variant life circumstances and ages are capable of neonaticide in response to limited coping resources, isolation and a conflicted pregnancy (ibid). It further indicates that the act is impulsive as opposed to a premeditated act of rage (ibid).

Riley's (2005) study raises concerns concerning the nature of the findings, the concluding assumptions, and application of the research method. According to Charmaz (2014), although many studies claim to have developed theory under the name of grounded theory, "... most of the studies are descriptive rather than theoretical" (p. 242). This appears to be the case with Riley's (2005) study, as emphasis seems to have been placed on describing the phenomenological experience of women who had committed neonaticide, instead of providing a plausible explanation of the actions and processes involved in the act. Charmaz (2014) denotes that approaches in grounded theory is different from other qualitative approaches in that research claiming to be grounded theory should analyse "actions and processes rather than themes and structures" (p. 15), and that the research "report should be an analytic product rather than a purely descriptive account" (p. 15). It is considered unfortunate that the descriptive account provided by Riley (2005) does not fully capture the complexity of the relationships among the identified characteristics.

It is considered likely that the seeming descriptive account provided by Riley (2005) is a consequence of the methods employed in the study. According to Weed (2009), there are at least three types of grounded theory methods in common use, including: Glassarian, Straussian and Constructivist. Riley (2005) failed to mention which approach was adhered to in the study. Although Riley (2005) incorporated *some* elements of grounded theory analysis, such as the use of in-depth interviews, the constant comparative method and some line-by-line coding procedures, Weed (2009) emphasises that grounded theory methodology is a "... complete package, not a 'pick and mix' box" (p. 504). Subsequently, it would appear that Riley (2005) provided descriptive themes such as 'fear', 'concealment', 'isolation', 'denial', 'dissociation', and 'panic' that seem connected but remained under-analysed in terms of actions and processes (Charmaz, 2014).

Up to this point the literature has been discussed with reference to the characteristics that pertain to ‘who’, ‘what’, and ‘why’ questions. The need to move towards more abstract conceptualisations and substantive theorisation has been indicated. However, the latter discussion reveals how science has failed, up to this point, to deliver such theory. The following section considers the common research approaches adopted in neonaticide research and motivates how alternative research approaches may address such specific gaps in the scientific domain.

2.2.6 Common research approaches

It is important to consider how the nature of the above findings and current knowledge around neonaticide is largely a function of the research methods employed. Most of the aforementioned studies have used a methodology of retrospective case analysis of judicial files and retrospective medical chart reviews, media reports or systematic literature reviews (Ciani and Fontanesi, 2012; Friedman and Resnick, 2009; Krischer et al., 2007; Lambie, 2001; Mendlowicz et al., 1998; Putkonen et al., 2007; Vellut, Cook and Tursz, 2012). As discussed above, in instances where attempts have been made to employ alternate methods, in the form of qualitative enquiry, inappropriate methodological implementation thereof has resulted in the persistence of such limitations. The nature of the research methods employed to date have resulted in two main gaps or areas of concern, namely, a) Static descriptions and lack of process information; and b) The lack of in-depth understandings.

2.2.6.1 Static descriptions and lack of process information

It is evident that the nature of retrospective case analysis research endeavours, with their apparent deductive check-list approach towards identifying offender characteristics, has resulted in the aforementioned literature remaining under-analysed in terms of revealing connections, relationships, and interactions among the variant characteristics. Furthermore, as highlighted above, the characteristics remain under-analysed in terms of their relationship with contextualised experiences, including the women’s world views, perspectives, and their cultural and historical milieus. It is understood that the consequence of the dominant research methods employed to this point has resulted in static descriptions around the phenomenon and, therefore, lacks process information.

Process information involves the consideration of variant unfolding temporal sequences and the linking of chronological sequences with starting and end points (Charmaz, 2006; 2014). Struss and Corbin (1998) mention that when researching process, one is not merely looking

for properties, but rather “... one is purposefully looking at action/interaction and noting movement sequence, and changes in context or conditions” (p. 167). In so doing, one is able to provide a ‘bigger picture’ of the phenomenon under investigation (Charmaz, 2006).

Process questions seem particularly relevant to neonaticide. The reason for this is because the phenomenon includes not only the actual act of taking the life of one’s offspring, but also the approximate nine months of pregnancy leading up to the event. This is based on the notion that studies that describe the common characteristics shared by women who commit the act reveal not only similarities in actions taken on behalf of the mother on the day of the offence, but also similarities in actions during the nine month of pregnancy as discussed above.

The nine months of pregnancy initially introduces a critical incident of finding out about the pregnancy followed by physical changes and sensations to the woman’s body, which confronts the mother with the knowledge of the impending birth of a child (Lundquist, 2008). The unique pregnancy experience over time can, therefore, not be ignored, as passing time is certain to suggest movement and change, and so further reaffirms the importance of considering process when seeking to understand the phenomenon (Charmaz, 2008b).

The aforementioned literature analysis reveals the need to move away from ‘why’ questions, regarding the women’s reasons for committing the act, and to rather embrace questions on ‘how’ women come to commit the act. ‘How’ questions are specifically concerned with the unfolding temporal sequences (process) and patterns of behaviour (actions). Changing the manner in which researchers seek to understand the phenomenon is, therefore, seen to yield complex processual interrelated knowledge of the women’s experiences. Of benefit, such knowledge is able to better provide information on areas of possible intervention in future prevention programming.

The above literature analysis pointed to variant broad avenues and gaps to investigate in terms of process. The broad identified avenues were incorporated as sensitising constructs in the study, which were seen to guide exploration but not to dictate or predict it; nor to limit exploration of unexpected avenues (Charmaz, 2014). The processes can be grouped under two categories, namely conceptual processes and emotional processes and are summarised under the aims and objectives section of this chapter (see Section 2.3.2). The categories are constructed in this section mainly for clarification purposes of the research objectives. Although they are categorised, the processual focus of this study considers the

interrelatedness between the conceptual and emotional processes as well as actions (patterns of behaviour) as it pertains to the experience of neonaticide.

2.2.6.2 The lack of in-depth understandings

Further methodological limitations pertaining to the dominant research approach to neonaticide is indicated. The preliminary literature review indicates that limited studies approach the phenomenon from an in-depth exploratory perspective and do not involve the direct investigation with the population being studied. Consequently, the field lacks thick descriptions and in-depth understandings of the perceptions, meanings and experiences of women who commit the act, as described by the women themselves.

It is evident that an alternative approach to researching the phenomenon is required if science were to provide both new insights (this time inductively obtained from the perspective of the viewed) and more comprehensive understandings of the complex phenomenon. Without such knowledge, the goal of preventative interventions remains largely unobtainable.

2.2.7 Towards a novel approach to researching neonaticide

If science were to deliver knowledge on the subject of neonaticide that would adequately inform preventative and rehabilitative interventions, a novel approach towards researching the phenomenon is required. The current study assumes such a novel approach as it aims to construct a substantive theory on the underlying processes and actions that underpin the phenomenon on neonaticide. Different to previous deductive methodological approaches, this study is inductively oriented. It is considered to be emergent as in-depth information is obtained directly from the viewed. It further considers the individual within their unique context, and the negotiations within their context that shape their thoughts, understandings, perspectives, and feelings. The processual knowledge obtained in this regard is considered valuable in aiding in the development of future interventions.

2.3 Research Question, Purpose, Aims, and Objectives

The above analysis and critique of the literature has guided the development of the research question, study purpose, aims, and objectives as discussed in this section. The information is summarised in Figure 2.1 and Figure 2.2 for purposes of convenience.

2.3.1 Research question

The study questioned: “What are the underlying conceptual and emotional processes as well as actions that underpin the act of neonaticide?” The purpose of the study was to construct a theory on how women come to commit neonaticide, based on the constructivist grounded theory (CGT) approach.

2.3.2 Aims and objectives

The principal aim of the study was to construct a theory on how women from criminal populations come to commit neonaticide, by offering an abstract understanding of the conceptual and emotional processes (unfolding temporal sequences) as well as actions (patterns of behaviour) that underpin the phenomenon.

It is important to bear in mind that a CGT is a product of its process (Charmaz, 2014) and that the study aims and objectives, as initially decided, inherently changes and emerges with the research process (Bryant, 2018). In this regard, the initial aims and objectives are regarded as initial, broad, sensitising domains to explore (Charmaz, 2014). Flowing from this, new questions emerge in the data, with associated aims and objectives also becoming more clear (Charmaz, 2016). This section will firstly reveal the initial aims and objectives of the study and then present the aims and objectives that emerged and were refined by the research process. Section 6.2.1 explains the serendipitous encounters throughout the research process and how the refined aims and objectives were subsequently attained.

2.3.2.1 Initial aims and objectives

Within this study, the theory was constructed by interpreting the accounts given by the women of their experience of the neonaticidal pregnancy. Initially, it was thought that the study would organise data from the moment the women gained awareness of their pregnancy, throughout the variant phases (trimesters) of the gestational period, the act of neonaticide, and finally, their understanding, meaning, and actions after the act.

In order to achieve the aims of the study, the initial objectives of the study were:

1. To describe the conceptual (thoughts) processes that underpin the act by:
 - a. Describing the participants’ constructed meanings and understandings in response to the physical experience of pregnancy throughout the various phases of the gestational period;
 - b. Describing how the women defined the pregnancy situation;

- c. Describing how the women understood their roles to be played in society;
 - d. Describing how the women negotiated their sense of 'self' (how the women view themselves based on their attributes, values and judgements) before and during the pregnancy experience and after the act of neonaticide;
 - e. Describing how the women negotiated their sense of 'identity' (how the women perceive they are regarded by others) before and during the pregnancy experience and after the act of neonaticide; and
 - f. Describing how the women perceived their foetus.
2. To describe the emotional (feelings) processes that underpin the act by:
 - a. Describing the emotional experiences during the various phases (trimesters) of the pregnancy; and
 - b. Describing the degree of closeness of the mother felt in relation to the developing foetus during her pregnancy.
3. To describe the variant actions taken on behalf of the women by:
 - a. Describing the patterns of behaviour that emerged throughout her pregnancy, the act of neonaticide and shortly after the act.

Figure 2.1 is a visual representation of the study question with its initial associated aims and objectives. It summarises the broad domains that were of initial concern in the study.

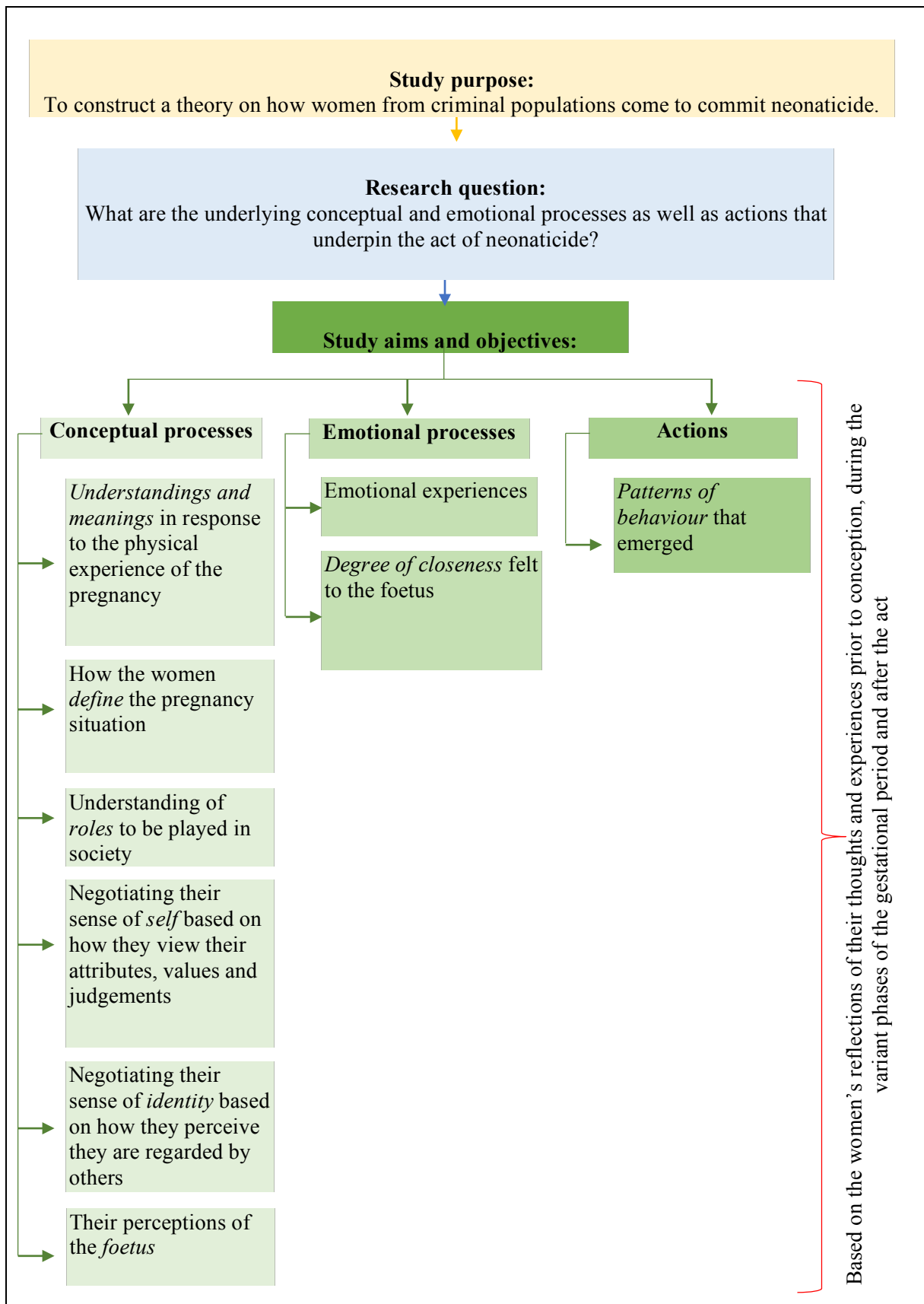


Figure 2.1 Visual representation of the initial study aims and objectives

Mentioning the initial aims and objectives are important as it was only via the exploration of the initial broad sensitising domains that the research question, aims and objectives were further refined.

2.3.2.2 Refined aims and objectives

The research presented a unique opportunity to interpret the women's accounts provided on their neonaticidal pregnancies (NP), as well as two or more non-neonaticidal pregnancies (N-NP) experienced by each woman. The research, therefore, sought to understand the women's experiences according to the pregnancies where the women had taken the life of the newborn, and pregnancies that had not resulted in the act, respectively. The study sought to reveal the underpinning pathways towards a NP by comparing it to the underpinning processes of a N-NP among the population concerned. The underpinning pathways were sought to reveal the different processes to which the women come to act to the different pregnancies conceptually, emotionally, and behaviourally. Ultimately, this was thought to address the research purpose concerned with how women from criminal populations come to commit neonaticide. Accordingly, the research question more specifically enquired how the women come to think, emotionally experience, and behaviourally act towards pregnancy and mothering content in accordance to their N-NPs and NPs.

Instead of focusing and organising data according to the pregnancy phases (trimesters), it was sought to explore the women's experience in accordance to a timeline of events, as emphasised by the women. It was, thus, thought to reveal the underpinning pathways according to the pregnancy events of a) pre-pregnancy; b) receiving pregnancy news; c) sharing pregnancy news; d) physical pregnancy; and finally, e) labour, birth and afterwards.

In order to address the emergent aim of the study, namely, to reveal the processes involved in how the women come to conceptually, emotionally and behaviourally act towards their NP and N-NPs, the refined objectives were:

1. To describe how the women approach pregnancy and mothering-related content or experiences by:
 - a. Describing the nature of the women's gestating;
2. To describe who the women are and how they engage in role playing as mother by:
 - a. Describing how the women come to think, feel and act towards mothering-related content;
3. To describe how the women interact with and engage with their environment by:

- a. Describing the women's assumptions at play that influence interaction with others;
 - b. Describing the women's communication strategies at play that influence interaction with others; and
 - c. Describing interpersonal responses that influence interaction with others;
4. To describe the consequences of the women's interactions by:
 - a. Describing different levels of support that may be experienced;
5. To describe the variant behavioural outcomes that may occur in the context of the women's interaction with their environment by:
 - a. Describing the extent to which women may engage in thoughts, feelings and behavioural actions towards pregnancy-related tasks.
6. To describe what the forces or types of actions at play are through which the above outcomes are attained or maintained by:
 - a. Describing specific thoughts, feelings and actions experienced towards pregnancy content, as well as the nature of it.

Figure 2.2 is a visual representation of the study question with its refined associated aims and objectives.

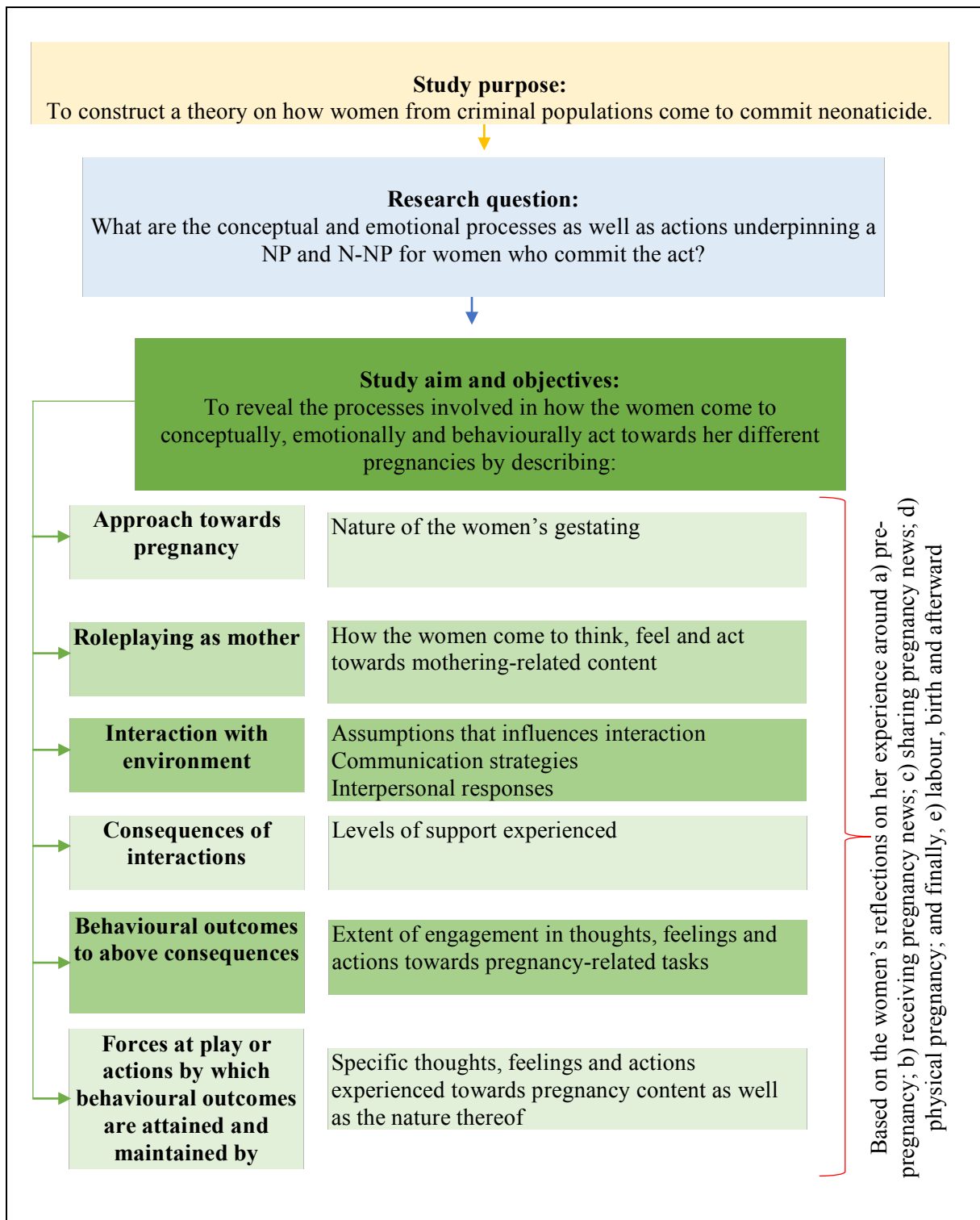


Figure 2.2 Visual representation of the refined study aims and objectives

The substantive theory constructed and presented in the latter sections of this thesis describes the aforementioned objectives within the conceptualised abstract renderings of the data and is presented in an interrelated manner with processual and contextualised information.

2.4 Chapter Conclusion

In summary, it is noted, that if science were to deliver knowledge that would serve meaningful to the establishment of rehabilitation and prevention efforts, it would need to produce processual in-depth emergent and substantive abstract theoretical understandings obtained directly from the viewed. This ought to be done specifically with reference to the interactional conceptual and emotional processes as well as actions that underpin the act. Moreover, it is also necessary to build on the previous studies highlighted in the sections above that provide the broader contextual and methodological insights into investigating neonaticide. Only then would the ‘bigger picture’ be understood regarding the phenomenon, and so would better identifiable opportunities for the construction of relevant intervention efforts be clearer.

While this chapter revealed the variant gaps identified within the literature as well as the motivations with respect to addressing such gaps, the following chapter discusses the guiding perspectives, namely that of symbolic interactionism (SI), that shaped the aforementioned research topic and conceptual focus.

CHAPTER THREE: GUIDING PERSPECTIVES TO THE STUDY

3.1 Chapter Introduction

One can in no way deny that the gaps identified in the previous chapter's preliminary literature review, the questions that arose throughout it, and my perceptions regarding the study's contribution towards science was informed by my own theoretical perspective to exploring and understanding human behaviour. I do not claim, nor believe, that it is possible to enter the field 'tabula rasa', in other words, a blank slate, when seeking to study human behaviour (Mills, Bonner and Francis, 2006). I further acknowledge that my background assumptions and disciplinary perspectives have alerted me to certain possibilities and have shaped my research topic and conceptual emphasis in a unique manner, even throughout data collection and analysis (Charmaz, 2014; Kincheloe, 2001). While the next chapter motivates acknowledgement of my own subjectivity on the basis of my underpinning philosophical views as a behavioural science researcher, this chapter describes my theoretical perspective to the study and plight to understanding human action in criminal cases of maternal neonaticide.

This chapter introduces the sensitising constructs borrowed from the symbolic interactionist (SI) perspective that gently pointed to potential areas of exploration in the current study. A sensitising construct is defined as a broad term without absolute qualities that sparks the researcher's thinking about the phenomenon of study (Charmaz, 2014). It offers a loose frame for the study's interests and provide tentative questions to raise about the topic (Blumer, 1969; Charmaz, 2014).

The chapter begins with the rationale for the selected theoretical perspective to the study. The reader is then introduced to the recent historical background of SI. Thereafter, the focus turns to Blumer's (1969) understandings around SI followed by a thorough description of his ideas and its role and relevance in gently guiding the current study.

3.2 Rationale for Selecting the Theoretical Perspective

In both my roles as a clinical psychologist and behavioural science researcher, I have seen the value in adapting an open-ended theoretical perspective that is able to guide exploration into complex phenomena. The scarce qualitative research available on the phenomenon and the complexity of human behaviour in general, and neonaticide in particular, raised concerns about the possibility of wondering aimlessly around the many possibilities surrounding the phenomenon. Conversely though, I was equally concerned about forcing data to evidence

existing theory. As such, I was seeking a theoretical perspective that would be broad enough as to not limit the construction of new previously unexplored knowledge but that would also provide explorative avenues that are specifically helpful in understanding the human condition and human action (Blumer, 1969).

Throughout the constructive processes of the substantive theory presented in this thesis, I elected to rely on a SI orientation on the basis of the open-ended exploratory powers it offers (Charmaz, 2014). The label ‘symbolic interactionism’ is considered a distinctive perspective and approach to the study of human conduct (Blumer, 1969). The perspective is not a theory about the nature of social reality, but rather a framework for questioning and understanding it (Charmaz, 2014; Cho and Lee, 2014; Stryker, 2002). Hence, it did not denote what I would find, but pointed to key areas of where to commence exploration. Furthermore, the framework was also relied on, but not limited to or constrained by it, during the phase of data analysis (Charmaz, 2016). The purpose in this regard was to raise theoretical questions about the data (ibid).

In the context of its open-ended exploratory approach, the SI approach is considered a well-suited framework to constructivist grounded theory (CGT) studies (Charmaz, 2014). It has been applied to a significant number of sociological, psychological, psychiatric, and criminological studies on criminal behaviour. Among others, are the work of Hochstetler, Copes and Williams’ (2010) perspective on violent acts and the rejection of authentically violent selves; Thornberg and Jungert’s (2013) study on school bullying; Berring, Pedersen and Buus’ (2016) findings on coping with mental health care violence; Aydin, Cicek, Artunay and Certel’s (2016) work on violence and alienation; and Khromina’s (2007) approach to juvenile violence and delinquency.

As is evident from the previous chapter’s critical review of the literature and research question, I relied on SI sensitising constructs, such as participant understandings, meanings, definitions, perceptions, roles, sense of self, negotiation of identity, emotions, and actions. This also included a strong processual focus on how such conceptions were arrived at from within their specific referenced contexts and interpersonal relations.

3.3 A Recent Historical Overview of Symbolic Interactionism

The greatest influence on symbolic interactionist thought is the contribution of the philosopher and psychologist, George Herbert Mead (1934), with his perspective about the

relationship between self and society, and the analysis of social interaction (Blumer, 1969; Stryker, 2002). Mead (1934) introduced the idea of human interaction taking two forms, namely the use of gestures and the use of symbols, identified as non-symbolic interaction and symbolic interaction respectively. Non-symbolic interaction refers to the response to the actions of another individual without interpreting the action, whereas symbolic interaction concerns the interpretation of such action and where such action is defined and given meaning (Mead, 1934; 1967). At a more concrete level, Blumer (1969) provides an example of this by stating that non-symbolic interaction involves automatic, reflexive responses, such as a boxer who raises his arm in order to parry a blow. In this instance, the individual does not interpret the gestures of another individual or ‘thing’ (see Section 3.4.2). Conversely, symbolic interaction involves ascribing meaning to and the process of interpretation of gestures or ‘things’, such as determining what the blow might signify to the opponent (ibid). In this instance, the ‘act’, ‘thing’, or ‘object’ is seen to symbolise something, as it has meaning to the individual. Although individuals engage in non-symbolic interaction frequently, Mead’s (1934) conception was that individuals characteristically engage on the symbolic level as they try to understand each other and respond to one another and also themselves on the basis of such interpretations.

Mead’s ideas are regarded as largely implicit and were later explained and popularised in the fields of psychology, sociology, and criminology by sociologist Herbert Blumer (1969) (Aldrid and Vega, 2010). Blumer (1969) is also known for coining the term SI. This chapter focuses mainly on Blumer’s (1969) interpretations of SI as it is his thought that led to the initial sensitising constructs adapted within the current study.

3.4 Blumer’s Basic Tenets of Symbolic Interactionism

This section will more clearly delineate the basic tenets of SI as described by Blumer (1969). Following a brief summary of the fundamental organising principles, variant elements pertaining to the principles will be explained and described in accordance to their contribution to the selected sensitising constructs.

3.4.1 The fundamental organising principles

According to Stryker (2002), “there is no symbolic interactionist orthodoxy” (p. 211) and each individual drawing from the frame may develop their own vision (Blumer, 1969). However, those navigating from the frame agree on some basic tenets and fundamental organising principles (Stryker, 2002).

Blumer (1969) denotes that symbolic interactionism rests on three premises:

- 1) Human beings act towards things on the basis of the meanings that things have for them;
- 2) The meanings of such things are derived from, or arise out of, the social interaction that one has with one's fellows; and
- 3) These meanings are handled in, and modified through, an interpretive process used by the person in dealing with the things he encounters.

(p. 03).

The abovementioned premises bring to light the nature of symbolic interactionism. It is an approach that is concerned with individuals as they engage in living and, thereby, provides opportunities to better understand human conditions, conduct, and actions (Blumer, 1969). Each one of the principles can be explored according to its intricacies in contributing towards approaches in understanding such human conduct. This is the focus of the sections that follow.

3.4.2 Acting towards 'things'

Symbolic interactionism is theoretically concerned with the acting individual and asking questions such as, 'what people do and how they come to do it' (Klunklin and Greenwood, 2006). As indicated above, individuals are seen to act towards 'things', where 'things' refer to "... everything that the human being may note in his [or her] world – physical objects, such as trees or chairs; other human beings, such as a mother or store clerk; categories of human beings, such as friends or enemies; institutions, as a school or government; guiding ideals, such as individual independence or honesty; activities of others, such as their commands or requests; and such situations as an individual encounters in his daily life" (Blumer, 1969; p. 02). Blumer (1969) also refer to such 'things' as 'objects' and similarly defines objects as "... anything that can be indicated, anything that is pointed to or referred to" (ibid, p. 10). He identifies three categories of objects, including: a) physical objects, such as a chair or tree; b) social objects, including, for example, a mother or friend; and c) abstract objects, such as moral principles or philosophical doctrines (ibid). Symbolic interactionists believe that, in order to understand the action of people, it is necessary to identify their "... world of objects" (ibid, p. 11).

In addition to the act of neonaticide itself, this particular perspective on action towards 'things' or 'objects' is considered to have the potential to open the door to a much wider conceptualisation of the act of neonaticide. The question from the previous chapter

concerning what actions the women take and what pattern of behaviours emerge during the course of their pregnancy, is broadly enquiring what ‘things’ the women are acting towards and what ‘things’ the women are noting.

The possibility of such knowledge can only really emerge through in-depth interaction with individuals who have committed such an act. However, my curiosity at the outset of the study raised questions about the ‘things’ the women might, if at all, note in response to the physical knowledge of being pregnant; physical changes to their body; the presence of a foetus growing inside of them, other significant individuals who may have invested interest in the pregnancy and the foetus; health and antenatal care establishments; ideals such as protecting the young; and finally, expectations of others, such as what society may be expecting from a woman who is pregnant.

Moreover, according to the symbolic interactionist frame, there is more to understanding human action than just merely observing the act and noting what ‘thing’ one is acting towards. In trying to understand human action, the perspective is concerned with that which underlies the action. Essentially, the perspective considers human action as more than just a consequence or product of external forces acting upon the individual (see Section 4.3.4 on deterministic thought) (Blumer, 1969). Instead, the role of an agentic actor capable of interpreting their situation and, subsequently, exerting influence over it, is emphasised as that which underlies action (ibid). Evidently, it is this very perspective that departs symbolic interactionism from functionalism, as the individual is regarded as determining instead of being determined (Klunklin and Greenwood, 2006).

3.4.3 Individuals as agentic actors capable of interpretation

In trying to understand what people do and how they come to do it, symbolic interactionism places emphasis on how an individual interprets their situation (including the ‘things’ that they may take note of) and how this ultimately impacts on their choice regarding which action or behaviour to take (see Section 4.3.1 on voluntarism) (Blumer, 1969; Charmaz, 2014). In this sense, action depends on the individual’s meaning, understanding, and definition of a situation (or ‘thing’ they may note) (Blumer, 1969).

Blumer (1969) refers to noting objects and ascribing meaning to them as making indications to objects. Ultimately, the act that is constructed depends on what the individual indicates to themselves (ibid). Blumer (1969) mentions that, among many others, this may include “...

matters as his wants, his feelings, his goals, the actions of others, the expectations and demands of others, the rules of his group, his situation, his conceptions of himself, his recollections, and images of prospective lines of conduct” (p. 65). It should be mentioned, that although the indication of ‘feelings’ are referenced by Blumer (1969) within this statement, the symbolic interactionist frame does not appear to place significant emphasis on emotional experiences. However, this is nevertheless emphasised within the current study, most likely as a result of my disciplinary approach of being a clinical psychologist working in forensic psychiatry.

It is clearly evident that symbolic interactionists place an immense value on the meanings that people have of the ‘things’ towards which they act (Stryker, 2002). This approach to understanding human conduct deviates from other popular approaches in social science, criminology, psychology and psychiatry which seek to identify various factors that ‘play upon’ human beings and are then regarded as factors that produce the behaviour (Blumer, 1969). Blumer (1969) argues that “to ignore the meaning of the things towards which people act is seen as falsifying the behaviour under study” (p. 03). He continues by saying that, “to bypass the meaning in favour of factors alleged to produce the behaviour is seen as a grievous neglect of the role of meaning in the formation of behaviour” (ibid, p. 03). For this reason, I presented the argument in the previous chapter to move beyond the mere retrospective analysis of case files. I, therefore, emphasise the importance of obtaining in-depth emergent data concerned with meanings obtained directly from the population concerned.

Symbolic interactionists’ notion that humans act towards things on the basis of the meaning they have for such things have been explained up to this point. However, it is the second premise that is unique to SI, which deals with the origins and source of such meanings (Blumer, 1969).

3.4.4 The origin of meaning

Symbolic interactionists place an emphasis on locating meaning and viewing meaning as arising through the social processes of interacting between individuals (Blumer, 1969). According to Blumer (1969), “the meaning of a thing for a person grows out of the ways in which other persons act towards the person with regard to the thing” (p. 04). The meanings are regarded as constructions that are formed “... in and through the defining activities of people as they interact” (ibid, p. 05). To clarify, individuals define things for each other and transmit meanings through language to one another (Stryker, 2002). It is seen that the social

interactive processes are more than a mere setting for the expression of human conduct, but that it is a process that forms actions (Blumer, 1969). He elaborates that, as social beings, "... human beings, in interacting with one another, have to take account of what each other is doing or is about to do; they are forced to direct their own conduct or handle their situations in terms of what they take into account" (ibid, p. 08). Inevitably, this brings the individual's context to the fore as the hub for meaning making. In understanding human conduct, it is, thus, considered important to regard individuals within context and their perceptions regarding others in relation to their situation.

The second premises mainly speak to the origin of meaning, but it is the next premises that communicates the 'how' of the meaning making and the 'use' of such meanings.

3.4.5 The process of constructing meaning

Symbolic interactionism accepts the fluidity of meaning making (Charmaz, 2014). The meaning that is arrived at is not conceived of as a once-off occurrence but is rather viewed as something that is negotiated, handled and changed through the interactive process over time (Blumer, 1969). The reader is reminded that process refers to the linking of chronological sequences that have seeming starting and end points, and it exhibits action and interaction, movement and sequences, all depending on context and conditions (Charmaz, 2006; Strauss and Corbin, 1998).

Moreover, the use of meanings by the individual occurs through a process of interpretation (Blumer, 1969). According to Blumer (1969), this process involves two steps. The first step concerns the individual interacting with themselves (ibid). During such times, the person indicates to themselves the 'things' towards which they are acting and pointing such things out to themselves that have meaning (ibid). Ultimately, the individual is engaging in a process of communicating with themselves. Throughout this process, interpretation "... becomes a matter of handling meanings" (ibid), which constitutes the second step. Here, the individual "... selects, checks, suspends, regroupes, and transforms the meanings in the light of the situation in which they are placed and the direction of their action" (ibid, p. 05). It is through this formative process where meanings are revised and used for the "... guidance and formation of action" (ibid, p. 05). Blumer (1969) summarises "thus, the activities of others enter as positive factors in the formation of their own conduct; in the face of the actions of others one may abandon an intention or purpose, revise it, check or suspend it, intensify it, or replace it" (p.

08). In light of these factors, he recommends “one has to get inside of the defining process of the actor in order to understand his action” (ibid, p. 16).

It is also this processual focus that has informed the gaps within the literature and which has shaped my research questions to consider the nine months of pregnancy leading up to the event of neonaticide. It would be naive to assume that the meanings behind the eventual act of neonaticide is a once-off occurrence when the very nature of constructing meaning involves negotiation processes. Understanding *how* the meanings were arrived at are just as important as understanding the meaning in and of itself, as it is perceived that such understandings can inform the development of preventative measures.

Moreover, the symbolic interactionist frame’s emphasis on the meanings people arrived at, and the processes of its negotiations, appeared particularly relevant to me when studying a phenomenon such as neonaticide. The reason for this is that the act appears in opposition to what society may indicate or define for women regarding ‘acceptable pregnancy behaviours’. According to Gerber (2000), a pregnant woman’s meanings and understanding of her pregnancy and the foetus often depend on the dominant societal discourses around the matter. “The dominant belief systems surrounding pregnancy contribute to the creation of a master narrative about pregnancy” (Freed, 1999, p. 262). According to Freed (1999), there is a dominant rhetoric about pregnancy, one where motherhood is considered the “... coveted goals of womanhood, and that they provide women with a deep and natural sense of fulfilment” (p. 261). Thus, it seemed important to explore the women’s interactions with such possible indications.

Returning to the thoughts on the abovementioned human capacity to make indications to others and to interpret the indications of others, one might question how humans do so. According to Mead (1934), this is only possible through the possession of a self. Self then, is seen as a central mechanism through which individuals deal with their world (ibid).

3.4.6 Possessing a ‘self’

Having a self allows individuals to interact with themselves and to make indications to themselves (Blumer, 1969). Symbolic interactionism considers humans as capable of being an object of their own action (Stryker, 2002). According to Blumer (1969), the individual may act towards themselves in countless ways; they may “... get angry with himself [or herself], rebuffs himself [or herself], takes pride in himself [or herself], argues with himself [or herself], tries to bolster

his [or her] own courage, tells himself [or herself] that he [or she] should ‘do this’ or not ‘do that’, sets goals for himself [or herself], makes compromises ...” (P. 79). Furthermore, Blumer (1969) states that individuals can recognise themselves, for example, as being male or female, with a specific profession, with a specific social standing. He indicates “in all such instances he is an object to himself; and he acts towards himself and guides himself in his actions towards others on the basis of the kind of object he is to himself” (p. 12).

The self-object also emerges from processes of social interaction. According to Blumer (1969), one would form objects of oneself through a process of role-taking. In fact, Turner (1962) describes behaviour as the product of role-making. Conventionally, roles may be defined as shared behavioural expectations (Stryker, 2002). Henceforth, one would see oneself through the manner in which others subsequently regard or define oneself according to those roles (Blumer, 1969). This means that others define a person to themselves and in order to become an object to oneself, one has to view oneself from the outside (ibid).

In this manner, symbolic interactionism helps one understand human behaviour, as individuals are seen to guide action towards ‘things’ based on how they regard themselves. Also, interaction with other individuals may either validate or challenge self-definitions and may be seen as “... venues of conflict among competing definitions” (Stryker, 2002; Klunklin and Greenwood, 2006). The process mentioned above reveals *how* the individual engages in the social process of ‘viewing’ themselves and subsequently comes to act towards ‘things’. It is for this reason, that I have identified the need in the previous chapter to consider the women’s sense of self (how the women view themselves based on their attributes, values and judgements), the roles they wish to prescribe to and their sense of identity (how the women perceive they are regarded by others), as well as the processes involved in the negotiation of these factors throughout the course of their pregnancy (Charmaz, 2014).

With an understanding of the variant processes involved in formation of action, it is also important to consider the potential success of such processes.

3.4.7 Outcomes of the formative processes

Blumer (1969) indicates that the individual may not necessarily exercise excellence in their construction and that they may fail to note things of which they should be aware, misinterpret that which they note, and that they may present with problems in determining prospective

lines of conduct or fail to adequately consider recalcitrant perspectives. Nevertheless, what is important in understanding such constructed action is the formative processes that underpin it.

3.4.8 Summary of the formative processes of human action

The abovementioned processes explain certain avenues to explore in seeking to understand that which underlies human action. Figure 3.1 illustrates the variant formative processes involved that underlie human action, according to the symbolic interactionist perspective. Within the processes of forming human action, the individual notes certain objects (physical, social or abstract) within their environment and constructs meanings, understandings and perceptions (indications) of such objects. The meanings are constructed and negotiated through social interaction and are communicated through language and action. The meanings that are derived at depend on the individual's sense of self, identity, and roles that they may prescribe to. It is through these interpretive processes that the individual is able to construct a possible course of action.

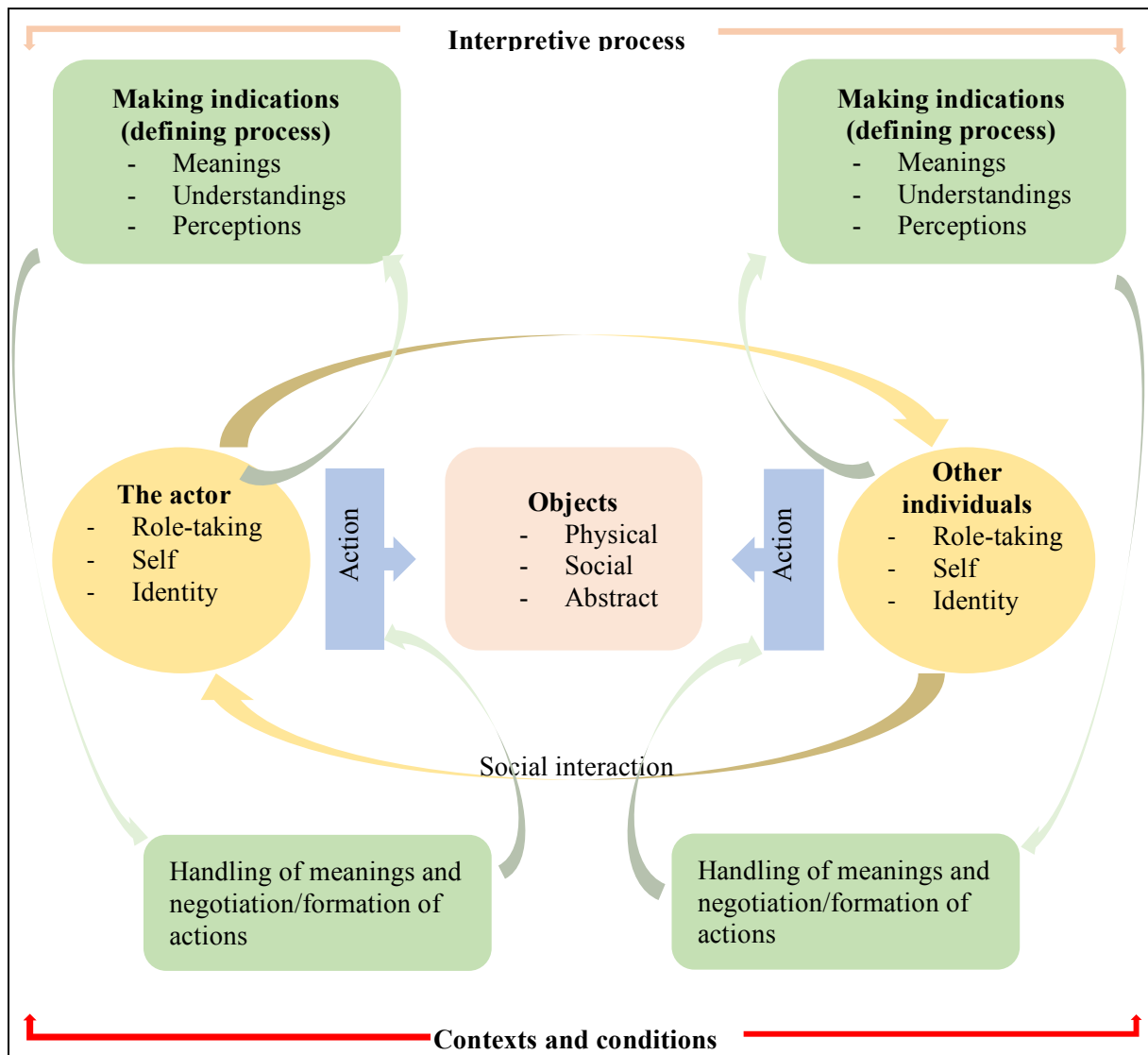


Figure 3.1 Visual representation of the formative processes of human action

3.5 Chapter Conclusion

This chapter introduces the guiding perspectives to the study, namely that of symbolic interactionism. The perspective is explained as a framework to understanding and questioning human action. The framework describes individuals as constantly engaging in an interpretive process through social interaction. This occurs as they are capable of defining and making indications and through possessing a self through which the individual may construct actions to deal with their world. Through an exploration of the basic tenets of symbolic interactionism, the roots of the selected sensitising constructs, as points of departure to the study, were explained. Participant understandings, meanings, definitions, perceptions, roles, sense of self, negotiation of identity, emotions, and actions and a strong processual focus on how such conceptions are arrived at, were, thus, adopted as sensitising constructs.

CHAPTER FOUR: RESEARCH DESIGN

4.1 Chapter Introduction

This chapter delineates the guiding philosophical assumptions and design strategies that underpin the study. The approach to the research question, the research question itself, as well as the aims and objectives of the study are situated within a specific era of science and paradigm, with its associated ontological and epistemological underpinnings. In turn, this informs the research design and methods employed to address the research question.

The chapter is divided into two parts. In Part I, the reader is introduced to the selected era of science and paradigm for the study as it is compared and contrasted with other paradigms and its associated epistemologies and ontologies. Through such comparisons, the selected philosophical assumptions selected are justified. Part II describes the design strategies employed for the study. The reader is first introduced to the appropriateness of a qualitative research design to the research question and the selected philosophical underpinnings of the study. Thereafter, the selected qualitative research tradition, namely that of grounded theory (GT), is discussed. In order to demonstrate the decision-making process regarding the type of grounded theory approach selected for the study, a brief history of the emergence of GT is provided. It is demonstrated that the development of GT has occurred alongside the variant paradigmatic shifts in science. Locating the appropriate tradition of GT within its historical and paradigmatic context eventually leads to the reader's understanding on the type of theory that was to be constructed via this study. Ultimately, the chapter provides a conceptual understanding for the following chapter, which explicates the research methods applied in the study.

PART I: PHILOSOPHICAL ASSUMPTIONS

4.2 Introduction

This section reveals the philosophical assumptions of the study. The appropriateness of the postmodern era, interpretive paradigm and social constructionist orientation, ontology of relativism and epistemology of subjectivism to the study is justified on the basis of its relevance to aspects pertaining to the research question. Each section unpacks the implicit features and nature of the research question to reveal the variant underlying philosophical assumptions at play. Finally, a discussion on the limitations associated with the selected paradigm is presented.

4.3 Era of Science and Research Paradigm

Before discussing the selected era of science and research paradigm, it is first necessary to understand the concept of paradigm and its influence in conducting research. It is also necessary to consider the array of paradigms considered when selecting the appropriate philosophical underpinnings to the study.

Several authors emphasise that it is important for researchers to declare their paradigmatic points of view within a specific era of science, as it is understood to inform their nature of enquiry along three dimensions of the research process, namely ontology, epistemology and methodology (Denzin and Lincoln, 2003; TerreBlanche, Durheim and Painter, 2006). The term paradigm, originating from the Greek word *paradeigma*, meaning pattern, was first employed by Thomas Kuhn (1962). The term refers to a conceptual framework, or system of thinking, accepted by a research culture; which encompasses specific interrelated values, assumptions, patterns and structures for observing, understanding, and solving research problems (Babbie, 2005; Kuhn, 1962).

One's paradigmatic stance may be situated alongside a continuum, ranging from three of the most common philosophical positions of positivism, postmodernism and critical postmodernism (Neuman, 2006). The former two approaches are considered to be the most widely used, while the latter is the least commonly seen in scholarly journals (ibid). Although critical realism shares many of the postmodern underpinnings accepted in the current study, it was excluded early on in the selection of philosophical underpinnings for the study. The reason for this is because the main emphasis of this framework of thinking is on researching value-based activism for human empowerment by demystifying ordinary events (Neuman, 2006). Although considered to be important, it was not necessarily affiliated with the main purposes of the current study.

The sections that follow contrast postmodernism with modernism and its associated practices in order to clarify the appropriateness of the selected philosophical underpinnings to the study.

Figure 4.1 summarises and contrasts the continuum of eras of science as well as paradigms with its associated ontology and epistemology. The content highlighted with colour resemble the philosophical underpinnings selected for the current study.

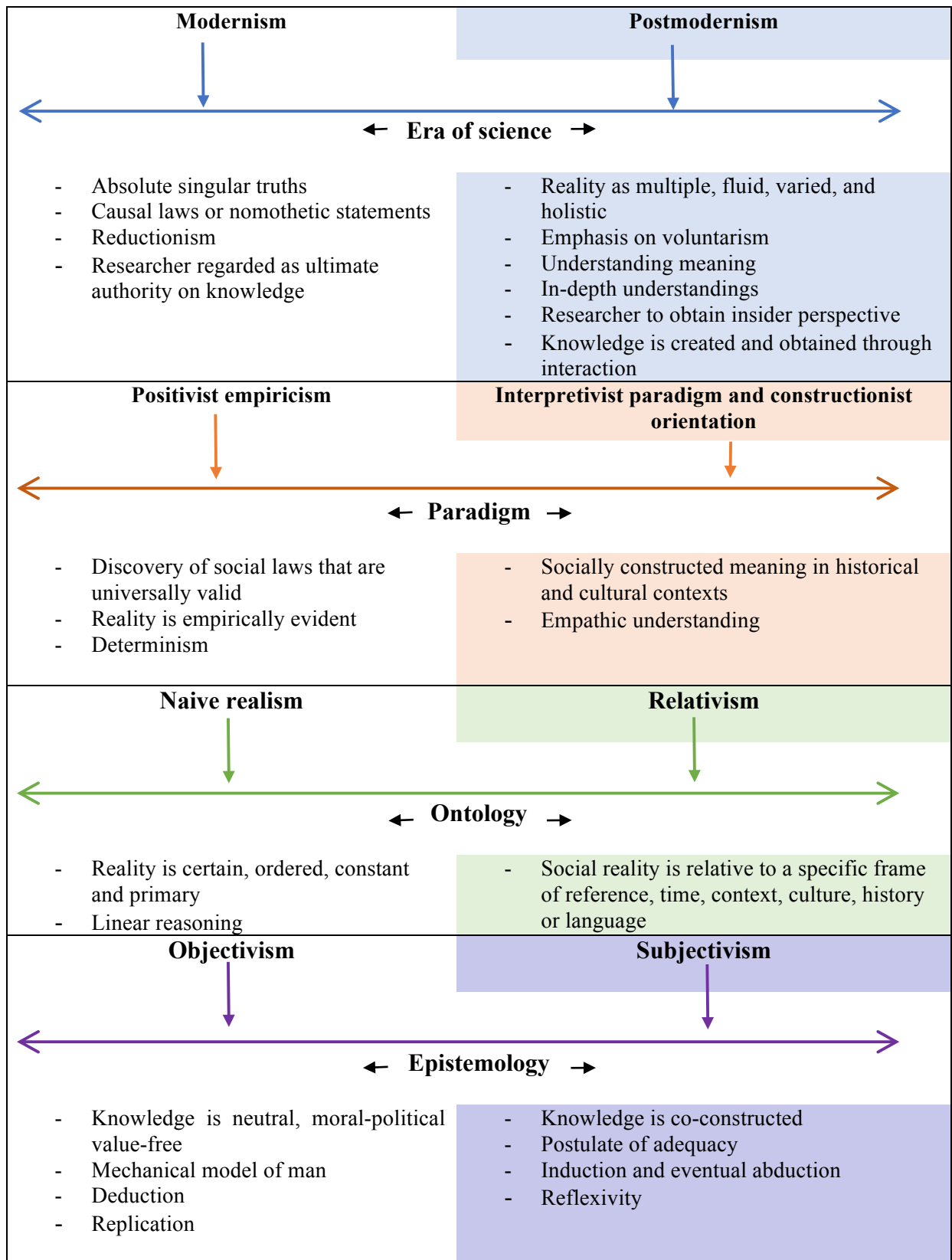


Figure 4.1 Summary of philosophical underpinnings

4.3.1 Postmodern era

My propositions about the world and, thus, the research undertaking and product, are rooted within the postmodern era. Postmodernism is seen to be appropriate to the variant aspects and approach to the research question including: a) A broad concern with human experience; b) Considering the women's constructed meanings; d) Acquiring in-depth understandings of the phenomenon; and finally, e) Obtaining understandings from the women's perspectives.

The research question is concerned with the conceptual and emotional processes, as well as actions that underpin the act of neonaticide. It is, thus, broadly concerned with human experience. Personally, I regard humans as qualitatively different from the objects of study within the more traditional natural sciences. The reason for this is that individuals have the capacity to reflect, have self-awareness, to learn, to have free choice, to have volition, and to possess motives for engaging in certain behaviours (Neuman, 2006). This is referred to as voluntarism (ibid). In this regard, it is understood that there cannot be a universal human experience (Denzin, 2001). Specifically, human experience may be influenced by a multiplicity of factors, such as personal histories and cultural and historical contexts. In accepting the premise that human experience is varied among people, it cannot be understood solely as one singular truth or causal law (Denzin and Lincoln, 2003; Neuman, 2006). The search for one singular truth that is considered 'accurate' and 'out there', waiting to be discovered, is situated within the modernist era, also referred to as neo-classical or enlightenment (Denzin, 2001; Neuman, 2006). Postmodernism is a response to such nomothetic (causal law-like statements) of modernism as it questions the premise of observing absolute singular truths when it comes to matters of human behaviour and experience. Instead, the belief of multiple realities is embraced (Denzin, 2001).

It is important to note that I not deny the existence of an external reality. However, I adopt Alfred Schultz' interpretive philosophy, or natural attitude, that the world exists before one arrives in it, and will continue to exist after one departs (Neuman, 2006). Nevertheless, individuals develop strategies to either maintain and/or reproduce a sense of reality based on the meanings one constructs for it (ibid). The concept of meaning in understanding human action is, thus, considered imperative in the current study.

The current study was specifically concerned with obtaining an understanding of the meanings of the women who had committed the act of neonaticide within their personal, cultural and historical contexts. This is rooted within Max Weber (German sociologist) and

Wilhelm Dilthey's (German philosopher) conception of science as *geisteswissenschaft* (Neuman, 2006). This approach to science emphasises the empathic understanding of individual and social action (ibid). Within such frameworks of science, the German term *verstehen*, referring to the understanding of the lived experience of individuals, is embraced (ibid).

Chapter Three's preliminary literature review criticises the current state of scientific knowledge on the phenomenon of neonaticide, claiming that current literature on neonaticide is reductionistic in nature. It is, thereby, argued that it fails to offer in-depth understandings of the experiences of women who commit the act. My aim was to move away from imposing a specific way of experiencing phenomena on others; generally, a criticism of modernism and positivist science (Neuman, 2006). This is seen to occur in instances when the researcher would identify variables of possible experiences beforehand and 'test' their accuracy among a population of individuals (deductive logic) (Proctor and Capaldi, 2006). In this sense, their reality would have been reduced to numbers, and the possibility of many alternative and varied experiences and interpretations would have been ignored or lost (Neuman, 2006). So, postmodernism is appropriate to the study as it seeks in-depth understandings of the many layers and possibilities of experiences.

Moving away from reducing experience to numbers and obtaining in-depth understandings of the women's meanings, ultimately suggests that the knowledge that was aimed at being obtained is that from the women's perspectives (Proctor and Capaldi, 2006). So, the women are considered experts on their own experience and the goal of the researcher is to obtain an 'insider perspective' (Silverman, 2013). This is in contrast with the modernist outlook, where the researcher is perceived as the ultimate authority on knowledge (Neuman, 2006). In order to obtain an insider perspective, it was understood that the research would require feedback and information from the individual regarding their insights (Silverman, 2013). It was, thus, evident that such knowledge would require engaging with the women personally and is affiliated with the postmodern belief that knowledge is created and obtained through human interaction (ibid).

At this point, it is evident that decisions were made to adhere to the postmodern era as its ideals about multiple realities and empathic in-depth understandings from the participant's perspective, via human interactions, were considered most appropriate to the research

question. The paradigm of science selected is the next area of focus and pertains to the latter point of how knowledge is created through human interaction.

4.3.2 Interpretivist paradigm and social constructionist orientation

The aims of the study enquired about variant meanings and understandings related to the women's pregnancy situation; their thoughts and understandings of their roles in society; their views about themselves based on their attributes; values and judgements; and their sense of identity based on their perceived sense of how they are regarded by others. It is evident that the questions aim to see the individual within their context and that a human interactional perspective is applied. It questions how participants arrive at these perceptions. Moreover, if the multiple realities of the women's experiences are to be obtained through research via human interaction, questions are raised as to the processes involved in obtaining such understandings. This brings one to the interpretivist paradigm and social constructionist orientation. It must be mentioned that interpretivism and constructivism are often combined (Creswell, 2013).

The interpretive paradigm, rooted within postmodernism, emphasises the role that social interaction play in the context of understanding human behaviour and action (Neuman, 2006). According to the interpretive paradigm, human behaviour, social life, and experience are considered largely what people perceive them to be, based on the meanings that people attribute them (ibid). It is understood that these meanings are socially created and constructed in an ongoing process of communication and negotiation through interacting with others (ibid).

Within the interpretive paradigm, reality is seen to emerge through interacting with others, while two important processes are at play – social construction and interpretation (Silverman, 2013; Neuman, 2006). The social constructionist orientation denotes that reality is socially constructed through language and social engagement (Proctor and Capaldi, 2006). Within such contexts, constructive processes such as typification, institutionalisation, legitimation, and reification are at play (ibid). Typification refers to the organisation of one's understanding and meaning according to prescribed types, class and gender. Institutionalisation, refers to institutions such as marriage and family, which communicate ideals of normative behaviour. The process of legitimation concerns the endorsement of views via religion, science or appointed expertise. Finally, reification refers to the process where

one forget about one's own authorship in the human world (taken-for-granted meanings) in the construction of one's perceived sense of reality.

The above constructive processes speak to the contextualisation of knowledge, and how reality should be conceived of within a given context (Proctor and Capaldi, 2006). It is also within these exchanges and contexts that meanings are created, negotiated, sustained, as well as modified (Andrews, 2012). However, the knowledge that is created within a given context is ultimately interpreted by the individual.

Interpretivism speaks to the internally experienced sense of reality of the individual as it is obtained through interaction, language, and finally, conceptualisation (Andrews, 2012). According to Byrant and Charmaz (2007a) "... to have a view at all means conceptualising it..." p. 51). Interpretivism is related to hermeneutics, which originated in the 19th century in religious and literary studies of textual material (Neuman, 2006). The aim of such studies was to understand the detailed in-depth meanings of the text by investigating and understanding its relation to a bigger 'whole' or context (ibid).

Essentially, within an interpretivist framework, reality is communicated through language between people in a given context, and the social constructive processes within that context shape and maintain the reality. However, ultimately, the reality is interpreted by the active agent, and their perception and conceptualisation of the meaning of reality depend on and are influenced by their own contexts and prior experiences (ibid).

Up to this point, the reader has been introduced to the postmodern era as well as the interpretivist paradigm and social constructionist orientation. With an understanding of the study's philosophical underpinnings and the appropriateness thereof to the research question, the focus can now turn to questions about the nature of reality (ontology) and how such knowledge can be obtained (epistemology).

4.3.3 Ontology

Ontology refers to questions of reality by enquiring, 'What is the structure and nature of reality?' (Weed, 2009), and defines "... what is real, and what is out there to know?" (Grix, 2010, p. 3). The study's ontology is clarified by contrasting it to alternative ontological stances. Its relevance is motivated by considering the nature of the type of research that was sought.

Ontologically, I deny the ideology of realism as advocated by positivism (Denzin, 2001). Realism denotes that social reality is not random but rather it is certain, ordered, constant and primary and that science discovers the order and laws of nature (Denzin, 2001; Neuman, 2006). However, it has been mentioned already that humans are complex and varied and that one cause will not necessarily have the same effect on everyone. This is evident in the preliminary literature review, which yields similar background characteristics among women who had committed the act, however, not all individuals with such experiences are known to commit neonaticide. As such, linear reasoning and deductive understandings in the current study was set aside in hopes of obtaining additional or varied truths and perspectives. Instead it was conceived that realities are multiple and exist in people's minds (Proctor and Capaldi, 2006).

The present study accepted an ontology of relativism. Relativism denotes that social reality is relative to some particular frame of reference, whether this be to a specific time frame, context, culture, history, or language, among others (Denzin, 2001). It is understood to situate interpretations within a given context (LaRossa, 2005). Such conceptions of reality account for the conceived variety and multiplicity of realities to be experienced by individuals as discussed earlier.

It is important to note that the relativism referred to should not be confused with scepticism, which may superficially appear to resemble relativism (Denzin, 2001). While relativism as well as scepticism doubt notions of absolute truth, scepticism advocates that there is 'no truth'. However, relativism, as adopted in this study, denotes that there are many equally valid relative truths and that specific truth holds value and relevance in its respective context (Neuman, 2006).

The relativist ontology of this study does not claim to reveal absolute truths about how women come to commit neonaticide, but it does offer one possible truth, among many. The truth is considered real and true to the context and circumstances in which the knowledge was constructed. With this in mind, it raises questions about how such knowledge can be known, and, therefore, brings one to the epistemology of the study as informed by such ontology (Grix, 2010; Weed, 2009).

4.3.4 Epistemology

Epistemology questions ‘How do I know what I know?’; and ‘How do I know that that which I know is correct?’ (Weed, 2009). The current study accepts an epistemology of subjectivism as it denotes that reality cannot exist independently from the mind of the knower (Denzin, 2001; Proctor and Capaldi, 2006). In addressing the latter question, aspects of reflexivity and reasoning practices are considered.

Ontologically, it has been argued that the present study is concerned with the multiple internally experienced realities of the women who participated in the study. The focus is, thus, on subjective experience. Earlier it was explained that such realities are obtained through two interrelated processes, namely that of social constructions and interpretation within a given context.

Just as individuals, in this case the participants, create a sense of reality via the abovementioned processes, so did I engage in similar processes when conducting research. This addresses the question of ‘How do I know what I know?’. The researcher is believed to collaboratively create meaning with participants (Hurd, 1998). The processes of constructing knowledge brings the researcher as an acting agent to the research scene (Byrant and Charmaz, 2007a). In this sense, the researcher’s circumstances, “positions, privileges, perspectives, and interactions ...” (Charmaz, 2014, p. 13), as well as disciplinary perspectives and conceptual emphasis, all contribute towards the interwoven dynamic co-construction of knowledge and are taken into account as an inherent part of the research (Henwood and Pidgeon, 2012; Hurd, 1998; LaRossa, 2005).

The epistemology of subjectivism contradicts with objectivism, which is prescribed in positivistic frameworks (Neuman, 2006). Positivism adopts the view of the ‘mechanical model of man’, which is deterministic in nature (ibid). It suggests that individuals act mainly due to external forces and procedures acting on man (Denzin, 2001; Neuman, 2006). With the emphasis being on external forces, knowledge is regarded as being produced independently from the knower (Neuman, 2006). Therefore, the positivist researcher adopts an objective stance, where the researcher acts like an invisible agent, who according to Durkheim’s ‘rules of sociological method’, strives to be neutral and moral-political value-free in their endeavours (Hurd, 1998; Neuman, 2006).

Not only does the interpretive paradigm suggest that research can never be value-free, in that the selection of a research topic already reveals personal preference and biases, it emphasises that objectivity is unattainable in studies such as the current one (Denzin, 2001; Proctor and Capaldi, 2006). This is deemed so on the basis that it emphasises individual meanings and understandings (Denzin, 2001; Proctor and Capaldi, 2006). In this regard, the subjectivist epistemology was deemed appropriate and essential to the current study.

A further important question addressed by the concept of epistemology is that of 'How do I know that that which I know is correct?' (Proctor and Capaldi, 2006; Weed, 2009). Searching for one singular truth in positivistic sciences advocates for the need for replication of studies to rule out logical contradictions (disconfirming evidence); as suggested by Karl Popper's falsification doctrine (Neuman, 2006). In cases where there are no contradictions, the findings are considered true. However, sciences that emphasise multiple realities and subjective understandings as a means to 'knowing', place a different value on how something should be regarded as 'scientific' or 'true' (ibid). So the principle of 'postulate of adequacy' is adopted. It suggests that explanations are sufficient when they convey a deep understanding of phenomena and allows one to enter the experienced reality of those who are being studied (ibid).

It is worth mentioning here that good evidence in interpretive research concerns acknowledging the impact of context on the construction of knowledge (ibid). An imperative feature in this regard is the researcher's subjective impact on the production of knowledge. This raises the point of reflexivity.

4.3.4.1 Subjectivity and the reflective process

Subjectivity in the research process is reflected through reflexivity and is considered prominent in interpretive research (Hurd, 1998). Hurd (1998) describes reflexivity as the act of making the co-constructed nature of research data and the context of interpretations made explicit. Specifically, reflexivity concerns the consideration of the researcher's role in the construction of the knowledge produced and involves their reflection back on the self, processes and representations throughout the research process (Denzin, 2001; Hurd, 1998). My reflective processes on what I brought to the research scene are presented throughout the thesis (Charmaz, 2014). Furthermore, a researcher's mental lens is also considered worthy of explicit discussion as it assists researchers in seeing relevant data (LaRossa, 2005). As discussed in the previous chapter, my mental lens is that of symbolic interactionism. The

process of reflexivity is believed to create broader understandings of phenomena (Hurd, 1998). As an instrument in interpretive research, it is considered necessary to enrich one's understanding of an individual's meanings but is not considered an absolute method or authority for understanding everything (ibid).

Up to this point, it is evident that, according to interpretivism, reality is obtained via subjective interactive processes of social construction and interpretation. In conducting research, the importance of reflexivity and acknowledging the researcher's role as co-constructor of knowledge was emphasised. However, the reasoning practices that underpin such processes remains to be answered. This concerns options in practices of reasoning, namely that of deduction, induction, or a combination of both, namely abduction.

4.3.4.2 Reasoning practices

The preliminary literature review expressed the need for an approach to researching the topic of neonaticide that would yield more in-depth abstract understandings regarding the conceptual and emotional processes that underpin the act. In this case, abstract understandings revealed the need for data that go beyond description about what is revealed but also to interpret, conceptualise, and make sense of the data in terms of its underlying processes. It was understood that this would require iterative processes of moving between obtaining in-depth data, conceptualising the data, and then going back to look for supportive data to broaden the abstract understandings (Charmaz, 2016). Such aims are obtained by abductive reasoning, which is an interplay of inductive and deductive reasoning.

Deduction, in its own right, involves starting with general or abstract concepts and moving towards more specific instances (top-down approach) (Charmaz, 2012). Positivistic approaches purely rely on deductive logic when addressing research questions in a cause and effect manner. On the other hand, inductive reasoning concerns the extrapolation of patterns and ideas from in-depth data (bottom-up approach) (Charmaz, 2014). Abduction concerns the imaginative interpretation of studied life and returning iteratively to the field to check one's conjectures, with the aim of using such information to continue raising the abstractive level of understanding (Charmaz, 2012).

In summary, the epistemology of this study reveals that the multiple social realities of the phenomenon of neonaticide can be obtained by subjective processes and abductive reasoning.

4.4 Limitations of the Philosophical Underpinnings

The appropriateness of the study's underpinnings has been argued up to this point. However, each paradigm of science, with its associated philosophical ideas, has limitations when applied to research problems. Jürgen Habermas (1985) discusses the term performative contradiction, which is defined as a statement, situation or action where the propositional content (that which is believed or meanings) thereof contradicts the presuppositions (implicit assumptions) of proclaiming it. It may also be understood as a form of an oxymoron.

Habermas (1985) denotes that post-modernist relativism embodies a performative contradiction in science. In the context of accepting multiple realities, the very act of carrying out a research project could make the implicit assumption that there is at least one absolute truth, thereby constituting a performative contradiction. However, I defend against this criticism by claiming to present *one*, among many possible constructed realities.

The idea of providing one absolute truth, among multiple possible realities, raised questions about the practical value of undertaking such research. Neuman (2006) affirms by arguing that, just because the specific group of individuals, within their particular context, perceive the world in a certain manner, does not make it illusory or unimportant. To them, their constructed reality is experienced as real from which very real consequences follow (ibid). In the mental health profession, being aware of many possibilities of experience and processes may result in the development and application of variant prevention and rehabilitation practices to be selected from. This may be done on the basis of appropriateness to different people.

4.5 Part I Summary

The above sections reveal the variant implicit meanings of the research question. It demonstrates the study's focus on human experience, its emphasis on meanings, goals of moving away from reductionistic understandings of the phenomenon and seeking understandings from the women's perspectives. It speaks to the postmodern era's conception of reality as multiple, and that science should aim to obtain empathic in-depth understandings via human interaction in this regard. The emphasis on obtaining knowledge through human interaction elicits the relevance of the interpretivist paradigm and social constructionist orientation. With the subsequent focus being on contextual knowledge, the relevance of an ontology of relativism and epistemology of subjectivism was discussed.

PART II: RESEARCH DESIGN STRATEGIES

4.6 Introduction

The design strategies selected for this study were chosen based on their appropriateness and potential to address the variant aspects of the research problem; and also, indirectly, as a result of the philosophical underpinnings of the study. The research design strategies therefore concerned the "... intersection of philosophy, strategies of action and specific methods" (Creswell, 2013, P. 05). A qualitative research design was selected along with the constructivist grounded theory (CGT) tradition. The sections that follow describe the design strategies employed and motivate for the appropriateness thereof to the research problem. Part II concludes with a consideration of the limitations of the selected design strategies.

4.7 Qualitative Research Design

Denzin and Lincoln (2000) describe qualitative research as a "... situated activity that locates the observer in the world" (p. 3). The authors elaborate "it consists of a set of interpretive, material practices that make the world visible" (ibid; p. 3). Denzin and Lincoln (2000), Denzin (2001), and Silverman (2013) describe variant characteristics of qualitative research that respond to the identified aims of the research problem. The characteristics are discussed in the section that follow.

Denzin and Lincoln (2000) indicate that "qualitative researchers study things in their natural settings, attempting to make sense of, or to interpret, phenomena in terms of the meanings people bring to them" (p. 3). This type of research is considered exploratory in nature and to have an emotionalist focus (Denzin and Lincoln, 2003; Silverman, 2013). This approach to research was considered appropriate to the current study, as the research question is broadly concerned with human experience, specifically the thoughts, understandings, meanings, perceptions, emotions, and actions of the women who commit the act of neonaticide.

According to the authors, qualitative research values rich descriptions of phenomena and "... deploys a wide range of interconnected interpretive methods, hoping always to get a better understanding of the subject matter at hand" (Denzin and Lincoln, 2000; p. 4). Again, the qualitative approach was deemed appropriate in that the research question required a study approach that would render in-depth understandings regarding the processes and actions that underpin the phenomenon.

According to Denzin (2001) and Silverman (2013), qualitative researchers are interested in obtaining the individual's perspectives. In order to obtain the abovementioned in-depth understandings from the women's perspectives, it has been motivated already that a research design that would allow the interaction, collaboration, and direct personal contact with participants was deemed necessary (Neuman, 2006). According to Whitley (2002), qualitative research has this advantage over quantitative research in that it allows the researcher to interact with research subjects and explore elements of human experience beyond confirmation of predetermined variables. It was further deemed appropriate as it responds to the subjective epistemology required by the current study (Silverman, 2013).

Seeing that the phenomenon of neonaticide remains poorly understood, the research question further required the flexibility of qualitative research, as it permits the researcher to follow new leads that emerge during data collection (Charmaz, 2014). According to Charmaz (2014) and Denzin (2001), the advantage of this is that it offers new pieces to the research puzzle that may otherwise have been overlooked.

It is evident that a qualitative design was considered most appropriate to the research question in that it was judged to exhibit the potential to render in-depth understandings of the meanings and experiences of the women who had committed the act of neonaticide. More importantly, it would afford an opportunity to obtain understandings from the women's perspectives. However, variant qualitative traditions exist, including grounded theory, hermeneutics, empirical phenomenological research, ethnography, heuristic research, and transcendental phenomenology, from which one tradition needed to be selected (Heppner and Heppner, 2004).

4.7.1 Selection of a qualitative tradition

The selection of a qualitative tradition was made on the basis of the requirements of the research question. In order to inform future policy and practice, the current research study endeavoured to explore the poorly understood phenomena of neonaticide by uncovering categories of meaning and identifying patterns and possible relationships among the data (Charmaz, 2014; Marshall and Rossman, 1999). In other words, the research was specifically concerned with identifying the variant actions and processes, defined as the variant chronological sequences with starting and end points, that are linked to the larger picture of the phenomenon of neonaticide (Charmaz, 2006). Also, the research was concerned with looking at the variant actions and interactions, movement of sequences and changes in variant

contexts and conditions as they pertain to the women's experiences of neonaticide (Strauss and Corbin, 1998). For these reasons, the research required a qualitative tradition that would move beyond a descriptive account of the data, and to provide an analytical product in the form of theory construction.

According to Charmaz (2014), grounded theory is affiliated with the abovementioned aims because it uses "... inductive data to conduct abstract analytical categories through an iterative process ... [and]... differs from sorting topics, as is common practice in general approaches to qualitative research" (p. 15). In this regard, the report is an analytical product as opposed to a mere descriptive account (ibid). Its focus on process, connections and interactions is what sets it apart from other forms of qualitative research and making it most relevant to the current study (Charmaz, 2014).

4.8 The Grounded Theory Approach

Variant grounded theory (GT) approaches needed to be considered in the selection of an appropriate method. The eventual approach selected, namely that of constructivist grounded theory (CGT), was made on the basis of its appropriateness to the research question and philosophical underpinnings. The selection process is revealed through a consideration of the historical developments of grounded theorising. Finally, this section concludes with an exposition of what is meant by the term 'theorising', according to the CGT tradition.

4.8.1 An historical overview of grounded theory

An historical overview of GT, and CGT in particular, is important in order to locate the approach to theory construction within the selected paradigm of science. The reason for this is because the methodological approaches to grounded theory have evolved along with the socio-political and intellectual context of the time (Charmaz, 2016). Also, this further assists in orienting the reader to understand the type of theory that the current study constructed.

4.8.1.1 The birth of grounded theory

Within the modernist era, the aim of research was mainly directed towards the verification of theories (Glaser and Strauss, 1967). According to Charmaz (2006) "... researchers who use a traditional quantitative design invoke an established theory and deduce hypotheses from it before conducting their studies" (p. 169). In such instances, the theory to utilise within their theoretical framework is already considered to exist (ibid). Consequently, extant theory may

have been refined, but such research seldom leads to new theory construction (Charmaz, 2014).

In the early 1960's, two prominent figures and sociologists, namely Anslem L. Strauss and Barney G. Glaser, started to challenge the dominant quantitative and positivistic logical-deductive methods of the modernist era (Glaser and Strauss, 1967). The researchers argued that theory should rather derive from the data and should be illustrated via examples from the data (ibid). Glaser and Strauss (1967) further criticised the quantitative positivistic approaches for lacking in creativeness and thorough enquiry. Ultimately, this resulted in an epistemological shift with reference to theory development in science and the emergence of grounded theory (Byrant and Charmaz, 2007a).

Grounded theory originated from the four-year research collaboration between Strauss and Glaser and was first described in their book, *The Discovery of Grounded Theory* in 1967 (Goulding, 1999; Stern, 2009). During this time, Strauss was a qualitative researcher and professor at the School of Nursing at the University of California, San Francisco (Goulding, 1999). He invited Glaser, a quantitative researcher, to join him on a research project concerned with the experience of dying in hospitals (Stern, 2009). The epistemological shift resulted due to the marrying of the two researcher's traditions in sociology, namely Strauss' Chicago School tradition of pragmatism, informed by its founder George H. Mead (1967), and Glaser's Columbia University positivism (Byrant and Charmaz, 2007b; Stern, 2009). The former is an approach that informed the rise of symbolic interactionism (SI), as proposed by Herbert Blumer (1962), which denotes that individuals create structure through engaging in processes. In the manner, the need to place emphasis on processes rather than structures in understanding human behaviour (Byrant and Charmaz, 2007a) was introduced. Inherently, pragmatism and symbolic interactionism assume that society, reality and self are constructed via interaction and communication (Charmaz, 2014). Interactions are regarded as "dynamic and interpretive and addresses how people create, enact, and change meanings and actions" (ibid, p. 9). Strauss added "... notions of human agency, emergent process, social and subjective meanings, problem-solving practices, and the open-ended study of action to grounded theory" (ibid, p. 9). Glaser brought his experience in descriptive statistics and constant comparisons to the data and emphasised the need for a rigorous and systematic method of coding qualitative research data in the processes of developing GT (Byrant and Charmaz, 2007a).

Glaser and Strauss developed GT during a time where quantitative research dominated and where qualitative research was regarded as “... impressionistic, anecdotal, unsystematic, and biased” (Charmaz, 2014, p. 6). It was believed that qualitative research could, therefore, not generate theory (ibid). Their recommendations towards the qualitative technique was firstly a response to develop new theory on research questions that were previously neglected due to a preference for positivistic research designs (Charmaz, 2014). It was also a response to gain credibility by addressing the aforementioned concerns regarding qualitative endeavours (ibid). Finally, their aim was to move qualitative enquiry beyond descriptive studies towards providing explanatory theoretical frameworks and abstract conceptual understandings of phenomena (ibid).

The researchers introduced a rigorous technique to develop new theory, consisting of interrelated concepts from data that can be systematically obtained and analysed (Charmaz, 2016; Glaser and Strauss, 1967). According to Glaser and Strauss (1967), grounded theory cannot be separated from the process that was employed to generate it. So the researchers claimed GT as both a method and result (Glaser and Strauss, 1967). The methods provide guidelines for enquiry, while the result is that of a grounded theory. Glaser and Strauss regarded a completed GT as one that would explain the studied process in new theoretical terms and that would reveal the properties of the theoretical categories (Charmaz, 2014). Furthermore, the GT would often demonstrate the causes and conditions under which the process emerged and varied, and would reveal the subsequent consequences” (Charmaz, 2014).

The researchers termed the method and result as GT, as the theory is discovered as it emerges from the data inductively as opposed to deductively within positivistic approaches (Glaser and Strauss, 1967). In this sense, the theory is conceived as being grounded in the data (Charmaz, 2016). In so doing, the researchers were perceived to develop theory as opposed to deducing hypotheses from existing theory (Charmaz, 2014). Glaser and Strauss (1967) surmise that beginning with data, as opposed to approaching phenomena with testable hypotheses, withstands refutation because the theory is a direct reflection of the data.

4.8.1.2 Extensions towards a collection of grounded theory methods

Over the years, there have been various expansions towards a range of GT versions, with differing approaches to the implementation of their methods; which have been informed by differing philosophical and epistemological underpinnings (Birks and Mills, 2011; Charmaz,

2014). Charmaz (2006) refer to the various developments as a “... family of methods” (p. 11). The Glaserian, Strausserian, and CGT are considered to be the three most prominent trajectories of grounded theory (Charmaz, 2014; Fernandez, 2012).

Glaser and Strauss eventually diverged in their approach to grounded theory following their collaboration (Charmaz, 2014). Glaser remained true to the original tenets of grounded theory and is commonly referred to in the texts (Charmaz, 2016; Fernandez, 2012). In 1987, Strauss published a manual entitled *Qualitative Analysis for Social Scientists*. According to Charmaz (2014), the manual reveals that Strauss preserved an emphasis on inductive and iterative (moving back and forth between data collection and analysis) enquiry but adopted a looser approach to grounded theory with an emphasis on verification.

In the 1990's, Strauss and Juliet M. Corbin joined to further the verification of grounded theory methods (Fernandez, 2012). The researchers introduced additional technical procedures to data analysis with a taxonomy of coding procedures and the introduction of an analytical matrix that steered the researcher in looking for and organising data (Charmaz, 2014; Fernandez, 2012). Ultimately, the researchers underemphasised the constant comparative methods and the discovery of emergent theoretical categories as was previously preferred (Charmaz, 2014). According to Charmaz (2014), Glaser continues to argue that such approaches result in forcing “... data into preconceived categories, ignore emergence, and result in ‘full conceptual description’” (p. 11), as opposed to grounded theory.

Strauss died in 1996, and Corbin continued on her own journey in contributing towards the evolution of grounded theory (Charmaz, 2014). Changes to Corbin's approach to grounded theory were influenced by the shifting landscapes of research paradigms from positivism to postmodernism (Corbin, 2008). Corbin (2008) states, “I have become much more fluid and open when doing data analysis, I use all the procedures, but they remain in the background rather than looming in the foreground” (p. 42)

4.8.1.3 A fundamental move from classical grounded theory

Ironically, the work of Glaser and Strauss, Strass and Corbin, and Corbin's initial independent work set out as being a radical reaction to positivism, but ultimately the method became known for exactly that, its positivistic assumptions in the 1990s (Charmaz, 2014). Having been born out of mid-century positivistic conceptions of scientific methods, the researcher's work retained an approach to data as being ‘truth’ to be discovered (Charmaz, 2000). Glaser

(2007) indicates that he perceives data as representing objective facts about the world and that researchers discover such meanings. Bryant and Charmaz (2007b) regard such underlying philosophical position as that of detached naive empiricism advocating neutrality and an objectivity external reality on behalf of the researcher.

According to Charmaz (2014), a large number of scholars moved grounded theory away from the positivism observed in Glaser's and Strauss and Corbin's earlier versions of grounded theory. Researchers such as Kathy Charmaz (2000), Anthony Bryant (2007), and Adele Clarke (2003) are considered some of the key role players in this regard. However, the most essential challenge to the original conceptions of GT came from Kathy Charmaz (2000).

4.8.1.4 A constructivist turn to grounded theorising

Kathy Charmaz (2000) is known to have been born out of a 'second generation of grounded theorists'. Charmaz (2000) had been a student of both Glaser and Strauss. Her main reaction to the original works was a response to its prevailing positivistic assumptions. She questioned the idea that the identified categories and theory in the data are latent and awaiting discovery (Charmaz, 2000). Charmaz's (2000) ideas around the use of GT have been mainly influenced by the postmodern turn. Charmaz (2014) states "if, instead, we start with the assumption that social reality is multiple, processual, and constructed, then we must take the researcher's position, privileges, perspective, and interactions into account as an inherent part of the research reality" (p. 13). Charmaz (2014) elaborates "it too, is a construction" (p. 13).

Charmaz's (2014) approach to GT is seen to have resulted in a constructivist turn to theorising. Although Charmaz initially coined her method and theory as 'constructivist grounded theory', she indicates that with the evolution of social constructionism, her position is considered aligned with such philosophical underpinnings (referring to the latter), as it is known today (see Section 4.3.2) (Charmaz, 2008a; 2014). Andrews (2012) and Charmaz (2006) go as far as to say that the terms constructivism and social constructionism are often used interchangeably in the literature and that it may be subsumed under the general term, constructivism. Essentially, the constructionist view denotes that data collection and analysis is a co-construction between the researcher and data, and that these constructions are located in a specific temporal, social and cultural context (Bryant and Charmaz, 2007a; Charmaz, 2014). As such, the approach is seen to be characterised by relativism and subjectivism is added to the research scene (Charmaz, 2014). The knowledge is seen to arise from an interactive process between the researcher, the participants and data, while an emphasis is

placed on language and interpretation (ibid). The theory is constructed via abductive processes (ibid). Ultimately, the theory is seen to be constructed and not to be discovered as previously described.

Charmaz's method is a well-known methodology employed in many research studies ranging from psychology, sociology, criminology, nursing and health sciences (Tie, Birks and Francis, 2019). Application of the method has been successful in rendering findings and recommendations that can contribute to policy development or service provision and is known to reform conceptualisations that would initiate change in the substantive area of investigation (Tie, Birks and Francis, 2019).

4.8.2 The affiliation between a constructivist grounded theory design and the research paradigm

Through considering the historical development of grounded theory, it is evident that a constellation of grounded theory methods exists (Charmaz, 2014). Charmaz (2014; 2016) emphasises that a complete disparity in the application of methods within the variant grounded theory approaches do not necessarily exist, but rather that the main differences are based on the foundational philosophical underpinnings (Charmaz, 2014). Incidentally, it is understood that the selection of grounded theory approach should be affiliated with the philosophical underpinnings that inform the nature of enquiry and research question.

Part I of this chapter highlights the appropriateness of the following philosophical positions to the nature of the research enquiry:

1. An emphasis on human experience, processes, actions and meanings;
2. A view of reality as diverse, fluid and varied with multiple interpretations;
3. Knowledge is created and obtained through human interaction;
4. Interpretivism and the social constructionist orientation;
5. An ontology of relativism and an epistemology of subjectivism; and finally,
6. Knowledge is created through abductive reasoning processes.

Charmaz's (2014) approach to GT is born out of the abovementioned philosophical underpinnings and was, therefore, considered most appropriate to the research endeavour.

4.8.3 Understanding theory according to a constructivist grounded theory design

Theory, according to the CGT approach, is defined as a substantive theory (Charmaz, 2014), which is described as “a theoretical interpretation or explanation of a delimited problem in a particular area” (ibid, p. 244). Alternatively, it may also be referred to as middle-range theories, consisting of “... abstract renderings of specific social phenomena that ... [are]... grounded in data” (ibid, p. 9). The term middle-range theories is “... contrasted with the ‘grand’ theories of mid-century sociology that swept across societies but lacked a foundation in systematically analysed data” (ibid, p.9). The current study aimed at producing a substantive theory, although, with further research, the potential of formal theory may be obtained. Formal theory, according to Charmaz (2014), may be achieved once it can reach across abstract concepts and specify relationships between them in order to understand phenomena in multiple substantive areas.

CGT is, thus, defined as a substantive theory that is constructed by interpreting qualitative data gathered through an interactive process with the viewed (Bryant, 2007; Charmaz, 2008a; Cho and Lee, 2014). The theory provides an abstract understanding or conceptualisation of the phenomenon under study by providing “plausible and conceptually dense relationships among concepts and sets of concepts” (Cho and Lee, 2014, p. 11) that are relevant to the context in which they were constructed (Breckenridge et al., 2012; Kempster and Parry, 2011). The theories constructed, according to this approach, emphasise the underlying processes and actions that underpin the phenomenon under study (Charmaz, 2014).

4.9 Limitations of the Selected Design Strategies

No research design strategies are free of limitations. Purposeful deliberation of the limitations was completed prior to selecting the qualitative research design and CGT tradition in addressing the research question. This section summarises the limitations of the design strategies in a general sense but is discussed with increased specificity and greater depth in Section 5.9 once an exposition of the methods employed is provided.

The criticisms against qualitative research are generally given from the philosophical points of reference of positivism and from those with a preference for quantitative investigations. From this perspective, the quality of qualitative research is devalued based on the criteria employed to evaluate quantitative studies, namely that of generalisability, representativeness, and external validity (Heppner and Heppner, 2004). This refers to the extent to which the

general principles of behaviour and theories discovered and the methods used to investigate it would apply, regardless of context, population, or setting (Whitley, 2002). Such ideals are based on the positivistic aims of obtaining one singular causality or truth. However, it is important to bear in mind that the goals of qualitative research, guided by CGT, are not to achieve statistical generalisability, but rather to provide one possible explanation of the phenomenon among many (Charmaz, 2014). The current study's research goals were to provide a substantive theory with the hopes that with additional studies, a formal theory may eventually be established (ibid).

Although qualitative research and the constructivist grounded theory tradition do not adhere to the same qualifying criteria as quantitative studies, this does not denote that it is free from measures to ensure quality and trustworthiness of the data (Heppner and Heppner, 2004). Section 5.7.3 reveals the evaluation principles of a grounded theory and measures to ensure quality in research.

4.10 Part II Summary

Qualitative research design strategies were considered most appropriate in obtaining in-depth understandings regarding the phenomenon of neonaticide. With the aim of moving beyond description and towards abstract theorising, the grounded theory approach was considered optimal. With its association to the philosophical underpinnings discussed in Part I, the constructivist grounded theory approach was selected among the constellation of grounded theory approaches available.

Figure 4.2 summarises the variant approaches to theorising according to its development alongside the paradigmatic shifts in science. The approach to theorising selected in this study is highlighted in colour.

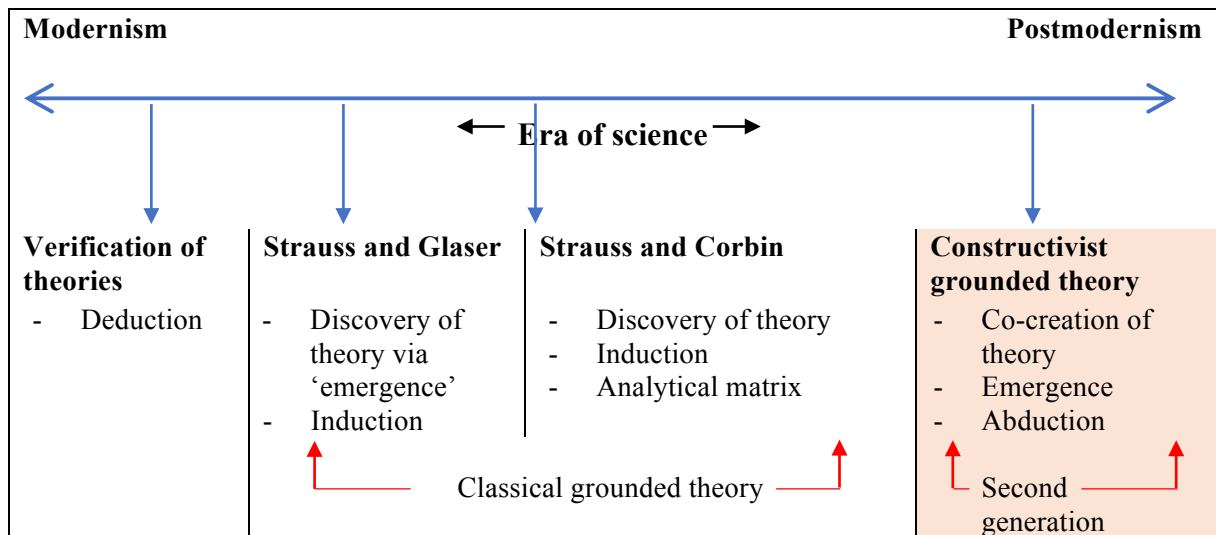


Figure 4.2 Summary of approaches to theorising

4.11 Chapter Conclusion

The chapter demonstrated the appropriateness of the postmodern era, interpretivist paradigm, and social constructionist orientation, with its associated relativist ontology and subjectivist epistemology, in addressing the research question. Furthermore, the relevance of a qualitative research design to the philosophical orientation of the study was discussed. In moving beyond description to providing more abstract theoretical understandings of the phenomenon of neonaticide, the GT approach was deemed most appropriate. The historical development of grounded theory along the variant paradigmatic shifts reveals how the CGT approach is most appropriate, notwithstanding the philosophical underpinnings of the study and the research problem.

With an understanding of the underlying philosophical underpinnings of the study and design strategies selected, the focus can now shift to the methods employed towards achieving the research aims. The next chapter delineates the rigorous CGT methods implemented in the study, with the aim of constructing a theory on how women from criminal cases come to commit neonaticide.

CHAPTER FIVE: RESEARCH METHODS

5.1 Chapter Introduction

This chapter delineates the constructivist grounded theory (CGT) methods and procedures employed in the study to construct the theory. The reader is first introduced to the purposes of the constructivist grounded theory, as each element of the variant methods selected were directed towards achieving such resolves. Thereafter, a broad introduction and overview of the theory construction procedures and process is provided. The conversation then turns to a detailed discussion on the variant elements involved in the research process, moving from the broad and open enquiry to the sampling of participants and recruitment strategies, towards the data generation and collection methods, followed by descriptions of the data analysis and theory construction process. Quality measures to protect the integrity of the data are discussed throughout the chapter. A section is also devoted to specific quality measures in qualitative and CGT research employed to guarantee the trustworthiness of data. Thereafter, ethical considerations in the research are discussed. Finally, while the strengths and limitations of specific aspects pertaining to the research process is discussed throughout the chapter, the latter part of the chapter is devoted to summarising some additional considerations around the limitations and delimitations of the methods selected.

5.2 Purpose of the Constructivist Grounded Theory

The purpose of the study was to construct a theory on how women from criminal populations come to commit neonaticide. The research design chapter delineated the appropriateness of Charmaz's (2014) CGT design to addressing the research question. Her methods to theory construction and data analysis strategies were considered to be particularly relevant in their potential to ensure the following identified purposes of the study:

- 1) The use of techniques to elicit *processes* (unfolding temporal sequences), albeit conceptual and emotional, that underpin the act of neonaticide;
- 2) An application of analysis methods that would elicit the *actions* (patterns of behaviour) that underpin the act;
- 3) An approach to data analysis that would move beyond description towards more *abstract understandings* of the phenomena;
- 4) The application of techniques that would reveal *variations, relations, and variant dimensions* of the processes that underpin the phenomena;
- 5) An approach to data analysis that would allow the theory to be *grounded in the data* (substantiated by the data) and constructed throughout the research process; and

- 6) The use of a method that ensures that the theory obtained is *emergent*.

The specific techniques employed to ensure the attainment of the aforementioned purposes are discussed throughout this chapter.

5.3 Overview of the Grounded Theory Construction Process

As indicated already, the study adhered to the CGT methods set out by Charmaz (2014). I was trained by Professor Kathy Charmaz in the application of CGT methods at a summer school programme entitled *International Summer School on Grounded Theory and Qualitative Methods* in Pisa, Italy in 2016 (Charmaz, 2016). Her close successor, Professor Antony Bryant, extended my training in the method at a summer school entitled *3rd International Summer School on Grounded Theory and Qualitative Research*, which I attended in Kuanas, Lithuania in 2018 (Bryant, 2018).

According to Charmaz (2014), “Grounded theory methods provide a frame for qualitative enquiry and guidelines for conducting it” (p. 14). This section provides a brief overview of how the research process was shaped by the goal of theory construction and introduces the variant interrelated elements involved in the theory construction process.

5.3.1 The goal of the theory construction process

The research process was shaped by the end goal of the constructive process, namely, to present an emergent and substantive theory on the phenomenon. This was to be done by providing plausible abstract renderings or theoretical interpretations of the processes and actions that underpin neonaticide (Charmaz, 2014). The properties of emergence and substantive theory, as well as the processes of attaining plausible abstract renderings, need to be considered as they affected the approaches and methodological techniques employed to attain this goal.

According to Charmaz (2008b), a “grounded theory is predicated on an emergent logic” (p. 155). Grounded theory methods should, thus, begin with a systematic inductive approach to collecting and analysing data (Charmaz, 2008b). Meaning, conjectures should arise from the ground up on the basis of information provided by participants. Moreover, in order to substantiate claims, one should move beyond pure induction. So, one would check “emerging categories that emerge from successive levels of analysis, through hypothetical and deductive reasoning” (p. 156). Ultimately, the final product is regarded as emergent (induction) but is

further substantiated via abduction (the combination of inductive and deductive reasoning) (see Section 4.3.4.2) (Charmaz, 2008b; 2014). This is presented in Figure 5.1, which is a visual representation of the process of emergence and substantiation and the use of abductive reasoning (combination of induction and deduction) in constructivist grounded theory.

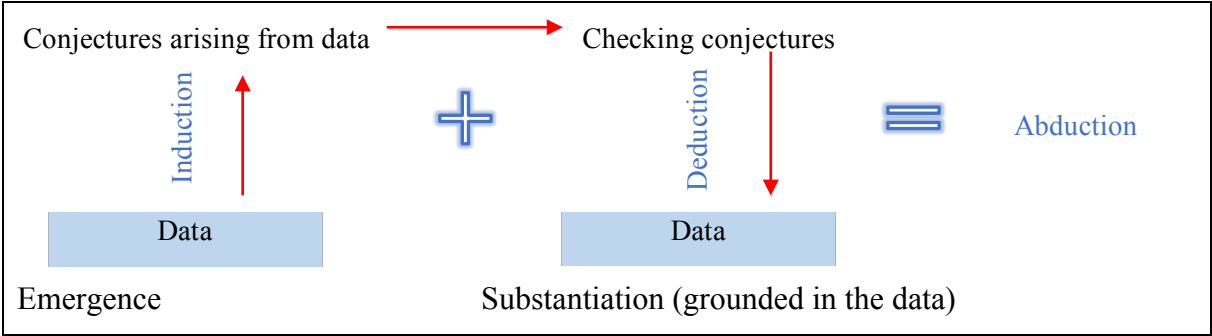


Figure 5.1 Visual representation of emergence and substantiation

A further goal of grounded theorising is to present plausible abstract renderings or theoretical interpretations of the data. In order to obtain this goal, the research processes or phases should be characterised by variant iterative actions to raise the analytical level of the data (presented schematically in Figure 5.2). This should be completed until the theoretical coverage of the research area has been reached (theoretical saturation) (Weed, 2009).

Figure 5.2 demonstrates the research process as it aims towards raising the analytical level of the data to a point that abstract renderings of the processes and actions that underpin the phenomenon under study could be reached. It also demonstrates how the process contributes towards ensuring theoretical coverage of the research area.

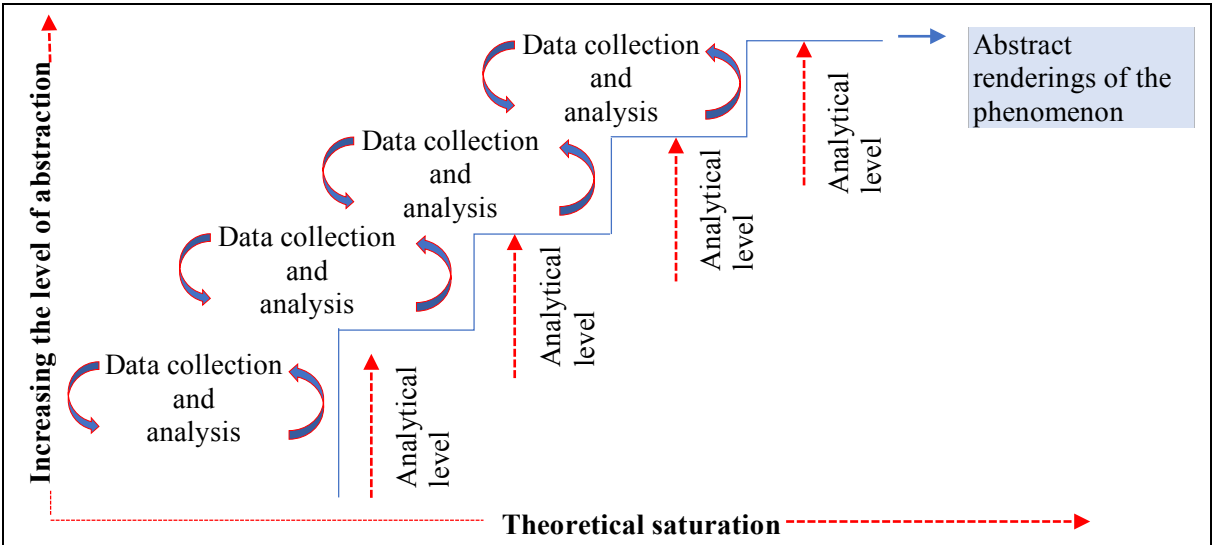


Figure 5.2 Visual representation of raising analytical levels

5.3.2 Overview of the research procedures and the theory construction process

As the theory construction procedures developed along the two processes of emergence and substantiation, as well as increasing the level of abstraction and reaching theoretical saturation, variant research strategies were employed along these processes to reach the final theory. Charmaz (2014) proclaims that the act of theory construction is not a linear process as the layout of this chapter may imply. The theory is constructed through a rigorous and iterative process of data collection and analysis, where the theory evolves throughout the research process (Charmaz, 2014; Timmermans and Tavory, 2012). This section summarises the procedures and processes in the theory construction process (see Figure 5.4). The variant elements and concepts referred to in this section are defined and explained in the detailed sections that proceed the overview.

The theorising began with a broad and open enquiry and was not constricted to too many predetermined ideas (Cho and Lee, 2014). Following the identification of the research area, the iterative process of data collection and analysis ensued. I constructed an initial semi-structured interview guide. However, on the basis of my maturity in the grounded theory method, I elected to merely keep the guide at hand and to commence interviewing via an unstructured manner, simply requesting the women to tell their life stories. It was decided to keep the interview guide at hand to serve more as a sensitising prompt to explore relevant content, once related areas were raised by the women. This was followed by participant recruitment and purposive sampling techniques. Data was then collected, transcribed and analysed. I started with initial coding and later moved on to focused coding and eventual axial coding. Even during the focused coding stages, initial codes emerged and I returned to initial coding to identify codes previously overlooked. In order to move towards the goal of refining concepts and reaching theoretical saturation, I returned to the construction of further interview guides and sampling, this time, theoretical sampling. With the aim of raising the level of abstraction and moving towards theoretical saturation, this process of cycling between the construction of interview guides, theoretical sampling, the focused collection of further data, transcribing and coding continued until theoretical saturation was considered to have been reached. Constant comparative methods were employed during all data analysis phases in order to aid with the identification of relational and dimensional components of the data.

Furthermore, the process of theory construction was aided by memo writing and reflexivity, which commenced at the outset of the study and was employed throughout the theory constructive process. Also, quality measures were put in place throughout all phases of data

generation and analysis in order to ensure a quality of the final product, namely that of a substantive theory. In this regard, quality measures to avoid data mining and techniques to obtain rich and substantial data were employed during data collection (see Section 5.6.2.5). Moreover, measures to establish and build trustworthiness were employed during the analysis (see Section 5.7.3). Figure 5.3 is a visual representation of the iterative processes involved in the process of theory construction. The arrows reveal the non-linear directions that the research process took. The figure reveals the elements of constructing the research question, beginning with a broad and open enquiry, crafting interviews, iteratively collecting and analysing data, moving towards theoretical saturation, theory building, the use of quality measures, memo writing and reflexivity.

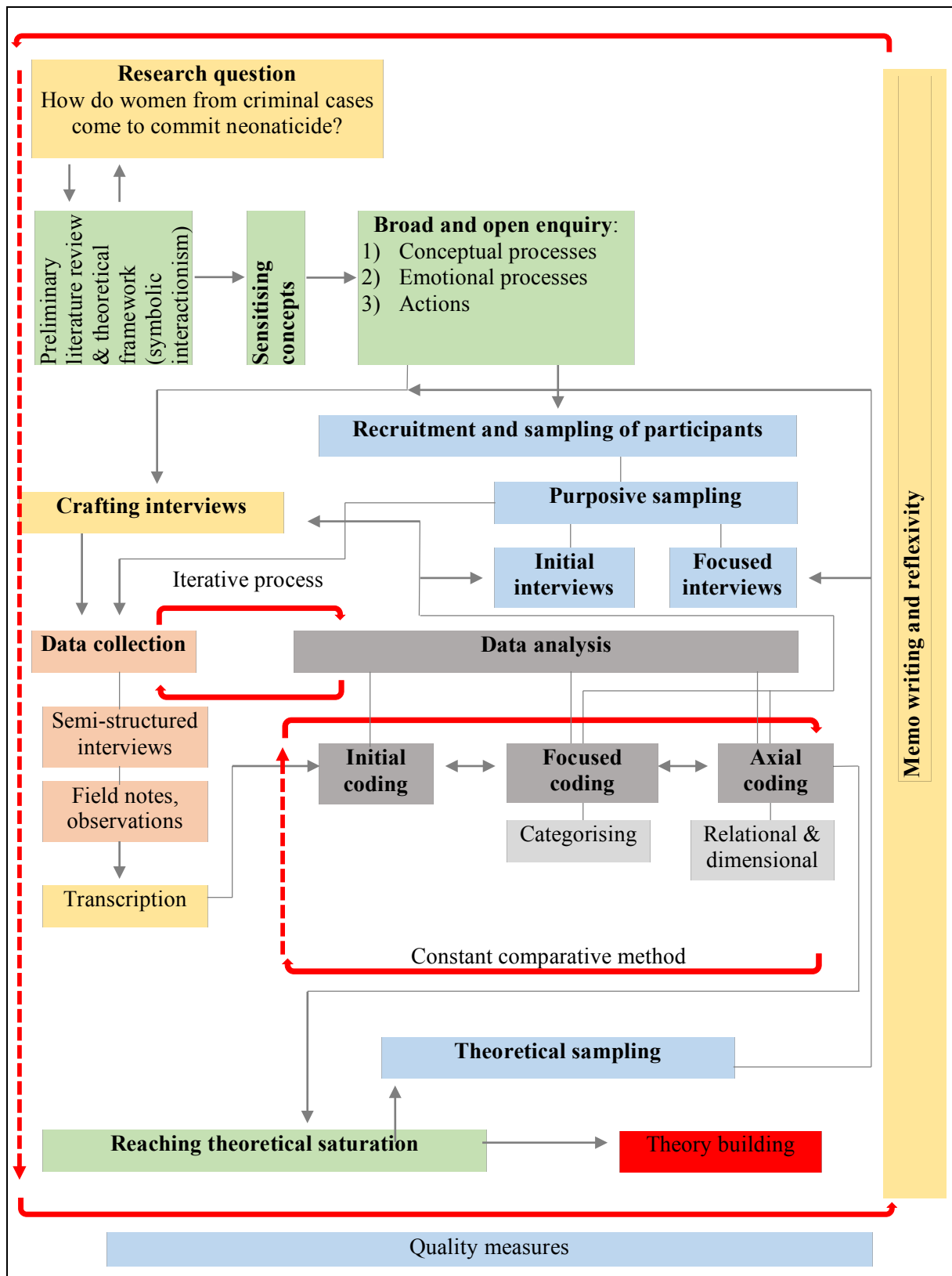


Figure 5.3 Visual representation of the constructivist grounded theory process

With an understanding of the non-linear and iterative nature of the study processes, the focus can now turn to a detailed description and understanding of each of the elements and processes involved.

5.4 Beginning with a Broad and Open Enquiry

The research question broadly sought to address how women from criminal populations come to commit neonaticide. The preliminary literature review, as well as the guiding perspectives of the study (symbolic interactionism), was used as sensitising constructs to broadly define the scope of the study (Charmaz, 2014). In this sense, the identified aims and objectives did not delineate predictions or determine the precise scope of perceivable findings (ibid). As can be observed, the aims and objectives roughly suggested the areas to be explored in the study but did not denote ‘what’ would be discovered or even confirmed by the study. Moreover, I allowed for flexibility in following new leads, and in this way allowed for new questions to emerge from the data. This is introduced in Section 2.3.2 and elaborated upon in Section 6.2. These approaches were undertaken to adhere to the principles of grounded theory (GT), of having the theory be emergent, grounded in the data, and constructed throughout the research process (ibid).

5.5 Sampling of Participants and Recruitment Strategies

With a broad and open enquiry in mind, I was able to commence with seeking a participant sample. As discussed in further sections, the sample included eight participants from three correctional centres across South Africa, including Kgosi Mampuru II (Gauteng), Westville (KwaZulu-Natal) and Pollsmoor (Cape Town) (see Section 5.6.1). This section discloses the sampling strategies employed in the study as well as the recruitment strategies used. Finally, the participant characteristics of individuals who were successfully recruited and participated in the study are revealed.

5.5.1 Sampling

Based on the unique nature of the phenomenon, methodological decisions regarding sampling techniques and sample size, inclusion and exclusion criteria, as well as sample identification techniques were implicated by this fact. The following paragraphs justify the selection of the sampling strategies employed in the study.

5.5.2 Sampling techniques and sample size

Purposive sampling techniques were employed, where I utilised my judgement to select the sample population in order to suit the research goals (Whitley, 2002). The sample consisted of eight participants. The small sample size of the study is justified for a number of reasons, including: a) The study sacrificed breadth for depth; b) The detailed case-by-case analysis of data was time consuming; c) Based on limitations in successful prosecution in

neonaticide cases and the notion that most women receive a suspended sentence, it was difficult to obtain access to suitable participants; and finally, d) Significant challenges were faced in identifying and locating potential participants (see Section 5.5.4) (Smith & Osborn, 2008).

5.5.3 Inclusion and exclusion criteria

As discussed in the preliminary literature review, the study focused only on women who had committed the act of neonaticide and opted to exclude men from the study. This was done on the basis that the processes that underpin the act are deemed to be different for men and women and was considered to be especially relevant in the context of the study's focus on the women's pregnancy experiences prior to the commission of the act.

The study was specifically concerned with how women from criminal populations come to commit neonaticide, specifically those convicted for the act. As discussed in the introductory chapter, the study opted to rule out women who had committed the act by virtue of a serious mental illness, and who had been declared a state patient of a psychiatric facility. However, this did not necessarily exclude those who presented with symptoms of mental illness (especially depression and/or substance abuse) as well as personality pathology within the correctional services setting.

With further reference to the exclusion criteria, participants with a poor comprehension of the English language were excluded from participation, as interviews were conducted in the English medium. In the context of knowledge being a co-construction between participants and the researcher, using the services of an interpreter was ruled out on the basis that the interpreter would run the risk of including their own interpretations of data presented when engaging in the act of interpretation (Charmaz, 2016). In this sense, it was considered likely that I could lose the meanings and understandings of participants as they would be clouded by further interpretation of a language interpreter.

5.5.4 Sample identification techniques

A significant challenge to the research endeavour was identifying and obtaining access to a sample population. On the basis of the challenges encountered, the study had almost not been further pursued. This section elaborates on the decisions made with respect to identifying participants and approaches taken to overcome challenges.

In the planning of the study, initial questions were raised as to what means could be used or what places could be consulted to obtain access to such a population. With the highly stigmatised nature of the offence, I did not have the luxury of posting an advertisement in a newspaper or community information boards as a means to recruit participants. Furthermore, no facility other than correctional services and criminal justice departments have contact with such a population of individuals in the South African context.

As a matter of opportuneness in gaining access to potential participants, I decided to interview women who had been incarcerated for the act at correctional facilities at the time of data collection. As discussed in the preliminary literature review, successful prosecution of women who commit the act is often compromised, with the result being that few women are convicted and incarcerated for the act. In this sense, the sample pool to draw from was already small.

A further complicating factor is that no forensic database exists that could assist with identifying women who are incarcerated for the act of neonaticide in South Africa. The reason for this is because the women are charged with murder and categorised as such. There was no possible way of deducing from the cases categorised as murder which ones of those had been neonaticide. However, forensic psychiatric facilities across the country was deemed a viable source that could provide the contact details of women who had been referred for forensic psychiatric observation, accused of murder and to have records on which of those cases had been for neonaticide. It was thought that those deemed to have been fit and responsible could be pursued for possible participation. However, this option had needed to be ruled out on the principle of ethics and confidentiality. In such cases, the women are referred by the courts and the consent form for psychiatric observation does not include permission to divulge personal details for research purposes to the researcher or any external sources. Perhaps if the hospital's forensic unit staff had been able to contact the participants on the researcher's behalf, inviting them to participate in the study and seeking permission to share contact information with the researcher, the approach may still have been deemed ethical. However, it was established that the women would most likely be serving a incarceration sentence at the time of seeking their participation. In the context of confidentiality not being obtained from participants, it would have been unethical to contact their families or other sources to establish the site of their incarceration in an attempt to reach the women. In such cases, the hospital may have been seen as failing to maintain confidentiality.

In overcoming limitations in obtaining access to a database that would yield information on possible research participants, alternative measures needed to be taken. This included identifying potential participants via an internet search of news articles from around South African regions. It was decided to seek out news articles that had reported on women who had committed the act and who had been convicted of the act.

I conducted an internet search with relevant keywords related to neonaticide in order to obtain the names of women who could be pursued as potential participants. Keyword combinations included among others: a) Newborn murder; b) Mother; c) Convicted; and d) Imprisonment. The keyword combinations were inserted into internet search engines in combination with variant region names throughout South Africa in an attempt to elicit relevant cases and news articles. This proved to be a challenging task as news articles would initially refrain from using the women's names. By again searching keywords of relevant case content pertaining to a specific case, for example, the method employed to take the life of the newborn or the regional area where the offence had been committed, I was able to eventually track down several potential names in subsequent articles. Another approach used in this manner was to search the names of the police stations or detectives mentioned in relation to the case, which offered some subsequent articles. Moreover, a different approach was to search the name of the journalist and search the individual's stories in the hope of obtaining further information on the case. However, a major limitation in searching for subsequent articles that would render a potential name of the women, was that the cases were often not further followed or pursued in the media.

The searching of news articles in order to obtain potential participant names to be pursued proved to be a further challenge, in that the women would mostly have a short incarceration sentence and court cases would occasionally last up to more than two years. In this respect, older news articles as well as the most recent articles would not prove to be useful as the women would either have been released from correctional centres or still be busy with their respective court cases at the time of data collection.

After obtaining a potential list of participants, the Department of Corrections (DCS) was consulted to assist in establishing which correctional centres the women had been incarcerated at. Problems with reaching relevant persons to assist in this regard was complicated by difficulties with telephonic availability and lack of responses to emails. Subsequently, this caused significant delays in the research process.

Moreover, this process was fraught with other challenges as well. Problems were faced in that the name under which the women had undergone their trial (name referenced in the news article) was often not their real name. By the time the women would be incarcerated, a different name had been used. Further concerns were raised as the records and identifying data utilised, as well as the records system employed at the Department of Corrections (DCS) and Criminal Records Centre (CRC), would not match those of the Department of Justice. In order to overcome the problem, it was sought to obtain the women's court case number or identification number and attempt to link it to their correctional services number. The CRC was contacted to establish the feasibility in assisting in this regard. The CRC conceded that they would be unable to assist in the matter as the information provided to identify participants would, according to their identification system employed, yield too many false positive cases. Subsequently, the potential sample pool was further reduced.

Nevertheless, via the aforementioned methods and assistance from the DCS, I was eventually able to establish the details of 13 potential women. This included their correctional services identification number as well as the site where they had been incarcerated.

5.5.5 Sample recruitment procedures

Following the identification of potential participants and the research sites, the relevant area commissioner of the respective research sites was contacted by me for introductory reasons and to assist with obtaining access to the relevant sections. By this time, the area commissioner had already been informed by the DCS of my intention and ethical approval to conduct research at the correctional centre. The area commissioner would then inform the head (HOD) of the female section of my intention to conduct research at the facility, who would, in turn, assist with obtaining a permit to the female section of the correctional centre for the data collection period. Thereafter, the HOD would introduce me to the section social worker. Upon instruction from the HOD, the social worker assisted with the procedure of locating and recruiting potential participants on the basis of the correctional services number provided. The social worker also assisted with logistical matters, such as providing access to a private interview room, identifying consultation times, and scheduling appointments.

A recruitment letter (see Appendix One) was then delivered by the social worker to participants, describing the purpose and nature of the study. Participants indicated their willingness to participate in the study via this form. The form was subsequently collected by the social worker within the facility and handed to me. Via the assistance of the social worker,

I could then schedule an appointment to meet with participants who indicated their willingness to participate in the study.

5.5.5.1 Participant characteristics

The study sample consisted of eight women incarcerated at three different correctional service centres across South Africa. All of the participants met the inclusion criteria. Of the 13 potential participants initially identified for participation, two had already been released from the correctional centre prior to data collection. Another two participants had been transferred to different centres and one case had been a false positive identification. The resulting eight women all agreed and consented to participate in the study after receiving the recruitment letter. On the basis of one participant appearing anxious to participate and guarded regarding sharing matters related to the offence, I elected to terminate the interview and further data gathering from this participant.

The majority of the women (n=7) fell within the adult age category (ages 26–39) with few (n=1) falling in the young adult category (ages 18–24). All of the women (n=8) had been above the age of 18 years at the time of the commission of the offence.

All of the women (n=8) had had previous pregnancies prior to the pregnancy concerning the act of neonaticide. Few women (n=2) had also had a pregnancy after the commission of the offence. Table 5.1 summarises the number of pregnancies had by each participant prior to the offence, resulting in neonaticide and after the act of neonaticide.

Table 5.1 Summary of the number of pregnancies among the study sample

Participant number	Number of pregnancies prior to neonaticide	Number of pregnancies resulting in neonaticide	Number of pregnancies after offence
Participant 1	3	1	0
Participant 2	2	1	0
Participant 3	2	1	0
Participant 4	2	1	0
Participant 5	1	1	0
Participant 6	2	1	0
Participant 7	2	1	2
Participant 8	2	1	1
Total number of pregnancies	16	8	3

Most of the women committed the act in their third pregnancy (n=6), with few committing the act in their fourth (n=1) and second pregnancy (n=1). Data was obtained on a total number of 19 non-neonaticidal pregnancies (N-NPs), referring to pregnancies that did not result in the act of neonaticide, and eight neonaticidal pregnancies (NPs). Of all the pregnancies discussed, including N-NP and NP, the pregnancies were unplanned with the exception of one pregnancy. The latter refers to pregnancies that resulted in the act of neonaticide. With respect to the NPs, most of the women (n=7) fell pregnant in the context of a long-term romantic relationship, with the exception of one case, where the woman conceived after being coerced into a sexual relationship with her grandfather. An equal split was observed regarding the gender of the baby in cases of neonaticide, with half the women taking the life of a girl (n=4) and the other half taking the life of a boy (n=4). None of the women (N=8) reported any previous terminations of pregnancy (TOP) or having given up their children for adoption.

Most of the women (n=7) had a highest level of education ranging between grades nine and 11 (mainstream education), with few completing Grade 12 (n=1). Most of the women (n=6) were employed in unskilled professions around the time of the commission of the offence, with few being unemployed (n=2). All of the women (n=8) reported socio-economic challenges. A larger proportion of women were living in urban areas (n=6) than in rural areas (n=2). Many of the women were from the IsiZulu culture (n=4), with fewer coming from the Ndebele ethnic group (n=2), as well as Indian (n=1) and Coloured (n=1) ethnic populations. Most of the women presented with a fair command of the English language (n=6), while few (n=2) presented with a satisfactory command of the English language regarding participation in the study.

All of the women (n=8) denied seeking treatment for any mental illness prior to the commission of the offence and all women denied any significant history of mental illness (n=8). Most of the women (n=6) reported a persistently low mood for the duration of their NP, however, not to the extent of it impacting significantly on previously presumed roles and responsibilities. The majority of women (n=5) reported to have refrained from taking illicit substances during their NP, while some reported the abuse of alcohol (n=1) and illicit substances (n=2).

All of the women (n=8) were serving a prison sentence related to the act of neonaticide. Most of the women were serving a sentence of five years or less (n=5), with fewer serving a sentence of 11 up to 14 years (n=2), and few falling in the category of five to 10 years (n=1).

Most of the women (n=6) were busy serving the first two to three years of their sentence (n=7), with fewer having served more than three years (n=1). Most of the women were charged with murder and concealment of birth (n=6), with fewer charged with murder only (n=2). None of the women (n=8) presented with a previous forensic history.

The participant characteristics shared above were obtained using a participant characteristics and demographics questionnaire, (see Appendix Two). The questionnaire is discussed in Section 5.6.2.1.

5.6 Data Generation and Collection Methods

Further study procedures that require deliberation are the data generation and collection methods. The following sections discuss the study setting and elaborate on the data collection techniques employed within the study and also reveal how the data collection process was guided by and evolved with the theory construction process. This occurred as I aimed, firstly, to ensure that the theory is emergent, and then persisted with increasing the level of abstraction and working towards theoretical saturation.

5.6.1 Study setting

Data was collected in the form of in-depth semi-structured interviews, the nature of which is discussed in sections below. The women were interviewed at three different correctional service centres across South Africa, namely: a) Kgosi Mampuru II (Gauteng); b) Westville (KwaZulu-Natal); and c) Pollsmoor (Cape Town). It was initially thought that data would only be collected at one correctional centre. However, on the basis of the challenges encountered with identifying and locating potential participants, the scope had to be extended to other centres. This was done in order to increase the sample size.

The correctional centre facilities offered a separate room for interviewing participants. Assistance from staff in booking appointments, locating and also in escorting participants was deemed conducive to the research process. Specific challenges of the setting to the research process included needing to travel far distances across South Africa to interview participants at my own cost. Furthermore, the setting was often noisy, making it difficult to hear and record participants.

5.6.2 Data collection techniques

According to Charmaz (2014), strong grounded theories depend on the researcher's ability to obtain rich data. She indicates that the aim is first "... to see this world as research participants do – from the inside" (ibid, p. 24). Charmaz (2014) elaborates, "... although we cannot claim to replicate their views or reproduce their experiences in our own lives, we can try to enter their settings and situations to the extent possible" (p. 24).

The previous chapter emphasised the importance of human interaction in the process of in-depth knowledge construction. The main source of data collection in the present study was the use of intensive interviewing. However, as Glaser (2007) denotes "... all is data" (p. 93). This popular phrase by Glaser (2007) suggests that data includes whatever "... is going on in the research scene ... whatever the source, whether interview, observations, documents, in whatever combination" (p. 93). As such, I was able to adopt varied data-gathering strategies (Charmaz, 2014). For these reasons, other forms of data were incorporated into the research process, namely field notes about behavioural observations made and my experience of the women concerning what they choose to say or omit at specific times.

This section focuses on the specific data collection techniques employed. It considers the use of a face sheet or demographics questionnaire, the act of conducting intensive interviews with a semi-structured interview guide, and the act of making field notes and transcribing data. Specific emphasis is placed on the interview process and the act of crafting semi-structured interview guides. The latter portion of the section discusses the quality measures adopted to protect the integrity of the data, namely, approaches to avoid data mining and measures to attain rich and substantial data.

5.6.2.1 The use of a face sheet or demographics questionnaire

After participants agreed to participate in the study, as well as having been oriented to the study and signing consent forms, I obtained information from participants in the form of a face sheet (see Appendix Two). Information obtained was considered to constitute a demographics questionnaire. The questionnaire consisted of close-ended questions. Content included information regarding the participant's a) Age; b) Human settlement (rural/urban); c) Ethnicity; d) Language; e) Level of education; f) Occupational history; g) History of mental illness; h) Duration of sentence served; i) Duration of sentence given; j) Charge and conviction for current sentence served; k) Previous forensic history; l) Relationship status,

m) Number of children and relationship to the father; n) Number of previous pregnancies; and, o) History of termination of pregnancies.

As per the recommendations of Charmaz (2016), the information obtained from the participant characteristics and demographics questionnaire was employed as a means to establish the context of the participant's life and the interview. As a reflexive statement, it should be noted that the questions were informed by my disciplinary approach to obtaining demographic information on individuals to create a context for their life. The information was considered important to informing questions to be used for intensive interviewing and to ensure that I knew enough about participants to delve into their experiences (Charmaz, 2014).

5.6.2.2 Conducting intensive interviews, making field notes, and transcription

Once contextual information was obtained from participants, I embarked on obtaining rich detailed information from participants in the form of intensive interviewing. Charmaz (2016) describes interviews as a gently guided and directed, one-sided conversation to explore an experience about which the participant has deep first-hand knowledge.

According to Charmaz (2016), a strength of the interviewing process is that it is interactive and allows a degree of connection, reflection, disclosure, and intimacy; factors that allow for emergence of knowledge. Characteristics of intensive interviewing in grounded theory include the notion that the interviews are: a) Open-ended, yet directed; b) Shaped, yet emergent; and c) Paced, yet unrestricted (ibid). The nature of such interviews is also "... informational, intensive, and investigative" (Charmaz, 2014, p. 57).

It was initially decided to make use of a semi-structured interview guide when interviewing participants. It was expected that the guide would serve as a gentle guide in: a) Exploring the broad areas to be discovered as determined by the study aims and objectives; b) To elicit information to follow an interesting lead identified via earlier interviews; c) To check and build understandings and concepts raised from earlier interviews; and d) To construct more detailed understandings of matters that have emerged up to a specific point in the research process (Charmaz, 2014; 2016). However, as previously mentioned, ethical reflection and maturity in the grounded theory method resulted in the decision to commence interviewing in an apparent unstructured manner. In this sense, the guide was to be kept at hand in cases that I would feel I would need to impose more structure on the interviewing process.

The decision to commence interviewing in a seeming more unstructured manner occurred as a consequence of critical reflection on the research approach with Bryant (2018) at an international summer school on grounded theory methods. I was worried that commencing questions directly around the women's pregnancies that related to the commission of the offence, would exacerbate possible feelings of defensiveness among the population concerned. I reasoned that neonaticide is already a highly stigmatised offence and that it would seem more appropriate to build rapport with the women, eventually leading up to the commission of the offence as their stories progressed. I reasoned that such a gentle approach would be experienced as more ethical, as I would allow the women the sense of freedom to share relevant content at the time that they would feel ready for it. The approach to interviewing also seemed more in line with Charmaz's (2016) previous description of an effective interview. It was decided to commence data collection with a broad question enquiring: "Tell me your life story, and eventually leading me up to that which happened that resulted in you having to come here". My approach was to see what aspects of their experience the women emphasise (Bryant, 2018). The semi-structured interview guide was, thus, merely employed as a tool at hand to explore related areas when the women raised related matters.

In practice, I requested participants to tell me their life stories, however, most participants required structure to commence their life narrative. Some participants mentioned feeling uncertain where to begin and others started with their charge and an explanation for their incarceration. I gently guided participants to their childhood histories with questions such as "Tell me about where you were born"; "Tell me about what your childhood was like"; "Tell me about going to school". After such explorations, I would prompt less specifically, asking questions such as "Tell me about the next significant event in your life". As participants provided responses to their life stories, I reflected content and emotions back to participants to build rapport. Participants appeared to relax as we journeyed through the retelling of their life stories, becoming more confident to spontaneously share and volunteer life events. I made sure to request examples of statements made so as to facilitate understanding and always ask what the participants were thinking, feeling and doing at the time. I also enquired what they believed significant others were thinking, feeling and doing in response to their unique situations. As the women started narrating aspects of their lives related to their pregnancies, I had an idea in my mind of possible content to explore as gently guided by the semi-structured interview guide. The content was concerned with the women's thoughts, feelings and actions towards pregnancy-related content (see Appendix Three). I afforded significant space to veer

in directions not previously determined by the guide so as to allow the exploration of unanticipated content. In so doing, the women themselves started structuring their narratives of the neonaticidal pregnancies by comparing it to their non-neonaticidal pregnancies. As the women discussed their neonaticidal pregnancies, they were gently prompted to move closer and closer to content relating to the birth of the baby as well as the eventual act of neonaticide and its aftermath.

The approach described above was deemed to be more in line with the grounded theorising philosophy. In this sense, my interviewing was conceived as a flexible emergent technique (Charmaz, 2016). I remained open to new unanticipated ideas and issues as they arose throughout the interview (Charmaz, 2014). Ultimately, this approach ensured that the theory was both emergent and a co-construction between me and the participants.

Overall, I employed my interviewing skills as a trained clinical psychologist to obtain in-depth and rich descriptions from participants. My skills allowed me to apply active listening and to foster following up and also deep exploration on meanings and understandings offered by participants. This further allowed exploration of the processes and manners in which they would arrive at such meanings.

Field notes

In order to contribute towards the richness of data obtained, I employed my skill as a clinical psychologist to focus on the behavioural observations of non-verbal behaviour and language used by participants during interviewing. This became part of the field notes taken during the interview process. The field notes included observations of pauses, interruptions, facial expressions, body postures, or utterances made during the interview. Special consideration was given to specific words and phrases articulated and emphasised by participants (Charmaz, 2014). The behavioural observations either informed further questions or leads to follow or to seek clarity during interviewing or was used to inform data analysis. For these reasons, the field notes were included and integrated into the transcribed interview data.

Transcription

The aforementioned interviews were audio-taped and personally transcribed verbatim by me. Although this proved to be a time-consuming task, I elected to personally transcribe data in order to remain close to the data and content (Charmaz, 2016). Doing so also allowed me better control over integrating the aforementioned field notes into the transcribed notes as the

experience was still fresh in my memory. Interview data were transcribed as soon as feasibly possible following an interview, typically within 48 hours of the interview, in order to allow any thoughts that arose during interviewing to be elicited and reflected upon in the memo writing as well.

The audio-recording and transcription of interviews also acted as a quality measure throughout the grounded theory construction process. The reason for this is because it allowed reflection on the nature of questions asked and allowed for the determination of whether the type of questions asked forced data to suit possible taken-for-granted preconceived ideas on my behalf (Charmaz, 2014).

5.6.2.3 The interview process

It is reiterated that the interview process was dependent upon the theory construction process with its goals of being emergent, substantive, raising the level of abstraction, and moving towards theoretical saturation (see Sections 5.3.1); as demonstrated in Figure 5.2. Such goals required an approach to interviewing and data gathering that would “... answer analytic questions and ... fill conceptual gaps” (Charmaz, 2014). Charmaz (2014) describes the process of data gathering as being “similar to a camera with many lenses, first you view a broad sweep of the landscape” (p. 26). She continues, “subsequently, you change your lens several times and shorten your focal points to bring key scenes closer and closer into view” (ibid, p. 26).

In line with the abovementioned theory construction process goals, the purpose of interviewing, the nature thereof, and my role as interviewer changed and evolved with the research process (Charmaz, 2014). The interview phases referred to here are defined as initial interviews and focused interviews (interviewing in theoretical sampling). Furthermore, the process was directed by four theoretical interests, namely: a) theoretical plausibility; theoretical direction; theoretical centrality; and theoretical adequacy (ibid). These interview processes are summarised in Figure 5.4 and are described in the sections that follow. The number of interviews had, according to each interview phase, is summarised in Table 5.2.

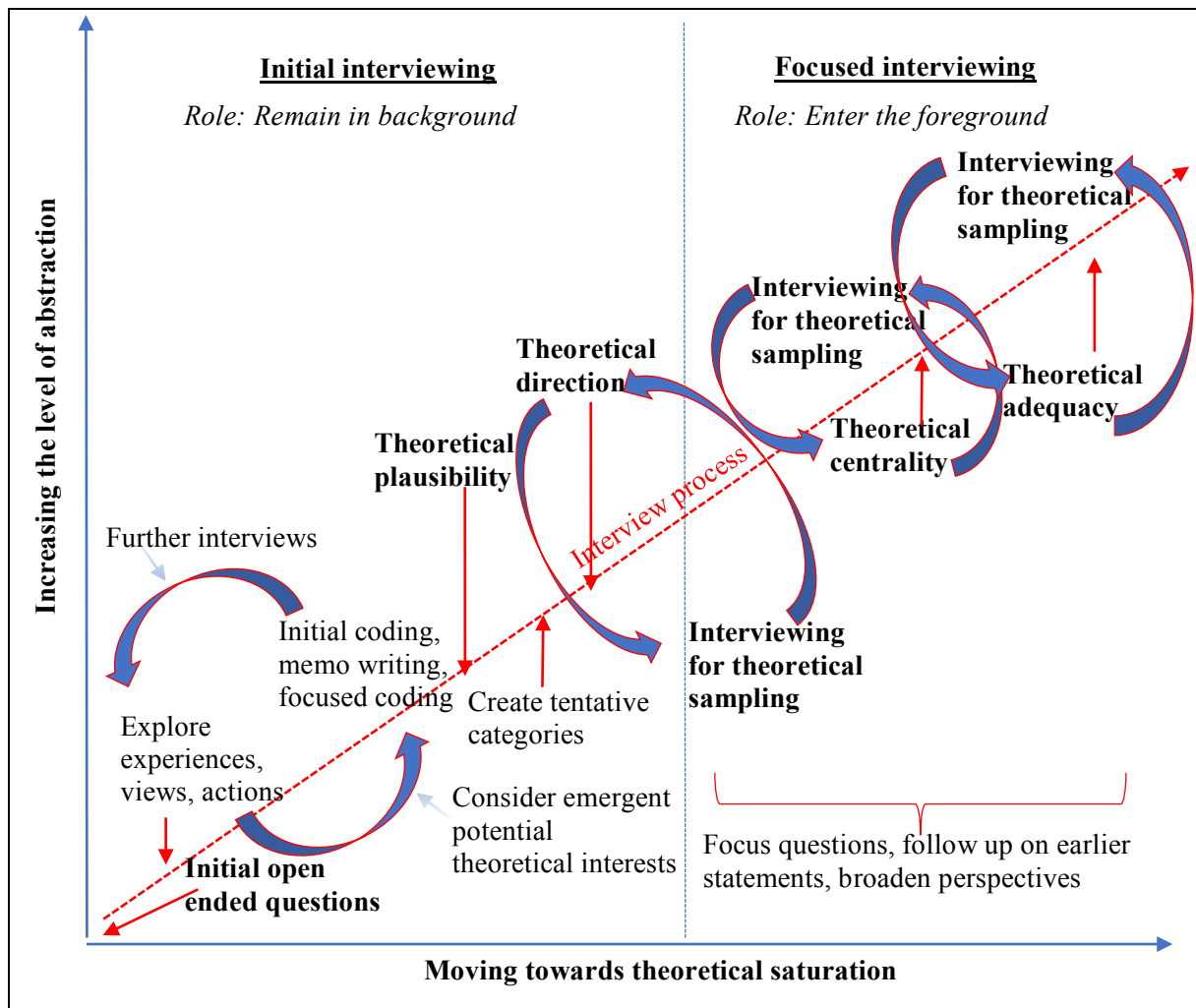


Figure 5.4 Visual representation of the interview process

The purpose of initial interviews was to explore the broad, identified initial study aims and objectives (Charmaz, 2016). The emphasis here was to focus on the participant's experiences, their views and actions (Charmaz, 2014). My role in this regard was to remain in the background and facilitate exploratory questions that would allow participants to discuss their perspectives and allow areas of possible theoretical interest to emerge (ibid). Iteratively, I went back and forth between interviewing and analysing data according to initial coding, memo writing, and focused coding (see Section 5.7.2).

The initial data began to reveal clues that appeared to carry meaningful impact and importance (Corbin and Strauss, 1990). The relevant issues were then incorporated in the next set of interviews (Corbin and Strauss, 1990; Charmaz, 2014). Throughout the process, the initial coding procedures began to reveal recurrent statements. The recurrent statements were then selected via focused coding and were treated as indicating theoretical plausibility (ibid). Theoretical plausibility refers to the recurrent statements that are conceptualised (raising the

level of abstraction) and provides a plausible and potential way to understand more or similar situations (ibid). Such codes were then raised to tentative categories (ibid). In so doing, the theoretical direction of the emerging theory was indicated and theoretical sampling could ensue (ibid). It should be mentioned that it was also by this point that the initial research question, aims and objectives could be refined on the basis of the questions and subsequent theoretical direction that emerged from the data.

Within the context of theoretical sampling, I entered the foreground and the nature of interviews were perceived to be somewhat more focused (Charmaz, 2016). The theoretical direction of the study was marked by directing interviews to focus on the identified main codes and categories (Charmaz, 2014). The aim then was to reach theoretical adequacy or saturation, meaning that the focus of interviews was to collect data that would make the theoretical categories robust (ibid).

Table 5.2 summarises the interview process in terms of the number of initial interviews held as well as the number of ‘focused’ interviews held with each participant.

Table 5.2 Participant initial interviews and focused interviews

	Number of initial interviews	Total number of hours and minutes	Number of focused interviews	Total number of hours and minutes
Participant 1	4	6:13	3	2:50
Participant 2	3	2:55	2	2:05
Participant 3	4	4:15	3	2:30
Participant 4	2	1:20	1	1:12
Participant 5	1	1:10	0	-
Participant 6	1	1:00	1	1:10
Participant 7	1	1:11	1	1:05
Participant 8	1	40 minutes	0	-
Total number	17	19:19	11	10:52

As indicated in the table above, I conducted a total of 17 initial interviews with a total duration of 19 hours and 19 minutes. Eleven focused interviews were conducted with a total duration of 10 hours and 52 minutes. Interviews were iteratively conducted and analysed over a period of one and a half years. The interview duration and number of interviews varied, based on participants’ ability to express themselves, to explore their ideas, and their ability to engage in the interview process. In this regard, a specific time limit and number of interviews had not been applied as “arbitrary time limits can stifle a story or curtail possibilities for analytic exploration” (Charmaz, 2014, p. 86).

On the basis of the challenges faced regarding the identification and location of potential participants, the research was initially threatened with the possibility of only gaining access to three participants. Concerns regarding the feasibility of identifying general patterns among the data was raised. Charmaz (2018) recommended the use of prolonged engagement of seeing the small number of participants over time as a means of overcoming the potential challenge (personal communication).

Phase one of the interview process concerned initial interviewing with participants one to three for a larger number of initial interviews, with the aim of elaborating on all initial information provided. Because of the need to travel to a distant location for the initial three participants, interviews were conducted on successive days. Data collection was then interrupted for a short duration in order to analyse data. I was able to identify some theoretical potential and direction. I then entered the next phase of interviewing. During this time, two more participants (participants four and five) were secured at a separate correctional centre. I commenced initial interviewing with these two participants, while also commencing with focused interviewing with the initial three participants. Again, interviews were held on successive days during this phase. While I was remaining open to new possibilities on the basis of initial interviews with participants four and five, I also commenced with pursuing the already identified theoretical interests obtained in the former phase of analysis. Hence, focused interviewing was also commenced with participants four and five. Data collection was interrupted again to analyse data. By this time, theoretical centrality appeared more clear and directed. Thereafter, phase three of data collection ensued.

By this time an additional participant was secured at a previous correctional centre (participant six). I commenced with an initial interview with the participant, always remaining open to new possibilities in the data, followed by focused interviewing centred around the concepts and categories already identified. Another interruption in data collection occurred as data was further analysed. Finally, very little information seemed necessary to saturate the concepts and categories (to allow for robustness in the concepts and categories). By this time the final two participants were identified at a new correctional centre. I commenced with initial interviewing in this phase again to allow the final possibility of new insights, also followed by focused interviewing concerned with the theoretical sampling needs already identified. Following the data analysis of this phase, theoretical saturation was deemed to have been reached as sufficient relationships, dimensions, and variations had been identified in the data (Bryant, 2018). Finally, data collection was deemed to be complete.

5.6.2.4 Constructing interview guides

As indicated already, the interviews were gently sensitised with the aid of an interview guide (Charmaz, 2014). The interview guides were crafted based on variant aspects, namely, a) The sensitive nature of interview content; and b) The aim of the interview, whether it be initial or focused and with specific goals in mind, such as obtaining information about process and action.

The sensitive nature of interview content

Based on the sensitive nature of the interview content, several measures needed to be taken in order to ensure that participants were firstly protected against potential harm and further to ensure that this aspect did not negatively impact on my ability to gather rich data (Charmaz, 2016). At all times, I gave priority to the participants' comfort level above obtaining "... juicy data" (Charmaz, 2014, p. 66).

Firstly, I spent a significant amount of time establishing rapport with participants. Less sensitive content was asked during the most initial stages of the interview encounter. In telling their life stories during initial interviews, some participants took longer to reach the narratives regarding the offence. This was respected and I patiently allowed participants to mostly take the lead towards discussing aspects concerning the offence. At other times, participants were gently led to more sensitive content by guiding exploration from in-depth discoveries along the chronology of events. However, when content proved too threatening to participants, I allowed flexibility to navigate towards earlier narratives and reminded participants that they did not need to share information when feeling uncomfortable (Charmaz, 2016).

Within each interview, the latter questions allowed participants to reflect on the content shared during the interview and to move further away from the incident of neonaticide, back to the 'here-and-now'. The latter questions were aimed towards more positive responses to bring the interview to closure with questions about what participants have learned about themselves or what they would like others to know (Charmaz, 2014).

The construction of interview guides for initial interviews

The interview guides were constructed based on the aim of the interviews, whether it be initial interviewing, focused interviewing, or for purposes of attaining specific processes and actions.

According to Charmaz (2014), “grounded theorists often begin their studies with certain guiding empirical interests to study” (p. 31). She elaborates, “My notion of grounded theory includes a basic methodological principle: our data collection methods flow from the research question and where we go with it” (ibid, p. 27). The aims and objectives of the study constituted the sensitising concepts, or broad initial tentative ideas without definitive characteristics to pursue in the study (ibid). Hence, the sensitising concepts were considered as points of departure from which open-ended questions were constructed. However, as mentioned previously, the guides were merely employed as sensitising ideas to explore once it related to content offered by participants.

The construction of interview guides for focused interviews

With successive levels of analysis, specific concepts were devised through studying the data that informed new avenues and questions to be explored (Birk and Mills, 2011; Charmaz, 2014). The analysis of data referred to here, concerns theoretical sampling as discussed below. During this process, I needed to sample additional information and data from participants (Charmaz, 2016). The construction of interview guides was based on constructing questions that would refine ideas and extend the theoretical properties and boundaries of the category or set of categories (Charmaz, 2006; 2012). Although the nature of these interviews had been more focused towards extending the properties of the categories concerned, I remained open to new possibilities and new leads I had within the initial stages of interviewing (Charmaz, 2016).

Constructing questions to understand process and action

As indicated already, in addition to understanding participants’ thoughts and emotions, a significant emphasis of constructivist grounded theory studies is to delineate the processes and actions that underpin the aforementioned. Moreover, the aim is to understand such processes in terms of their variations, relations, and variant dimensions (Charmaz, 2014). This became increasingly important in my endeavours to extend the properties and boundaries of concepts and categories identified.

In attempting to elicit responses that would yield information and understanding on the variant emergent processes, I incorporated combinations of the following questions proposed by Charmaz (2014) in the construction of interview guides as well as spontaneously throughout interviewing as required:

- 1) From whose point of view is a given process fundamental? From whose point of view is it marginal?
 - 2) How do the observed social processes emerge? How do participants' actions construct them?
 - 3) Who exerts control over these processes? Under what conditions?
 - 4) What meanings do different participants attribute to the process? How do they talk about it? What do they emphasise? What do they leave out?
 - 5) How and when do their meanings and actions concerning the process change?
- (P. 34).

In attempting to elicit responses that would yield understandings regarding emergent actions, I incorporated the following considerations proposed by Charmaz (2014) in the construction of interview guides as well as spontaneously throughout the interviews as required:

- 1) Delineating the context, scenes, and situations of action carefully.
- 2) Recording who did what, when it occurred, why it happened ... and *how* it occurred.
- 3) Identifying the *conditions* under which specific actions, intentions, and processes emerge or are muted...

(p. 35).

The constructed theory, as presented in Chapters Six and Seven, reveal the nature of the variant processes and actions that underpin the act of neonaticide by discussing and responding to the aforementioned questions and considerations as proposed by Charmaz (2014) and explored within the study.

5.6.2.5 Quality measures in data collection

Given that the quality of theory constructed was dependent upon the nature of data collected, significant emphasis was placed on quality measures to ensure the integrity of data obtained. In this regard, measures were taken to ensure the avoidance of data mining and to ensure the attainment of rich and detailed data.

Quality measures to avoiding data mining

An imperative concern in GT studies is ensuring that data mining is avoided (Charmaz, 2016). Data mining refers to forcing preconceived ideas on data and asking loaded questions that would lead responses to fit with what one might expect to find (Charmaz, 2014; 2016; Kvale, 2008). It is important to avoid data mining in GT studies, as the aim is to remain true to having the theory emerge from the data (Charmaz, 2006). It has been mentioned already that constructivist grounded theorists do not conceive that one can be completely free from disciplinary expectations or ideas. In order to address the matter, I sought supervision to ensure that the questions asked were broad and open-ended and exploratory in nature to avoid

imposing preconceived ideas on data (Kvale, 2008). These matters were also reflected on as part of the reflexivity requirements of the study.

Quality measures taken to ensure the gathering of rich and substantial data

According to Charmaz (2014; 2002), a study's quality and credibility depends on the extent of the depth, richness and scope of the data obtained. Thus, I aimed to gather sufficient data to provide a comprehensive picture of the phenomenon of neonaticide within the parameters delineated for the study (ibid). In order to ensure that the data obtained was rich and sufficient, the following questions posed by Charmaz (2014) was asked:

- 1) Have I collected enough background data about persons, processes, and settings to have ready recall and to understand and portray the full range of contexts of the study?
- 2) Have I gained detailed descriptions of a range of participants' views and actions?
- 3) Do the data reveal what lies beneath the surface?
- 4) Are the data sufficient to reveal changes over time?
- 5) Have I gained multiple views of the participants' range of actions?
- 6) Have I generated data that enable me to develop analytical categories?
- 7) What kinds of comparisons can I make between data? How do these comparisons generate and inform my ideas?

(p. 33).

The aforementioned questions are reflected upon in the quality evaluation of the study (See Section 8.5).

5.6.3 Summary of the data collection and generation strategies

The sections above reveal the specific data collection and generation strategies along with the associated quality measures employed within this study. They also reveal the strategies of data generation involved throughout the theory construction process as the level of abstraction and theoretical saturation was increased. Specific emphasis was placed on utilising techniques that would answer to the purposes of the pursued theory namely: a) To elicit the conceptual and emotional processes; b) To elicit actions taken; c) To render abstract understandings; d) To reveal variations, relations and dimensions of the processes that underpin the phenomenon; e) To have the theory grounded in the data; and finally, f) To construct a theory that is emergent.

Table 5.3 is a summary of the data collection and generations strategies employed to attain the purposes of the theory pursued in the study.

Table 5.3 Data collection techniques to attain the purposes of the pursued theory

Techniques to elicit process	Techniques to elicit actions	Techniques to render abstract understandings	Techniques used to reveal variations, relations and dimensions	Grounding the data	Seeking emergence
Obtained through the use of detailed, rich, in-depth interviewing.	Obtained through the use of detailed, rich, in-depth interviewing.	Moving iteratively between data collection and analysis.	Follow up questions in interviewing to elicit variations, relations and dimensions of experience.	Beginning with a broad and open enquiry and not too many predetermined ideas.	Initial interviewing and checking conjectures in focused interviewing.
The use of sensitising concepts as obtained from the symbolic interactionist perspective .	The use of specific questions and prompts in interview guides to elicit such content.	Changing the nature of interviewing, from initial to focused and constructing interview guides along the process of moving from theoretical plausibility to theoretical direction, centrality and finally adequacy.		Prolonged initial interviewing.	Following up on unexpected leads throughout the interview process.
The use of specific questions and prompts in interview guides to elicit such content.		Focused interviewing in theoretical sampling to extend the properties of a category.		Returning to the field and checking conjectures in focused interviewing.	

With an understanding about the variant data collection and generation strategies and phases employed in the study, the focus can now turn to the data analysis and theory construction procedures applied to the data.

5.7 Data Analysis and Theory Construction

Data was analysed according to the coding procedures as set out by Charmaz (2014; 2016). According to Charmaz (2014), coding refers to the labels attached to segments of data that depict what each segment is about. This section discusses the assistive techniques used to manage data along with the coding procedures and strategies employed.

5.7.1 Data management

Various visual aids were employed to assist with the visual analysis, comparison and categorisation as well as attempts to see relationships between data. Figure 5.5 reveals the pin board and whiteboard strategies employed during data analysis.



Figure 5.5 Examples of visual aids employed in data analysis

It was decided to employ practical visual assistive tools for the categorisation of data rather than computer-assisted qualitative data analysis software (CAQDAS). The decision was made on the basis that it afforded greater practical interaction regarding the organisation of data. Moreover, the data obtained was rich, complex and dynamic. It was, thus, difficult to analyse the data in list form. For this reason, I elected to make use of diagramming on a whiteboard to reveal connections between data or to organise codes into different categories via the pin board. Via this method, it was easier to represent categories of concepts and to indicate their variant linkages and relations (Charmaz, 2006). Such diagrams are often messy, partial and provisional but are useful in organising ideas (Bryant, 2018; Charmaz, 2006). The decision was further influenced, in part, by the lack of available resources to engage with the data on a daily basis should CAQDAS have been employed. The decision to use practical visual aids as opposed to CAQDAS is not deemed a limitation to the study as CAQDAS is merely an organisational tool (Salvini, 2016). Thus, although the use of a computer program in qualitative research may implicitly suggest that objective themes would be elicited, this is not the case (ibid).

5.7.2 Coding procedures and strategies

The coding procedures and strategies evolved with the theory construction process. This occurred as the research process sought to be emergent and substantive and also as it moved towards raising the analytical level of data and moving towards theoretical saturation. The measures taken can be organised according to two phases, namely that of initial data analysis and focused data analysis. The two processes were not entirely independent, but rather iterative (Charmaz, 2014). The process is presented schematically in Figure 5.6. The figure represents the variant coding procedures and data analysis strategies that were employed throughout the theory construction process. The variant elements included: a) Initial line-by-line coding; b) Memo writing, albeit initial and later more advanced; c) Constant comparative method; d) Focus coding; e) Axial coding; f) Theoretical sampling; g) Theoretical saturation or data sufficiency; and, h) The final steps in theory construction (Charmaz, 2014; Wilson, 2012).

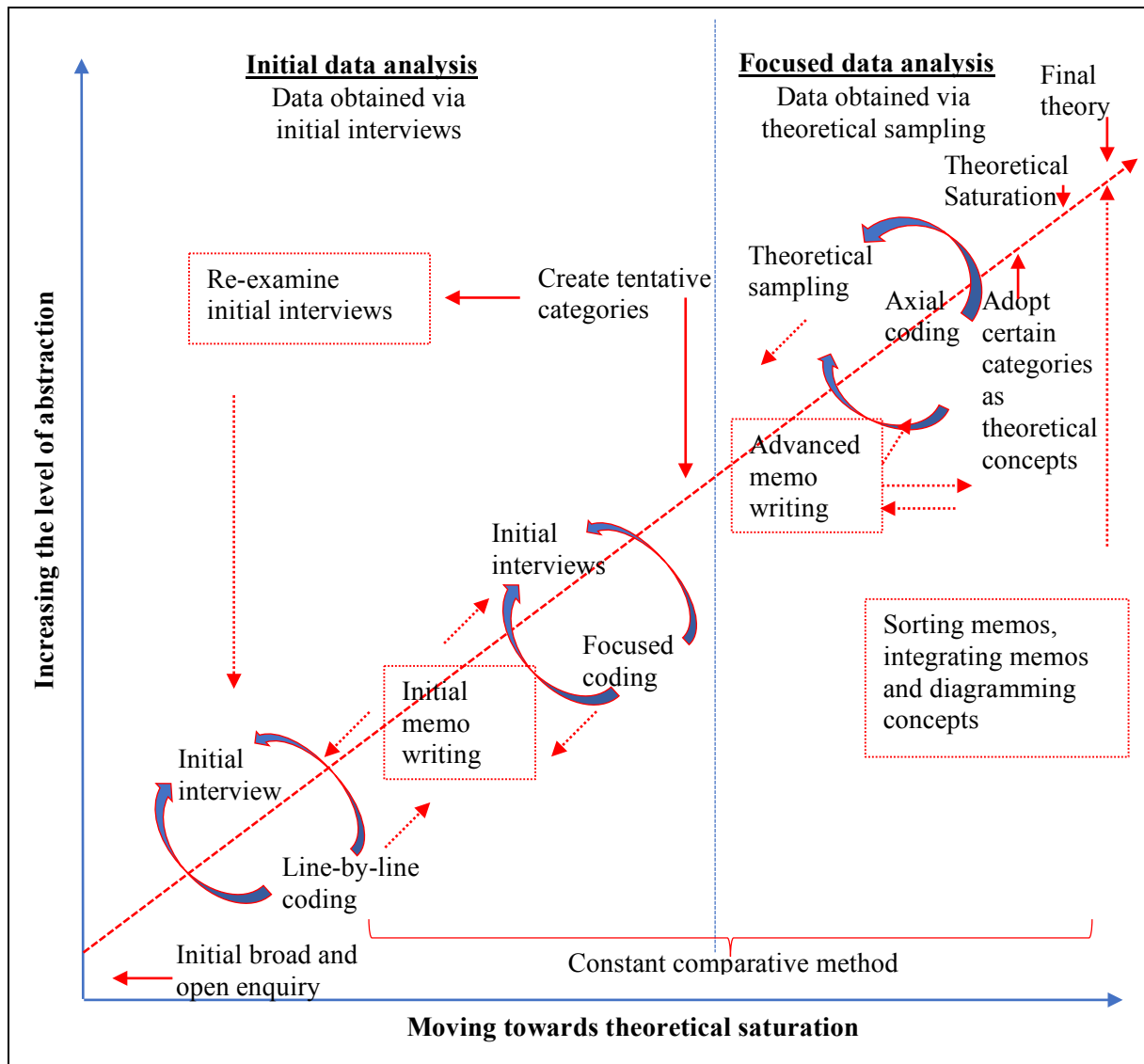


Figure 5.6 Visual representation of the data analysis process

5.7.2.1 Initial line-by-line coding

The initial broad and open enquiry afforded a significant amount of data to be coded and analysed. The first phase in coding included the initial line-by-line coding, meaning that I labelled each line of data (Charmaz, 2012; 2014). In this regard, I separated, sorted, and synthesised the data by looking very closely at the information, doing so line-by-line (Charmaz, 2014).

Instead of coding for topics and themes as with other qualitative studies, the grounded theorist codes with gerunds (using verbs as nouns) (Charmaz, 2008a; Wilson, 2012). A gerund is a heuristic device that attempts to enter the studied phenomenon more deeply by attempting to explicate it through coding for actions and processes (Charmaz, 2014). This eventually allowed me to uncover relationships between understandings, meanings, experiences, events

and behaviours and it allowed me to see connections between data (ibid). An example of my line-by-line coding via the use of gerunds is provided in Box 5.1.

Box 5.1 Example of initial line-by-line coding

Participant narrative	Initial line-by-line coding in gerunds
Ria: I didn't want to tell my mother that I was pregnant. Okay, I saw that the first time (referring to her first pregnancy) I didn't tell her I was pregnant and she saw for herself and also the second time. And the third time I didn't want to tell her I was, I thought that she will see for herself. And then I knew that she will be angry with me as the first and second time when she found out I was pregnant. She was angry. So, I was ashamed, I didn't want to tell her.	Not sharing news Not sharing news Mother noticing pregnancy Mother noticing pregnancy again Not wanting to share news Preferring mother to notice Expecting anger Experiencing anger Feeling ashamed Not wanting to share news

Moreover, exceptions occurred where in vivo codes were employed in coding; this refers to using participant words or phrases as code names. This was useful as in vivo codes progressed theoretical insight into the women's experience directly without needing further abstraction (Strauss, 1987).

I continued with line-by-line coding until I obtained codes that I wanted to explore (Charmaz, 2012). The codes obtained in this phase formed ideas about the data and potential theoretical interests and then pointed to areas that needed to be explored further during subsequent data collection (Charmaz, 2014). The theoretical interests were reflected on via initial memo writing.

5.7.2.2 Initial memo writing

The phase between description and conceptualisation, for purposes of theory construction, was aided by memo writing (Weed, 2009). I commenced with the initial memo writing early in the data collecting and analysis process. Memo writing concerns writing informal analytic notes about the data where the researcher begins to theorise about the relationships between data, its characteristics, connections and differences (Charmaz, 2014). Memo writing provided the space for engaging in constant comparisons between different types of data (See Section 5.7.2.3) (Charmaz, 2016) and allowed consideration of the temporal, social and situational conditions involved in the production of the data (Charmaz, 2014). Memo writing had the benefit of assisting with increasing the level of abstraction with reference to my ideas.

In so doing, new ideas emerged from that data that required further investigation and analysis. Ultimately, it informed the preparation and adjustment of interview guides for when I entered subsequent data collection and analysis phases (ibid).

5.7.2.3 The constant comparative method

Before discussing successive levels of data analysis, it is first necessary to discuss the constant comparative method within grounded theory. The method was employed as a tool throughout the data analysis process. According to Mills et al. (2006), a distinctive feature of GT is the use of the constant comparative method. The use of the comparative method allows the researcher to build systematic checks and refinements of the major theoretical categories constructed (Charmaz, 2012). Charmaz (2014) describes the constant comparative method as “a method of analysis that generates successively more abstract concepts and theories through inductive processes of comparing data” (p. 342).

The study made comparisons via comparing data with data. In the example below, two women report the same type of experience of failing to acknowledge the child as being a baby when she confronts her newborn after birth.

Box 5.2 Example of comparing data with data

Data	Data
Ria: At that time, okay, okay, I didn't feel anything towards the baby. Okay, it was like, it's not even a baby to me.	Ann: I didn't think anything about it. It's like I didn't even see it's a baby. I didn't even take notice of her. You know? ... It was like I wasn't seeing the baby.

By comparing incidents, as indicated in Box 5.2, it was possible to observe how the same incident may occur in different contexts and variant conditions over time.

Data was also being compared with codes. After recurrent codes were obtained, similar codes were collapsed into one code. The pin board was employed as a visual aid in this regard (see Figure 5.5) where codes were written on single sticky notes and grouped under one larger page or sticky. The data was then consulted again, this time comparing data with codes. An example is provided below.

Box 5.3 Example of comparing data with code

Code	Data
Un-acknowledging	Ann: Maybe if I would have acknowledged a baby. Maybe I would have called off for someone, my parents... Tika: By my first born, nobody knew I was pregnant. Interviewer: Nobody knew you were pregnant? Tika: Nobody knew I was pregnant... My boyfriend was telling me, you are pregnant. And I would say, "are you mad?" "I'm not pregnant"... I would say to myself, "no, you are imagining things, you can't be pregnant".

Furthermore, codes were compared with codes; then the codes were collapsed into one code, which was then raised to the level of a concept as revealed below or grouped together to form a category of concepts. The pin board was similarly employed again in this regard.

Box 5.4 provides an example of comparisons between similar codes resulting in the assignment of one single new code.

Box 5.4 Example of comparing code with code

Codes	Single new code
Avoiding Blocking-out Ignoring Not focusing	Ignoring

Once a single new code was assigned, codes could be compared with the concept to establish its relation to the concept and the feasibility of keeping the single code or the need to add another code.

Concepts were also compared with concepts to establish their relation and the feasibility of grouping them together into a category that would reveal greater theoretical insights regarding the concepts. For example, the following concepts were grouped together as they all resulted in a bigger process and category of concepts, namely, phantomising actions. The grouping of such concepts are better demonstrated via examples within the next chapter when variant excerpts reveal what is happening in the data.

Box 5.5 shows the comparisons between similar concepts, which, via comparisons, reveal a more abstract category of concepts.

Box 5.5 Example of comparing concepts with category of concepts

Concepts	Category of concepts
Ignoring Un-acknowledging Deprioritising Clouding Numbing feelings	Phantomising actions

Finally, the above may also serve as an example of how concepts were compared with categories to establish their suitability to being added to the category of concepts.

Throughout data collection and analysis, I sought to compare the relevant data to locate variations, similarities and differences in the data (Charmaz, 2014). This was done between, but also within, interview data throughout the entire data collection and analysis process (Charmaz, 2014; 2016). I also asked certain analytical questions about the data in order to achieve this and extended the properties of theoretical concepts. I relied on Glaser's (1978) questions enquiring:

- 1) What is actually happening here?
- 2) Under what conditions does this happen?
- 3) What is this data a study of?
- 4) What category does this incident indicate?

(p. 57).

Furthermore, analysis was constantly seeking to identify action and interaction, variant movement sequences, contexts, variations, degrees, and relationships between data (Charmaz, 2016). By constantly comparing, I was looking to continuously build connections between codes (Salvini, 2018); the aim was to continuously raise the level of abstraction to a point of having explanatory power (Bryant, 2018).

5.7.2.4 Focused coding

The next level in data coding concerned focused coding. According to Charmaz (2014), focused coding concerns using the most significant or frequent earlier codes to sift through large amounts of data. The aim with focused coding was to synthesise, analyse and conceptualise larger segments of data. An example of focused coding in the study is presented in Box 5.6. The qualitative codes in the excerpt label what the researcher saw as happening in the data.

Box 5.6 An example of focused coding within the study.

Participant narrative	Focused codes
Ann: Like I knew I was pregnant. I wasn't happy about it, I wasn't sad about it. I just wasn't feeling anything. I didn't even have time to think about when this baby is going to come and what I am going to do. I never even thought so far. I knew I was pregnant, but even so I am going about my normal day, going to work, doing what I have to do, coming home, seeing to the other kids. And it's like, my mind is not even there, you know? thinking now, it's coming near for me to give birth, and stuff like that. Nothing at all (emphasis in voice). It's like I just had this fat belly or something but it's not even like I am pregnant. I haven't acknowledge the baby at all.	Numbing feelings Un-projecting futures Maintaining present past Phantomising the pregnancy Un-acknowledging

The process between initial and focused coding was not entirely linear. I noticed during focused coding that some relevant and important topics that seemed implicit in earlier statements became explicit during the phase of focused coding (Charmaz, 2016). In such instances, I returned to earlier respondents and explored the topics further.

During the initial memo writing, I selected the codes that suggested analytic strength and raised them to a level of a tentative category to develop (Charmaz, 2014). A category is defined as the "... conceptual element in a theory" (Glaser and Strauss, 1967, p. 37).

5.7.2.5 Advanced memo writing and theoretical sampling

Based on the information obtained and analysed as discussed above, I was able to refine conceptual categories through advanced memo writing and theoretical sampling (Charmaz, 2016). Memo writing yielded thoughts on specific missing elements of the categories that needed to be explored, indicating that theoretical sampling could commence.

Theoretical sampling included sampling for information or additional data from participants to refine ideas and to extend the theoretical properties and boundaries of the category or set of categories (Charmaz, 2006; 2012). The data obtained became more rich, yielding variances, complexities, and relational dimensions that could be further explored via axial coding (Charmaz, 2014).

5.7.2.6 Axial coding

Axial coding, which concerns the type of coding where a category is used as an axis around which variant relationships and dimensions of the category are delineated, was used. (Charmaz, 2014). Charmaz (2014) regards this as a strategy to bring the data together into a cohesive whole. With the use of axial coding I began to adopt certain categories as theoretical conceptual categories, defined as the analytic conceptualisations or abstract ideas that form the variant components of the theory (ibid). The conceptual categories were further refined via additional theoretical sampling and advanced memo writing. The process continued until theoretical saturation was considered to have been reached.

5.7.2.7 Theoretical saturation or sufficiency

At the point of theoretical saturation, also identified as theoretical sufficiency, further iteration was no longer considered necessary and the data collection process and coding came to an end (Glaser, 2007; Weed, 2009). The point of theoretical saturation was considered to have been reached at the point where gathering fresh data no longer revealed new theoretical insights, nor extended the properties of theoretical concepts (Charmaz, 2014). In this regard, the theoretical concepts were all deemed to have been sufficiently robust (Bryant, 2018).

5.7.2.8 Memo writing and the construction of the final theory

Towards the final phases of the theory construction process, additional memo writing was done. This was considered a final opportunity to see if I would need to check my conjectures in the field and whether there were sufficient data to support my claims (Charmaz, 2016). I employed clustering to sort theoretical data, which involves the diagramming of configurations of clusters to provide images of how the data fits together and relates to one another (Charmaz, 2014). The final step involved sorting and integrating the concepts, categories and properties into an integrated theoretical statement, constituting the final theory constructed (ibid).

With an understanding of the techniques and processes involved in theory construction, the focus can now turn to measures taken to establish trustworthiness and quality of research.

5.7.3 Establishing and building trustworthiness and quality of research

A major component of the research process was to ensure to establishment of trustworthy data. Grounded theory approaches do not necessarily use the terms validity, generalisability and reliability to evaluate the quality of the research, as within quantitative approaches

(Brinchmann and Sollie, 2014; Weed, 2009). Instead, “the point is not whether another researcher will find the exact same categories to interpret the data, but if the findings are attention worthy” (Brinchmann and Sollie, 2014, p. 5). Qualitative researchers and grounded theorists, in particular, propose a different set of criteria to evaluate the scientific rigour and also propose alternative techniques to establish good scholarship (trustworthiness) (Heppner and Heppner, 2004).

I employed an integration of trustworthiness and quality criteria for qualitative research and GT as proposed by Lincoln and Guba (1985), Glaser (1978) and Charmaz (2006; 2008). The criteria are introduced and the techniques employed to ensure the attainment of the criteria are discussed in this section. The criteria are later revisited in the discussion chapter of this thesis, where evidence is supplied to demonstrate and confirm the attainment of the required quality criteria (see Section 8.7).

There is an overlap between the criteria for qualitative and GT as proposed by Lincoln and Guba (1985), Glaser (1987) as well as Charmaz (2006; 2008a). The criteria are summarised in Figure 5.7 below but are discussed in an integrated manner in the sections that follow, based on their relatedness. The major components of credibility, originality and ‘work’, resonance, usefulness, and finally dependability are considered.

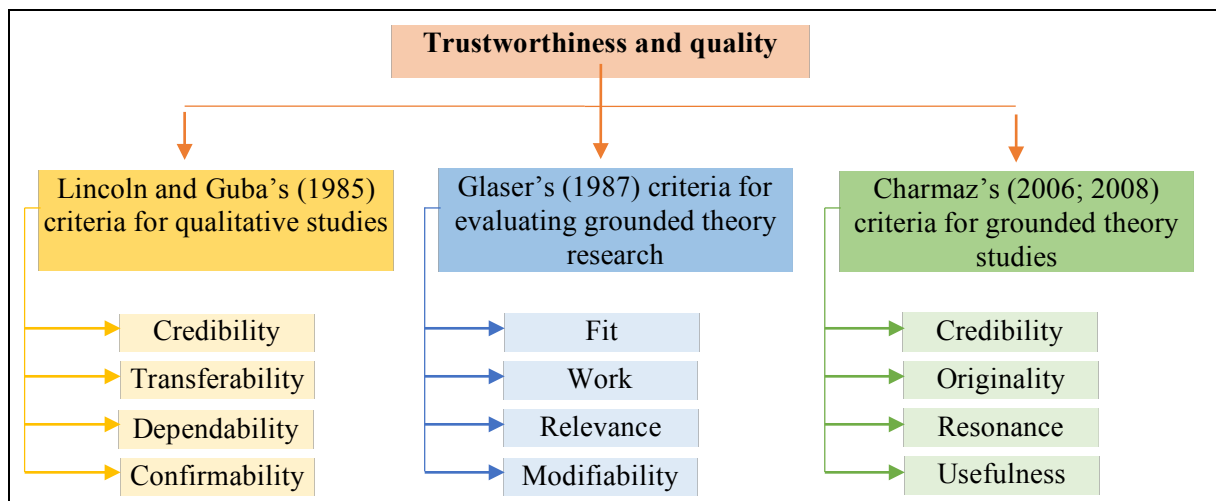


Figure 5.7 A visual representation of the quality criteria expected in qualitative research and constructivist grounded theory, in particular

5.7.3.1 Credibility

According to Lincoln and Guba (1985), credibility refers to the extent to which the findings are believable, or the extent to which the theory is considered plausible by critical readers (Charmaz, 2014). With reference to the concept of credibility, Charmaz (2006) asks the following questions:

- 1) Are there strong links between gathered data and argument?
- 2) Are data sufficient to merit claims?
- 3) Do categories offer a wide range of empirical observations?
- 4) Has the research provided enough evidence for the researcher's claims to allow the reader to form an independent assessment?

(p. 182).

The first and fourth question pertains to Glaser's (1987) grounded theory principle of 'fit' and Lincoln and Guba's (1985) concept of confirmability. The section that follows explains the measures taken to ensure that the principle of 'fit' was adhered to. In order to address the criteria of the second and third question, Lincoln and Guba's (1985) techniques of prolonged engagement and negative case analysis were applied. Finally, in order to ensure overall credibility, the qualitative research techniques of peer debriefing were applied (ibid).

Fit and confirmability

The principle 'fit' refers to whether the generated categories are indicated by data and can also be led back to data (Birchmann and Sollie, 2014). It has been mentioned already that inductive processes were employed via initial coding to allow the emergence of categories (indicated by the data). Moreover, deductive (ultimately abductive) processes were employed with focused coding and theoretical sampling to obtain supportive evidence for constructed categories and to elaborate the categories (leading back to the data) (Charmaz, 2014). 'Fit' was ensured by the researcher's incorporation of the abovementioned constant comparative method and seeking theoretical saturation within the data (Weed, 2009). In order to ensure that an accurate account of participants' stories was reflected, the interpretations made in the study are supported by excerpts and quotes extracted directly from the interviews (Lincoln and Guba, 1985) in the data analysis chapter. The excerpts from participants reveal how the categories were constructed and supported from the data. The excerpts also indicate strong links between the data that was gathered and the theoretical arguments and abstractions made.

Prolonged engagement

In order to obtain sufficient data to merit claims, I needed to engage with participants in such a manner so as to ensure the collection and construction of appropriate data for purposes of

theoretical saturation. This concerns the technique of prolonged engagement. Prolonged engagement refers to the extent to which the researcher engaged with participants in order to effectively establish trust and rapport to elicit relevant responses from participants. As mentioned already, I employed my skill in interviewing as a clinical psychologist to aid in establishment of effective rapport.

Prolonged engagement further pertains to the amount of time spent with participants as necessary to elicit the breadth and variations in experiences, understandings and scope (Lincoln and Guba, 1985). This also addresses the second question of offering a wide range of empirical observations. In this regard, I delayed moving on to theoretical sampling to first allow sufficient data to emerge relating to participants' experiences, before the theoretical direction was established (Charmaz, 2016). Later, a significant amount of time was spent on theoretical sampling in order to obtain information of varied experiences to fully extend the properties of the identified categories (ibid).

Negative case analysis

A major tenet of grounded theory is to provide explanations of the varied processes involved in the phenomenon under study (Charmaz, 2016). With this in mind, the analytical procedures of negative case analysis were employed. Negative case analysis refers to seeking out information and data which not only confirms and expands on the constructed properties and categories but which also contradicts the findings and points to alternative experiences, understandings and variances (Lincoln and Guba, 1985; Charmaz, 2016). The use of the constant comparative method further assisted towards such aims (Glaser, 1987; Charmaz, 2014). Such variances and contradictions were included as additional data and accounted for in the study by expanding the theoretical properties of the theory, and modifying the conceptualisations rendered by the theory (Lincoln and Guba, 1985; Charmaz, 2014). This process was continued until no new contradictions were rendered by the data (see theoretical saturation). As a result, the theory rendered was considered to be more credible (Lincoln and Guba, 1985).

Peer debriefing

Peer debriefing refers to meetings of the researcher with individuals who are not participants and who are able to ask probing questions regarding the methods used, conclusions and constructions made about the data, as well as to elicit potential biases on behalf of the

researcher (Lincoln and Guba, 1985). I, therefore, actively involved my supervisors and colleague in the reflexivity processes in affiliation with such aims.

5.7.3.2 Originality and ‘work’

A further criterion by Charmaz (2006) required for quality of grounded theory studies is that of originality. With respect to originality, Charmaz (2006) asks:

- 1) Do the categories offer new insights?
- 2) What is the social and theoretical significance of this work?
- 3) How does grounded theory challenge, extend, refine current ideas, concepts and practices?

(p. 182).

The aim of the research was to move beyond description and to move towards abstract theoretical renderings of the data. Specific emphasis was placed on eliciting the processes (albeit conceptual and emotional) that underpin the act. The significance in the work was, thus, to be determined by such previously unexplored new insights as is rendered in Chapter Six and Seven. Glaser’s concept of ‘work’ is applicable in this regard. According to Weed (2009), a theory ‘works’ if “... it is able to offer analytical explanations for problems and processes in the context to which it seeks to refer” (p. 506).

As discussed above, in order to ensure that such processes were elicited, interview guides were constructed based on the content discussed in Section 5.6.2.4, as well as the use of gerunds when coding. Process was further elicited during the analysis processes via the focus on relational and dimensional aspects of the data (Charmaz, 2014). The processes that were elicited had the benefit of extending and refining understandings of the act of neonaticide among the women who were studied.

5.7.3.3 Resonance

The next criterion proposed by Charmaz (2006) is that of resonance. Charmaz (2006) enquires:

- 1) Do categories portray fullness of the studied experience?
- 2) Does the grounded theory make sense to the participants?
- 3) Does analysis offer them deeper insights about their lives and worlds?

(p. 182).

Question one and three refer to in-depth understandings about the women’s experiences.

Section 5.6.2.2 above argues the importance of the in-depth interviewing techniques used as well as the prolonged engagement argued in Section 5.7.3.1 to ensure that such rich data is

obtained and portrayed in the final theory. The requirements of question two were obtained via adhering to Lincoln and Guba's (1985) recommendations of member checks.

Member checks

According to Lincoln and Guba (1985), quality in grounded theory and credibility is determined by the extent to which the findings are accepted by those who were being studied. I engaged in member checks by having participants review the plausibility of the final theory constructed towards the final stages of the theory construction process (ibid). With the participants' input, confirming that the theory adequately represents their perspectives and experiences, I was assured that the theory constructed is credible (ibid).

5.7.3.4 Usefulness

A further concept concerning quality criteria in qualitative research is that of usefulness. With reference to the concept, Charmaz (2008a) asks the following questions:

- 1) Can the analysis spark further research in other substantive areas?
- 2) How does the work contribute to knowledge?
- 3) Does the analysis offer interpretations that people can use in their everyday lives/worlds?

(p. 182).

Related concepts that pertain to the concept 'usefulness' is that of 'transferability' and 'relevance'. Before considering the questions, Charmaz proposes, with reference to usefulness, it is firstly important to consider the concept of transferability.

Transferability

Transferability in qualitative research refers to the extent that the findings can be transferred to other settings and populations (Lincoln and Guba, 1985). Although participants yielded rich interviews, the study is small and the findings are specific to the context in which they were created (Charmaz, 2014). A further limitation with reference to CGT is that the data is co-created by the participants and the researcher, and that another researcher may have emphasised and elaborated on other findings with similar data (Charmaz, 2016). With limited studies to compare data with, it is considered premature to transfer the findings to other settings. However, such limitations were accepted when embarking on the research endeavour with this specific method. The reason is because the usefulness of the study is measured by the steps taken in providing substantiative theory with the eventual goal of establishing a formal theory. The final goal cannot negate an initial starting point and research endeavour such as the current one (Charmaz, 2016).

Addressing usefulness

In addressing Charmaz's (2008a) first two questions of usefulness, the study is perceived to provide *one* possible explanation of the phenomenon of neonaticide among many (Charmaz, 2014) and is conceived as a starting point to theorising around the phenomenon. The discussion chapter provides recommendations on how additional research can contribute towards the establishment of more formal theories. The chapter also elaborates on how the study contributes towards practical knowledge in the field.

Relevance

It is worthwhile to mention that the third question relates to Glaser's concept of 'relevance'. 'Relevance' refers to the extent to which the theory pertains to the real concerns of the individuals involved in the process and whether it is useful in practice and meaningful for practice (Birchmann and Sollie, 2014; Weed, 2009). Suggestions on how the research may be used to inform the development of future rehabilitation and preventions techniques with reference to neonaticide are considered in the discussion chapter.

5.7.3.5 Dependability

The final research quality criteria considered is that of dependability. Dependability refers to the extent to which the research has followed the prescribed process of the selected methodology (Lincoln and Guba, 1985). This chapter provided in-depth coverage of the research processes taken to arrive at the final theory constructed. These endeavours are understood to allow the reader an opportunity to assess the extent to which the selected research practices were adopted (ibid).

A further approach to reach dependability was the provision of reflexive statements provided (Lincoln and Guba, 1985). Charmaz (2014) refers to this technique as transparency in the research. According to Charmaz (2008b), transparency is pivotal to qualitative research. In this sense, it is understood that the researcher's background assumptions, experiences and disciplinary perspectives may shape their selected topic, its conceptual emphasis and interpretations (Charmaz, 2014). The researcher is, therefore, obliged to be reflexive about what they may bring to the research scene, by making these aspects known in the research report. Charmaz (ibid) further advocates that the researcher's knowledge and theoretical preconceptions should be subjected to rigorous scrutiny through the previously described constant comparative method, which was ensured throughout the data analysis phases and the use of a reflexive journal. Through such measures, I ensured that the data described was co-

constructed by both research participant and me, as the researcher, emerging through the data; and not purely a product of my preconceived ideas or assumptions (ibid).

5.7.4 Summary of data analysis and theory construction

The aforementioned sections reveal the data analyses strategies employed throughout the process of theory construction, along with the quality measures to protect the integrity of the data. Table 5.4 is a summary of the data analyses strategies employed to attain the purposes of the theory pursued in the study.

Table 5.4 Data analyses techniques to attain the purposes of the pursued theory

Analysing process	Analysing actions	Techniques to render abstract understandings	Techniques used to reveal variations, relations and dimensions	Grounding the data	Seeking emergence
Constant comparative method	Coding in gerunds	Memo writing	Memo writing	Initial line-by-line coding	Initial line-by-line coding
Coding in gerunds		Raising focused codes to tentative categories to pursue	Coding in gerunds	Focused coding	Focused coding
		Adopting certain categories as concepts	Constant comparative method	Constant comparative method	Constant comparative method
			Axial coding	Checking to see whether sufficient data was obtained to support claims	
			Diagramming and sorting		
	Theoretical sampling				
		Theoretical saturation			

It is not only important to understand the data collection and analysis strategies used as discussed above, but also the measures taken to protect participants throughout such efforts. The discussion will now turn to the relevant ethical principles adhered to in order to ensure such aims.

5.8 Ethical Considerations

Inherent in any research study is the potential of risk or harm to participants (Rid and Wendler, 2010). This section delineates the evaluation of the risk-to-benefit ratio of the potential study, the decisions made based on such understandings, and the measures taken to protect participants on the basis of such knowledge. It considers the applications made to the

internal review boards, the prevention of coercion, and insuring informed consent. Furthermore, participant rights are explored and the importance of availing emergency psychological services are discussed.

5.8.1 Risk-to-benefit ratio

The evaluation of risk-to-benefit involves the act of assessing the potential risk factors concerning the considerations of the likelihood of harm occurring and balancing this against the potential benefits of the study, referring to its potential positive outcomes (Rid and Wendler, 2010). Harm in the present study was evaluated based on participant experiences that set back the interests of individuals, while benefits were evaluated on the basis of the value that the study would have for the advancement and interests of one or more individuals (ibid). Ultimately, the evaluation resulted in a decision being made based on those aspects that were deemed to outweigh the other.

There are risks in any research endeavour that involves the use of study participants, especially in instances where methods of interviewing are employed (Rid and Wendler, 2010; Wolgemuth et al., 2014). This is particularly relevant when researching vulnerable populations, such as those who are incarcerated, and when exploring sensitive topics, such as that of neonaticide (Wolgemuth et al., 2014). Wolgemuth et al. (2014) concede that such circumstances and populations may view interviews as “... emotionally intense, distressful, and sometimes painful” (p. 03).

However, it need not necessarily be the case for everyone. Some individuals report that their interview experience for scientific research resulted in feelings of catharsis, empowerment, feelings of self-acknowledgement, a sense of meaning and purpose with the knowledge that the findings would be used to benefit others, increased self-awareness, feeling heard by empathic listeners, and the sense of a voice being given to the disenfranchised (Hutchinson, Wilson and Wilson; 1994; Wolgemuth et al., 2014). Hence, the aforementioned risks are not necessarily guaranteed, and it was understood that measures could be taken to reduce the sense of harm and amplify the sense of benefit for participating instead.

Chapter One introduces neonaticide as a grave social issue that has implications for individuals, families and society as a whole. The literature review of this thesis emphasises the little scientific knowledge pertaining to the phenomenon and that particularly few in-depth understandings around the phenomenon exists. The dilemma concerning the implications this

has for the development of prevention and rehabilitation programmes has also been discussed. In this sense, the value and potential benefits of research of the current nature were considered to outweigh the potential, but not guaranteed, risks to individual participants (Wolgemuth et al., 2014).

Despite this decision, however, a central concern regarding the ethical considerations of the study was to ensure that the potential risks to participants were not excessive and that measures were taken to reduce the likelihood of such risk as much as possible (Rid and Wendler, 2010). The sections that follow elaborate on how this was achieved.

5.8.2 Internal review boards

In order to ensure that best ethical practice guidelines were adhered to in this study, an application to conduct the study was made to the University of the Witwatersrand (WITS) Human Research Ethics Committee (HREC) (Medical) as well as the research committee at the Department of Correctional Services (DCS). When decisions were made to include additional study sites, an application was made again to the HREC. Supportive documentation yielding approval of the study procedures are presented in Appendices Five and Six.

5.8.3 Prevention of coercion and informed consent

The research population was considered vulnerable to being coerced into partaking in research undertakings, based on their status as detainees and the power dynamics inherent in the prison setup. For this reason, special measures were taken to prevent a sense of coercion and to encourage voluntary participation.

To avoid a sense of coercion from prison staff or me, as researcher, participants were invited to participate in the study via a recruitment letter presented to them in a sealed envelope by the social worker (see Appendix One). The letter described the nature of the study, provided information about me as the researcher, and contained a copy of the consent form detailing participant rights, to be signed at a later stage. Participants were provided with an opportunity to absorb the information in the recruitment letter and indicated their willingness to participate in the study by marking an 'X' in a designated box. Participant responses were returned in a sealed envelope to the social worker, who subsequently handed the responses to me.

Once participants indicated their willingness to participate in the study, they were approached by me for an initial meeting. This was used as an opportunity to verbally inform participants about the nature of the study, to inform participants of their rights, the potential consequences of participating, and to ensure that participants understood the consent form. Participants were also afforded an opportunity to ask questions about the study during this session.

5.8.4 Participant rights and consequences of participation

In addition to concerns of participants experiencing a sense of coercion, the study population was further considered a vulnerable population, based on the likelihood of the prison context creating a perceived notion that the incarcerated and, thus, participants, are devoid of rights. Participants were also considered vulnerable to exploitation as involvement in prison activities may typically indicate ‘good behaviour’ in the prison context, which could be perceived to result in favourable outcomes, for example, early parole. For these reasons, special measures were taken to communicate participant rights to those involved in the study and the consequences of participating.

Participants were informed via the recruitment letter and consent form (see Appendix Seven) about the voluntary nature of participating and that there would be no consequences for participating or not participating in the study procedures. Participants were directly informed that their involvement in the study would not impact on their incarceration in any way. Additionally, participants were informed that they were free to withdraw from participating at any time. Permission to be audio recorded was further sought prior to participation and participants were informed that the interview data and transcripts would be securely held for a duration of five years and then destroyed. Furthermore, anonymity was ensured as all data was de-identified and participants were allocated a number as a source of reference. Finally, participants were informed that the findings would be used to construct a theory and that it would be published in scientific journals and presented in academic settings and conferences.

5.8.5 Emergency psychological services

I put measures in place prior to commencing the study to intervene in the event of participants experiencing emotional distress as a result of their participation in the study procedures. Although I am a trained and practicing clinical psychologist with skills in debriefing and containment, I elected not to intervene on this level to avoid a conflict of interest in terms of assuming dual roles (researcher and clinician) in my interactions with the same individual. Two senior psychologists and one psychiatrist, independent from the study, provided a letter

of support indicating their availability to provide initial psychological intervention to participants in emergency situations in each respective region (see Appendix Eight). It was established that the study procedures would have been stopped immediately should I have become aware of the aforementioned circumstances and the psychologist referred to would have been contacted to consult with the relevant individual the same day of the referral (see Appendix Nine). The psychologist would have focused on debriefing the individual, containing them, and signing no-suicide or no-homicide contracts, where relevant (see Appendix Ten). The unit manager of the participant's correctional services block would then have been informed of any suicide or homicidal ideations in order to protect the participants and others. A referral would then have been made for further intervention by informing the supervising individual for mental health workers within the prison. Participants had been informed of the possibility of such measures being taken prior to participating in the study. However, the services were never required throughout the study procedures.

5.9 Limitations and Delimitations

A final matter to consider regarding the methods used is the limitations and delimitations thereof. This concerns limitations with identifying and locating potential participants and the impact thereof on time constraints, concerns with transcribing interviews, problems with having collected large amounts of data, challenges in manoeuvring around the hierarchical ranking system of the DCS, difficulties of power-imbalances between me and participants, and challenges concerning participant characteristics and interactional styles.

The significant limitations regarding identifying and locating potential participants have already been discussed. This sheds light on the need for record-keeping in South Africa to include the nature of the offence (i.e. neonaticide) when documenting types of crime (i.e. murder). Record-keeping should also link variant systems, such as that of the Department of Justice and the Department of Correctional Services as well as the Criminal Records Centre. If this were not to be done, identifying such samples for research purposes may significantly hamper the feasibility of conducting studies such as the current research.

The act of transcribing the interviews myself had the benefit of cost-effectiveness and remaining close to data. However, transcribing over 30 hours of interviews proved to be significantly time consuming.

Furthermore, a significant amount of data was collected. At times, the amount of data to manage was overwhelming. Although obtaining information on the women's 'life stories' was positive, in that it afforded time for significant rapport to be established and for the women to direct the discussion towards the offence when ready, it also added to the amount of data obtained. Some of the data was not necessarily directly relevant to the study question. However, how the women managed going about their lives (additional details obtained) alerted me to some possibilities for the areas in which the study was more specifically concerned with, namely the variant pregnancy experiences. Moreover, coding of the large amounts of data also proved to be complex and time consuming.

Early in the research process, I recognised the importance of fitting into the organisational culture of the correctional services system. All interactions with the DCS and requests made had to occur via a hierarchical system and chain of command. Requests had to be approved from a bottom-up perspective through the ranks. Initially, this was a challenging task in that I was unaware of the nature of the ranking system and at what point the final deciding authority would have been reached. This also proved to be time consuming, whether it was a request for changes to be made in the application to conduct research, obtaining study approval letters, needing assistance with obtaining information on where potential participants may be incarcerated, or arranging permits to gain access to correctional services centres on the day of interviews.

All research may create a power-dynamic between researcher and participant; in other words, creating a context where the researcher is deemed as the all-knowing expert (Babbie, 2005). However, this proved to be a significant concern with respect to women who are incarcerated and for the population concerned. It initially appeared to me that the women were agreeable and I felt concerned about the potential of participants feeling coerced into participation or that they would experience undue pressure or intrusion. I did wonder whether such an attitude is important for fitting in as an incarcerated individual within the correctional services system. I felt it to be important to remind participants of my position outside of the system, as one of being researcher. Also, I constantly reminded participants of their right to withdraw and that involvement in the research would not result in any consequences to their incarceration or sentence, whether positive or negative. Personally, this was a challenging task as I needed to manage my own desperate need for participants at the expense of respecting participant's rights and well-being. However, reminding participants of their rights within the research process eventually proved to be beneficial to the research endeavour, as participants reflected

experiencing 'freedom to choose'. This is something reportedly not frequently experienced within the correctional system. Ultimately, this assisted with the building of rapport.

Moreover, I was very aware of my presence in the interviewing room. That of being a Caucasian professional woman. My race, status as a professional woman, socio-economic status, and status as a non-offender were all expected to create distance between myself and the participants. I was concerned about whether this would make the women feel more guarded, and whether they would think that a woman with such a different background would truly understand their experiences and perspectives. Moreover, most of the women narrated concerns regarding stigmatisation for the nature of their offences committed. I, therefore, remained especially cautious of the possibility of the women experiencing judgement by my manner of speaking and questions asked. At times, I also reflected on the differences between me and the participants, and how it is also natural to feel guarded regarding the offence; or sharing life stories with someone with a different background. Participants were also consistently reminded that they had the right to choose whether a question would be answered. Moreover, I reminded participants of their status as 'expert on their lives' and that I simply wanted to understand their experiences from their perspectives. This was also done to balance the power-imbalances. The approach appeared fruitful in strengthening rapport and allowing further exploration.

Having been within a forensic setting and addressing content of a highly stigmatised nature, I remained aware that participants may wish to present themselves in a favourable light. While it was of optimal importance to obtain information from the women's perspectives, I also deemed it important to remain critical of the data obtained, in the context of knowing the aforementioned presentation. I felt it to be necessary to enquire more on contradictions observed or when women were seemingly minimising significant events. However, I waited for rapport to be effectively established prior to confronting the women on such content.

It was my impression that many of the participants appeared passive and immature in their interactional styles. Initially I experienced that the women wanted me to lead and guide the interviews, with a seeming preference for closed-ended questions. Moreover, I was concerned about participants being impressionistic and suggestible. On the basis of this, it was deemed especially important not to be directive in my interviewing style. This proved to be challenging at times, as their style would elicit a part of me that would want to take direction and lead. This subsequently needed to be managed and was reflected upon within peer

supervision. With the aim of obtaining rich and detailed data from the participant's perspectives, I reminded participants to share their stories in whichever order and manner they liked. I also assured participants that I would return to details if I needed to flesh content out further and frequently did this by asking for examples of statements made.

Finally, it is important to bear in mind that many of the women were not interviewed in their first language. Although I deemed the women's comprehension of the English medium to range from satisfactory to fair, it is likely that more in-depth or different information could have been obtained if all the women had been able to converse in their home language.

5.10 Chapter Conclusion

This chapter delineates the theory construction process employed as it began with a broad and open enquiry and moved forward iteratively between the initial interviewing and coding procedures towards more focused interviewing and coding in theoretical sampling. The aim of increasing the level of abstraction and ensuring theoretical saturation was emphasised as I pursued a theory. Claims of the efforts made to elicit the processes and actions that underpin the act, manoeuvres to render abstract understandings in the form of variances, relationships and dimensions pertaining to neonaticide, and techniques used to ensure the emergence and grounding of the theory were discussed. Attempts to ensure the trustworthiness and quality of the theory as well as measures taken to protect participants were examined. The methods discussed led to the construction of the substantive theory that is presented and illustrated in the following chapter.

CHAPTER SIX: THEORY CONSTRUCTION AND THE THEORETICAL FRAMEWORK

6.1 Chapter Introduction

The purpose of this chapter is to serve as a bridge between the methodology of constructivist grounded theorising and the findings delineated within the following chapter. In the bridging, the chapter provides my reflections and reasoning throughout the research process as it led to theory construction. Firstly, an account is provided on how the research question was rethought and reconstructed throughout the research process; as being true to the grounded theorising style. Ultimately, it is revealed how the study process contributed to new and unexpected insights. It is further introduced why the findings are presented in the form of a conceptual framework together with the rationale for the framing of post-interview constructs presented within this chapter. The chapter then serves to define each of the category of concepts as well as its properties, variations, relations and dimensions. A reflective tone is provided as I reveal how the initial study objectives and sensitising concepts as well as my workings with the data contributed towards the construction of the theoretical concepts. The definition of the variant concepts within this chapter sets the scene for the following chapter, the purpose of which is to present the findings and reflect the women's voices, as well as to apply and reinforce the concepts.

6.2 Locating and Reshaping of the Research Question

The purpose of this study was to construct a theory on how women from criminal populations come to commit neonaticide. The aim was to provide an abstract account of the conceptual (thoughts) and emotional processes (unfolding temporal sequences) as well as actions (patterns of behaviour) that underpin the phenomenon. In navigating towards such aims, it is important to bear in mind that a grounded theory is mainly the result of the research process, not it's beginning (Salvini, 2018). The nature of a grounded theory study is that it is, in itself, a process and that one does not necessarily end up where one begins (Charmaz, 2016). It is unlikely that one would know from the start what the study would in actual fact be about, or what the data is a study of (Glaser 1978). In considering it as a process, one remains open to changes in the research direction and different theoretical possibilities (Charmaz, 2016). It is through such means that one is able to develop new theoretical insights within the field (ibid). While I was cautious of steering too far away from the principal aim of the research, namely, developing a theoretical account on how women come to commit neonaticide; I did allow for flexibility in navigating towards the answer to the research question. The nature of content

and data required to answer this question was shaped within the research process on the basis of emerging data and concepts as well as the research experience. My interaction with the data and navigation was, thus, shaped by: a) Embracing serendipity within the research encounter; b) Rethinking the study objectives and pursuing complexity as well as a processual and action focus; and, c) Allowing new questions to emerge and to be constructed from the data.

6.2.1 Serendipity in the research encounter

The research offered unexpected insights and I was able to broaden the scope of exploring potential processes and actions that may be underpinning the phenomenon. At the outset of the study, I was expecting to construct a theory by looking at the women's pregnancy experience with respect to their neonaticidal pregnancy only. However, due to a serendipitous encounter regarding my sample characteristics, and subsequent surprising observations within the data, I elected to extend the scope of exploration.

Given that previous literature conceded that most neonaticidal women tend to be nulliparous, I expected the women in my sample to have experienced their neonaticidal pregnancy as their first pregnancy. However, I was surprised to find that all the women within my sample had experienced two or more pregnancies prior to committing the act. I was, therefore, not expecting the possibility that exploring the women's non-neonaticidal pregnancies (N-NPs) together with their neonaticidal pregnancies (NPs) would hold for understanding the foundations of the act. It is fortunate that the scope of the research was amended to incorporate their experiences in accordance to both their N-NPs and NPs in conceptualising the act.

The women in the sample were invited to broadly share their life stories at the outset of the study. In trying to explain their experiences regarding their NPs, the women compared their experiences thereof to their N-NPs. The women also volunteered differences of their non-neonaticidal birth (N-NB) to their neonaticidal births (NBs). The women narrated surprising differences between the two types of pregnancies which will be demonstrated via excerpts in the next chapter. Within their N-NPs, they related receiving significant support and input; a pregnancy that was contemplated for nine months and guided by others. The women further narrated feelings of compassion and care towards the baby at birth. However, within their NPs, the women reported feeling alone, never having thought about the pregnancy and baby and feeling at birth as if the child was not their own or even a child at all. I came to reason

that if the same mother may come to experience her two babies and births so differently, that comparing the them may offer insight into the underpinnings of neonaticide. Thus, instead of focusing mainly on the women's NPs and NBs, I elected to also expand the scope of exploration and analyse their N-NPs and N-NBs in equal detail. Subsequently, this presented an opportunity to explore the underpinning processes and actions that may serve as different pathways towards a N-NB and NB.

6.2.2 Rethinking the study objectives and format of research findings

The previous chapters emphasised the need to create new insights and to provide a theoretical account concerning the 'bigger picture' regarding the phenomenon of neonaticide. However, this aim may potentially have been jeopardised if I had not addressed two conflicting intentions expressed within the research. The two conflicting aims concern answering the list-format objectives provided in Section 2.3.2.1 versus the expressed interest of providing an abstract theoretical account that would speak to the connections, relations and interactions between concepts. In rethinking the study objectives and purposes thereof, I was able to reshape my view of the final research product and what the final outcome would be.

As part of the review board and ethics requirements for a thesis format, one is required to list the study objectives. I endeavoured to list objective content that would be sufficiently vague, to allow for new insights to emerge. In the same sense, I identified sensitising constructs that would become areas of potential exploration. However, I carefully undertook for them not to dictate what would be discovered. Despite the latter two approaches set in place, the mere act of listing objectives was in conflict with the overall aim of providing a theoretical account of the data. The reason for this is because such an approach sets the scene that there are specific data to be sourced and themes to be presented in accordance to the objectives listed.

Inherently, presenting static themes and structures goes against the grounded theory intention of providing a rich, abstract, complex and dynamic understanding of phenomena (Charmaz, 2014). It was, thus, decided that the end product would not answer directly to the initial objectives listed in the previous parts of the thesis. Instead, it was endeavoured that the end product would provide a comprehensive dynamic account of interacting concepts. Charmaz (2019) was consulted on the matter and indicated that "writing any qualitative research project in which discoveries are made, and the researcher develops new ideas does not fit into the standard dissertation format" (personal communication).

From a practical point of view, it was decided to loosely maintain the sensitising constructs borrowed from SI (See Section 3.4.8). However, what was more important, was to see what possibilities this conceptual focus would allow for in the data. Such data was then analysed by identifying their properties and summarising them in categories that were placed at a higher level of abstraction (Bryan, 2018). At this point, it was observed how new questions had emerged from the data and the research question and objectives could be refined. Finally, the analysis was completed through identification of relationships between those categories, conceived as theoretical saturation (ibid). On the basis of this, unique connections as well as relationships, interactions, variations, and dimensions could be constructed (Charmaz, 2014). Subsequently, the findings are presented in the form of a theoretical framework, offering concepts and categories of concepts (or conceptual categories) that can be applied to the women's stories to conceptualise pathways towards a N-NB and NB. The definition of the different conceptual elements that constitute the research framework are defined in Section 6.4 below.

6.2.3 Eliciting theoretical potential within the data and the emergence of new questions

The concepts provided within the theoretical framework below demonstrate my workings with the content provided by the women within the study. They reveal how the research objectives, as provided within Section 2.3.2.1, and sensitising concepts, led to new theoretical insights as well as new questions to emerge within the data. I reflect on how I was looking to build abstract categories that would have explanatory power, by looking at what was happening in the data obtained (Bryant, 2018). It is, thus, broadly shown how I was eliciting the theoretical potential within the data via constantly comparing and building connections within the data, looking for action and interaction, changes over time, different contexts, variations, degrees, and relationships among the data (Bryant, 2018; Charmaz, 2014; Salvini, 2018). Glaser's (1978) questions concerning what is occurring in the data or enquiring what the data is actually a study of, or what categories the occurrences indicate, are also reflected upon. As a result of these practices, it is shown how the following new questions emerged and were constructed from the interaction with the data:

1. How do the women approach pregnancy and mothering-related content or experiences?
2. Who are the women and what is the nature of their role playing as mother?
3. How do the women interact with and engage with their environment?
4. What are the consequences to the aforementioned interaction?

5. What are the variant behavioural outcomes that may occur as a result of the women's interaction with their environment and the subsequent arising consequences?
6. What are the forces or types of actions at play through which the above outcomes are attained or maintained by?

The questions speak to the refined study objectives in Section 2.3.2.2. The questions led to the construction of variant abstract concepts that would address each of these questions. Each of the concepts may be seen to reveal conceptual (thoughts) and emotional (feeling) processes as well as actions taken. The concepts are summarised in accordance to the framework of this study. Within the next chapter, the constructed concepts are shown to interact over time, having unique consequences for the women. It is further indicated how the subsequent constructed concepts may be applied to reveal the underpinning pathways towards a N-NB or NB among the population studied.

6.3 Rationale for the Presentation of Study Findings

The reader is reminded that the study question was seeking to reveal the processes (conceptual, emotional and behavioural processes) that underpin the act of neonaticide. The question of 'process' is argued herein to require a research product that reveals complexity, interaction among concepts, connections, relationships variations and dimensions, changes over time and in accordance to different contexts. The research product which was sought was not a linear one, but rather a recursive circular account. The circular and interactive presentation of concepts present a unique challenge for communicating the study findings. The reason for this is because the abstract constructed concepts are dynamic and not one directional. Moreover, one concept may be an extension or sub-category of another concept. This makes it difficult to list theoretical concepts with accompanying data, merely because of the vast recurrences, variations, dimensions and connections that interacting concepts make. It would be too challenging to show connections in a list-style format of writing by explaining how one concept relates to another if the latter concept has not yet been defined. On the basis of this, it was decided to first orientate the reader towards the conceptual framework and to introduce the abstract concepts constituting the framework. By way of reflecting on my intuitive contemplations of the data as indicating the concepts described within this chapter, the reader is prepared to more readily recognise the data indicating such concepts within the next chapter. The sections that follow, thus serve to introduce and frame the concepts and, thereby, provide order and structure to the findings and analysis presented in Chapter 7.

6.4 Conceptual Elements of the Research Framework

The findings in this study are presented in the form of a theoretical framework. Essentially, a framework is an abstraction that focuses on some specific aspect of the research context (Bryant, 2018). The research framework constructed consists of a number of conceptual elements. The elements are firstly introduced and then defined throughout this section. The framework consists of variant concepts that communicate several ideas about the data. The concepts include one core category and four major categories of concepts (conceptual categories). Some major categories have further sub-categories of concepts. The concepts are explained via the research properties. Furthermore, where relevant, variations, relations and dimensions of the concepts are indicated and referred to. This is done to explain how the concepts manifest over time, under different circumstances, conditions, and contexts. The framework can, thus, be employed as a conceptual frame by drawing on the relevant concepts, its properties, variations, relations, and dimensions to offer a theoretically plausible account on the underpinning pathways towards a N-NB or NB. The framework may, therefore, serve to provide a language that may be used to understand how women may come to commit neonaticide. This section serves to define the framework elements as used within this study.

The core category is the most abstract theoretical construct (Bryant, 2018). It has the most explanatory power; which explains the formative processes towards a N-NB or NB (ibid). All major categories relate to the core category. It is through the variant interactions, connections and relations among the major categories and their associated concepts that the underpinnings of neonaticide are revealed.

After the core category, the major categories of concepts have the most theoretical power, providing an explanation on variant processes (conceptual and emotional) and actions. The concepts are grouped together under the respective categories on the basis of their relatedness. Subsequently, the category of concepts serve more of a purpose than grouping related concepts together but has explanatory power in itself. It is, thus, deemed a conceptual category that may interchangeably be referred to as a concept when spoken about. Some major categories have sub-categories, which constitutes a separate theoretical group of concepts that are related to and which also forms part of the higher level of category.

Each constructed concept and category of concepts (conceptual categories) introduced is explained by delineating its properties, namely the defining characteristics or attributes thereof (Charmaz, 2016). Some concepts are presented with variations that delineate how the

concept may present differently at different times or in accordance to different contexts (Bryant, 2018). Relations between concepts further reveal how the concept may relate to or interact with other concepts (ibid). Finally, dimensions demonstrate degrees of the concept and give way to which extent the concept may occur or present as (ibid). With an understanding of the variant elements of the research framework, the following section will present an outline of the constructed research framework.

6.5 Theoretical Constructs of the Research Framework

This section introduces the variant theoretical concepts constructed within the study. It commences with an introduction to the narrative structure that the women recounted their stories to. The section further outlines the core category, main categories of concepts and their accompanying properties, variations, relations, and dimensions. My personal engagement with the data is briefly reflected upon as I reveal how I engaged with the data, built connections between data, and constructed the subsequent concepts and categories. I reflect on what I felt the data was revealing and how I reasoned to group data together in more abstract conceptual categories. It must be noted that the concepts are merely introduced within this chapter but are bolstered and reinforced via example excerpts from the data within the next chapter. The variations of the different concepts are also better revealed within the following chapter, as a variety of examples of the concepts are revealed to manifest differently over time.

6.5.1 Narrative structure: The gestating events continuum

At the outset of the study, it was decided to consider the women's conceptual and emotional experiences as well as actions as they present over time. It was initially thought that this would be considered across the various trimesters of the gestational period. However, on the basis of my maturity in the research method, it was decided to impose less structure and afford the women an opportunity to elect what aspects of the pregnancy experience they wished to emphasise. This concerned both types of their pregnancies, their N-NPs and NPs alike. The women appeared to narrate their stories according to variant phases, ranging from pre-pregnancy towards reflections on the occurrences at birth and also after giving birth.

On the basis of their stories, I identified five apparent gestational phases where the women discussed variant tasks or activities to be achieved. The phases include: a) Pre-pregnancy; b) Receiving news; c) Sharing news; d) Physical pregnancy; and e) Labour and birth. I refer to this as the 'gestating events continuum', which serves as a narrative structure through which

the women's pregnancy experiences can be understood. It is not a theoretical construct, but merely provides a timeline and structure that the theoretical concepts constructed within the study can be seen to present, recur and interact with one another over time. It is, thus, employed as a structural aid to reveal the pregnancy process over time. This will become evident within the next chapter, as the underpinning pathways towards a N-NP and NP for this sample of women are shown to occur as the variant concepts interact with one another over time. Hence, while content related to variant trimesters are still discussed, the concepts constructed within the study are better shown to occur according to the 'gestating events continuum'. In sum, by way of the structural use of the gestating events continuum, the important element of timelines is incorporated in the theory.

Each phase of the gestating events continuum concerns how the women manoeuvred around relevant pregnancy-related tasks. The pre-pregnancy phase is seen to involve the task of family planning. The receiving news phase concerns the task of recognising and acknowledging the pregnancy. The sharing news phase concerns the act of drawing in support for the pregnancy and parenting. Next, the physical pregnancy phase concerns considering the foetus, accepting the pregnancy, connecting with the foetus, anticipating and planning a future for the baby, prenatal baby and self-care, preparing practically for the baby and self, identifying the baby, and finally, preparing for birth. The final phase of labour and birth concerns the task of delivering of the baby as well as confronting the newborn and the aftermath.

The manner in which the women manoeuvre around each of the aforementioned tasks can be seen to occur via the interaction of theoretical concepts constructed. However, it is first necessary to orientate and introduce the reader towards the variant theoretical constructs with its explanatory potential.

6.5.2 The core category: Docile gestating

In considering the data, Glaser's (1978) question of seeking to understand what the data is a study of was constantly at the forefront of my analysis. In comparing the women's stories regarding all their pregnancies, N-NP and NP alike, I started realising that the women were telling stories about 'relinquishing control' over mothering and pregnancy-related content. In this respect, control refers to the notion of taking responsibility and initiating action towards something. The idea was first provoked via narratives concerning the notion of not taking control, as exemplified by the statement below.

Excerpt 6.1

I don't think I would have done what I had done if I thought first about what I was doing; and to take control of my life. Because, at that time I had no control over my life, always having people dictate to me all the time.

Ann

I started paying attention to the different ways in which the women were refraining from taking control. Glaser's (1978) question, concerned with what is happening in the data revealed that, at the highest level of abstraction, the women were in all their doings refraining from taking control (responsibility). This was seen to reveal something about the nature of how they approach pregnancy and mothering content, eliciting the question, "How do the women approach pregnancy-related content?" The question is addressed by the core category of the study, namely, 'docile gestating'.

6.5.2.1 Properties of docile gestating

The theoretical construct of docile gestating refers to the women's approach towards pregnancy and mothering-related content and/or experiences. Their approach is seen to be underpinned by docility, where the women relinquish control over the situation; they await instruction from others or alternatively, negate to act at all without the initiation or instruction from others. In this regard, the women are seen to relinquish control in one of the above two ways. The core category, thus, includes the two concepts: a) 'relinquishing control via vicarious enacting', and b) 'relinquishing control via abdicating'. Figure 6.1 is a visual representation of the core category, docile gestating, and its two associated concepts.

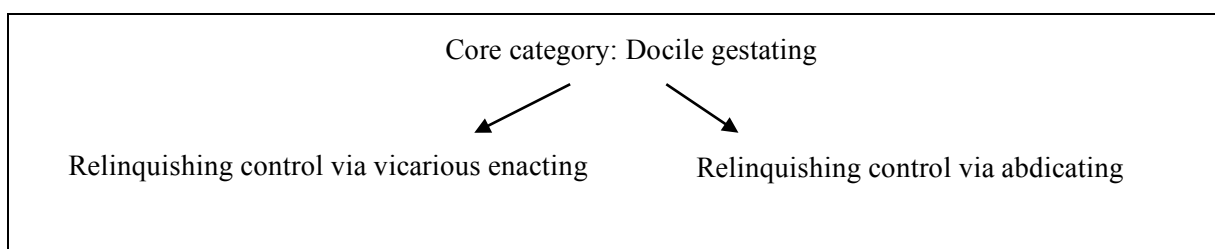


Figure 6.1 Visual representation of the core category

6.5.2.2 Relinquishing control via vicarious enacting

The concept of relinquishing control via vicarious enacting refers to the preference of outsourcing control over the pregnancy situation to another individual. In other words, placing the responsibility upon another. The women's stories reflect the stance of docility, where they readily await and accept control or instruction from another individual on how to manage their respective pregnancies and mothering-related content. The synonym of

vicarious enacting may be viewed as the process of having action towards pregnancy and mothering-related content be dictated by others.

The concept of relinquishing control via vicarious enacting has a number of variations, whether it is having others dictate family planning or having others aid in the process of recognising one's pregnancy. It may also occur through hoping others would recognise and intervene within their pregnancies or having others initiate the engagement in pregnancy-related tasks.

The concept has relationships with other concepts constructed within the study. Relinquishing control via vicarious enacting is seen to occur as the women play the role of 'vicarious mother' (see Section 6.5.3). This occurs as she enacts via another on how to feel and think about or act towards pregnancy-related content.

6.5.2.3 Relinquishing control via abdicating

The second type of relinquishing control concerns the notion of failing to undertake, or fully undertake action (responsibility) towards pregnancy-related matters. This defines the concept relinquishing control via abdicating. Again, the nature towards gestating in this regard is seen to be docile, as the women neglect to take control and act on their own accord. The synonym, abdicating, may also be used to refer to this concept.

The concept abdicating has a number of variations. It may present as neglecting to take control, as women fail to engage in family planning, or negating to take significant and purposeful action towards the foetus during the physical pregnancy. It may also involve the act of superficially taking action towards the pregnancy, but inevitably failing to take action and, thus, control.

The concept has relationships with other constructed concepts. Abdicating is seen to occur as the women play the role of vicarious mother, through the 'un-being self' (see Section 6.5.3.3).

Finally, it is noteworthy to mention that the core category is deemed to be the most powerful explanatory concept of this study, as all constructed concepts link with the women's approach towards pregnancy, namely, docile gestating. The manner in which the concept was constructed led to this unexpected finding within the study. Namely, a study that is ultimately about how women who commit the act present with pregnancies where they relinquish

control, and that are thereby underpinned by docility. The next chapter reveals how, via the variant interacting concepts, the women relinquish control in one of the two ways and thereby approach pregnancy and mothering-related content in a docile manner. It is further shown how the women vicariously enact within their N-NPs and abdicate within their NPs.

6.5.3 Major category one: The vicarious mother

With my background in symbolic interactionism (SI), I was interested in understanding who the women are as the actor within their own narratives. With the sensitising constructs of the women's sense of self, I was hoping to elicit a clear account of how the women perceived themselves as mother, on the basis of their own attributes, values and judgements. With the sensitising construct of identity, I was hoping to elicit an understanding of how the women perceived they were being regarded by others as mother. More importantly, I was hoping to obtain an understanding of how the women negotiated their sense of self and identity. Without initially realising it, I was expecting to find that the women would devalue the role of motherhood and their own capabilities as mother. I was further expecting to hear that they would perceive others to confirm such notions via their feedback.

However, my explorations in this regard proved to be significantly challenging and did not affirm the abovementioned taken-for-granted expectations. The women seemed to struggle in providing information regarding their own sense of self and their identity as mother, often responding with, "I don't know" to questions. In my encounters with the women, I thought that the women did not have a clear sense of who they were or how others had perceived them; it was as if there was no sense of self at all. I could not help but wonder, that if the women have no clear sense of who they are as mother, how do the women decide on how to 'be' mother? Specifically, how to think, feel about, and act towards mothering and pregnancy-related content. This became a starting point of conceiving the women's 'being' as mother. It was, thus, through the nature of exploration of the sensitising constructs that the question eventually developed into 'how do the women arrive at thoughts, feelings and actions towards mothering-related content?' Ultimately, I was borrowing from Glaser (1978), enquiring what is happening in the data as the women narrate their thoughts, feelings and actions towards mothering and pregnancy-related content.

With respect to the above lens, I started observing that the women would either arrive at thoughts, feelings or actions towards their pregnancy by adopting such thoughts, or feelings of others, or having actions be initiated by others. On other occasions, and specifically in the

absence of others, the women would narrate accounts of refraining from engaging in thoughts, feelings and actions towards pregnancy and mothering-related content. In this sense, the women would either ‘be’ mother through others or not ‘be’ mother at all. This was seen to address the question of who the women are and what the nature of their role playing as mother is. I elected to combine these components as speaking to the women’s ‘being’ as mother and named the category of concepts, the ‘vicarious mother’. The word vicarious was selected as it speaks to experiences occurring through the thoughts, actions and feelings of another.

6.5.3.1 Properties of the vicarious mother

The theoretical construct of vicarious mother refers to the mother’s ‘being’ in this world as mother. ‘Being’ refers to the mother’s thoughts, feelings and actions experienced in relation to mothering and pregnancy-related content. It also refers to the driving force behind the ‘being’, namely, that the women prefer to mother vicariously, meaning, through another. The women are seen to play the role of vicarious mother either by ‘being’ through another (‘being’ through proxy) or via superficially ‘being’ or not ‘being’ at all (un-‘being’ self). Note that by proxy refers to any action taken through or via the input of others. The synonyms of enacting the role of vicarious mother or playing the role of vicarious mother may be used when referring to the construct of vicarious mother. This category of concepts consists of two concepts, namely ‘being’ through proxy’ and the ‘un-‘being’ self’. ‘Being’ through proxy’ has three general variations, namely, ‘acting by proxy’, ‘decisioning by proxy’ and ‘feeling by proxy’ – see Figure 6.2, which is a visual representation of major category one, the vicarious mother, and its associated concepts.

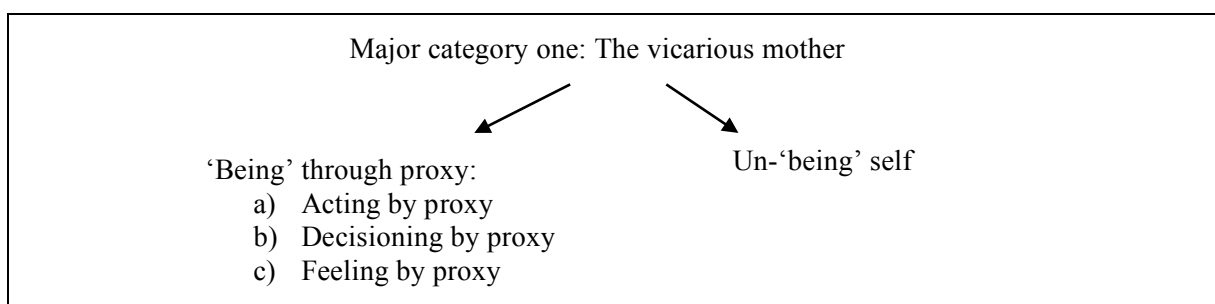


Figure 6.2 Visual representation of major category one

6.5.3.2 ‘Being’ through proxy

The concept ‘being’ through proxy refers to the women’s ‘being’ as mother as being determined by the thoughts, feelings and actions of others. Thus, their own thinking, feeling and acting is determined by another’s point of view and input. The synonym ‘be’ through

proxy or vicariously mothering may be used when referring to the concept. The concept 'being' through proxy also has relationships with other concepts. The concept is able to manifest best within a vicariously secure context (see Section 6.5.5.4). Furthermore, the concept is also seen to be operational via vicarious actions (see Section 6.5.6.4). Next, the three general variations of the concept are defined.

Acting by proxy

The concept acting by proxy refers to the actions and behaviour towards mothering or pregnancy-related content that are based on the prescriptions and initiations of significant others.

Decisioning by proxy

The concept decisioning by proxy refers to instances where the course of action is decided by the initiation and influence of others.

Feeling by proxy

The concept feeling by proxy refers to instances where the women's emotions are based on other people's emotional reactions and other people's feelings are accepted as their own.

6.5.3.3 Un-'being' self

The un-'being' self refers to a part of the self that operates under the bigger concept of vicarious mother. Here, the women refrain from 'being' mother, whether it be thinking about, feeling towards, or acting in relation to pregnancy or mothering-related content independently. The synonym concept of not 'being' may also be used when referring to the concept.

Superficially engaging in thoughts, feelings and actions towards a pregnancy or mothering content is also a variation of the un-'being' self being operational. The reason for this is because the women fail to fully engage in this manner independently.

The concept also has relationships with other concepts, as the un-'being' self is mostly operational within a vicariously insecure context or unconfirmed assumed vicarious secure context (see Sections 6.5.5.2 and 6.5.5.3 respectively). Furthermore, the un-'being' self is operational via the use of phantomising actions (see Section 6.5.6.2) or misrepresenting actions (see Section 6.5.6.3).

6.5.4 Major category two: Vicarious accessing

The next major category of concepts is termed ‘vicarious accessing’. As the data started revealing the women’s ‘being’ through proxy, as mentioned above, I also observed further data reflecting feelings of discomfort in feeling alone and distress when lacking support. Comparisons between data revealed that their stories indicated the need to draw in other individuals as a potential source of support, and a source to ‘be’ through proxy. However, the process of securing support resources was observed to be fraught with complexity. I started to build such connections between the data and looked to combine the content to raise the level of abstraction (Salvini, 2018; Bryant, 2018). The unique combination of variant data yielding the need for vicarious security, and also aspects that could complicate such accessing, led to the unexpected insight and construction of the theoretical construct, vicarious accessing. The question was raised via the data on how the women interact and engage with their environment, and is subsequently addressed by the construct, vicarious accessing.

6.5.4.1 Properties of vicarious accessing

Vicarious accessing is a category of concepts that refers to the processes the women go through to involve others in their pregnancy and mothering world. It concerns the action and inactions of the mothers in drawing in the support of others and, consequently, to allow others to exert action within their lives. It is observed that the women in this process are attempting to secure vicarious sources, namely those specific individuals who would assume the lead, offer guidance and support, or influence how the women come to think about, feel and act towards a pregnancy. Alternatively, a synonym for a vicarious source may also be referred to as a security source. Moreover, vicarious accessing is deemed a process, as it is influenced by variant factors impacting on the direction on whether or not vicarious sources are attained. Such factors may include certain assumptions or rules for engaging and interacting within the women’s unique interpersonal relationships or, alternatively, variant situational circumstances. This introduces the two concepts that constitute this category of concepts, namely, ‘assumptions for accessing’ and ‘situational limits to accessing’ (see Figure 6.3). The concept, assumptions for accessing, has three general variations, including ‘evaluating degree of burdening’, ‘fearing judgement and anger’, as well as ‘expectations for communicating’. Expectations for communicating may also be seen as a sub-category as it has two components, namely ‘unconfiding communicating’ and ‘powerless communicating’. The sub-category is further extended by the consequential construct, ‘strategies in communicating’, which concern the four components of ‘communicating through proxy’, ‘non-verbal

communicating’, ‘following communications’ and ‘withholding communications’. Figure 6.3 is a visual representation of major category two, vicarious accessing and its associated concepts.

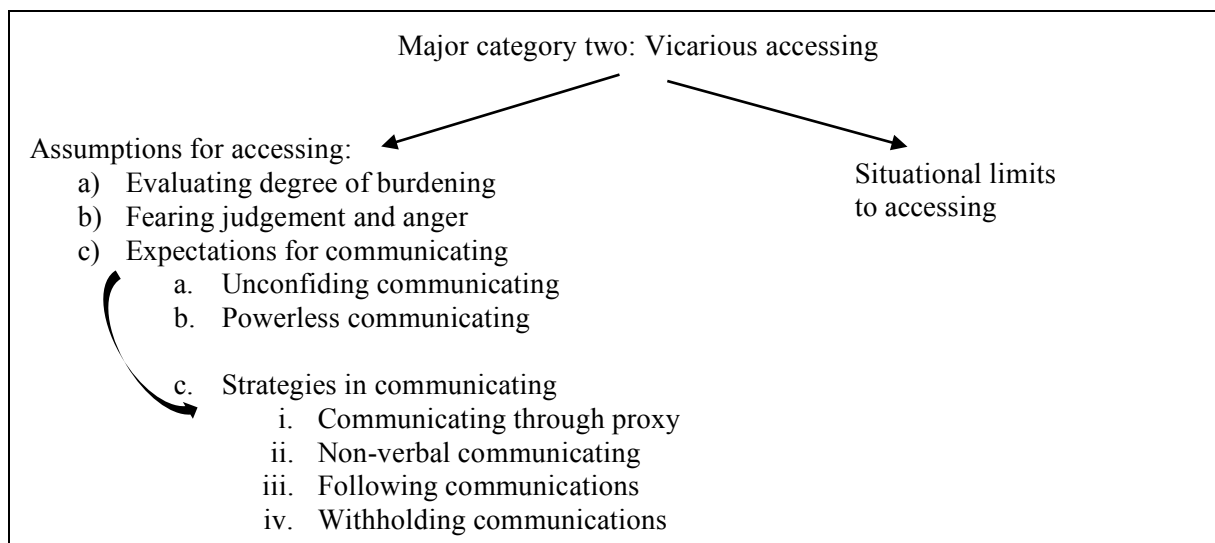


Figure 6.3 Visual representation of major category two

Overall, vicarious accessing shares relationships with other concepts. The outcome of the process of vicarious accessing is seen to influence the type of security context that is established (see Section 6.5.5).

6.5.4.2 Assumptions for accessing

The concept assumptions for accessing refers to the women’s expectations for interacting with and drawing in support within interpersonal relationships. The expectant rules may be presumed or taken for granted and refers to the manner in which the women believe they must go about such accessing and whether it would be permitted. Ultimately, the assumptions may have a bearing on whether or not pregnancy or mothering-related content is eventually shared with others. The variant assumptions for accessing are considered next.

Evaluating degree of burdening

Evaluating degree of burdening concerns an evaluation of the extent to which a pregnancy may be perceived as a burden by others. Evaluating degree of burdening has a dimensional component where a burdening threshold may be reached. Burdening threshold refers to the point at which the women perceive the pregnancy to be too much of a burden on others to the extent that it cannot be shared. In such instances, the women refrain from taxing their support

resources further, or the women may be immobilised by their feelings of guilt around being a burden on others.

Fearing judgement and anger

The concept fearing judgement and anger refers to an evaluation of and feelings of fear concerning the notion that significant others would judge one and be angry with one for her pregnancy. Again, fearing judgement and anger has a dimensional component where a judgement threshold may be reached. The judgement threshold refers to the point at which the women perceive the pregnancy to render too much judgement from others to the extent that it cannot be shared.

Expectations for communicating

Another variation of assumption for accessing is the concept expectations for communicating. This concerns the women's assumptions regarding how communication with significant others would be. This includes the concepts unconfiding communicating and powerless communicating.

Unconfiding communicating is an expectation for communicating and refers to an experience of perceiving to lack closeness with significant others. In such instances, the women may report experiencing others as not being "open" to communication or being closed-off. The women may also describe the nature of their relationship as lacking in closeness. Consequently, the women assume they cannot confide in such people.

Powerless communicating is an expectation for communicating that concerns the women's belief that communicating their problems would not result in the desired outcome or change. Subsequently, the women are left feeling powerless and are reluctant to communicate.

As a response to the abovementioned expectations for communicating, the consequential concept of *strategies in communicating* may be observed. Thus, the strategies are seen as manoeuvres employed in communicating that are implemented as a consequence to the above expectations for communicating. This includes the concepts of communicating through proxy, non-verbal communicating, following communications, or withholding communications.

Communicating through proxy refers to the action of sharing problems or pregnancy news or content via another individual to a desired source.

Non-verbal communicating refers to the expectation to communicate problems or pregnancy-related content without using verbal means. In such instances, it is still hoped that relevant concerns would be observed and acted upon.

Following communications refer to the expectation that others would initiate and lead conversations regarding the women's problems and pregnancy-related content. Subsequently, and only then, would the women respond concerning such content. In such instances, there is a hope that the conversation would eventually be initiated by others and the women are seen to wait expectantly regarding this.

Withholding communications refer to the act of electing to purposefully withhold information regarding one's pregnancy status for the duration of the pregnancy. It may also involve behaviours of hiding or being secretive about issues that would result in disapproval.

Overall, the concept of assumptions for accessing, shares relationships with other concepts. Assumptions for accessing and strategies for communicating may result in the attainment or maintaining of different types of security contexts (see Section 6.5.5). Also, the concepts may maintain or contribute towards the use of vicarious actions, misrepresenting actions, or phantomising actions (see Section 6.5.6.1).

6.5.4.3 Situational limits to accessing

The concept of situational limits to accessing is a further construct that has relevance for the process of vicarious accessing. Situational limits to accessing refer to variant environmental responses, behaviours and situations that may impact on whether vicarious sources are secured. Such limits may, thus, impact on the direction of obtaining access. Based on the varied human experience, such limits may be endless, however, some examples from the women's narratives are provided in the next chapter.

Situational limits to accessing, shares relationships with other concepts, as it may impact on the attainment and maintaining of security contexts (see Section 6.5.5). Also, on the basis of situational limits to accessing, the nature of a security context may change at any time. Furthermore, it may change the direction of the outcome to the variant strategies in communicating.

6.5.5 Major category three: Context of security

Major category three concerns the theoretical construct, 'context of security'. By comparing data, especially the women's narratives concerning their unique thoughts, feelings and different actions, I was looking to determine in which contexts the different type of thoughts, feelings and actions may occur (Charmaz, 2016). I started observing that the women were describing relational contexts where they would either experience support, perceive to possibly experience support but experience uncertainty thereof, or another experience, where they completely lacked support. Building the connection between this data raised the level of abstraction to the category of concepts referred to as, context of security (Salvini, 2018). Further comparisons seeking to understand moving sequences, changes and consequences in the data revealed that the level of support experienced, thus, context of security, is a consequence to the abovementioned process of vicarious accessing. The emergent question from the data enquiring what the consequences of the women's said interaction with their environment are, is addressed by the category of concepts, context of security.

6.5.5.1 Properties of context of security

Context of security refers to a relational context determined by the extent to which the women may obtain access to and be supported by significant others. The word security, in this sense, refers to the experience of having support and input from others. The contexts are seen to emerge as a consequence to vicarious accessing, revealing a relationship to this theoretical construct. The synonyms of security contexts or security contexts continuum may be used when referring to this category of concepts. Context of security is further deemed a dimensional concept, as it ranges from the one extent of having security towards the opposite extent of not having interpersonal security. The three variations or types of security contexts are, therefore, arranged along this continuum. In other words, the concepts that constitute this category are constructed to lie along the continuum. They begin with 'vicarious insecurity' at the left pole, towards 'unconfirmed assumed vicarious security' in the middle and finally 'vicarious security' placed at the opposite pole on the right side – refer to Figure 6.4, which is a visual representation of major category three, context of security and its associated concepts.

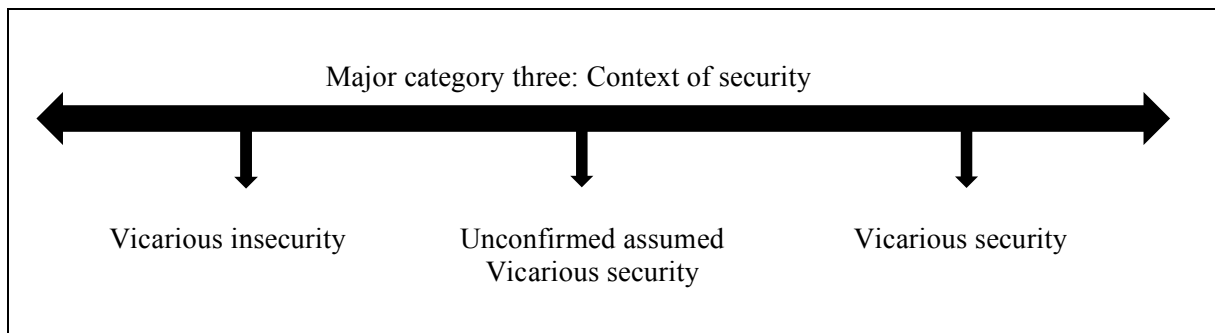


Figure 6.4 Visual representation of major category three

The concept has already been shown to relate to the concept of vicarious accessing, as this process determines the extent to which vicarious security is experienced and the security context that is established. Moreover, on the basis of vicarious accessing being a potentially ongoing process, it is important to observe that the experience of the security context is not static. The context may change at any instance, as time passes throughout the phases of gestating events and the process of vicarious accessing. With an understanding of the relation of this concept to other concepts, the variant concepts of this category of concepts can now be defined.

6.5.5.2 Vicarious insecurity

The concept of vicarious insecurity is deemed a relational context where the women experience feeling unsupported, abandoned, rejected, alone and unloved by significant others. The women may also experience feeling as if others are disengaged from their pregnancy-related matters. Subsequent feelings of helplessness in such contexts are often reported. The synonym of a vicarious insecure context may also be used when referring to the concept. The women's experiences in this regard may be seen to intensify throughout the pregnancy process, where the women emphasised feelings of rejection and abandonment.

The concept shares relationships with other concepts as it is seen to set the platform for the behavioural consequences of phantomised disengaging (see Section 6.5.6.2). Also, on the basis of other concepts, such as assumptions for accessing and the use of communication strategies used, the context may be maintained.

6.5.5.3 Unconfirmed assumed vicarious security

Unconfirmed assumed vicarious security refers to a relational context where the women hold assumptions about vicarious sources likely being available for security reasons. However, this is not confirmed and it may also be doubted at times.

The concept was constructed on the basis of an account provided by one woman within the sample. Bryant (2018) recommends utilising data that do not neatly fit into already constructed concepts and categories to add dimension to constructs. Bryant (2018) recommends against discarding the outlier case, but rather adding it to data to add depth and dimension. The concept was, thus, uniquely integrated into the constructed theory to add value in this exact manner.

The concept is also seen to share relationships with other concepts. The context is seen to set the platform for distorted engaging (see Section 6.5.6.3).

6.5.5.4 Vicarious security

Vicarious security refers to a relational context where the women may experience input, initiation, guidance, and support from others in matters pertaining to pregnancy content. The women report to experience feelings of acceptance within such contexts. The synonym of a vicarious secure context may be used when referring to this concept.

The concept shares relationships with other concepts, as it is seen to set the platform for vicarious engaging (see Section 6.5.6.4).

6.5.6 Major category four: Degree of pregnancy engaging

Throughout the comparisons between the data, incidents and stories regarding the women's respective pregnancies, I started to observe that the women were narrating content regarding their engagement in different pregnancy-related tasks. The different pregnancy-related content and tasks have already been delineated above in the gestating events continuum (see Section 6.5.1). Comparisons between the data revealed different degrees to which the women would engage in pregnancy and mothering-related content in the respective pregnancies. A degree of engaging was observed, moving from disengaging, towards superficial engaging and finally engaging in pregnancy-related content. Therefore, building this connection led to the theoretical construct, degree of pregnancy engaging. The construct encompasses the degrees of engaging as a category of concepts. However, there was a further opportunity to raise the level of abstraction for this theoretical construct by combining codes concerned with the nature of the women's engaging. This would be specifically concerned with the nature of the women's thoughts, feelings and actions and how this would be arrived at. The following section will firstly reveal the pathway towards eliciting and constructing the nature of the

women's thoughts, feelings and actions and then how it was integrated into this category of concepts.

The study set out to understand the different conceptual and emotional processes, as well as actions the women engage in regarding their respective pregnancies. Via my surprise concerning my study findings in this regard, I realise, with hindsight, that I expected to observe specific thoughts, feelings and actions on behalf of the women concerning their N-NP and NP as well as the foetus. With respect to the N-NPs, perhaps I was expecting that the women would attribute meanings to their pregnancy where they would experience feelings of contentment regarding motherhood and define the pregnancy situation as having been wanted. I was also expecting the women to perceive the foetus as a child that is loved and behave towards it in endearing ways. Alternatively, with the NPs, it is likely that I was expecting that the women would conceptually devalue the foetus during the pregnancy, define it as a problem, and experience negative feelings towards the pregnancy and foetus. Subsequently, I was expecting that they would behave towards the baby in harmful ways.

However, Bryant (2018) argues that if one were to remain true to the study method, the study would offer unexpected findings and that this is the product of a successful grounded theory. Via the research process and by merely employing the study objectives as sensitising constructs, I was able to observe unique manners in which the women come to think about, feel towards and act in their respective pregnancies. With respect to the women's thoughts, the data revealed that in one type of pregnancy, the women would come to acknowledge the baby, anticipate a future for the baby or identify the baby, but only via a process of having this be initiated by others. Referring to feelings, the women would be seen to accept the foetus as something that was wanted and connect with it, but only via close reliance on others. In terms of behaving towards the baby, the women would be seen to engage in prenatal baby and self-care tasks, prepare practically for the baby and for birth, but again via close reliance on others. In another type of pregnancy, the data revealed that the women would conceptually represent the baby in their mind, but not think directly of the baby for what it was, a baby, but for some other benefit that the child may bring to their life. In such instances, they could be seen to only superficially think about, feel, and act towards the baby. Finally, in other pregnancies, the mother would not come to think of the baby at all, experience feelings towards it, or even initiate any action towards the baby. In such instances, the baby did not exist for the mother. It was, therefore, conceived that the nature of engaging in the first type of pregnancy is one that occurs via another, thus vicariously. The second type of pregnancy is

one that is engaged in via a distorted manner. The final type of pregnancy is one where the baby does not exist; it is like a phantom and not thought about, emotions are not experienced, or the mother does not act towards it (phantomised).

Via the question enquiring under what conditions the degree of engaging would occur (Charmaz, 2014), I was able to connect the degree of engaging with the nature of engaging (how thoughts, feelings and actions are managed) to construct the types of engaging along the degree of engaging continuum. Instances of disengaging from the pregnancy were seen to connect with instances where the baby was not contemplated. Instances of superficially engaging with the pregnancy was seen to connect with instances of representing the baby in one's mind in a distorted manner. Finally, engaging with the pregnancy was seen to connect with instances where others guide and initiate the process. Through such connections, I constructed the respective concepts of 'phantomised disengaging', 'distorted engaging', and finally, 'vicarious engaging'. With the relevant background to the construction of this category of concepts, the constructs can now be defined.

6.5.6.1 Properties of degree of engaging

Degree of engaging concerns a continuum along which women may engage with pregnancy-related tasks. It may involve the extent to which the women come to think about, feel towards and act towards their pregnancies. Along the continuum, lies the three concepts that constitute this category. The concepts speak to a type of and extent of engaging, also referred to as a style of engaging. This concerns the nature of how the women come to think about, feel towards and act towards their pregnancies. The concepts include phantomised disengaging, distorted engaging, and vicarious engaging. Each of the types of engaging are seen to occur via specific attaining and maintaining forces. The respective attaining and maintaining forces are 'phantomising actions', 'misrepresenting actions', and 'vicarious actions'. Figure 6.5 presents a visual representation of major category four, degree of engaging and its associated concepts.

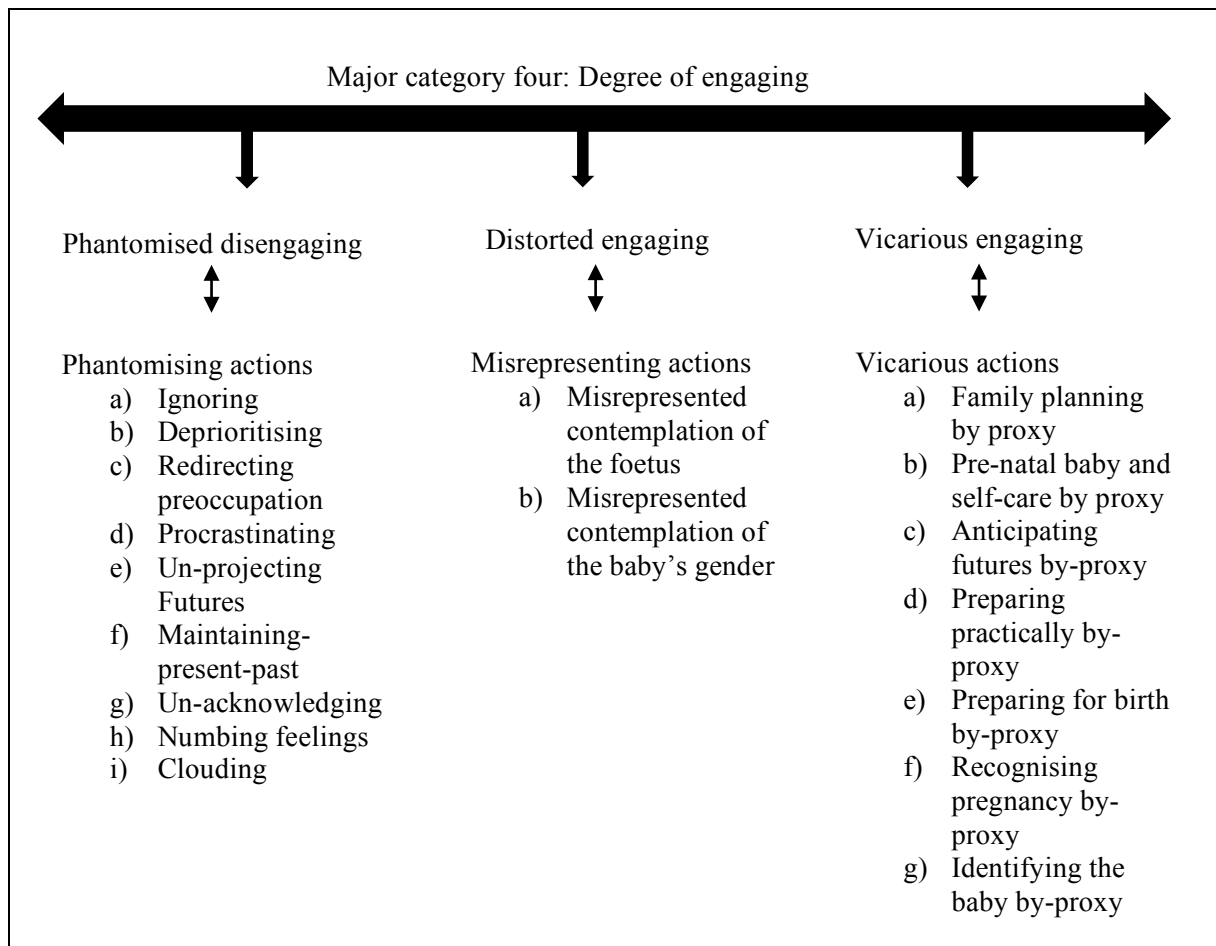


Figure 6.5 Visual representation of major category four

This category of concepts shares a relationship with context of security as the different contexts become a platform from which the style of engaging may be expressed. This will be reflected upon below when relevant. Nevertheless, this category of concepts is, thus, seen to address the question elicited within the research, namely, ‘What are the variant behavioural outcomes that may occur as a result of the women’s interaction with their environment and the subsequent arising consequences (contexts)?’ Moreover, as each style of engaging reveals a behavioural outcome, each style is further seen to be attained by and maintained by specific actions, namely ‘phantomising actions’, ‘misrepresenting actions’, and ‘vicarious actions’. These concepts are, thus, seen to address the question ‘What are the forces or types of actions at play through which the behavioural outcomes are attained or maintained by?’

6.5.6.2 Phantomised disengaging

Phantomised disengaging refers to an experience where matters related to pregnancy and the baby do not exist within the mother’s mind and she consequently does not engage with such content. The concept concerns two main components, one being ‘phantomising’, and the other, ‘disengaging’. Phantomising refers to an experience on behalf of the mother, where the

foetus she is carrying is rendered a phantom, in the sense that she experiences the baby or matters relating to the foetus and pregnancy as not existing in her mind. This occurs despite her physical knowledge of being pregnant. The pregnancy and foetus is deemed to be ‘there’ but it is not clearly visible, prominent, or in the forefront of experience. Disengaging refers to the act of not participating in the pregnancy or matters concerning it. Taken together, the concepts accede that the mother does not participate in pregnancy-related matters because it does not exist within her mind. Essentially, the pregnancy and baby is not experienced as a reality and is not lived as a reality. The experience of phantomising is attained by and maintained by phantomising actions as described below.

The synonym of a phantomised disengaged stance or phantomised disengaged state may be used when referring to this concept. Ultimately, phantomised disengaging results in the consequential concept ‘not bringing-into-being’ where the women are seen to neglect bringing the baby into existence within their mind. Phantomised disengaging is seen to share relationships with other concepts, specifically relinquishing control via abdicating (see Section 6.5.2.3). As the women make use of this type of pregnancy style, the docility of their gestating is observed as they negate acting towards their pregnancies without vicarious support.

Phantomising actions

Phantomising actions refer to specific thought patterns, emotional experiences, as well as actions or inactions to render the baby or pregnancy non-existent or unreal within the women’s minds. This involves the thought patterns of ‘ignoring’, ‘deprioritising’, ‘redirecting preoccupation’, ‘procrastinating’, ‘un-projecting futures’, ‘maintaining present-past’, and ‘un-acknowledging’. It concerns the emotional experiences of numbing feelings and clouding. The component of action is accounted for by the women’s observed inaction. The women are simply, via these techniques, not acting towards the baby. This will become more clear in the next chapter via examples given.

Ignoring is a phantomising action that concerns the conceptual act of ignoring thoughts or content related to the pregnancy or baby. Medication, alcohol or illicit substances may be employed to aid in this regard. In such instances, the women may report “blocking” content related to the pregnancy out of their minds.

Deprioritising is the phantomising action and conceptual act of deprioritising matters related to the pregnancy and foetus.

Redirecting preoccupation is the phantomising action and conceptual act of redirecting attention towards other concerns at the expense of focusing on pregnancy-related content. This may occur as a result of focusing on more prominent environmental stressors or concerns.

Procrastinating refers to the phantomising action and conceptual act of delaying in dealing with pregnancy-related matters.

Un-projecting futures is the phantomising action and conceptual act of negating to contemplate a future with the baby.

Maintaining present-past is the phantomising action and conceptual act of maintaining the past within the present by focusing on the same day-to-day concerns as prior to conception.

Un-acknowledging is the phantomising action and conceptual act of failing to acknowledge matters related to a pregnancy or pregnancy-related content and experiences.

Numbing feelings is the phantomising action and emotional act of ignoring feelings, inexpression of or refrainment from acknowledging feelings; or failing to experience feelings.

Clouding is the phantomising action as well as emotional and conceptual act of vaguely experiencing the reality or knowledge of pregnancy-related content without seeking clarity. The women may experience the matter with a degree of confusion and lacking in clarity. They may also experience uncertainty and lack of clarity in how to proceed. Difficulty in reflecting upon and recalling details around their experience may also be observed. The experience of the concept may gain intensity with a peak described as “losing control” or referred to as an experience of a “snapping mind”. The experience here, thus, concerns the build-up of confusion and multiple vaguely experienced thoughts.

The variant phantomising actions may be used together, the one influencing the other. Examples thereof are provided in the next chapter. Furthermore, the extent of experience

regarding phantomising actions may be intensified throughout the pregnancy experience and may be heightened, especially at the time of birth.

Phantomising actions share relationships with other concepts. Phantomising actions are seen to occur within a context of vicarious insecurity (see Section 6.5.5.2). Such actions occur as the women play the role of vicarious mother where the un-being self is operational (see Section 6.5.3.3).

6.5.6.3 Distorted engaging

Distorted engaging refers to a type of pregnancy engaging where the women may appear to be engaging in pregnancy-related tasks, but where their engagement in such tasks are, in actual fact, superficial. While engaging may be superficial, the women who fall into this category of engagement may also make use of phantomising actions as described above. It is for this reason, that this degree of engaging falls between ‘phantomised disengaging’ and ‘vicarious engaging’ along the continuum.

The reason for the aforementioned superficial engagement occurs as a result where the pregnancy and foetus is considered, but not necessarily in its direct form. Rather, the pregnancy and the foetus represent something of importance to the women and, thus, mostly represents something other than the baby. The focus is, therefore, redirected to something else. In this regard, the foetus is considered but mostly in its representation of something else. Distorted engaging is, thus, seen to be attained by and maintained by ‘misrepresenting actions’ as discussed below.

Distorted engaging results in the consequential concept ‘not bringing into being’. Here, the women are seen to neglect bringing the baby into existence within their mind as they consider the benefit of the baby and not necessarily aspects related to the baby itself. The concept also shares relationships with other concepts, specifically relinquishing control via abdicating (see Section 6.5.2.3). As the women make use of this type of pregnancy style, the docility of their gestating is observed as they negate to fully act towards their pregnancy and foetus in the absence of vicarious input.

Misrepresenting actions

Misrepresenting actions concern actions seemingly taken towards the foetus and pregnancy, but for ulterior benefit. The actions are not necessarily to the benefit of the baby or the

women's pregnancy. 'Misrepresented contemplation of the foetus' and 'misrepresented contemplation of the baby's gender' are examples of misrepresenting actions.

Misrepresented contemplation of the foetus is a misrepresenting action where the mother contemplates the baby for reasons other than contemplating the baby for its own sake.

Misrepresented contemplation of the baby's gender is a misrepresenting action where the women consider the gender of the baby, but with ulterior motives.

As a consequence to misrepresented actions, the baby may be regarded as a 'misrepresented object', meaning that it represents something other than a baby. Moreover, misrepresenting actions share relationships with other concepts. The concept is seen to occur within a context of unconfirmed assumed vicarious security (see Section 6.5.5.3). Such actions occur as the women play the role of vicarious mother where the un-'being' self is operational (see Section 6.5.3.3).

6.5.6.4 Vicarious engaging

Vicarious engaging refers to the women's behaviour of acting towards pregnancy-related content and engaging with such content via close reliance on other individuals. In such respects, significant reliance on others is indicated, while initiation on the women's own behalf is minimised. 'Vicarious engaging' is attained by and maintained by 'vicarious actions' as discussed below.

Vicarious engaging results in the consequential concept 'bringing into being', where the women are seen to bring the baby into existence within their mind as they begin to consider the baby and act towards it vicariously. The concept also shares relationships with other concepts, specifically relinquishing control via vicarious enacting (see Section 6.5.2.2). As the women make use of this type of pregnancy style, the docility of their gestating is observed, as they engage in pregnancy content only as they receive instruction, guidance and input from others.

Vicarious actions

Vicarious actions refer to the specific conceptual, emotional and behavioural actions taken towards the foetus or pregnancy where such action is supported, initiated, influenced or guided by another individual. The concept is closely linked with the concept of the 'vicarious

mother', specifically 'being' through proxy. However, the vicarious mother and 'being' through proxy refers to a general sense of 'being' and preference for 'being' in the world as mother; where the women may generally think, feel and act by proxy. Vicarious actions occur as a result of 'being' through proxy and refer to the *specific* actions that are taken via another; which result in engagement in pregnancy-related tasks. Vicarious actions include the conceptual actions of 'family planning by proxy', 'recognising pregnancy by proxy', 'anticipating futures by proxy', and 'identifying the baby by proxy'. It also includes the emotional actions of 'accepting by proxy' and behavioural actions of 'prenatal baby and self-care by proxy', 'preparing practically by proxy' and 'preparing for birth by proxy'.

Family planning by proxy is a vicarious action and conceptual act where family planning occurs via the initiation, encouragement and decision-making of others on behalf of the women to have a baby.

Recognising pregnancy by proxy is a vicarious action and conceptual act where the women rely on external input to recognise and acknowledge a pregnancy.

Anticipating futures by proxy is a vicarious action and conceptual act where the women enter a reflective space on what the future would be like, what the future may hold, or planning for the future for the baby via close reliance and initiation from others.

Identifying the baby by proxy is a vicarious action and conceptual act where the naming of the baby and engagement in thoughts around participating in cultural practices to introduce the baby to the family are initiated by others.

Accepting by proxy is a vicarious action and emotional act where the women come to experience acceptable and positive feelings towards the pregnancy and baby on the basis of others' positive feelings towards the pregnancy and baby.

Prenatal baby and self-care by proxy is a vicarious action and behaviour where actions to care for the self and foetus during pregnancy occur via the close reliance and initiation of others.

Preparing practically by proxy is a vicarious action and behaviour where the women prepare for the practical needs of the baby and self via close reliance on others.

Preparing for birth by proxy is a vicarious action and behaviour where the women begin to prepare for the actual birth of the baby via close reliance on others.

Vicarious actions share relationships with other concepts. Such actions are seen to occur within a context of vicarious security (see Section 6.5.5.4). The actions occur as the women play the role of vicarious mother where ‘being’ through proxy is operational (see Section 6.5.3.2).

6.6 Schematic Representation of Interacting Concepts

It has been mentioned already that the constructed conceptual categories and their associated concepts are seen to be interacting with one another, resulting in a variety of variations, relationships and consequences. These patterns of interaction may be seen to occur and recur over the gestating events continuum. This section serves to provide a schematic representation and summary of the different ways in which the concepts may interact repeatedly over time. The next chapter will reveal how the different manners of interaction serve as an identification of different plausible pathways towards a N-NP and NP among this population of women.

Figure 6.6 is a schematic representation yielding how different concepts may relate to and interact with one another recurrently over time. The diagram begins at the top with the concept of the vicarious mother, which has two components that may be active, either the un-‘being’ self or the ‘being’ through proxy. The expression of the different components depends on the interaction of the vicarious mother with others and the subsequent arising support contexts that are established. The vicarious mother’s interaction is, thus, shown via the notched downward arrow.

The mother’s interaction with her environment occurs through the process of vicarious accessing as she attempts to secure support sources for herself. However, as shown by the circular arrows, the process is complex and interacting and depends on the mother’s assumptions for accessing as well as the environmental responses. The latter constitute the concept of situational limits to accessing. On the basis of this complex process, different support contexts may be established. The connection between vicarious accessing and the subsequent arising contexts of security is demonstrated via the downward arrow.

Via a long blue two-way horizontal arrow, the context of security is seen to range from lacking support, uncertain support, and finally, support. It is along this continuum where the different types of security contexts that may be established are seen to lie, ranging from vicarious insecurity to unconfirmed assumed vicarious security and vicarious security. As separated by the red vertical dotted line, contexts to the left leave women to access the un-‘being’ part of the self, as none or limited support resources are available from which the women may act vicariously. In such contexts, the women may refrain from thinking and feeling and acting towards pregnancy-related content. Alternatively, the context of vicarious security to the right of the red dotted vertical line allows women to access the part of the vicarious mother who is ‘being’ through proxy. The mother is, thus, able to think, feel and act by proxy towards pregnancy-related content.

Subsequently, the type of security context established becomes a platform for the degree of pregnancy engaging. Firstly, the degree of pregnancy engaging is demonstrated by the blue arch, ranging from disengaging (not thinking towards, feeling towards or acting towards pregnancy content) to the left onwards to the right, towards engaging (thinking towards, feeling towards and acting towards pregnancy content). As demonstrated by each downward speckled blue line, the different security contexts are shown to serve a platform for the type of pregnancy engaging. For instance, phantomised disengaging with its associated phantomising actions (linked with a two-way arrow) are seen to occur within a context of vicarious insecurity. Distorted engaging with its associated misrepresenting actions (linked with its two-way arrow) are seen to occur in a context of unconfirmed assumed vicarious engaging. Vicarious engaging with its associated vicarious actions (also linked with its two-way arrow) are seen to occur in the context of vicarious security.

Again, via the vertical dotted red line, the un-‘being’ self can be seen to be active during phantomised disengaging and distorted engaging, as all items are placed to the left of the red line. Similarly, ‘being’ through proxy can be seen to be active as the women vicariously engage with their pregnancy, as all such items are placed to the right of the line.

Overall, the women’s pregnancies are deemed to reveal docile gestating, as in all instances and interactions the women’s interactions are seen to be underpinned by docility as they relinquish control. This is demonstrated by the surrounding red dotted line arrows. However, the nature of relinquishing control is separated by the red vertical dotted line. Items to the left of the red line reveal relinquishing control via abdicating. All interacting concepts involved in

this process are marked with a red triangle. Items to the right of the red horizontal line reveal relinquishing control via vicarious enacting and each concept that is related to this process is indicated by a red square. Ultimately, the next chapter will reveal how NPs are underpinned by the interacting concepts to the left of the red vertical line and, thus, a pregnancy that is underpinned by docility and relinquishing control via abdicating. A N-NP is shown to be underpinned by interacting concepts to the right of the vertical line and, thus, a pregnancy that is still underpinned by docility, but via the relinquishing of control via vicarious enacting.

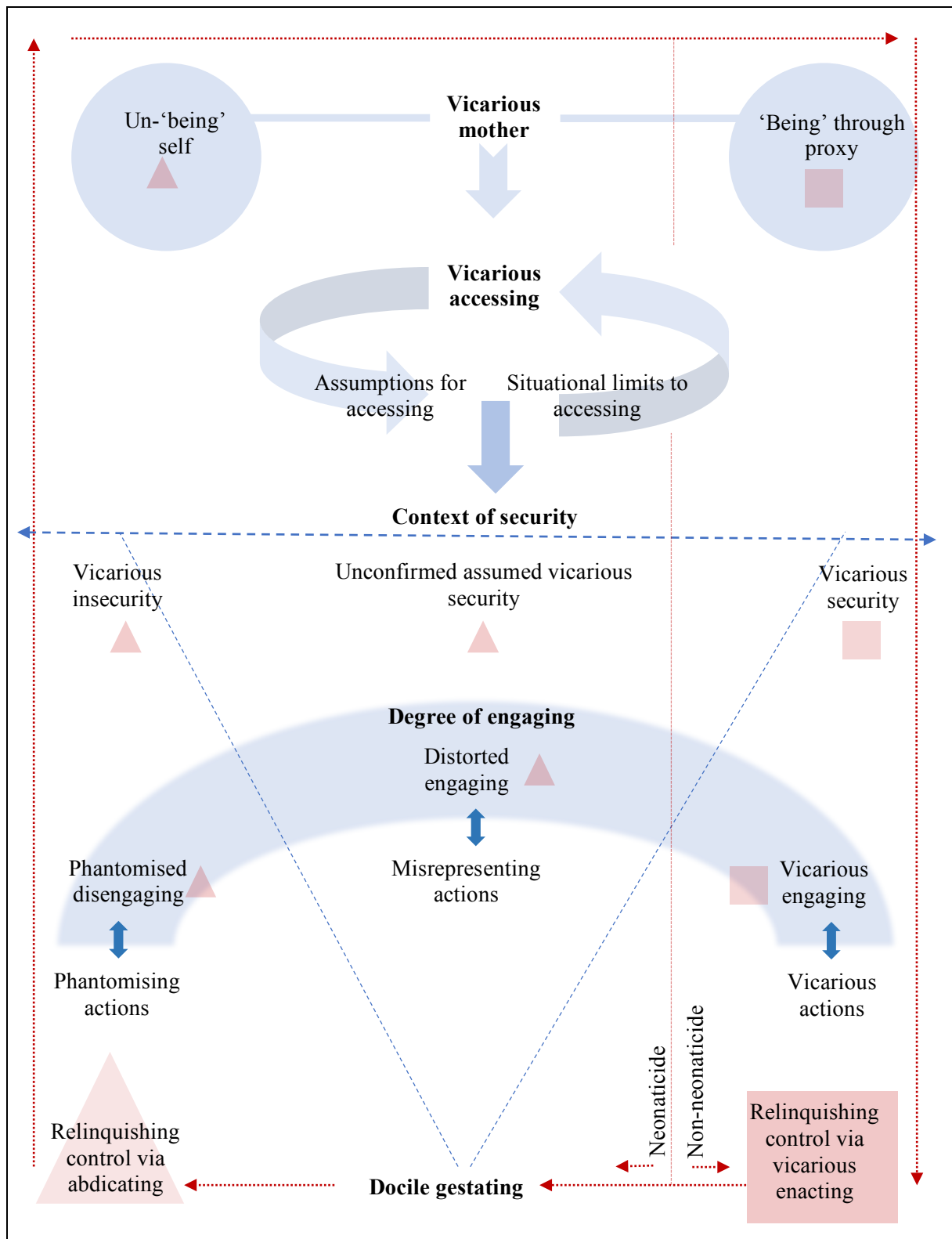


Figure 6.6 Schematic representation of interacting concepts

6.7 Chapter Conclusion

This chapter introduced the variant elements of the theoretical framework constructed. It served to define each of the theoretical constructs constructed within the study along with its variations, relations and dimension. The core category of docile gestating, as well as the four major categories of concepts (conceptual categories), including, the vicarious mother,

vicarious accessing, context of security, and degree of engaging, were defined. A schematic representation was provided that serves to reveal the relations and different interactions among concepts. A narrative structure, namely, the gestating events continuum was also introduced to serve as a chronological guide from which the concepts can be seen to occur, recur and interact over time.

CHAPTER SEVEN: FINDINGS AND APPLICATION OF CONCEPTS

7.1 Chapter Introduction

The findings of this study and the subsequent theory constructed was based on the narratives of eight women from across three correctional sites within South Africa. This chapter commences with a brief introduction to each of the women, providing a summary of the women's stories. An introduction to their stories are seen to create a context for the unfolding of constructed theoretical concepts and pregnancy processes. Thereafter, and throughout the remainder of this chapter, the concepts constructed in the grounded theory are applied to the stories the women told of their experiences. The women's stories reflect the women's voices that led to the abstractions. Their stories are told across a timeline of gestating. The example excerpts provided serve a dual purpose. Firstly, the excerpts serve to reveal, reinforce and also provide evidence to support my definition of the concepts constructed and the analytic claims about them. Secondly, the excerpts serve to demonstrate how the concepts may be applied as a framework to conceptualise how the women within the sample came to commit neonaticide. This is attained by revealing the complex and dynamic interaction of such concepts. In this regard, the concepts and their interactions are employed to reveal plausible underpinning processes towards a non-neonaticidal pregnancy (N-NP) and non-neonaticidal birth (N-NB), as well as a neonaticidal pregnancy (NP) and neonaticidal birth (NB). Here, N-NP and N-NB refers to the pregnancy and birth, respectively, where the mother did not take the life of her newborn. NP and NB refers to the pregnancy and birth, respectively, where the mother took the life of her newborn.

7.2 Introducing the Participants

This section introduces the participants who were involved in the co-construction of this theory. A brief summary on their background is provided as well as a brief summation of the act. All the participants have been given pseudonyms for confidentiality purposes.

Overall, my impression of the women was that they struggled to engage in reflective thought about themselves and their experiences. This was deemed to be significantly more so for some participants than others. I also perceived the women to be immature, dependant and passive. Appearing impressionistic and suggestable was also mentioned already, together with how this was managed (see Section 5.9). I was surprised to find that the women presented as meek and soft-spoken as I expected them to have an intimidating presence on the mere basis of the heinous nature of the offence. Initially, the women appeared guarded and wanting to present

themselves in a favourable light, however, this changed favourably throughout the process of establishing good rapport. Appearing guarded was especially relevant to women who were in the early stages of their incarceration sentence. I elected to discontinue interviewing only for one participant (Alex), on the basis of her apparent discomfort, guardedness, superficiality and not being forthcoming with information. On the basis of the aforementioned challenges, I needed to rely more heavily on the quotes provided by some participants regarding the reinforcement and application of concepts within this chapter.

7.2.1 Participant one: Ann

Ann was a married woman with three children. She had taken the life of her last born child, her fourth. Around the time of her pregnancy, she reported tumultuous relationships with her parents and husband as well as socio-economic challenges. Ann, her husband and three children were living with her parents around the time of the offence. While similar challenges were present during her previous pregnancies, they were exacerbated during the final pregnancy. Her family had become aware of her fourth pregnancy after she had started showing, however, they refrained from discussing the matter with her.

Ann reported that she gave birth to her fourth child alone in the bathroom during the night. During the act, Ann took an item of clothing laying on the bathroom floor and suffocated the baby. Afterwards, she placed the baby in a plastic shopping bag and placed it inside her cupboard. She cleaned the bathroom and proceeded to go back to bed.

7.2.2 Participant two: Sam

Sam was a single mother of two children. She had taken the life of her last born child, her third. Sam felt that she had been unable to inform her family that she was pregnant, with the exception of her boyfriend. Although she was living with her grandmother and two children at the time, no one asked her if she was pregnant. Unfortunately, Sam's boyfriend died during her first trimester, and she reported to dealing with the grief by abusing alcohol.

Sam reported that she gave birth alone on her bedroom floor. She indicated that she took a razor blade that had always been in her room and made a small incision in the baby's throat. She then felt fatigued, left the baby on the bedroom floor and then proceeded to take a nap. Afterwards, she ate breakfast and then telephoned her mother to inform her that she had been pregnant; and that she had given birth. When the family arrived, they had realised that the baby had died.

7.2.3 Participant three: Ria

Ria was a single mother of two and took the life of her third child, the last born. She had hoped that the pregnancy would strengthen her relationship with her boyfriend. Ria only shared the pregnancy news with her boyfriend, who she had hoped would support the pregnancy and provide financial support. At the time of the offence, she was living at her place of employment and her mother was raising her other two children.

Once Ria had gone into labour she contacted her boyfriend to inform him. She indicated that she felt that he had been unwilling to assist. At the moment of birth, Ria felt enraged and suffocated the baby by shoving newspapers down the baby's throat. She placed the baby in a plastic bag, and the bag into her laundry hamper and then proceeded to take a nap. Ria rose the next morning to go to work. The baby was discovered in the basket more than two weeks later by her employer when she was away visiting family.

7.2.4 Participant four: Kim

Kim was a single mother of two and took the life of her last born child, her third. Kim and her children were living with her grandmother and other relatives around the time of the offence. Kim had been unable to inform her family that she was pregnant but her boyfriend accepted the news. Kim was eventually informed by another family member that her grandmother was aware of her pregnancy and that she was angry with Kim. This resulted in Kim wanting to withdraw. She felt rejected and became more isolated, deciding to no longer see her boyfriend, despite his pleas.

Kim was alone when she gave birth in her bedroom during the night. She reported that she suffocated the newborn by placing her thigh over the baby's face. Kim then placed the baby in a backpack, cleaned the room and proceeded to rest for the evening. She got up and went to work with the backpack the following morning, kept the baby with her for the duration of the day, and then discarded the bag near a river by a bridge after work.

7.2.5 Participant five: Llyn

Llyn was a single mother of one child. She took the life of her second child, the last born. Llyn indicated that she was living alone around the time of the offence and that her family had been taking care of her other child. Llyn presented with a significant history of stimulant

abuse and continued using substances throughout her pregnancy. Llyn did not inform anyone of her pregnancy and was concerned about her mother's health around the time of the offence.

Llyn reported that she had been involved in the drug trade, specifically the smuggling of illicit substances across the borders of South Africa around the time of the offence, which involved swallowing the substance encased in a plastic bag. She reported that on the day that she took the life of her newborn baby, she consumed a bag with unknown substances. The bag "burst" inside her and she went into labour. According to the court documents, the baby was born alive and Llyn was subsequently charged with murder. However, Llyn stated that she was unable to recall the birth or events thereafter.

7.2.6 Participant six: Amy

Amy was a single mother of two children. She took the life of her third child, the last born. She and her two children were living with her grandfather around the time of the offence. Amy reported that her grandfather coerced her into a sexual relationship in exchange for money to provide for her children. Amy believes that her grandfather was the father of her third child and so she decided not to inform anyone of her pregnancy.

Amy said she gave birth alone in her bedroom in the late afternoon. She proceeded to bury the baby in a grave, which she dug after giving birth. She said she then returned to her room and slept until the next morning, when she bathed and dressed herself as well as her children and went to work. She reported that her colleagues suspected that she had been pregnant and initiated a police investigation after they observed her coming to work appearing as if she had given birth. Although Amy was guarded around the exact details concerning the act, she indicated that the court had argued that she had buried the baby alive.

7.2.7 Participant seven: Tika

Tika was a single mother of four children. She took the life of her third child and had two more children after that. Tika was living with her boyfriend around the time of the offence. Her parents assisted with caring for her children. Around that time, Tika said she felt conflicted; her boyfriend thought she was pregnant with his child, but it was actually a former boyfriend's child. Tika had been reluctant to inform her family that she was pregnant and would deny the fact when they asked her.

Tika reported that her family had accused her of wanting to take the life of her firstborn child. Around that time, she was in high school and concealed her teenage pregnancy. When she gave birth alone in the bathroom during the early hours of the morning, her parents were alerted by her cries. When her parents entered the bathroom, Tika was trying to shove the baby down the toilet bowl. A criminal case was never opened.

Around the time of the offence (third child), Tika was involved in the dealing of illicit substances. She also abused crystal meth throughout her pregnancy and consumed the substance on the day that she went into labour. At the time of birth, Tika was alone in her bathroom and took the life of her newborn baby by forcefully throwing the baby head-first to the ground. Exhausted, she fell asleep on her bed, only to discover the deceased's body next to her bed when she awoke. Her case was opened and dismissed within the same year. However, the case was re-opened seven years later.

7.2.8 Participant eight: Alex

Alex was a single mother of three children. She took the life of her third child and had another child while her trial was ongoing. At the time of the interview, she reported that her last child was staying with her at the correctional centre's 'mother and baby unit'. Around the time of the offence, she was living alone with her two children. Alex broke off the relationship with the father of her third child around the time of establishing her pregnancy. She did not inform anyone that she was pregnant.

Around eight months into her pregnancy, Alex gave birth alone. She indicated that the court alleged that the baby had been born alive but that it died after she placed it in a suitcase. Alex was guarded regarding any further details as she was concerned about the consequences to her last born child if she divulged further information on the case. The interview was then discontinued by me, based on Alex's level of discomfort. However, she agreed to the use of the information obtained up to that point for research purposes.

7.3 Introduction to the Findings and Application of Concepts

The presentation of the study findings below are based on the nature of the research product that was sought. That is, a processual account that is abstract, revealing interaction and connections among concepts as well as showing relationships, variations and dimensions, changes over time and in according to different contexts. The findings are, thus, presented in a circular manner across time via the gestating events continuum. Headings are used to alert

the reader to the core category or major categories that have been elicited and are shown to present and interact with related concepts during each gestating event.

Each section below reveals how the women's stories demonstrate the concept or how the concept is indicated by the story. Within some of the earlier sections it is merely shown how the concept is alluded to or how it may present as a possible presentation of the concept. However, further sections will then bolster the concept. Furthermore, each section will reveal how the concepts may present differently in accordance to the relevant gestating events, how they connect with and relates to other concepts, and to which extent or degree the concept may be indicated or experienced. Finally, commentary is delivered on the consequences of each concept along the gestating events continuum.

The reader will follow the women's stories beginning with the first gestating event, namely pre-pregnancy, towards successive events; including, the receiving of pregnancy news, the sharing of pregnancy news, towards the physical pregnancy, and finally the labour and birth of the newborn. Emphasis will be placed upon the similarities with subtle variations as well as stark differences between the women's N-NP and eventual N-NB in comparison to their NP and subsequent NB. Each section will be concluded with a summation of the underpinning processes towards an N-NP and NP as revealed within the relevant pregnancy phase. The underpinning processes explored within that section will then show to have consequences for the next pregnancy event and section of the chapter.

The processes discussed are deemed a response to the refined aims and objectives of the study (see Section 2.3.2.1) and links the findings with the research question. The recurrent but diverse underpinning processes considered throughout the women's N-NP and NP narratives include:

- 1) How the women approach content related to their pregnancy and baby as addressed by the concept of docile gestating;
- 2) What role the women enact with respect to being mother, as indicated by the concept of the vicarious mother;
- 3) How the women engage with their interpersonal environment with respect to pregnancy and baby-related content, as discussed via the concept of vicarious accessing;
- 4) Establishing what the consequences are for the nature of their vicarious accessing as addressed by the concept, contexts of security;

- 5) How the women behave in response to the established contexts of security as revealed by the concept, degree of engaging; and finally,
- 6) Considering the behaviours that determine the nature of and degree of engaging as indicated by the concepts of vicarious actions, misrepresenting actions and phantomising actions.

The demonstration of the concepts interacting over time, reflecting on the nature of and formative processes of thoughts, emotions and actions in accordance to their N-NP and NPs, serve to reveal the underpinning pathways to neonaticide.

7.4 Pre-pregnancy

In telling their life stories and in discussing their variant pregnancy experiences, the women deliberated on matters related to family planning. The women's stories are, thus, considered as occurring within the pre-pregnancy phase along the gestating events continuum. Their approaches regarding these stories appear to reflect similar concepts, statements and actions as within other matters relating to the pregnancy experience. However, the concepts indicated by the data within this section merely reveal tentative links to the concepts constructed. It is only via further in-depth exploration of the data throughout further sections that the constructs are appropriately bolstered and justified. Nevertheless, the concepts are introduced and alluded to as revealing finer nuances of the constructed concepts within this gestating phase. The inclusive value of doing this is deemed important on the basis that it provides a background to the women's approach to pregnancy and the mothering world as early as the pre-pregnancy phase.

This section introduces the relevant concepts alluded to within the pre-pregnancy experience and include vicarious engaging and phantomised disengaging. The concepts are revealed with respect to the women's approach towards family planning content and the nature and extent to which they may participate in such a process. The two styles of engaging (vicarious engaging and phantomised disengaging) will be considered separately. The former is associated with a process of participating in family planning and the latter the negation thereof. The manner of engaging is explored with its relevant attaining and maintaining actions, whether it be vicarious actions or phantomising actions, respectively. The pre-pregnancy context also allows for an introduction for the context in which family planning may or may not occur for the women. It is through considering such content that it can be shown how the women play the role of vicarious mother and engage in docile gestating during this pre-pregnancy event.

The section concludes with a summation of the underlying processes during this gestating phase.

7.4.1 Family planning as occurring via vicarious engaging

The women's narratives yield that family planning may occur among this population of women via close reliance on others. Below it is, thus, indicated that the process may occur as the women participate in vicarious engaging. The concept vicarious engaging, with its associated vicarious actions and its relationship to relevant concepts, is introduced. It is shown how this type of engaging occurs within vicarious secure contexts. Within such contexts, the women are able to play to role of vicarious mother via 'being' through proxy. The women are then understood to approach family planning with docility (docile gestating) by relinquishing control via vicarious enacting.

7.4.1.1 Vicarious engaging and vicarious actions within pre-pregnancy

The women mostly shared stories regarding their pregnancies being unplanned, whether it had been a N-NP or NP. The underpinning processes regarding this are better understood according to the category of concepts, phantomised disengaging, as discussed below. However, a single woman's account, where she reflected on her one planned pregnancy, a N-NP, reveals the underpinning processes that may unfold in instances where a pregnancy is planned. This section reveals the concept of family planning by proxy. The concept is demonstrated as a vicarious action, which is argued to link with a bigger process and type of engaging, namely vicarious engaging.

One woman's account reveals the role her family played in family planning. The excerpt below indicates the concept family planning by proxy. The participant was engaging with the idea of having a baby but via the initiation, encouragement and decision-making of others on her behalf to have a baby.

Excerpt 7.1

... The family of theirs is open; very open. We party together, tell everything to each other. Now they wanted it (referring to having a baby) because his (referring to her boyfriend) one egg (referring to his testes) was I don't know where. But he go to the doctor and the doctor make it come back down again. That's why they (referring to his family) said, okay, they teased him and said, "you can't make a child". Then he said I will show you ... then we conceived [name of second born].

Tika

The above concept of family planning by proxy is deemed to form part of and be an example of a more abstract category of concepts, namely vicarious actions. Within later sections, vicarious actions are revealed as specific actions the women take through the support of others. Such vicarious actions are described as attaining factors through which the women come to engage and act towards pregnancy-related matters; but via the support of others. In this regard, a type of engaging is indicated, namely vicarious engaging. Here, others seem intricately involved in initiating action on behalf of the mother, so much so that the women later report feeling as if the other is in fact the individual who is pregnant. With respect to the pre-pregnancy situation, the woman's narrative above demonstrates the concept of vicarious engaging where they begin to act towards family planning and the potential of being pregnant via close reliance on others.

7.4.1.2 Vicarious engaging within vicarious secure contexts during pre-pregnancy

Further sections will elaborate on the concept of contexts of security, namely a context determined by the extent to which the women may obtain access to and be supported by significant others. The type of context experienced and subsequent degree of support experienced is generally determined by a process of vicarious accessing, which concerns the processes involved in drawing in support resources to aid in the management of their mothering worlds.

The exploration of the above content, in accordance to the concepts constructed within this study, reveal that if the women were to engage in family-planning activities, it is done so through the close initiation of others. Moreover, Excerpt 7.1 also reveals the context in which such action may be initiated by others and followed by the women. Within her narrative, Tika describes her boyfriend's family as "open", where they had greatly shared everything with one another. Her narrative, thus, demonstrates how her family planning for her second born child had occurred within a vicarious secure context. The context is defined as a context where there is input, initiation, support, and acceptance of others.

7.4.1.3 Playing the role of vicarious mother in vicarious secure contexts within pre-pregnancy

The above demonstrates that the women may engage in family planning by proxy within vicarious secure contexts. Moreover, such vicarious actions by the mother are conducted on the basis of who she is as mother. The situation occurs as she enacts the role of 'vicarious mother'. The concept of vicarious mother refers to the women's 'being' as mother. 'Being'

refers to the mother's thoughts, feelings and actions experienced in relation to mothering content, but also the driving force behind the 'being'. Namely, the women may prefer to mother vicariously through another. Within the pre-pregnancy experience, their 'being' is shown through what they believe they ought to think and decide regarding family planning. By the vicarious action of family planning by proxy, they are playing to role of vicarious mother via more broadly 'being' through proxy and specifically, decisioning by proxy. The former concept refers to being as mother, whether it be thinking, feeling and acting via another. The latter refers to decision-making based on the initiation and influence of others' decisions.

7.4.1.4 Vicarious enacting as a form of docile gestating within pre-pregnancy

As a result of who the women are within the vicarious secure contexts, the nature in which they approach pregnancy-related matters may also be identified. This may be seen in as early as the pre-pregnancy phase. The approach towards family planning, as yielded above, demonstrate how the women may put action into place towards family planning via the dictation of others. The concept of relinquishing control via vicarious enacting is, thus, indicated, as the women are seen to relinquish control by having others dictate family planning. This form of relinquishing control demonstrates the core concept of docile gestating as an underpinning process among this group of women.

While the one outlier case within this section was considered in terms of the concepts and processes constructed within this study, it is also necessary to consider the majority of cases and approaches towards family planning among this population of women. This is achieved via considering the conceptual category of phantomised disengaging.

7.4.2 The negation of family planning as occurring via phantomised disengaging

Most of the women's stories reveal that they had negated to participate in family planning for all of their pregnancies, whether it be a N-NP or NP. Below, it is shown how this occurs via a pregnancy style of phantomised disengaging; with its associated phantomising actions. It is further shown how this type of engaging occurs within a vicariously insecure context. This time it is shown how the women play the role of vicarious mother, but via the 'un-being' self. Again, the women are seen to approach the family planning situation with docility (docile gestating), but this time by relinquishing control via abdicating.

7.4.2.1 Phantomised disengaging and phantomising actions within pre-pregnancy

This section begins with an exploration of the actions most of the women reported to take during the pre-pregnancy phase for all of their pregnancies, N-NP and NP alike. The concepts of un-acknowledging, procrastinating, and redirecting preoccupation are introduced. As each of these concepts are discussed, they are revealed as specific phantomising actions through which a phantomised disengaged experience concerning family planning is revealed.

Many of the women's stories concerning pre-pregnancy allude to the construct of un-acknowledging. In later sections, un-acknowledging is employed to speak to the women's experience in failing to acknowledge or actively choosing not to acknowledge their pregnancy or baby that they are carrying. Within the pre-pregnancy situation, the construct is suggested when the women fail to acknowledge the potential of falling pregnant and, subsequently, refrain from using contraception. It is surprising to observe that none of the women used contraception in any of their pregnancies, despite it being freely available at clinics across South Africa; and despite their awareness of their previous unplanned pregnancies. Upon more direct questioning with later interviews, Ria demonstrates the concept un-acknowledging in this regard with respect to her NP.

Excerpt 7.2

Interviewer:

Now, when you and your boyfriend were having sex, you said you weren't on contraception?

Ria:

No.

Interviewer:

Okay, how come you were not on contraception?

Ria:

I didn't ever think of contraception. I don't know why.

Interviewer:

And, did you ever worry that you might fall pregnant?

Ria:

Okay, I wasn't thinking of it. I wasn't.

Interviewer:

You had the two pregnancies before that right?

Ria:

Yes.

Interviewer:

They weren't planned pregnancies?

Ria:

No.

Interviewer:

When you were with this boyfriend, did you ever discuss with him the possibility of falling pregnant?

Ria:

No, we didn't discuss it.

Interviewer:

Did you ever say maybe you must use a condom or something?

Ria:

No, we were not talking about condoms.

Ria

As a consequence of refraining from acknowledging the possibility of falling pregnant, the above participant is, consequently, seen to refrain from engaging in family planning activities. Further sections will demonstrate the concept of un-acknowledging as constituting a phantomising action. The construct phantomising action is a higher level abstract category of concepts that include a variety of different types of actions the women may take. The actions within this category speak to either actions or inactions on behalf of the women to render the possibility of pregnancy or pregnancy-related experiences to be rendered non-existent or unreal within their minds. Further sections will bolster this idea and argue that the act of phantomising is, thus, rendering the pregnancy-related matters and experience as a phantom; it is there, but not fully experienced within their mind or behaviour.

The next construct with seeming relevance to the pre-pregnancy event is procrastinating. Procrastinating is referred to during later sections, where the women are seen to hold off on engaging in behaviours typically associated with a pregnancy, to the extent that the pregnancy is not considered and never dealt with. Within the excerpt that follows, Ann reveals a similar approach towards taking contraception, in that she reports on leaving the task of going to the clinic for later, but eventually failing to go.

Excerpt 7.3

... I could have done that (referring to going to the clinic for contraception) and maybe things could have turned out differently. Like me always leaving things for the last minute

Ann

Procrastinating is also considered a phantomising action within further sections. While the women procrastinate, the pregnancy or the potential of falling pregnant is not acted towards for that moment.

As Ann continues, she also demonstrates the next concept of relevance, namely, redirecting preoccupation. This construct is employed in other gestating events to indicate how the women focus on other concerns within their environment at the expense of the baby or pregnancy. As such, the baby or pregnancy is never fully considered. Similarly, within the

pre-pregnancy encounter, Ann demonstrates this below as she focuses on working at the expense of going to the clinic for obtaining contraception.

Excerpt 7.4

I guess in a way, nothing was stopping me from going to the clinic. I don't know, maybe I just used work as an excuse But it's not like they wouldn't allow me to go to the clinic. I could have went to the clinic. It's like I have these children now I have to take care of them. So, it was just like that, yeah. There's no time for clinics and stuff like that.

Ann

Again, redirecting preoccupation is also regarded as a phantomising action, as the women fail to engage in thought and act towards the possibility of falling pregnant and, thus, family planning on the basis of focusing on other matters.

Up until this point, un-acknowledging, procrastinating and redirecting preoccupation was introduced as phantomising actions within the pre-pregnancy experience. As the possibility of falling pregnant is not considered within the women's minds, they also fail to engage in family-planning matters. In this regard, a higher level abstract concept and type of pregnancy engaging, namely phantomised disengaging is indicated. This concept denotes that matters related to pregnancy fail to fully exist within the women's minds and, thus, they refrain from engaging with it.

7.4.2.2 Phantomised disengaging within vicarious insecure contexts during pre-pregnancy

The concept of contexts of security was introduced above. In exploring the pre-pregnancy experience, especially the contexts where the women may fail to engage in family planning matters, it was observed that the women's stories mostly reveal vicarious insecure contexts. In further sections, this context is defined by the women feeling unsupported and unloved by significant others in their environment and also as if others are disengaged from pregnancy-related matters. As an example, during pre-pregnancy, Ann mentions her husband's lack of involvement in family planning.

Excerpt 7.5

He (referring to her husband) didn't speak much about it (referring to the use of contraception). He never even used to tell me you need to go to the clinic because you are having all these kids and stuff. He didn't even discuss anything like that with me.

Ann

7.4.2.3 Playing the role of vicarious mother in vicarious insecure contexts within pre-pregnancy

The phantomising actions discussed above can again be seen as a reflection of who the women are as mother, their 'being' as mother, within a vicarious insecure context. Previously, it was shown how the women may engage with family planning via others. However, within the vicarious insecure contexts the women showed little reflection on their own thoughts, feelings and actions in relation to such content. Ann's comment in Excerpt 7.5, "He never even used to tell me you need to go to the clinic" reveals an expectation that her husband had needed to inform her actions (acting by proxy) or decision-making (decisioning by proxy). However, within the vicarious insecure context, it would appear that there was no source available to drive action. This alludes to the un-'being' self, which is a component of the vicarious mother. The concept yields that the women appear to refrain from 'being' mother, whether it be thinking about, feeling towards, or acting in relation to pregnancy content independently. They are, thus, seen to remain a vicarious mother, who vicariously mothers or engages in pregnancy-related content mostly via the close reliance on others, or when such sources are unavailable, not 'being' mother at all.

7.4.2.4 Abdicating as a form of docile gestating within pre-pregnancy

This section demonstrates the nature of gestating as being one underpinned by docility yet again among this group of women. However, this time, the nature thereof is deemed docile on the basis that the women relinquish control over family planning matters by abdicating responsibility. The concept of 'relinquishing control via abdicating' here, refers to the women failing to undertake action towards pregnancy-related matters, specifically family planning, within pre-pregnancy.

7.4.3 Summation of the underlying processes towards N-NP and NP within pre-pregnancy

The finer nuances of the concepts constructed have been demonstrated above in as early as the pre-pregnancy phase. This section summarises the beginning underpinning processes towards a N-NP and NP via the constructed concepts. It provides initial insights into the women's approach towards family planning, the women's 'being' as mother within specific relational contexts, and deliberation on the specific actions she engages in based on this dynamic situation. Thus, the culmination of these aspects determines a degree or type of engaging where she is able to engage with family planning, or not.

Through the constructed concepts, this study denotes that, among this sample of women, their approach towards family planning and, thus, pregnancy is one underpinned by docility, whether it be a N-NP or NP. In accordance to their approach towards pregnancy, the women's stories mostly reveal relinquishing control over family planning. However, the data does seem to suggest that if the women were to engage in family planning, that it would still be underpinned by docility, but in the form of vicarious enacting.

On the basis of the narratives, it is evident that the relational context within which the women find themselves has a bearing on the women's 'being' as mother. It is observed that the mothers may either play the role of vicarious mother by 'being' through proxy or via the un-'being' self. The former is observed within vicarious secure contexts and the latter within vicarious insecure contexts. As the vicarious mother operates within the vicarious secure context, she is able to employ vicarious actions, which allows her to engage with family planning content, however, it is within the vicarious insecure contexts in which the un-'being' self is operational and where she employs the phantomising actions. The likelihood around falling pregnant is subsequently not fully experienced as a real possibility and, thus, not acted towards. The latter indicates a form of phantomised disengaging from family planning.

In sum, while the one outlier case was considered in terms of the concepts constructed, it should be mentioned that the women's stories mostly emphasised a phantomised disengaged experience with respect to family planning. Thus, the docile nature of their pre-pregnancy experience was mainly marked by abdicating responsibility. This appeared to hold true for both their N-NPs and NPs.

While this section emphasised the women's approach towards family planning as being best described by a phantomised disengaged approach, the next section will consider the women's reactions and approaches towards receiving pregnancy news.

7.5 Receiving News

As one of the early gestating events, the women told stories about receiving news of being pregnant. It is within this phase where the consequences of the phantomised disengaging employed within the previous gestating event are observed. Moreover, the receiving news phase allows for insight into how the women may receive news and come to act towards such news. Alternatively, it is revealed how they may maintain a state of not fully engaging with this content or reality of being pregnant.

This section will firstly shed light on the consequences of phantomised disengaging in pre-pregnancy for the receiving news phase. Thereafter, the concepts indicated within this phase will be revealed with their accompanying insights in how the women may come to receive and act towards the news; or maintain a state of unreality in response to it. The concepts of vicarious engaging and phantomised disengaging will be considered separately again with respect to the receiving of pregnancy news phase. Relating to the former, the women narrate a need to vicariously come to receive the news, however, the latter is more consistent with the women's experience of what mostly occurred. It is through such phantomised disengaging that they maintain a state of unreality towards their pregnancies. The respective vicarious actions and phantomising actions will also be considered. On the basis of each type of engagement in this regard, how the women play the role of vicarious mother and her docile approach towards receiving pregnancy news is further revealed. Finally, a summation is provided on the underlying processes towards N-NP and NP in the context of receiving news.

7.5.1 Consequences to phantomised disengaging when receiving pregnancy news

Within the previous gestating event, it was mentioned that the women shared stories about their phantomising actions, especially 'un-acknowledging' the feasibility of falling pregnant. This was done despite being sexually active at the time. As a seeming consequence to such un-acknowledgement, the women mostly expressed feelings of disbelief once gaining awareness of their pregnancies, whether it had been a N-NP or NP. The disbelief is demonstrated in Ria's account that follows.

Excerpt 7.6

Ria:
... I couldn't believe it... I wasn't believing it.
Interviewer:
What do you mean you weren't believing it?
Ria:
I didn't think I would be pregnant.
Interviewer:
You didn't think you would fall pregnant?
Ria:
Yes
Interviewer:
Why did you think you wouldn't fall pregnant?
Ria:
I don't know, I don't know. I wasn't expecting it.

Ria

Essentially, the women demonstrated a phantomised disengaged stance towards family planning in the previous gestating event and, thus, failed to fully experience the reality of falling pregnant. Consequently, Ria demonstrates that even when receiving pregnancy news, she was unable to “believe it” or experience it as a reality.

While most of the women narrated accounts that they were not expecting to have fallen pregnant, the use of the theoretical concepts below allows insight into how the women may have preferred to engage with and begin to act towards pregnancy news.

7.5.2 The need for vicarious engagement in receiving pregnancy news

This section employs the concepts of vicarious engagement and vicarious actions to reveal their preferred approach towards receiving pregnancy news, overall. Furthermore, their need to play the role of vicarious mother is determined as they prefer to recognise the pregnancy via vicarious input. Via this approach, they are observed to engage in docile gestating as they hope to relinquish control via vicarious enacting.

7.5.2.1 Vicarious engagement in recognising and acknowledging a pregnancy

Most women expressed difficulty in recognising the reality of the situation regarding being pregnant in general. This was narrated among their N-NP as well as their NPs. In the context of finding it difficult to believe such a reality, the women narrated the need for significant others to aid in the process of acknowledging a pregnancy. The encounter with the significant other within the gestating phase of receiving news reveals the vicarious action and concept recognising pregnancy by proxy. The construct denotes the women’s need to rely on external input to recognise and acknowledge their pregnancy.

Llyn’s story, regarding her NP, denotes this construct as she reveals how she had experienced confusion regarding the reality of being pregnant. She mentions that she had known the truth but experienced thoughts as if she had not been pregnant. This had reportedly occurred as a result of others failing to ask her regarding her pregnancy status.

Excerpt 7.7

Llyn:

This time, nobody came to me to ask if I’m pregnant.

Interviewer:

Were you upset that nobody was asking you if you were pregnant?

Llyn:

I thought maybe I’m not pregnant because people are not talking too much. If they don’t ask, I thought maybe I am not pregnant.

Interviewer:

Help me understand this, did you think maybe you are not pregnant because people are not asking whether you are pregnant?

Llyn:

Ya, nobody was asking and I confused my mind, but I knew the truth ...

Interviewer:

So, if other people would have asked you more about whether or not you are pregnant, would it have made things feel more real for you?

Llyn:

Yeah

Llyn

This preferred approach towards coming to acknowledge the pregnancy as a reality may also relate to who the women are as mother. This aspect will be considered next.

7.5.2.2 Playing the role of vicarious mother when receiving news

It has been mentioned already that vicarious actions operate on the basis of the women's 'being' as mother. Recognising pregnancy by proxy is operable, as the women play the role of vicarious mother via 'being' through proxy, specifically, acting by proxy. In Excerpt 7.7 above, Llyn revealed the need to acknowledge her pregnancy secondary to significant others enquiring verbally about her pregnancy. She is, thus, seen to engage vicariously as a result of acting by proxy. This concept denotes that the women are 'being' mother via acting and behaving towards mothering or pregnancy-related content based on the prescriptions and initiation of significant others.

7.5.2.3 Relinquishing control via vicarious enacting when receiving news

The women's preferred mode of 'being' in responding to pregnancy news again reveals the docile nature in which the women seem to approach pregnancy. Preferring to act by proxy and, thus, recognise the pregnancy by proxy, demonstrates the relinquishing of control via vicarious enacting. With this, the core concept of docile gestating is then revealed.

While the above demonstrates a preferred way to recognise and acknowledge a pregnancy, the following section will consider the approach and type of engaging emphasised most in terms of experience by the women during the receiving news phase.

7.5.3 Maintaining unreality via phantomised disengaging

Next, the concepts in the study are employed to reveal how the women maintained a state of unreality towards receiving pregnancy news. This is achieved by considering the phantomise

disengaged stance with its associated phantomising actions towards the receipt of such news. Again, the vicarious mother is shown to be operable but this time via the not-‘being’ self. As the women negate mothering in their own accord, they are seen to relinquish control via abdicating.

7.5.3.1 Phantomised disengaging when receiving news

Within this phase, the women are observed to maintain a phantomised disengaged stance towards the possibility of being pregnant. Their phantomising actions in this sense are seen to maintain the phantomised disengaged state. This is achieved as the women’s actions seem to maintain the experience where they are unable to fully experience or acknowledge the reality of being pregnant. The phantomising action considered in this regard include clouding.

Llyn’s statement below indicates how she had wanted to refrain from accepting the truth of one of her N-NPs and that this had continued for some time after her mother had informed her that she had appeared pregnant. Although this instance may appear as un-acknowledging, the concept of clouding is rather indicated. Clouding is closely linked to ‘un-acknowledging’ and may even be considered a form of un-acknowledging. However, clouding rather speaks to the experiencing of knowing the truth to some extent, but only having a vague (clouded) sense of knowing or experiencing matters related to pregnancy content. The women may be observed to maintain such cloudiness without seeking clarity; or as observed in the statement below, choose not to acknowledge the reality of the situation. This may be done despite having an experience to some extent of knowing the truth.

Excerpt 7.8

Llyn:

It’s my mom who said I’m pregnant. I didn’t accept it, I said to my mom, no mom, I’m not pregnant. Then I was big ... but I said no, I’m not. I’m not ...

Interviewer:

So how many months were you about, when your mom started asking you if you were pregnant?

Llyn:

Six months ... I said no I’m not pregnant. I’m starting to hide myself ...

Interviewer:

When your mom said you were pregnant, was it like you didn’t want to see the truth?

Llyn:

Yes

Interviewer:

Tell me a little bit more about that?

Llyn:

That time when I would come from school, me and my friend would go to the clinic to get tested. We would sit and sit and sit, and then after a few minutes I want to go. Because I know that time when my mom told me I'm pregnant, it's like I want to know, but I don't want to know

Llyn

A further component of clouding is the reported experience of confusion at the same time. As Llyn continues, her statement below yields how she was clouding acceptance as she had experienced a vague sense of fear and confusion.

Excerpt 7.9

Interviewer:

When you said to your mom, "no I am not" (referring to being pregnant), would she believe you?

Llyn:

She was not believing me because the way I was not accepting it, I was scared.

Interviewer:

So, you didn't want to accept it because you were scared? What were you scared about?

Llyn:

I don't know. Scared, just scared and confused.

Llyn

The actions taken and reported on within this section can again be considered within the context of who the women are as mother and will be considered next.

7.5.3.2 Playing the role of vicarious mother via not 'being' when receiving news

Earlier sections revealed that the women would have preferred to act towards the pregnancy news via the aid of somebody else. However, this section denotes that while this may still be true, the women may also continue to play the role of vicarious mother through not 'being'. This is attained as they fail to fully consider the pregnancy news on their own accord and act in a manner to keep it from being experienced as a reality.

7.5.3.3 Relinquishing control via abdicating when receiving news

The above manner of 'being' as mother again yields how they relinquish control over engaging with and responding to pregnancy news. It is, thus, observed again that the women's approach towards pregnancy is underpinned by docility and, thereby, demonstrates the core concept of docile gestating.

7.5.4 Summation of underlying processes towards N-NP and NP when receiving news

This section further considered the beginning underpinning processes towards a N-NP and NP for this sample of women. The above sections highlighted the women's emphasis on their

experience of disbelieving their pregnancy news, whether it be a N-NP or NP. However, it was shown that this experience may be maintained on the basis of the women's preferred manner of 'being' as mother and approach towards pregnancy.

It was shown that the women's nature of relating to pregnancy news is one defined by docility as they either relinquish control via preferring to vicariously receive and act towards such news or by failing to fully engage and act towards such news on their own accord. More importantly, it was shown how, by phantomising actions, they may maintain this state of not realising or appreciating the reality of being pregnant. While they may be aware, to some extent, of their pregnancy, it was shown that they would prefer to maintain the vague confused state regarding such reality.

This section again emphasised the important role that vicarious sources seem to play for this sample of women to recognise, acknowledge and start acting towards pregnancy news. The next section will focus on the processes of drawing in potential security sources or aspects that may hinder such access.

7.6 Sharing of Pregnancy News

The women's reflections on their variant pregnancies yield their actions or inactions as well as thoughts and experiences around decisions of sharing their pregnancy news with significant others. It is in the sharing of pregnancy news that the women may be able to draw in vicarious support for themselves. On the other hand, when the women are unable to share their pregnancy news, they are unable to draw in such support. Alternatively, the environment may not be responding in the desired approach when certain strategies are put in place to share such news. A further possibility is that the environment may intervene even in the face of the women attempting to avoid disclosure. This section reveals the complex processes involved in such vicarious accessing as well as the consequences or different outcomes of this process.

The women's stories below firstly yield the importance of securing vicarious resources and, thereby, indicate the concept of vicarious accessing. Thereafter, the concept assumptions for accessing as well as the concept situational limits are considered as complex processual factors that may impact on whether or not the women are able to secure vicarious sources. Thereafter, the concept context of security is introduced, as it allows for an understanding of the variant consequences or processual outcomes to the processes involved in securing

vicarious sources. After the introduction of these concepts, the notion of how the women play the role of vicarious mother and their intended approach towards pregnancy is revisited but, this time, as it presents within this pregnancy phase and constructed concepts. Finally, a summation of the underlying processes towards N-NP and NP as unfolding during this gestating event is provided.

7.6.1 The need for vicarious accessing

While engaging with others regarding the pregnancy may be fraught with complexity, the need thereof remains evident within the women's narratives. The concept of vicarious accessing concerns both the need for and the process in securing such sources. This section reveals the women's need for accessing vicarious sources, namely, those individuals who would assume the lead, and offer guidance, practical resources and support.

After establishing that they are pregnant, the women emphasised a need for accessing individuals to assume the lead and offer guidance and support in both their N-NPs and NPs. For instance, Sam, who had been unable to communicate with her mother regarding her second pregnancy, a NP, reveals the unmet need for her mother to have advised her and show the way forward. It is noteworthy to mention that in the discussion preceding this excerpt, Sam had first expressed her disappointment that her mother had not come to ask her about her pregnancy. Following this, she demonstrates the need for guidance and her mother to assume the lead and offer support.

Excerpt 7.10

Interviewer:

If she (referring to her mother) had come to you to talk to you about it (referring to her pregnancy), to ask you about it, what would that have meant to you?

Sam:

You know, if you are a parent, the thing you must know; know your child as you know yourself. If you know your child, you will know something is wrong now. Call your child if you know something is wrong. And if my mom, she was calling me, and sitting down with me ... if my mom was calling me that time saying, "you are pregnant", and I say, "yes I'm pregnant" and she says, "who is doing this" and I told her ma, "this guy is so and so and so". I think I was going to get the advice with her that my child that we can take the first step forward now.

Sam

The women's motives to draw in vicarious sources may also be based on the need for practical support. Below, Ria mentions her motivations of informing her boyfriend of her third pregnancy, a NP, as she had initially identified him as a source to provide practical support to her.

Excerpt 7.11

Interviewer:

Then, what made you decide that you must tell your boyfriend?

Ria:

Okay, on this time, I knew that he would support me. He would be supportive in everything.

Interviewer:

You thought that you must tell him so that he can be supportive?

Ria:

Yes ... okay, as a person who was stuck without money, I knew he was going to be the one to give me money to go to the clinic and I was hoping that he can support me with everything that I need. At that time, I could see, he got a car, even if he didn't give me the money, he could take me to the clinic with his car. I was hoping that ... (long silence)

Interviewer:

He was going to be supportive?

Ria:

Yes.

Ria

This section demonstrated the women's need for vicarious sources. Moreover, the different functions, support, initiations, guidance, and resources that vicarious sources offer are demonstrated throughout this chapter. This is revealed as reflections are made on how the women act vicariously (vicarious actions) via such sources throughout their pregnancies. It will be demonstrated how such individuals serve a purpose beyond offering support, but greatly influence how the women come to think about and feel and act towards their pregnancies and foetuses. The next section will focus on the complex processes involved in securing vicarious sources.

7.6.2 Vicarious accessing as a process

From the women's stories discussed within this section, it will become evident that vicarious accessing is a process with many influencing factors and outcomes. While the women shared narratives around their need to draw in vicarious sources, a general reluctance to share the news was recounted by the women. This was observed whether it was a N-NP or NP. Their reluctance to share the news and variant outcomes of whether or not the news is eventually shared appears entrenched within the process of accessing. The process is observed where the women interact with their environment, which impacts on whether or not they are able to draw in vicarious sources. Within the exchange, the women's narratives yield a variety of assumptions that may impact on their willingness to share the news. This is explored below, in accordance to the concept assumptions for accessing. Moreover, the process of accessing also depends on variant situational factors that may impact on whether or not the women may

secure vicarious sources or may impact on the direction of accessing. Such scenarios and situations are defined by and discussed below in accordance to the concept situational limits to accessing.

7.6.2.1 Assumptions to accessing

The concept, assumptions for accessing, contains the expectations for interacting and drawing in support within interpersonal relationships. As revealed by the women's narratives below, this category of concepts contains three domains, including: a) Evaluating degree of burdening; b) Fearing judgement and anger; and c) Expectations for communicating; along with the consequent and next concept, d) Strategies in communicating. The assumptions for accessing appears to inform the basis for the women's reluctance to share their pregnancy news.

The first assumption to accessing includes the concept evaluating degree of burdening. The concept is indicated when the women elect to inform people of their pregnancy on the basis of the women's determined degree to which the pregnancy may be a burden upon others. Firstly, Ann was able to freely inform her parents of her second pregnancy, a N-NP, on the basis that she did not deem the pregnancy to be a burden upon them; whether it be financial or otherwise.

Excerpt 7.12

Ann:

At that time, I was living with my mother-in-law and stepfather-in-law, so they knew I was pregnant. So, with my parents I could just tell them. I wasn't living with them, they wasn't supporting me in any way so there wasn't too much worry because they are not seeing to me for anything. If this baby is coming, they are not responsible. They are not doing anything, financially and stuff, you know? It's not their responsibility so they don't mind.

I wasn't living with them at that time.

Interviewer:

Ok, so was it easier for you to let you parents know if they weren't caring financially for the baby?

Ann:

I guess, in a way because now it's like you're pregnant, it's your responsibility, you're living with your in-laws, you are their responsibility.

Interviewer:

Okay, so are you saying it would be more difficult for you to share that you were pregnant if it was going to have an impact on them? Financially?

Ann:

Yeah. And I guess vice versa, like if I was living with my parents (referring to informing her in-laws of the pregnancy).

Ann

Moreover, based on the women's narratives, it would appear that within their NP there may be an evaluation again regarding the degree of burdening. However, within the NP it may be as if a burdening threshold had been reached, as the women would refrain from disclosing their pregnancy on the basis of the current pregnancy being too much of a responsibility on others. Ria indicates how she had refrained from informing her mother of her NP on the basis of such evaluations, along with the fear for the consequence of such burdening.

Excerpt 7.13

Interviewer:

What was the reason for not telling your mom?

Ria:

I didn't tell my mom because I was scared to tell my mom.

Interviewer:

What did you think her reaction would be?

Ria:

Yoh! I thought she was going to be very angry this time. She was going to be very angry. And it was going to be worse this time because my first child and second child it was her responsibility, they were her responsibility, and this now, I'm coming again with another child. I was so scared.

Ria

The construct degree of burdening is, thus, regarded as a dimensional concept as there are certain degrees to which the pregnancy may be deemed acceptable and an extent ('burdening threshold') where it is deemed unacceptable. This appears to depend on the women's assumption or projections of how others may react.

The next assumption for accessing include the concept fearing judgement and anger. The women's stories indicate this concept, as they demonstrated fear of judgement and anger from others for having fallen pregnant. While the women mentioned concerns around judgement and anger within both N-NPs and NPs, it is my observation that the women seemed to emphasise the extent thereof even more so within their NPs. Nevertheless, it is evident that the women may fear judgement for a multitude of reasons, one such reason is having a controversial pregnancy; such as in Tika's third pregnancy, a NP.

Excerpt 7.14.

Interviewer:

What kept you from telling people you were pregnant with this baby?

Tika:

Because like I said, he was a married man (quiet tone of voice). So, it's disgusting. It's a big disgrace to my people. Just my mother was thinking that my first child was also from a married man. She was angry I was with a married man.

Interviewer:

Were you scared of how your mom would react if you had a baby with a married man again?

Tika:

Yes, yes.

Tika

Tika's concerns around judgement in the above excerpt also yield a dimensional component to fearing judgement and anger. She emphasises that her mother had thought her first pregnancy had been with a married man and how her NP had, yet again, been with a married man. The dimensional component also yields a judgement threshold which may be reached and, thus, limit confidence in the sharing of pregnancy news.

Another example of fearing judgement and anger is experiencing the fear of being too young when falling pregnant. This is demonstrated by Sam's first pregnancy, a N-NP.

Excerpt 7.15

I was worried because I was too young and I was doing the Grade 10 and even for my mom, I was too worried to go and say I'm pregnant. So, I was hiding my stomach.

Sam

Expanding on the variant controversial pregnancies that may result in such fear of judgement and anger from others extends beyond the purpose of this theory. It is merely important to note that a variety of culturally defined and moral expectations may deem certain pregnancies controversial. Nevertheless, it is important to observe that the women may experience such feelings towards both their N-NP and NPs, with a seemingly greater emphasis thereof in the latter. This, in itself, does not necessarily account for the women's reluctance to share their pregnancy news in its entirety. Further contributing aspects need to be considered. This includes the women's expectations and subsequent strategies for communicating their pregnancy status.

The next assumptions for accessing concern the women's expectations for communicating pregnancy news or general life problems with significant others as well as the subsequent strategies employed for communicating. Expectations for communicating is indicated as a concept when the women hold certain assumptions regarding how communicating with significant others would be. Moreover, strategies in communicating is revealed as a concept when the women employ unique techniques to communicate their pregnancy or general problems in the face of the aforementioned expectations.

As the first expectation for communicating, the women's stories revealed the experience of lacking closeness with prospective vicarious sources or that such sources would dislike engaging with them in conversation. This indicates and defines the concept unconfiding communicating. As a consequence, the women hold the assumption that they would be unable to confide in such individuals. Sam's narrative concerning her NP reveals this experience.

Excerpt 7.16

... Now, with my mom, I did not have this good relationship. That's why it was not easy to tell her about the pregnancy. She didn't like to talk and I'm not too close with my mom.

Sam

After the offence, Sam went through psychotherapy that facilitated a process to aid her in communicating with her mother, especially regarding the commission of the offence. Upon reflecting on this, Sam further revealed how she had experienced her mother around the time of the offence. This further speaks to how the women may experience significant others as a motivational component of unconfiding communicating.

Excerpt 7.17

... And I try to talk to her even though it was hard because the things (referring to the offence) was new, I was getting the counselling for this thing. I tried to tell her and the way she was crying. She told me that, "why you never told me before?" (referring to the pregnancy) I told her, "you know ma, I'm scared of talking to you." "I'm not too close of you and you are not like the open mother, you are like a closed mother".

Sam

The next expectation for communicating is displayed by the concept powerless communicating. This concept is indicated in the women's stories where they described feeling as if their reaching out to others would not have resulted in the desired input. So, the attempt would prove to be futile and, therefore, not attempted. Ann's experience below concerning her NP reveals this concept.

Excerpt 7.18

... Even though with everything I've been going through, I did have friends at work I could talk to but at that time I didn't feel like it It's like how are they going to help me? They can't help me financially. Even if I tell them my problems they are just going to listen but they are not going to do anything you know?

Interviewer:

So, you thought that talking about it at the time wasn't necessarily going to change anything?

Ann:

I did feel like that.

Ann

In the context of the women's expectations for communicating, as described above, they further demonstrated variant 'strategies in communicating'. The first strategy in communicating concerns the concept communicating through proxy. This concept is defined by instances where the women may have elected to share their pregnancy news with potential vicarious sources via another individual. Such behaviour is mostly described in instances where the women are too afraid to share their pregnancy news. Kim's narrative indicates an example of this within her NP.

Excerpt 7.19

Interviewer:

So, at about six or seven months your granny had called you in for the meeting, and they had confronted you for the first time about being pregnant. What kept you from telling them before that that you were pregnant?

Kim:

No, it's like, I was going to tell my aunt when the time is right. I told myself I am going to tell her, I'm still fresh, six months, it's not too early. Because nine months is a long time to go. I am going to talk to my aunty so that my aunty can tell my uncle and my uncle can tell my grandmother.

Interviewer:

So, you did not want to tell her directly?

Kim:

Yes, because I know my grandmother.

Interviewer:

Okay, and also you were waiting for the right time to tell your aunt, so that your aunt can tell your uncle and your uncle can tell your grandmother. What were you hoping for, or how would you have known it's the right time to tell your aunt?

Kim:

By that time, I wasn't feeling like it, but I told myself at the end of the month, my grandmother will come home, but before I will tell my aunt I have a problem, I'm pregnant, so will you please pass a message for my uncle so my uncle can tell my grandmother, because you know how granny is. I was planning it like that.

Kim

The second strategy in communicating concerns the concept non-verbal communicating. Non-verbal communicating refers to the communication of problems or pregnancy content without using verbal means. Ann's narrative below, concerning her NP, yields that she did not inform her husband directly that she was pregnant, but that he had eventually noticed himself.

Excerpt 7.20

Ann:

Umm, I umm, if I think I remember clearly, I think I did say that I didn't tell him. He knew I was pregnant.

Ann:

How did he know?

Ann:

He just knew, and then after a while we started talking about me being pregnant. But I didn't physically tell him, "I'm pregnant". He could see that I'm pregnant, you know?

Ann

Alternatively, the physical changes to the women's bodies or changes in behaviour, such as having a preference for certain food, may eventually communicate their pregnancies non-verbally. Amy reveals this regarding her second N-NP after a period of about four months of being pregnant.

Excerpt 7.21

Amy:

My grandmother was suspecting I was pregnant but she was not sure.

Interviewer:

Why was she suspecting?

Amy:

Because she could see the changes in my body.

Interviewer:

Like what kind of changes?

Amy:

Like my breasts are getting bigger, I'm getting fat. And now she notices that when I'm eating, I am eating too much. She sees now, I'm choosing the food that I am eating. But she was keeping quiet because she wanted to hear it from my side.

Amy

Moreover, the communication strategy of non-verbal communicating may be motivated by a variety of factors, whether it is fear of anger or not knowing how to communicate the news to relevant others. Ria's account below indicates her behaviour of intentionally waiting for her mother to notice her respective pregnancies in the context of such motivations. Furthermore, it is also noteworthy to observe that the intention is still to communicate the pregnancy (by waiting for the other to notice) but that the women may prefer to do so indirectly, without needing to verbally communicate the fact.

Excerpt 7.22

Ria:

It's like with the first pregnancy, I actually didn't tell her, she saw herself, and the second time she saw herself, and the third time she didn't see.

Interviewer:

Why did you wait for her to see herself that you are pregnant? And not to tell her?

Ria:

Eh, I didn't even know where to start, how to tell her. I didn't even know what's what. But I knew that she would see, because I was doing everything in front of her so I knew that she would see.

Interviewer:

You were waiting for her to see?

Ria:

Yeah I was waiting for her to see.

Interviewer:

Okay, so for you, you didn't tell her because you didn't know how to tell her?

Ria:

I didn't know how to tell her, because I knew that she would be angry ... and then I knew that she will be angry with me as the first and second time when she found out I was pregnant. She was angry. So, I was ashamed, I didn't want to tell her.

Ria

A further motivational aspect for non-verbal communicating concerns a general lack of closeness. Sam's narrative concerning her NP demonstrates this component, along with the expectation for others to be able to respond to non-verbal communications. Below, Sam provides unclear or contradictory information regarding her well-being and reports expectations that others would be able to distinguish her true emotional experiences. Her excerpt further demonstrates that other's ability to respond to non-verbal communications may define the degree of closeness experienced with others for her.

Excerpt 7.23

Interviewer:

So how did you decide to tell the second boyfriend you're pregnant? You decided not to tell your mom?

Sam:

Because you know my boyfriend, he was like my best friend, he knew all my things. My situations, even my background. He was like my best, best friend. It was easy to talk to him. I would tell him I got problems and he would say do this and this and this I think I was, too close with him. He has care and love. If I am not okay, he can see today I am not okay. If I say, "I'm okay", and I'm not okay he can see I'm not okay. He will say, "hey you are not okay". But my mom, she didn't know me totally, if I am okay or not okay she didn't notice. She wasn't too close to me

Interviewer:

It sounds like you say your boyfriend could see something is not right without you telling him.

Sam:

Yes

Interviewer:

Is that how you prefer it, you would prefer to rather have them see something is not right instead of you saying so?

Sam:

The time if he saw me, and even if I'm talking on the phone, he can see I'm not okay. Then he will say, "you're not okay" then I say, "no I'm okay", then he will say, "no I will see you later". Then he will come and say, "hi, in the morning I saw you were not okay, what is happening?" and then I will tell him one, two and three. Then he will tell me how to solve it and to do this, this and this.

Sam

Subsequent to communicating their pregnancies non-verbally or by proxy, the women's narratives yield the third strategy in communicating. This strategy is termed following communications, which concerns the women's expectation that others would initiate and lead

conversations regarding the women's problems or pregnancies. Amy's narrative reveals this as she discusses her second pregnancy, a N-NP.

Excerpt 7.24

Interviewer:

How did you know she was already suspecting that you might be pregnant?

Amy:

She could see the changes in my body.

Interviewer:

You think she saw the changes in your body?

Amy:

Yeah

Interviewer:

And when you told her, did you tell her first or did she ask you? How did that work?

Amy:

Like she called me and she said, "let's sit down and talk about this". And I ask, "with what?" And she said, "you have another boy you are dating". And I told her, "I don't have a boyfriend". And she said, "you are lying, tell me the truth so that we can see what you are doing". And then I started to tell her, "Ish, yes, I have a boyfriend and I did this and this and this". She said, "you know, I'll say something to you, if there is something inside your stomach, just talk to me, we can see what we can do". Then I started to talk to her. I said, "Ish, I'm pregnant". And she asked me "who made you pregnant?" And I told her. And she said "okay".

Amy

It is also observed above that the women may need further encouragement following initial broaching of the topic to reveal the pregnancy news. The reason for this appears to be that the women may still remain reluctant to share such news. Furthermore, within the context of such following communications, the women indicate that they feel unable to discuss their problems or pregnancy without the conversation being initiated by others. This is demonstrated by Sam's narration on her NP.

Excerpt 7.25

Sam:

It's not easy to tell your mom that you are pregnant, even if you are old. I was hoping my mom was going to ask me "are you pregnant again?"

Interviewer:

Because she wasn't asking you, you felt that you couldn't talk about it?

Sam:

Yes.

Sam

While the women's stories up to this point mostly reflected a hope to eventually share the pregnancy news, the women also reported some instances of purposefully needing to withhold information throughout the entire pregnancy. This introduces the fourth and final strategy in communicating, which is termed withholding communications. On the basis of

the women's stories, this is mostly done as an attempt to avoid the expected negative situational consequences to the sharing of pregnancy news. For instance, Amy's narrative indicates her fears around disclosing her pregnancy news in her third pregnancy, a NP.

Excerpt 7.25

Amy:

... I'm wondering, why didn't I just talk about everything that was happening? ... I couldn't tell him (referring to her grandfather) he made me fall pregnant. Because he will start to fight. To do the funny things to me. So, I just kept quiet until I gave birth.

Interviewer:

You decided not to tell him you were pregnant because you were scared?

Amy:

Yes

Interviewer:

What were you expecting him to do if he were to find out you were pregnant?

Amy:

Ish, there were a lot of things. Like even if I was thinking I was pregnant, he will chase us away; me, my brother and my two children. That means I'll never get another place to stay. Even if I can talk with him, maybe if we're sitting with my brother to tell him, I wish we can get someone to help us. Then he will start to fight. He will say if you had a place to get help, then why are you still here? ... Like he was holding my life in his hands. To control it, what I'm supposed to do and what I'm not supposed to do.

Amy

From Amy's account, it would appear that she considered an alternative approach of communicating the pregnancy news, such as communicating through proxy, through her brother. However, ultimately, her decision to withhold the information was made on the basis of an experience of fear for the consequences and a sense of powerlessness.

With respect to the processes involved in accessing vicarious sources, the variant assumptions for accessing have now been indicated. It was shown how this may relate to certain beliefs the women hold regarding the reactions of others to their pregnancy news along with expectations on what consequences their own communications may have. The strategies employed to communicate pregnancy news or decisions to completely withhold disclosure have also been revealed. The next processual component to consider, which may bear consequences to obtaining vicarious sources, is the situational circumstances or behaviours of others to the aforementioned approaches by the women. This concerns the concept situational limits to accessing, as previously defined (see Section 7.4.2).

7.6.2.2 Situational limits to accessing

Different strategies in communicating pregnancy news have been revealed up to this point.

However, the women may be faced with a variety of situations where significant others fail to

respond to the non-verbal communications or communications through proxy. The consequence of this is that the women may fail to secure vicarious resources altogether. Alternatively, the women may intend to withhold communications with the unexpected outcome that family become aware of their pregnancies and then intervene.

One example of such situational limits is demonstrated by Sam's narration regarding her second pregnancy, a NP. It is initially shown that she had hoped that her mother would observe her pregnancy without prompting. Here, non-verbal communicating is revealed. Moreover, she also indicates her wishes to communicate her pregnancy through proxy via her cousin. Unfortunately, her mother had not responded to either manoeuvres, even up until the point of the commission of the offence.

Excerpt 7.26

I was like, with my mom, I was thinking if my mom sees (referring to noticing her pregnancy), she's going to ask me, but she didn't ask me In the first pregnancy, I didn't tell my mom, in the second one, I didn't tell my mom. But I make the plan with my cousin. My mom she wasn't staying with me, she was staying far of me. And if she came back she came back on month end only ... I make the plan with my cousin, I say, "I got problem, your aunty (referring to Sam's mother), she don't know I'm pregnant". She said "serious?", I said "serious". I said, "I want to tell her about the story". She said, "I don't like your story, but let's make the plan". "You know what, if your aunt is here, ask her the question 'did she see I'm pregnant?'". And my cousin she do that. She ask my mom, "did you see your daughter, she's pregnant?" And my mom said "haibo, she's pregnant?" And my cousin said "yes". And she (referring to her mother) didn't pay attention. And she just kept quiet after that. I was so disappointed because I was thinking that my mom, if she's hearing this, that she will come and sit with me and talk with me about the pregnancy. But she didn't do that. And she was going back to work and doing her work up until the crime (referring to the act of neonaticide).

Sam

Different to the other communication strategies, it was also said that some women may have elected to withhold communication concerning their pregnancy status. However, situational limits may again interrupt this process. One instance of this is Ria's first pregnancy, a N-NP, where she had initially attempted to conceal the pregnancy from her mother. However, she indicates that her mother discovered her pregnancy by finding her clinic card. Subsequent to this, Ria was able to engage in following communications with the consequence of securing a vicarious resource. Ultimately, this demonstrates how situational factors may impact on the direction of securing vicarious sources.

Excerpt 7.27

Interviewer:

So how did your family respond to when you were pregnant with that baby?

Ria:

Okay, my mother didn't know ... when I first knew I was pregnant I tried to hide it. I was trying to hide it and then yeah, my mother saw the clinic card She saw it and then asked, "what is this" and then I just told her. Then she just called, she knew who I was dating at the time. She just called him. She phoned him and asked him if he knew I was pregnant. Yeah. After that it was not so bad because she was not putting so much pressure.

Ria

Up to this point, it has been shown that vicarious accessing may be regarded as a process that includes complex interactions between the women and others within their environment. It was demonstrated that there may be assumptions as to whether or not the women may access support. Also, that there may be certain thresholds that would determine the extent to which the women may feel confident enough to share their news. However, whether it be a N-NP or NP, the women mostly shared stories of reluctance of sharing their pregnancy news on the basis of these assumptions, but with the thresholds having been reached more within the NPs. The process of accessing was shown to be further complicated by the women's expectations for communicating outcomes and subsequent norms around communicating problems and their pregnancy. Finally, the process of accessing may be further impacted upon and complicated by the situational factors, which may change the direction of vicarious accessing. While vicarious accessing has now been explained as a process, it is further necessary to consider the variant outcomes of vicarious accessing. This reveals the next category of concepts already briefly introduced in previous sections, namely contexts of security.

7.6.3 Contexts of security as outcomes to vicarious accessing

The gestating event of sharing pregnancy news offers an opportunity to see the variant types of security contexts that may result as a consequence to vicarious accessing. The reader is reminded that such contexts speak to the extent to which the women may obtain access to and be supported by others in relation to pregnancy and mothering content. The different security contexts (type of contexts) may be considered along a continuum ranging from experiencing acceptance and support to the one extent towards unacceptance or lacking support to the other extent. This section will reveal and reinforce the three types of security contexts, namely vicarious security, unconfirmed assumed vicarious security, and vicarious insecurity. A reflection is also provided on the type of security contexts experienced among the N-NPs and NPs.

7.6.3.1 Vicarious security

At the one end of the security contexts continuum lies vicarious security, previously defined as the relational context where the women may receive input, initiation, acceptance, and support from others. The context emerges as a consequence to vicarious sources gaining awareness of the women's pregnancy and, thereafter, showing support and exerting action within the women's lives. Kim's narrative indicates a vicarious secure context based on her mother's reaction and subsequent boyfriend's reaction towards her first pregnancy, a N-NP. The context is revealed by her mother's assurance, support and input for Kim's pregnancy.

Excerpt 7.28

Kim:

When I became pregnant the first time, my mom was so scared, but she taught me how to raise a child.

Interviewer:

Your mom was scared?

Kim:

Yeah, like with everything that was happening, but everything was fine when she was there ... my mother was the one to care for me, my shoulder to cry on

Interviewer:

Tell me more about finding out that you were pregnant with that baby?

Kim:

Sometimes, when I ate food I was starting to vomit and I stopped my menstruation.

Then I was already two months pregnant. I asked my mom, "What's happening? What's happening?". My mom said, "Owa! You must go to the clinic". I say, "I'm scared to go to the clinic". My mom say, "No problem, I take you to the clinic". When we go to the doctor, we found out that I'm pregnant. So, my mom knew and she told my boyfriend. They were having no problem with it. And my boyfriend came and paid 'damages' for the baby He (referring to her boyfriend) said, "I don't have a problem; I know that girl". So, my boyfriend paid that and engaged me My mom said, it's fine, this baby is going to grow up no matter what . she said, "don't worry, this baby is going to be fine". When my mom said that, I had this power, like 'yoh!' my mom is here to help me with the children, I don't have a problem.

Kim

Within Kim's narrative above, is it apparent that she experienced feelings of competence regarding her pregnancy on the basis of her mother and boyfriend's accepting reaction and input into her pregnancy. It is also observed that her boyfriend's conformity to cultural expectations (paying damages) following a pregnancy out of wedlock communicated a vicarious secure context to her. This, as revealed as his response to the pregnancy, appeared as if he had not regarded it as problematic.

7.6.3.2 Unconfirmed assumed vicarious security

The security context of unconfirmed assumed vicarious security lies within the security context continuum between vicarious security and vicarious insecurity. The concept in place here, as her experience, is not one of confident confirmed security, however, it is also not one defined by expected rejection, abandonment, and lack of support; as within vicarious insecurity. The concept of unconfirmed assumed vicarious security is defined by an experience, where the women hold assumptions about vicarious sources likely being available for security reasons but where this is unconfirmed and is also doubted at times. While Ria tells a story of her NP where her boyfriend had rejected and abandoned her only shortly before the time of the baby's birth, she reflects on initially having assumed that her boyfriend would be supportive of her.

Excerpt 7.29

Interviewer:

What else was going through your mind when you realised you were pregnant?

Ria:

The next thing that came through my mind when I realised I was pregnant, was ... okay because I'm in this together with the father of the baby, I thought that everything will be alright. At the time. And everything was alright. It didn't seem like at the end it would be a problem.

Interviewer:

Okay so you were hoping that things were going to be okay? And that this pregnancy won't be a problem?

Ria:

Yes.

Ria

From Ria's overall account, I had wondered whether she had experienced confusion during her pregnancy regarding her boyfriend's concern for the baby and her. More supportive content regarding this is provided in Section 7.5.1.2 below. Although Ria initially described that she had thought he would be supportive, it appeared to me that she experienced his behaviour during the pregnancy in contradiction to this or at least with some uncertainty regarding this. I decided to question Ria directly on such ambiguity; to which she responded that she had only realised at birth that he had not been caring for her pregnancy while she had been pregnant. More important, however, is that her response demonstrates the concept of an unconfirmed, assumed vicarious security as her boyfriend's care for the baby is never outright confirmed verbally or behaviourally to Ria.

Excerpt 7.30

Interviewer:

Did you ever ask him? Do you care about me or if he wants the baby?

Ria:

Actually, I didn't. because that time I wasn't really noticing what was happening. I noticed after the baby came, after I delivered the baby I noticed but before the time I didn't notice. I was just fine with everything

Ria

The above context was constructed on the basis of one case that did not neatly fit into a context of vicarious security or vicarious insecurity. The case was included as it adds and reveals more dimension to the concept of security contexts.

7.6.3.3 Vicarious insecurity

The next security context of relevance is that of vicarious insecurity. This falls at the opposite side of the spectrum to vicarious security. The reader is reminded that this concept speaks to a relational context where the women report feeling unsupported and unloved by significant others as well as feeling as if others are disengaged from pregnancy-related matters. This context may ensue as a consequence to a number of interactions. Firstly, as yielded in Excerpt 7.25, the women may withhold conversations regarding their pregnancy status and, thereby, fail to draw in support for themselves. Subsequently, the woman's context remains one of vicarious insecurity.

The second situation that may result in a vicarious insecure context is when the family express disapproval for the pregnancy once gaining awareness thereof. This is demonstrated within Ann's fourth pregnancy, a NP. It is also important to observe the women's expressed feelings of being alone, abandonment, and lack of support within such vicarious insecure contexts.

Excerpt 7.31

At that time, with the last baby especially, when I was feeling alone, it was like my parents, they abandoned me. It's like they don't want me, they don't want to help me, or support me. Although I'm pregnant again and it's wrong of me because now I'm battling financially but I still got pregnant again. So, it was really hard on me, I was always suicidal. I felt like they didn't care, he (referring to her husband) didn't care even my siblings too they was really hard on me. I felt alone, I felt I couldn't talk to anyone I guess when I had all these problems I wanted my husband, okay just to help me. I wanted some help, from my parents, from my in-laws. I couldn't ask for help because I wasn't living with them. I couldn't really expect much from my parents because I'm living under their roof. They are paying the lights, the water, everything So, all I wanted was to get help from him. So, if I had problems I tried talking to him but he didn't understand and he never wanted to listen...

Ann

A vicarious insecure context may also ensue as the women's families fail to respond to their communication manoeuvres to share pregnancy news. Within the excerpt that follows, it is revealed how such a vicarious insecure context may be defined by feeling abandoned, unattended to, and unloved as a result of their families failing to respond to their pregnancy. The reader is reminded that Sam had attempted to communicate her second pregnancy, the NP, by proxy, but that her mother had failed to respond. Below, Sam demonstrates the experience of vicarious insecurity and the expectations she had had that had been unmet within this vicarious insecure context.

Excerpt 7.32

My cousin told my mom, "Aunty, did you see your daughter is pregnant"? My mom said, "She's pregnant?" She said, "You lying", and taking it like a joke ... she didn't pay attention. She didn't see if anything is wrong. She didn't show the love ... she's not giving love and care, and she didn't pay attention of me. And she hurt me again, why my mom she's not paying attention of this?

Sam

Finally, it is important to mention the women's apparent emphasis on feelings of rejection and being unattended to within the context of vicarious insecurity. This is demonstrated as Tika describes her third pregnancy, a NP, where she had hoped for her mother's attention.

Excerpt 7.33

My brother worked by my mother, and I just felt, he is getting more attention than me ... I was then having the third (referring to her third pregnancy). But I just felt, no man, my mother, she is pushing me away man. In a way, I wanted her attention but she's not giving it to me

Tika

Up to this point, it has been demonstrated via the concepts constructed within this theory that while there may be a need for the women to secure vicarious resources, there is a general reluctance within both their N-NPs and NPs to share the pregnancy news. However, on the basis of the women's interaction with their environment, there may be different outcomes as to whether or not significant others may gain awareness of their pregnancy. It was also revealed that the family's awareness of and/or reaction to the news creates a context of security and support for the women. With the establishment of different type of contexts, it is also important to consider how the women experienced their security contexts, specifically related to their N-NPs and NPs.

7.6.3.4 Contexts of security among N-NP and NP

In comparing the women's stories around their N-NP and NPs, a noteworthy difference was observed with respect to the context of security that had been experienced between the

pregnancies. With respect to the N-NPs the women told stories about experiencing vicarious security with its associated support towards the pregnancy news and acceptance thereof. Whereas, within the NPs, the women mostly told stories about vicarious insecurity, where they did not perceive support or assistance for the pregnancy. This section demonstrates the women's comparison of their pregnancies as reflecting this point.

Ann's comparison reveals a context of acceptance, thus, vicarious security for her N-NPs, and discusses her fourth pregnancy, a NP, as different; one identified as being vicariously insecure. It is also interesting to observe the decreasing acceptance across the pregnancies from significant others.

Excerpt 7.34

I guess in a way, like with my first pregnancy, I told you I was scared to tell them. And so, when like, I was really scared, but when my mom told me she's okay, were talking about baby names now, then I got excited myself. Okay mom is happy, dad is happy, I'm okay. So, that's how, it's like with my other pregnancies, its followed the trend. That's how I wanted it to be. Okay my second pregnancy they were okay still. My third pregnancy, not so much but they accepted it. The fourth one came now, it wasn't. It wasn't how it was with the others ... the fourth time everyone was really mad now Nobody was talking to me. The whole family wasn't talking to me. So, I felt alone. Or abandoned and now he (referring to her husband) wasn't there. He didn't even want to be at home. Sometimes I'm thinking now because I'm pregnant he doesn't want to be at home. Because just before I gave birth he left and went to live at his mom's house.

Ann

Up to this point, the women's need for vicarious security, the process of vicarious accessing and the subsequent security contexts that arise, have been revealed. Next, it should be considered how the mother plays the role of vicarious mother as well as her approach towards pregnancy in the gestating phase of sharing news.

7.6.4 Playing the role of vicarious mother in the sharing news phase

The gestating phase of sharing news allows for another opportunity to see the women play the role of vicarious mother. Excerpts 7.10 and 7.11 reveal the women's need for vicarious security. The emphasised need for others to initiate, guide, and provide practical support reveals who the women are as mother. The women require others to act by proxy, make meaning by proxy, decide by proxy, and feel by proxy. While these concepts are elaborated on and reinforced within the following sections, it is emphasised here that the women's needs for others in the mothering space reflect who they are, namely, the vicarious mother. The vicarious mother relies on others to navigate the pregnancy and mothering world.

7.6.5 Docile gestating in the sharing news phase

The sharing news phase also allows an opportunity for reflection on the nature in which the women approach pregnancy-related content. The approach is again seen to be underpinned by docility since the women's actions within this gestating phase reveals an expectation and intention to relinquish control. The intention of relinquishing control is revealed, as the women are seen to hope others would recognise their pregnancy without significant initiation on their own behalf and that such individuals would subsequently exert action within their lives. The intention and concept of relinquishing control via vicarious enacting is, thus, again revealed.

7.6.6 Summation of the underlying processes towards N-NP and NP in vicarious accessing

The gestating phase of sharing news demonstrate the women's need for and intention to have others guide and initiate action towards their pregnancies. In this sense, their intended docile approach towards the pregnancy news is revealed via the relinquishing of control over the situation. The apparent intention of relinquishing control via vicarious enacting inherently reveals the women's 'being' as vicarious mother. Again, it is shown how the vicarious mother intends to act, decide, think, and feel towards her pregnancy via reliance on another.

Despite the women's intention to engage vicariously with pregnancy-related content, the sharing news phase reveals the complexities that have a bearing on whether vicarious sources may be secured. This process of vicarious accessing constitutes the assumptions for accessing that appears to have a bearing upon the women's reluctance to share their pregnancy news in both their N-NPs and NPs. Further complicating factors include the women's expectations for communicating with others as well as specific communication techniques that may employed. These expectations and techniques have further consequences as to whether the pregnancy news is shared and whether or not vicarious sources are secured. Finally, certain limits to accessing may further impact on whether such sources are secured. Within the sharing news phase, it was further demonstrated that various contexts of security may be established as a result of the intricate processes involved in vicarious accessing. The context is defined by the extent to which vicarious security is secured. The contexts include a vicarious secure context, defined by the establishment of vicarious security, as well as a context of unconfirmed assumed vicarious security, where the women may think there is vicarious security but where this may be doubted, and finally, a vicarious insecure context where the women do not experience support for their pregnancies. It is notable to observe during the sharing news

phase that the women described their N-NPs as occurring within a vicarious secure context and mostly describe their NPs as occurring within a context of vicarious insecurity.

In sum, this section revealed the need for vicarious security as well as the processes involved in establishing such security and the resultant security contexts. The next section will focus on how the established contexts serve as a platform from which the women may begin to engage with their pregnancies, or not.

7.7 Physical Pregnancy

In discussing their pregnancy experiences, the women narrated stories about certain activities or tasks to be engaged in while being pregnant. The possible tasks are, thus, organised within the gestating phase of physical pregnancy. The tasks include: a) Considering the foetus; b) Accepting the pregnancy; c) Connecting with the foetus; d) Anticipating and planning a future for the baby; e) Prenatal baby and self-care; f) Preparing practically for the baby and self; g) Identifying the baby; and finally, h) Preparing for birth.

As a gestating event, the physical pregnancy allows an opportunity to see how the variant security contexts discussed above may become a platform from which to engage in pregnancy-related content and tasks. Each context allows for a different degree of engaging and subsequent expression, type, or nature of engagement with respect to the pregnancy. This section will, thus, reveal the concept degree of engaging. The different types of engagement along the continuum will be shown to be situated within specific security contexts. Inherently, it is through such types of engagement that the underpinning pathways towards a N-NP and NP are more clearly revealed.

7.7.1 Degree of pregnancy engaging

This section reveals the concept degree of pregnancy engaging in greater detail. Within this phase of gestating, the construct is shown throughout on the basis of the extent to which the women engage with pregnancy-related tasks.

The concept, degree of pregnancy engaging, is regarded as a dimensional construct since the women may engage with pregnancy-related content at the one end of the spectrum and disengage at the other end of the continuum. On the basis of how the women tell their stories at each end of the spectrum, I present an argument on my observations where the women are seen to ‘bring the baby into being’ at one end of the spectrum, towards ‘not bringing the baby

into being' at the other end of the spectrum. The concept, bringing into being is, thus, regarded as a consequential concept to types of engaging, meaning, it's regarded an outcome to the type of engaging. Note, the bringing into being aspect may refer to the baby coming into existence within the women's mind as they narrates their story. Within the former (bringing into being), content related to the baby is considered and features within the women's experience, where it is avoided within the latter (not bringing into being). Towards the middle, I argue that the women may superficially appear to 'bring the baby into being', however, their focus is distorted. In this manner, they focus on other aspects and benefits related to the pregnancy and not necessarily the baby itself. Again, they are seen to not necessarily 'bring the baby into being'.

Along the continuum of pregnancy engagement are three types or styles of engagement, namely, vicarious engaging, distorted engaging, and phantomised disengaging. The concepts were briefly introduced within former sections as yielding the finer nuances thereof within the earlier pregnancy experience. Nevertheless, this section will further bolster these concepts, along with the associated attaining and maintaining forces (actions) thereof. Each style of engaging is discussed as it is situated within a specific security context. As each style of engaging is examined, commentary is also delivered on the manner in which the women play the role of vicarious mother and the nature of their gestating as being underpinned by docility.

7.7.1.1 Vicarious security, vicarious actions and vicarious engaging during the physical pregnancy

This section reveals the stories of the women's N-NPs. The stories reveal the different physical pregnancy-related tasks and how the vicarious secure context creates a platform from which the women may engage in their pregnancies vicariously. It is on the basis of the variant vicarious actions that the women are shown to engage vicariously with their pregnancies. Following an exposition of the aforementioned, it is explained how the mother is playing the role of vicarious mother via 'being' through proxy. Their docile manner of gestating is also revealed, as they relinquishes control via vicarious enacting.

One of the physical pregnancy-related activities that the women narrated was coming to accept the pregnancy. The women told stories about coming to accept their pregnancies on the basis of their family's reaction and acceptance of their pregnancies. This is seen to occur within a vicarious secure context, as the women narrate feeling supported and accepted by significant others. The following narrative demonstrates the concept accepting by proxy.

Accepting by proxy is deemed a vicarious action as the women come to experience positive and accepting feelings towards their pregnancy and baby on the basis of how others react towards their pregnancy. The excerpt indicates that after her mother had become aware of her first pregnancy, a N-NP, and demonstrated interest in her having a baby, Ann was able to become excited and experience positive feelings towards the pregnancy as well.

Excerpt 7.35

... and then she (referring to her mother) says to me, “Your sister got a boy, now you must have a girl”, and then they (referring to her family) were talking about baby names. And she said, “Oh there’s lovely clothes for girls if you have a girl”. Then I was relieved, huge, I was excited now Only after they knew about it, that’s when I started being happy about it. Because I’m pregnant now, because they are happy. You see, just to make them happy ... first I was really scared, but when my mom told me she’s okay, we’re talking about baby names, then I got excited myself. Okay mom is happy, dad is happy, I’m okay.

Ann

The importance and role of vicarious security and input in coming to accept their pregnancies are emphasised as the women narrated that they may have considered having an abortion in the context of rejection from their families. This is reflected in Amy’s statements below.

Excerpt 7.36

Interviewer:

If your mom wasn’t so happy about the baby, how do you think you would have felt about the baby?

Amy:

Maybe I would have done the abortion.

Interviewer:

So, it was very important for mom to be okay with this baby?

Amy:

Yes.

Amy

The above statement also demonstrates how the women’s feelings, whether it be acceptance or rejection towards their pregnancies, are influenced by that of vicarious sources.

A variation to accepting the pregnancy on the basis of vicarious sources’ reactions to the pregnancy and baby is the notion of allocating purpose to the pregnancy. This is also a vicarious action as the women are seen to allocate accepting meanings for the baby on the basis of others’ acceptance and endearing reactions. Again, this is seen to occur within a vicarious secure context of assurance and emphasis on raising a child with the support of others. The next quotation demonstrates the extent of Amy’s acceptance of her N-NP vicariously as she begins to name the baby “princess”. She is seen to do this in responding to

her mother's perception of the baby as such. She also expresses finding meaning for the baby on the basis of her mother's history of having lost children herself.

Excerpt 7.37

Interviewer:

When you were pregnant, how did you feel towards this baby? Or what did you think of the baby?

Amy:

(Giggling) It was like my princess inside of my stomach. Everything was good for me. I was feeling comfortable. When I'm thinking, my mother said this and this and this I was comforted My mother, she told me she lost a lot of children in her life. So, she was not having hope that she would have a child or getting a grandchild. So, to her (referring to her mother) she (referring to the baby Amy was carrying) was a princess. She told me, if you can just handle this thing nicely, your pregnancy nicely, at least I know it's not only your child, it is like my child. That means we can keep this child together and handle this child together.

Amy

A further pregnancy-related activity during the physical pregnancy phase appears to be anticipating what the future may hold for the baby or planning how to raise the child in the future. Within the vicarious secure contexts, offering encouragement and guidance, the women told stories that indicate the concept anticipating futures by proxy. This concept is deemed a vicarious action as the women begin to enter a reflective space on what the future would be like, what the future may hold or planning for the future via close reliance and initiation from others. This concept is indicated in the above narrative (see Excerpt 7.35) as Ann's family were beginning to respond to the pregnancy news by discussing future possibilities for the baby, such as the gender of the baby and clothes that may be suited to this gender. As a variation of the concept, the next narrative indicates the concept as Amy's mother initiates and aids in the planning for the future management of her first child, a N-NP.

Excerpt 7.38

Ish, like I was shocked. But on the other side my mother was just telling me, "you are fine" ... "you can handle these things". Then everything was good and I was accepting it ... my mother when she told me, "When the baby is maybe two or three months, you can take her to the crèche, and go back to school, then you continue with your education" ... I was thinking, my mother loves me, she guides me with a lot of things. I though my mother can help me to raise this child.

Amy

The next variation of anticipating futures by proxy concern the women's vicarious reflection and forward-thinking in terms of what to expect regarding the pregnancy process and impending labour. Kim's excerpt below, concerning her N-NP, indicates her mother's

initiation and involvement in this regard. Again, this is seen to occur within a vicarious secure context as her mother is facilitating the process by offering guidance and support.

Excerpt 7.39

Even when I can't sleep at night, she's (referring to her mother) coming to stay with me and read me some book and talking about the past and the future, what she wants me to be like when the future comes Teaching me things that I don't know. Telling me in life you have to face challenges, whether it's bad or not, you have to face the challenges She was also helping me to prepare, like how things are going to be when the time is coming.

Interviewer:

Do you have an example? Like what was she doing or telling you?

Kim:

Like for example, she said, when the time is going to come, at nine months, you are going to have the pain on your stomach, or at seven months' time the baby is going to move around, or when the water breaks you have to go to the clinic. She said if you see changes in your body you have to go to the clinic and talk to them about the changes.

Kim

A further variation of 'anticipating futures by proxy' concerns the impartation of a variety of skills in caring for the baby in the near future. Within the next excerpt, Amy discusses her first pregnancy again. It is evident that the impartation of skills occurs within a vicarious secure context as her grandmother offers significant guidance and support. She reveals the role her grandmother had played in initiating and instilling thoughts in anticipating the future with the baby and imparting skills for Amy to employ in the nearing future.

Excerpt 7.40

Then she (referring to her grandmother) taught me, she would bring the dolly to me and show me how you are supposed to handle the baby. Teaching me things like that.

Interviewer:

Okay, so she was teaching you how to hold the baby? Tell me more about that day, of her teaching you how to hold the baby.

Amy:

Like when the small child when you start to bond, how you're supposed to hold the baby so that it's not getting an injury. Also, how to change the nappies, how to bathe her. And breastfeeding.

Interviewer:

Oh, and she showed you all of this with a doll?

Amy:

Yes

Interviewer:

How far were you into the pregnancy when she was showing you how to do these things?

Amy:

Sometimes when I'm sitting alone under the trees, maybe she was thinking that I am thinking too much, maybe I can do the bad things. Then she would call me and teach me what I am supposed to do. And then we would play with the dolly.

Amy

A further pregnancy-related task concerns the preparation of practical needs for the baby as well as the women's own practical needs during their respective pregnancies. This is seen to occur within a vicarious secure context as the women discuss the attainment of such needs via the initiation and support of others. This vicarious action is defined as preparing practically by proxy. In discussing one of her N-NPs, Tika reveals this concept as she acquires objects needed for the care of her baby via the aid of others.

Excerpt 7.41

They (referring to her family) got me a stand for the bath, the bottles ... this expensive milk, you know? ... They got me the ABC stuff you put on the walls, and Barney things ... toys and stuff like that. My room was looking good and stuff, it was like a fairy tale man.

Tika

Similarly, Ann reflects on the abundance of items received from her friends, family and husband's colleagues for her first N-NP.

Excerpt 7.42

... I had my daughter's baby shower at a camping trip that they took me to and I had my baby shower there and she was a lucky baby I had so much gifts for her. So much clothes and whatever I needed I had it. They bought a camp cot, bought a pram, bought a walking ring, a car seat. She was so lucky she had everything. While I was pregnant, my husband was working for some people ... and they bought a whole lot of stuff. They bought baby milk and diapers and everything. I was like stocked up for some time.

Ann

Although one might expect anyone's family to purchase items for them in helping one prepare for the birth of one's child, it would appear that the women emphasised the initiation and input of others in this regard, while minimising their own input in respect thereof. This is reflected in Kim's narrative as her mother had expected Kim to purchase items; as *she* had in fact been the one who had been pregnant with her first child.

Excerpt 7.43

Kim:

She (referring to her mother) was already preparing for the baby.

Interviewer:

Yeah? How was she doing that?

Kim:

Even my sister-in-law, she was already buying things. Me, I didn't buy anything ... I thought maybe if I am at hospital, I will give my mom money to buy things. But on that day (referring to being at the hospital for the labour), I asked my mom ... She said, "But, it is *you* (emphasis) who is expecting a baby, not me, you see me now on your last day and ask me to buy things, why did you not prepare yourself?" ... But my sister-in-law was already buying and my mom was already buying. On the last day in hospital ... my sister-in-law came with a bag and my mother came with a bag. So, I don't know which one to choose The clothes it's not the same, my mom packed clothes for a girl ... the other one was clothes for a boy, both colours.

Kim

Furthermore, it is interesting to observe that the women in the study, coming from diverse cultural backgrounds, also revealed that preparing practically for the baby may be influenced by cultural norms. Nevertheless, what appears important, is that the expression and adherence to such culturally informed approaches to preparing for the baby, again happens within a context where vicarious security and vicarious action are emphasised. Below, Alex's statement introduces the idea that within some cultures, specifically her own, there is limited practical preparations for a baby.

Excerpt 7.44

In our culture, you are not allowed to prepare if the baby is not here.

Alex

Ria echoes this and her statement is used here to create understanding around the approaches towards preparing for a baby in accordance to her cultural norms.

Excerpt 7.45

The elders say that we are not supposed to get or buy for a child that has not been born yet. It's bad luck. So, when you're going to give birth, they buy only one robe. Because they say if you buy clothes it is bad luck You can buy maybe nappies, like one box, so when the baby is born, then maybe you can dress the baby. But then after that you can go and buy the things You buy a blanket, and clothes but not many, only one, so that after the baby is born you can dress the baby and cover the baby. But only one. You are not supposed to buy the many things during the pregnancy ... when you see the things in the shops, you wish that you can maybe have it when he or she is born.

Ria

It is observed that the concept of preparing practically by proxy is also shown to relate to the women's preparation for their own physical pregnancy via the support of others. In the statement below, Kim's mother offers vicarious support by taking the initiative to purchase Kim maternity clothes during her first pregnancy, a N-NP. Moreover, the statement demonstrates that the vicarious actions of others may have a bearing on the women's

emotional experience of her pregnancy. Kim narrates how she was beginning to enjoy her pregnancy subsequent to her mother's actions and conversation with her. This demonstrates how the vicarious actions may relate with one another and specifically demonstrates how preparing by proxy may have an impact on accepting by proxy.

Excerpt 7.46

Interviewer:

You said she (referring to her mother) bought you maternity clothes and came to talk to you, what did it mean for you when she was doing that?

Kim:

I thought my mom wanted me to be open to her, don't be scared anymore, talk to her, how I'm coping ... I have to be open with her.

Interviewer:

She wanted you to be open and tell the truth?

Kim:

Yes.

Interviewer:

What was it like for you when she did that?

Kim:

It was nice for me because I could see my mom was not angry at me anymore, she's forgiven me. Although I made a mistake, she forgiven me. It's not the end of the world, we can fix it

Interviewer:

How did you come to believe it's not the end of the world?

Kim:

Because she told me it's not the end of the world. It's not the end. She knew why God gave me this baby at this time After my mom spoke to me ... I was much better and I started enjoying my pregnancy. It was so nice.

Kim

The next pregnancy-related activity may concern the prenatal care of the self and baby during the physical pregnancy experience. Within vicarious secure contexts, the women narrated stories around taking care of themselves and the foetus during their pregnancies as a result of the initiation and close involvement of supporting others. This denotes the construct prenatal baby and self-care by proxy. Amy reveals this with respect to her grandmother seeing to her dietary needs during her first pregnancy, a N-NP.

Excerpt 7.47

Even my grandmother, she was supportive towards me. Like, she was giving me the kind of food when you're pregnant that you're supposed to eat. Like spinach, veggies.

Amy

The concept of prenatal baby and self-care by proxy may also concern mothers being taken care of by significant others in facing pregnancy-related illnesses and complaints. In this

regard, Kim reflects on the importance of her mother in playing a role with respect to her first, N-NP.

Excerpt 7.48

When I was six months I was so sick with the heartburn, so I stay close to three weeks without eating ... when I eat I would vomit. My mom took me to the clinic. My mom, she was like a doctor ... so my pregnancy was not so bad, it was not so bad since we solved these problems with my mom When I was having some pain, or can't sleep or eat, my mom gave me that support. She would say, don't stay without eating, you have to eat so that your baby will be fine. You have to drink your tablets (referring to medication) so that the baby can grow well. She gave me that support and that love.

Kim

A further pregnancy-related activity narrated by the women concern the action of identifying the baby. This refers to giving him or her a name and considering the baby with regard to the given name. With respect to their N-NPs, the women told stories about the involvement of others in naming their babies. This indicates the concept of identifying the baby by proxy. In this vicarious action, the baby is vicariously being brought into the mother's mind as she contemplates his or her name and identifies him or her according to this name. The vicarious action is demonstrated by Ann.

Excerpt 7.49

Ann:

Their names were already planned by my mother-in-law. They planned the names. I didn't name any of my children. It was her and my husband who kept the names.

Interviewer:

Would you ask before birth what the names were?

Ann:

No, they would just say they want those names, and then I will go with it. Whatever makes them happy.

Interviewer:

Is this a cultural way of doing it, or is it?

Ann:

(Interrupts) No. I could choose the names but they wanted to. My mom-in-law said no she wants this name for the girl. They didn't check if it's okay with me, I just said okay. Then my son came along and my mother-in-law named him. She asked me, my mom had a name and my mother-in-law had a name so the first name is from my mom-in-law then the second name is the one from my mommy. And umm, so I didn't have a say as well there. Then the third one came. My mother-in-law named him as well. So, I said okay if you are happy with it.

Ann

Relevant to identifying the baby is the cultural practices which may also be initiated and planned by vicarious sources. The idea here, is to name and introduce the baby to relevant individuals from the past and present. The women told stories about their families planning culturally relevant activities to introduce the baby to be born to their ancestors.

Excerpt 7.50

Amy:

... They (referring to her family) said when the baby is born, we must have a small ceremony, maybe they go to the ancestors and tell the ancestors about the baby... at the ceremony we just do it as a family. We stay in the house and we go with the baby and put the things from the home birth down in the ground and we call the ancestors and tell them we have a baby, it's from [participant name deleted]; it's (referring to the baby) our grandchild, look after her.

Interviewer:

So, does the family talk beforehand that this ceremony will happen?

Amy:

Yes, they talk about it. They also said if it's a boy, they give a name and if it's a girl they gave this name.

Amy

Up to this point it has been demonstrated how the women had engaged with the physical pregnancy-related tasks during their N-NPs. It was shown how the variant activities of accepting the pregnancy, anticipating and planning for a future with the baby, preparing practically for the baby, participating in prenatal baby and self-care as well as identifying the baby were all engaged in within vicarious secure contexts. Within such contexts, offering the support, input, initiation, acceptance, and guidance, the women could engage in their pregnancies vicariously. The concept of vicarious engagement is, thus, shown. Here, the women are seen to engage in the relevant physical pregnancy tasks by *participating* in them; and the required initiation and input from others account for the vicarious component of the construct.

The vicarious component of the construct, vicarious engaging, requires further clarification. Critically, I considered that all women may require a certain degree of input, support and guidance from significant others during their pregnancies. However, the vicarious component of the construct is emphasised among the study population in the face of their significant emphasis of the role others played within their N-NPs. Excerpt 7.33 revealed the extent to which the women emphasise the input of others and the minimisation of their own initiation in engaging with pregnancy-related content. Moreover, the extent of vicarious initiation, involvement and support is emphasised by the women and described in such a manner, that it may, at times, be experienced by the women as if the significant other was, in fact, the individual who was pregnant. This is indicated within the excerpt below, as Amy discusses her first pregnancy.

Excerpt 7.51

Amy:

It was kicking, and I was going to the sonar to look at the baby inside my stomach, its healthy.

Interviewer:

How did you decide to go have the sonar done?

Amy:

It's my mother, everything my mother was preparing for me ... she (referring to her mother) was so happy when she saw the sonar Like she was happy. Happy, happy, happy ... my mother, she was happy like she was carrying the baby, but I am the person carrying the baby. So, I was doing it for myself and my mother's sake

Interviewer:

Tell me more about that, you said it was almost like your mom was carrying the baby?

Why was your experience like that?

Amy:

Because she was supporting me through a lot of things. Especially when I am supposed to go to the doctors. Telling me what food I am supposed to eat ... she was so supportive of me.

Interviewer:

So, your experience was like your mom was so happy and supportive about the baby, she was so involved, it was like she was carrying the baby. Is that what you are saying?

Amy:

Yes.

Amy

The above excerpt highlights the nature of the vicarious component of pregnancy engaging. This denotes that the pregnancy is experienced and engaged in *through* and *via* another individual, mostly on the basis of the intricately close reliance on another. Therefore, the term vicarious engagement appears most suited to the N-NP experience.

Vicarious engaging and the consequence of bringing the baby into 'being'

Upon reflecting on the women's N-NP narratives above, I observed that it is through their vicarious engagement that the pregnancy and baby is considered in their minds and engaged in behaviourally. As such, the consequence of vicarious engagement is deemed to be that of bringing the baby into being. Meaning, the baby is brought into existence as a reality via close reliance on another. Here, the reality of the baby is lived, as the mother practically considers the baby and behaves towards it. This consequential concept will be further clarified and reinforced as it is compared to the women's thoughts and behaviours during their NPs.

Vicarious engaging and playing the role of vicarious mother

The vicariously engaged style of engaging with their N-NPs also speaks to how the women enact the role of vicarious mother during the physical pregnancy. It is within this vicarious

secure context, with the aid of vicarious sources, that the women are able to engage in vicarious actions. The women's vicarious actions, as revealed in the preceding paragraphs, can be linked with the variant ways of 'being' through proxy. As a reminder, the latter concept refers to how the women's 'being', namely, their feelings, decisions and actions, are arrived at and are determined by others. In this regard, the women were seen to 'be' through proxy by feeling by proxy, decisioning by proxy, and acting by proxy during the physical pregnancy. This will be clarified next.

Firstly, the concept feeling by proxy must be introduced. This construct speaks to the women experiencing emotions that are largely based on how others feel. In this sense, other people's feelings are adopted as their own. The above concept and vicarious action of accepting by proxy is an example. Here, the women are feeling by proxy, as they adopt the accepting and positive feelings of others towards the baby and pregnancy as their own. Secondly, the women are seen to engage in decisioning by proxy, as previously defined (see Section 7.2.1.3). They are seen to do this via the vicarious actions of anticipating futures by proxy and identifying the baby by proxy. In this respect, they are observed to make decisions regarding the baby, whether it be forward-thinking for caring for the baby or naming the baby via close reliance on others. Thirdly, the women are also seen to be acting by proxy, also previously defined (see Section 7.3.2.2), via the vicarious actions of preparing practically by proxy as well as prenatal baby and self-care by proxy. Thus, the women are acting towards the pregnancy by preparing for the baby and caring for themselves and the baby via reliance on others.

The aforementioned behaviours of feeling by proxy, decisioning by proxy, and acting by proxy speaks to how the women are 'being' through proxy. The women's behaviour during their N-NPs occur through and via others. Accordingly, the women are seen to play the role of vicarious mother by 'being' through proxy.

Vicarious engaging and the docile nature of gestating

Finally, commentary is necessary on the women's docile gestating during their N-NPs. In the preceding paragraphs, the nature of the women's approach towards pregnancy and mothering-related content is revealed. Again, they are seen to relinquish control via vicarious enacting as they surrender to others regarding how to feel about the baby, how to make decisions regarding the future of the baby, and what to name the baby or how to introduce the baby. They also relinquish control by having others dictate how they should prepare practically for

the baby and how and when they must engage in prenatal baby and self-care activities. As this is observed to relinquish control in this regard, it is argued that the nature of their gestating is one underpinned by docility.

This section revealed how a vicarious secure context may serve as a platform from which the women may begin to engage with their respective N-NPs. The vicarious engagement was shown to be attained via the variant ‘vicarious actions’ the women took as they confronted the different physical pregnancy tasks. The next two sections reveal the women’s type of physical pregnancy engagement along the rest of the vicarious security spectrum. The unconfirmed assumed vicarious secure context will first be considered, followed by the vicarious insecure context. The latter two security contexts are shown as a platform for different types of pregnancy engagements, ultimately underpinning a NP.

7.7.1.2 Unconfirmed assumed vicarious security, misrepresenting actions and distorted engaging during physical pregnancy

This section reveals one unique NP narrative told by one of the participants, namely Ria. Her account can still be understood under the frame of concepts constructed and offers an opportunity to see the dimensional component of concepts constructed. Her narrative yielded the context of unconfirmed assumed vicarious security, as demonstrated in Excerpt 7.29 above. Within this section, her experience of unmet needs and expectations during her physical pregnancy are revealed as occurring within the unconfirmed assumed vicarious security context. Her context is then shown to serve as a platform from which she begins to manoeuvre around physical pregnancy-related tasks. While Ria may, at face value, appear to participate in pregnancy-related activities and content, a deeper look reveals that her engagement is superficial. This section will, thus, introduce the concept of distorted engaging with its associated misrepresenting actions. The revelation of the distorted engaging construct will then introduce a further dimension to the concept, degree of engaging, as it is seen to fall between vicarious engaging and phantomised disengaging. Her distorted style of engaging brings forth the consequential concept and experience of not bringing the baby into-being. Following an exposition of the abovementioned, it is explained how Ria is playing the role of vicarious mother via superficially ‘being’ mother, and subsequently interacting as the un-‘being’ self. On the basis of her approach towards the pregnancy, her docile manner of gestating is revealed as she relinquishes control via abdicating.

Ria's narratives below demonstrate a need for vicarious security and a need to engage with her NP vicariously. Her account reveals her expectation for her boyfriend to facilitate and support her as she manoeuvres around pregnancy-related tasks. However, as these examples are shown below, it is also evident that her boyfriend did not meet such expected needs during her physical pregnancy. In this manner, she is observed to experience her relational context as an unconfirmed assumed vicariously secure context, where her expectations for vicarious security are not necessarily lived or experienced.

Within the statement below, Ria yields the need for vicarious security within her NP when engaging in prenatal baby and self-care activities. She reveals unmet expectations with regard to receiving input regarding her health and attending her clinic appointments.

Excerpt 7.52

It bothered me sometimes, because I used to ask him (referring to her boyfriend) every time he phoned me, and he didn't used to ask me how is the baby. He would just ask me how am I. Then I used to ask him how can you ask me and not ask about how the baby is, because you know that I'm pregnant. But, I didn't think of anything at the time. I was just asking it. Because I normally noticed that he doesn't talk a lot about the baby ... if you are going to have a baby you have to make sure the baby is okay and the person who is carrying the baby is okay. And you have to make sure that that if one needs help, you help her. And you have to make sure every time you talk with that person you must ask how is the baby and you have to be there every time she goes for a check-up. Even if you are not there you have to ask, "How did it go?" ... if I had an appointment at the hospital, he should have made sure that I keep the promises about the appointment.

Ria

As Ria manoeuvres around the next pregnancy-related task, namely that of considering the presence of the neonate, the concept of misrepresenting actions is revealed. Misrepresenting actions speak to variant actions taken by the mother, where the motive for her action is one of having secondary gain. Thus, the concept is defined as specific actions taken seemingly towards the baby and pregnancy but for ulterior benefit and not necessarily to the benefit of the baby or her own pregnancy. Within the excerpt below, Ria may appear to think of the baby moving inside of her, thus contemplating the presence of the foetus. However, further exploration reveal that the baby's movements do not necessarily draw her attention towards the baby, for the sake of the baby. Instead, it unlocks thoughts around what the baby could mean for her relationship with her boyfriend (secondary gain). This misrepresenting action is termed misrepresented contemplation of the foetus as she appears to contemplate the baby but does so for purposes of experiencing secondary gain in her relationship with her boyfriend; and not necessarily for the sake of the foetus.

Excerpt 7.53

Ria:

If the baby moves you think of the baby.

Interviewer:

And the thoughts you were having about the baby?

Ria:

If anything happened or is happening while I'm pregnant, I always thought that maybe if this baby came, this baby will change everything.

Interviewer:

Okay and what will the baby change?

Ria:

Okay, I usually thought that if I were not getting along with the father of the baby, when the baby came the baby will make us get along.

Ria

Similarly, with respect to the pregnancy-related task of anticipating the future of the baby, Ria again demonstrates misrepresenting actions. This time, the concept of misrepresented anticipation of the baby's gender is yielded, as she considers the gender of the foetus with the ulterior motive of receiving favour from her boyfriend. This is demonstrated in the next narrative.

Excerpt 7.54

Interviewer:

How did you feel towards the baby inside of you?

Ria:

I would think about the baby, I was loving the baby. To tell you the truth, I was expecting to be together with the father of the baby so that we could love the baby together.

Interviewer:

So, what kind of thoughts would you have about the baby while the baby was inside of you?

Ria:

I was thinking that if the baby is a boy, I was going to be so happy because the father of this baby wanted the baby to be a boy. So, this is what I was thinking. [Long pause].

Um, okay, I, umm, okay, I wasn't thinking about the baby and the future. I wasn't thinking about the baby ... I was excited for this baby because I thought that this baby would have made me more closer to his father.

Ria

It is important to observe above that Ria eventually contradicts herself and acknowledges that she did not, in reality, consider the baby and that her focus had been on her boyfriend instead. The idea is, thus, more fully revealed that although she may appear at some extent to be engaging with pregnancy-related tasks, whether it be participating in prenatal baby and self-care tasks or anticipating the future of the baby, her degree of engagement is superficial. This

speaks to a type of pregnancy engaging, namely distorted engaging. The concept is, thus, defined as a type of engagement where the women may at times seem to engage with pregnancy-related content, but where the engagement is superficial.

Moreover, while misrepresented actions are indicated within the distorted engaged pregnancy, Ria's narrative also reveals significant examples of phantomising actions, as seen within the phantomised disengaged pregnancies below. Reference will be made to this when relevant in forthcoming sections. Nonetheless, this also indicates that a distorted engaged pregnancy may include elements of a phantomised disengaged pregnancy. Subsequently, this reveals the dimensionality and fluidity of the concept degree of engaging. This is based on the positionality of the concept distorted engaging, as it is seen to fall between vicarious engaging and phantomised disengaging, appearing to suggest some elements of both. It is also evident, again, that the security context serves as a platform from which the women may express their type of pregnancy engagement.

Distorted engaging and the consequence of not bringing the baby into 'being'

The focus can now turn to the consequences of distorted engaging. Firstly, the misrepresented actions utilised may result in the baby being regarded as a misrepresented object. Meaning, the baby is regarded as representing something other than a baby. In Ria's case, the baby represents an object that could earn her boyfriend's affection and favour. Moreover, her distorted engaging may be argued to result in the consequential concept of not bringing-into-being. The concept means that the individual may neglect to truly bring the baby into existence within their mind, as they consider the benefit of the baby and not necessarily aspects related to the baby itself.

Distorted engaging and playing the role of vicarious mother

As the women may show misrepresenting actions, phantomising actions, and also superficially engage with their pregnancies, commentary can be delivered on who the women are as mother. The concept of vicarious mother is yet again revealed within the phantomised disengaged pregnancy. While there may be an intention to 'be' through proxy as within the vicarious engaged pregnancies, Ria's unconfirmed assumed vicarious context does not seem to offer her an opportunity to really engage vicariously. It was shown above that her expectations for engaging vicariously were unmet. Subsequently, she cannot act by proxy by engaging in prenatal baby and self-care tasks or fully consider the presence of the foetus. As she superficially manoeuvres around such tasks she is regarded as refraining from, in reality,

truly thinking about, feeling towards, or acting independently towards pregnancy content. The concept of the un- 'being' self is, thus, indicated. The un- 'being' self is defined as a part of the self that operates under the bigger concept of vicarious mother, where the women refrain from 'being' mother, whether it be thinking about, feeling towards, or acting in relation to pregnancy content independently.

Distorted engaging and the docile nature of gestating

Ria's narrative may also demonstrate the nature of how the women approach the physical pregnancy. Again, the concept of docile gestating is revealed. As Ria superficially engages with her NP she is seen to relinquish control via abdicating. The concept, as previously defined, is relevant here, since she is failing to *fully* undertake action towards pregnancy-related matters.

This section revealed how an unconfirmed assumed vicariously secure context may serve as a platform from which the women may distortedly engage with their NPs. The distorted engagement was shown to be attained via the misrepresenting actions that the women may take as they confront variant physical pregnancy tasks. The next section will reveal how a vicarious insecure context may serve as a platform for a different type of physical pregnancy engagement among NPs, namely, phantomised disengaging.

7.7.1.3 Vicarious insecurity, phantomising actions and phantomised disengaging during physical pregnancy

This section reveal the women's pregnancy stories concerning their NPs. Their narratives indicate how the women manoeuvred around the pregnancy-related tasks within a context that was experienced as vicariously insecure. The women's comparisons between their vicarious secure contexts to their now vicariously insecure contexts sheds light on how their NPs were different to their N-NPs. While the women were able to engage vicariously with pregnancy-related activities within vicariously secure contexts, the women's narratives below demonstrate their subsequent lack of participation in pregnancy-related tasks; as experienced within vicariously insecure contexts. Moreover, it is shown how the women proceeded to utilise variant phantomising actions within this context. In this regard, the women's stories will further bolster this category of concepts as yielding specific actions or inactions to render the baby or pregnancy non-existent or unreal within the women's minds or experience. The section will also demonstrate a type of pregnancy engagement as narrated within the NPs. Here, the concept of phantomised disengaging will be reinforced. This concept is shown to

consist of two processes, one where the baby and pregnancy is phantomised, or rendered non-existent, and the second being a disengagement or lack of participation in pregnancy-related tasks. Following an exposition of the aforementioned, it is explained how, on the basis of the women's phantomised disengaging, they negated from bringing the baby into being. This is regarded as a consequential concept to phantomised disengaging. It is also deliberated upon how they played the role of vicarious mother via the un-'being' self. Commentary is also delivered on how they relinquished control via abdicating.

The manner in which the women manoeuvre around pregnancy-related tasks within a vicariously insecure context will be discussed in accordance to two focus areas. The first is to consider the consequences of a lack of a vicarious source and how the women were unable to think, feel and act by proxy. The second area concerns the concept of phantomising actions. Although briefly introduced previously (see Section 7.2.2.1), it is first necessary to explain the experience of this concept as it relates to the physical pregnancy.

The women narrated stories of their actions or inactions they had taken during their NPs; where the baby they carried was subsequently experienced as if it had not really been present. This refers to the phantomising component of the concept phantomising actions. Tika's narrative demonstrates this.

Excerpt 7.55

Interviewer:

So, if you look back at all your pregnancies now and you compare the pregnancies ... what would you say was different about those pregnancies, as opposed to the one where you did take the life of the baby? If anything at all?

Tika:

It's like, how can I say, it's like she was there but she wasn't there.

Tika

The phantomising component of the concept refers to the experience where the baby did not *fully* existed in the women's mind; as if it were a phantom. Although there may be an inkling of it being there, it was not clearly visible, prominent or in the forefront of experience. Ann elaborates on the experience of not fully acknowledging the baby or pregnancy and neglecting to experience it in her mind.

Excerpt 7.56

... and it's like, my mind is not even there, you know? Thinking now, it's coming near for me to give birth, and stuff like that. Nothing at all (appearing surprised and raising her tone of voice)! It's like I just had this fat belly or something but it's not even like I am pregnant. I haven't acknowledged the baby at all For this baby, it was just a

blank ... I just wasn't interested in this baby, you know? I didn't acknowledge it; I wasn't interested in the baby. But with my other three I did (referring to her other three pregnancies) But with this baby, it's like I knew I was pregnant, but in a way, it was like I wasn't pregnant. You know?

Ann

It is evident from the above that the women did not come to fully experience the baby or pregnancy within their minds. It will be shown below how vicarious input would have been required for the baby to be brought into the mother's mind. However, the women's narratives also yield stories around certain actions they took, which resulted in the baby or pregnancy not being an area of focus. Subsequently, the baby ceased to fully come into existence in their minds. Such actions are, thus, termed phantomising actions, which may include: numbing feelings; ignoring; avoiding; deprioritising; clouding; redirecting preoccupation; procrastinating; un-projecting futures; maintaining present past; and un-acknowledging. The women's narratives reveal that these phantomising actions occur repeatedly throughout the variant pregnancy-related tasks.

With a deeper understanding regarding the need for vicarious input as well as the concept of phantomising actions, the following sections reveal how the women manoeuvre around pregnancy-related tasks in accordance to these two focus areas within NPs. Summation of their general approach will be provided followed by a consideration with respect to their experiences and actions in relation to specific pregnancy tasks.

In approaching the pregnancy-related tasks, the women expressed their fears for the lack of vicarious support within vicariously insecure contexts. Llyn's excerpt below yields how the women felt they would be unable to engage in pregnancy-related matters without such sources.

Excerpt 7.57

Llyn:

And then she (referring to her mother) got into a car accident and got very sick. Every time she is on my mind, I'm thinking about her and I think I can't even do anything without her.

Llyn

In describing their NPs, the women elaborated upon and emphasised the vicariously insecure context experienced during this time. Kim's narrative below indicates a vicariously insecure context as she experiences disapproval from her family. Moreover, her narrative reveals how this context sets the scene for approaching pregnancy-related tasks. The confusion she

experiences denotes the concept of clouding, as previously defined (see Section 7.3.3.1). Subsequently, without vicarious security and input, Kim experiences uncertainty or lack of clarity in managing her pregnancy in general.

Excerpt 7.58

Kim:

At the time when I'm pregnant, there was an argument at home with my grandmother ... I was getting very strong opinions.

Interviewer:

What was the argument about?

Kim:

Why I'm falling pregnant at this stage, something like that. They (referring to her family) said many words to me. So, I started being confused then and I didn't know which way to go. So, I was so confused, so confused. I already have two kids, one is 12 years and the other is five years. So, after that I didn't feel well. Until the time came to give birth, I felt like this.

Kim

Despite the discomfort expressed within vicarious insecure contexts, it is also important to note that some of the women's stories reflect behaviours that would maintain a vicariously insecure context. For instance, Kim's narrative indicates that after her family rejected her, and she had jeopardised her relationship with her boyfriend, a potential vicarious secure source. She was also failing to consider alternative viewpoints.

Excerpt 7.59

Interviewer:

Earlier you said you distanced yourself from your boyfriend?

Kim:

Yes, I even destroyed my phone. I threw it away because he was calling me every minute Even before I destroyed my phone, my boyfriend was messaging that he loves me. He doesn't want to lose me. I replied, "How can you love a dog?"... he said "no you are not a dog, you are a human being"....

Kim

With respect to the specific pregnancy task of considering the foetus, the women's stories revealed the impact of the lack of vicarious input as well as phantomising actions with respect to the task. By comparing their NPs to their N-NPs, the women emphasised having failed to consider the presence of the foetus within their NPs. Firstly, the women argue that this pregnancy-related task was negated within their NPs as a result of the lack of involvement and interest of vicarious sources. Below, Ann reveals that in order for her to have contemplated matters related to the pregnancy and foetus, input and interest would have been required from her family.

Excerpt 7.60

Ann:

And nobody around me, my husband, not my parents, not his parents, nobody spoke to me about being pregnant or talking about this baby or asking me what I want to do. They all was just too upset with me for getting pregnant again so they all left it at that, like that. You know? With me doing what I want to do. Nobody ever spoke to me about being pregnant. They all knew I was pregnant, I was showing. But nobody spoke about it or asked me what I am going to do or how I am going to manage. Nobody at all. Not even my husband. He didn't even ask about the baby, not once ... like with my first pregnancy they did, the second one they did, my third one, they wasn't so happy about it but they did ask about the pregnancy, and how I'm feeling and stuff like that, like if I am okay to go to work. You know? like that.... Like nobody asked about the baby or even bothered about the baby. So, for me too now, in a way it's like I knew I was pregnant but I had forgotten that there was a baby there. With them like not asking me anything, with the other pregnancies they did ask me, you know? I guess everyone was just not interested in me anymore.

Interviewer:

Are you saying if they had asked you about this pregnancy, would that have made you think about it more? Or?

Ann:

(interrupts) I guess yeah, depends on what they were asking as well ... I was all alone, I had nobody to talk to.

Ann

Despite the emphasis the women placed on the need for others to engage them in conversation regarding their pregnancy, certain assumptions for accessing and strategies in communicating may continue to hamper this process. The women's stories reflect the concept of withholding communications throughout their pregnancies on the basis of their assumptions for accessing. For example, Ria's excerpt indicates the concept, as she had needed to hide or conceal her pregnancy on the basis of her fears for her mother's anger and disapproval.

Excerpt 7.61

Ria:

... I didn't want my mom to notice my pregnancy at the time. So, I was away from them.

Interviewer:

Why didn't you want your mom to notice your pregnancy?

Ria:

Because I thought that she would be angry with me ... I didn't want to worry my mom.

That's why I was keeping away from her. I was trying to keep away from her. Because I didn't want her to be worried.

Ria

Also, Ann reveals withholding communications, as she negates attempting to change her family's opinion or respond by initiating conversation to engage them in pregnancy-related matters.

Excerpt 7.62

Interviewer:

Did you do anything to try and change their opinion about the pregnancy in any way or about the baby?

Ann:

I did not, I just left them as they were. I just left them ... I didn't have anyone to talk to, so, it's just like I kept everything inside. Everything. I didn't speak to anyone about what was going on with me. I just kept everything to myself.

Ann

In this process of assumptions for accessing and strategies in communicating, it is observed how a context of vicarious insecurity may be maintained; with the consequence that the women also fail to obtain access to vicarious sources for vicarious input. Subsequently, the baby fails to be vicariously considered within their minds as shown in Excerpt 7.56 and 7.60.

Previously, Ann's narrative above (see Excerpt 7.60) revealed that the baby had failed to come into existence in her mind as a result of other's failure to engage her in positive conversations to consider the foetus. Moreover, with respect to the task of considering the foetus, the phantomising action of ignoring is further indicated. This concept speaks to act of ignoring thoughts and content related to the pregnancy. The women's stories further reveal the use of medication, alcohol or illicit substances to aid in this regard. Sam's narration below shows this, with the consequence that she failed to notice the pregnancy situation with the exception of her waist expanding.

Excerpt 7.63

That time it was the time my boyfriend passed on. I was thinking a lot of things and that time I was getting involved in drinking alcohol. If you drink alcohol you never notice nothing ... I took the Allergex, I took the Allergex and I fell asleep. Now if I wake up and all things are coming back, I go to tavern to drink ... I drink and drink. But my family they don't know nothing about my things and my pregnancy ... ai, I'm drinking nonstop, I'm drinking, drinking, drinking, Monday to Friday... if I'm drinking all the problems it go away. You are leaving your pain there The time when I was drinking I was just drinking to move away the stress. If I'm drinking now, I forgot all things that is happening in me. I didn't notice nothing. But if I'm not mistaken, the only thing I was noticing is my stomach growing.

Sam

Similarly, Tika reflects on her experience of abusing tik throughout her NP. Her statements reveal the phantomising intentions and the consequences thereof. In other words, her intention to render the pregnancy non-existent in her mind and the subsequent experience of not feeling pregnant in her mind.

Excerpt 7.64

Tika:

The baby was inside me and I was feeling it but I didn't want to believe it. It was there, I was feeling her, but I was ignoring it ... I thought that the tik was going to make my circumstances disappear.

Interviewer:

What specific circumstances are you talking about?

Tika:

To take my problem away of I don't want to be pregnant.

Tika

Next, Tika explains the consequences of abusing the tik around the time of her NP.

Excerpt 7.65

Tika:

It's like it isn't there. It is there but it's like it isn't there. It's like that when you are high. I was feeling something is kicking, but then I'm like I'm thinking something is kicking but there's nothing. I was feeling like that.

Interviewer:

So the drugs were making you feel like there's nothing really there?

Tika:

Yes

Interviewer:

And when you had the feeling that nothing is there, did that make you feel better?

Tika:

Yes ... like you can say I didn't really care. I didn't really care because I just want my lolly to be filled up.

Interviewer:

You were beginning to explain a little bit about that pregnancy earlier and you said it was like she was there but wasn't there. So, was it as though you were not even pregnant?

Tika:

Yes, it felt like that, exactly.

Interviewer:

Tell me more about that?

Tika:

It's like I fell pregnant but it doesn't feel like I fell pregnant. Because I was so into the tik.

Tika

Moreover, the women also negated the task of considering the foetus, even in the face of physical reminders of the baby's presence, such as its kicking. Amy reveals having done this as a result of the phantomising action of redirecting preoccupation. The concept was previously defined as an action where the women redirect their focus to other, sometimes more competing environmental concerns; at the expense of the baby. Here, she refrains from focusing on the baby's kicking as she chooses to focus on her work instead.

Excerpt 7.66

It was very different (comparing her NP to her N-NPs), because even while I was pregnant I didn't focus on this baby. Even when the baby used to kick it's like I should acknowledge the kicking and stuff but I was just busy at work ...

The above also reveals that variant phantomising actions may be used in conjunction to bring about a similar consequence, namely, one where the baby and pregnancy is not experienced within their minds. As a result of redirecting her preoccupation, Amy is also not acknowledging (phantomising action of un-acknowledging) her foetus.

The women's stories further reveal that certain circumstances may result in their initial vicarious sources becoming unavailable to them. The reader is reminded that Sam had been unable to tell any other individual that she had been pregnant, except her boyfriend. She also believed that he would have been content regarding the pregnancy (See Excerpt 7.63). However, Sam revealed that her boyfriend died during her pregnancy. As a result, she redirected her focus to this matter, a more prominent concern within her environment and, subsequently, no longer considered the baby. The excerpt, therefore, also indicates the concept redirecting preoccupation, as her focus had been on other concerns at the expense of the baby.

Excerpt 7.67

After my boyfriend died, I was not thinking too much about this baby because I was focusing on the situation.

Sam

Sam compares this with her N-NP and reveals how much the death of her boyfriend impacted on her capacity to consider the NP baby.

Excerpt 7.68

That time of the first pregnancy (a N-NP), I was excited about the first born and like it's all things, that time I was not stressing about the man because my mind was excited about the baby. If my mind is excited its thinking only about the baby. It's not thinking about tomorrow. I'm just thinking about the baby ... I thought about if it's a boy of a girl. But a lot of thoughts you have when you are pregnant.

Sam

The above excerpts, thus, yield the culminating impact of losing a vicarious source as well as the phantomising action of redirecting preoccupation on her capacity to experience the foetus in her mind.

Furthermore, the women's stories indicate that the foetus may not have been considered during their NPs as a result of the phantomising action of un-acknowledging. The construct

was previously defined (see Section 7.2.2.1) and is demonstrated in Ann's narrative below. While Ann may have been reminded of the presence of her foetus by experiencing the physical sensation of its kicking, she explains that the baby was un-acknowledged to the extent that it was not fully experienced in her mind.

Excerpt 7.69

I never, never, ever thought about her. Even in my times like when the kids were sleeping and my husband is not there and I can't sleep, you know, and the baby is kicking and stuff, it was like it wasn't anything to me.

Ann

Ria also demonstrates the phantomising action of choosing not to acknowledge the changes in her body, such as the swelling of her breasts or baby's kicking during her NP. Subsequently, she failed to consider the foetus and pregnancy.

Excerpt 7.70

Ria:

During the pregnancy, the baby was kicking. My breasts was filling, my breast was big.

Interviewer:

When you would feel those things, what would you think about?

Ria:

Eh, I thought that (long pause), no, I actually didn't think of anything.

Ria

There are several other ways in which un-acknowledging may manifest with the consequence of failing to acknowledge the pregnancy and neonate. As indicated previously, Tika's family had accused her of wanting to take the life of her firstborn (an eventual N-NB due to family intervention at birth) (see Section 7.2.7). Her actions in the excerpt below demonstrates several ways in which the phantomising action of un-acknowledging may present. For instance, she received external promptings to enquire regarding her pregnancy status from her grandmother as well as physical sensations to indicate her pregnancy, yet, she actively tried to deny and convince herself otherwise. The consequence is one of experiencing her pregnancy as if she was not pregnant. Through more in-depth explorations between her and me, it was revealed that she was aware that she was pregnant, but that her experience was one of un-acknowledging it.

Excerpt 7.71

Tika:

By my first born, nobody knew I was pregnant.

Interviewer:

Nobody knew you were pregnant?

Tika:

Nobody ... I was getting my periods. My boyfriend was telling me, you are pregnant. And I would say, "are you mad?" "I'm not pregnant" ... I was 17.

Interviewer:

When did you first figure out you were pregnant?

Tika:

Before I go to visit my grandmother, that year.

Interviewer:

How many months pregnant were you then?

Tika:

Eight.

Interviewer:

Okay, so you never knew that you were pregnant? Was there anything that was happening during those eight months that made you think, maybe you are pregnant?

Tika:

Yes, because you feel umm umm.

Interviewer:

I see you shaking your fingers by your tummy?

Tika:

Yes, I would feel something (pointing to her stomach) and then I would tell myself, "no [participant name deleted], you are imagining things"... you are imagining things".

Then when I go to visit my grandmother, my grandmother asked me why I am so fat.

And I said no, "it's the weather, it's the sun, granny". Then she said, "Don't lie to me, is there a bun in the oven?" And I said "no" (shyly giggles). Then my brother said, "No, mommy, she is pregnant". Then I would get aggressive. When she would want to feel my stomach, then I would be a gonner and go to my friends'.

Interviewer:

At that time, did you maybe have a feeling that you could be pregnant?

Tika:

No (emphasis in voice)! I thought they were imagining things. I'm turning 17, I was 16 and my father will be so upset and I'm going to Grade 11.

Interviewer:

So, was it like you couldn't accept you were pregnant because you were so young and your father wouldn't be happy?

Tika:

Yes

Interviewer:

So, was your experience like an idea in your head that said you are pregnant but you didn't want to see it?

Tika:

That I am pregnant, yes. But then I would say to myself, "no [name deleted], you are imagining things, you can't be pregnant, you can't be pregnant."

Tika

In summary, in terms of the task of considering the foetus, the women's stories revealed within this section reported that they did not receive vicarious input. It was also shown that the women utilised the phantomising actions of ignoring, redirecting preoccupation and unacknowledging. As a result of the lack of vicarious input and phantomising actions, the baby or pregnancy is kept from being brought into the women's minds, to the extent that it was not

fully experienced. Therefore, the consequence appears to be a negation of participation in pregnancy-related tasks.

Regarding the specific task of accepting the pregnancy, the women previously narrated having accepted their N-NPs vicariously within vicarious secure contexts. However, the vicariously insecure context does not appear to offer such opportunities. Within their NPs, the women narrated accounts of refraining from having committed the act of neonaticide if their vicarious sources had felt differently towards the baby and if they had assisted with the pregnancy. Ann reveals below that she might have refrained from committing the act if her family had accepted her pregnancy.

Excerpt 7.72

Ann:

I don't know, maybe I wouldn't do what I did, maybe things would be different, I don't know, if they would feel different towards the baby.

Interviewer:

So, did you in some way hope that people would feel differently about your pregnancy?

Ann:

Especially my family and my husband. I always wanted their approval. You know?

Interviewer:

Approval of?

Ann:

Of me being pregnant again. Just helping me through everything.

Ann

Moreover, regarding the task of accepting the pregnancy, the women's stories also reveal the phantomising action of numbing feelings. This concept refers to the act of ignoring, the inexpression of or refrainment from acknowledging feelings, or failing to experience feelings towards the pregnancy and foetus. This is demonstrated in Ann's narrative.

Excerpt 7.73

Ann:

I wasn't happy about it; I wasn't sad about it. I just wasn't feeling anything ... At that time, I had no emotions, no feelings I was just numb, just going through my days. I wasn't looking forward to anything. There was nothing left you know? Just the work and kids.

Interviewer:

Almost like being in a bit of robot mode?

Ann:

Yes.

Interviewer:

How did you feel about keeping the baby?

Ann:

At that time, I wasn't happy about it, I wasn't sad about it, I was just numb. I didn't even concentrate much on this baby.

Ann

As a consequence of not receiving vicarious input and also numbing feelings, the pregnancy situation is not emotionally experienced. Subsequently the women are not seen to engage with the pregnancy task of accepting the foetus.

When comparing their NPs with their N-NPs, the women reflected having been unable to connect with the foetus or bond with it without vicarious support. Ann demonstrates the impact of her lack of vicarious security on her capacity to, firstly, consider the foetus and, secondly, bond with her baby within her NP.

Excerpt 7.74

Ann:

It's like I didn't even, I don't even know how to explain how I felt for this baby. Like some days it was there, some days it wasn't there, you know? Even when the baby is kicking and I tell him (referring to her husband) to feel, he just didn't want to bond with this baby. Now because of that it's like I didn't want to bond with this baby.

Interviewer:

Okay, so him not wanting to bond had some impact on you not wanting to bond with the baby as well?

Ann:

Yes, you can say that Even with the other three, the babies would be kicking and stuff and previously they would want to feel it but with this baby it was nothing, no.

Ann

Again, on the basis of lack of vicarious input and acceptance, the women were unable to engage in the task of connecting with the foetus, to the extent that it was experienced as if the baby was not really there.

Regarding the task of anticipating and planning a future for the baby, the women previously narrated the guiding role vicarious sources played within their N-NPs. However, within their NPs, the women narrated stories around negating to consider a future including the baby. Here, the phantomising action of un-projecting futures is indicated, as the women fail to contemplate a future that involves pregnancy content and the baby. This concept is demonstrated within Ann's statement below as she compares her NP with her third pregnancy, a N-NP. She is shown to negate thinking about the future regarding her delivery date and her required actions.

Excerpt 7.75

I didn't even have time to think about when this baby (referring to her NP) is going to come and what I am going to do. I never even thought so far ... although for my third one (referring to her N-NP), financially I was still battling and stuff, but I still acknowledged him ... I knew when my time was to give birth and stuff.

Ann

On the basis of un-projecting futures, the women also revealed negating thoughts during their pregnancy concerning what actions to take once the baby was born. Prior to interviewing, I expected to hear that the women would have contemplated abortion, thoughts of adoption, or intentions to take the life of the newborn. However, the women's narratives revealed a negation of such thoughts. As the women failed to contemplate the baby in terms of the future, they also revealed that they did not engage in such thought or content in focused detail.

Excerpt 7.76

Interviewer:

You said you only thought in that moment (referring to the birth) that you were going to take the life of the baby. So why do you think you didn't think about taking its life before? Or why did it not come up as a thought before?

Ann:

It never ever came up in my mind. I didn't really think, okay, I'm going to keep this baby. But also, I didn't say I don't want this baby. Actually, I didn't even think anything. I know I'm pregnant, and I didn't think further on now ... like I'm going to have this baby and what's going to happen and that I'm going to take care of it. It was nothing like that. I guess I was too numb and too busy and exhausted and tired with everything. It's like I didn't plan anything, I didn't think anything. I know this baby is there but I didn't, I didn't really think anything ... because I was like "maybe I should have an abortion" while I'm pregnant, but I didn't really dwell on it a lot. Like "I need to have an abortion, I need to have an abortion". I just thought about it, it came into my mind, then I just stopped thinking about that. It wasn't something I was really thinking about it, dwelling on it, "do I want to have an abortion?" Yeah I didn't really think much about it ... I didn't think much of it.

Ann

A further approach to negating the task of anticipating and planning a future for the baby is via the 'phantomising action' of maintaining present-past. In this respect, the women told stories around engaging in much as the same activities as before their NP. Here the focus remains on the same day-to-day concerns as prior to conception, without much thought of the baby they are carrying. In this sense, the past is seen to merely continue in the present, despite changes to their bodies and lives being pregnant. Ann demonstrates this concept of maintaining present-past below.

Excerpt 7.77

So, I am going about my normal day, going to work, doing what I have to do, coming home, seeing to the other kids ..., I guess in a way, because I was too busy with the kids you know, being busy all the time, rushing around, I knew I was pregnant, but I never really acknowledged the baby My mind was just so messed up, I don't know, I was just concentrating on the three children now, nothing else. So, nothing about the baby. Nothing ... and umm, it's like I guess in a way with me being so busy with everything else around me, I forgot about the baby It's just like going over and over the same things each and every day ... it was just like in 'that time' (emphasis on words) now, it's like an everyday thing. You're just doing what you have to do every day. It wasn't like seeing the future ... I just wanted what was now.

Ann

Moreover, it is further evident from Ann's narrative, that by maintaining some of the past activities and experiences in her current situation, she would ultimately also experience un-projecting futures. This occurs since her focus is not on the baby and the future of this baby, but instead on the same day-to-day concerns as before.

In summary, the necessary vicarious support in contemplating a future for the baby was missing within the women's narratives regarding their NPs. This aspect, together with the phantomising actions of un-projecting futures and maintaining present-past, the women negated to consider the baby in these respects. Consequently, the experience was one of the baby not really being present.

Previously, the women narrated participating in prenatal baby and self-care tasks within their N-NPs via the initiation and support of others. However, the women told stories about refraining from engaging in prenatal baby and self-care tasks within their NPs. Not only do the women emphasise the impact of lack of vicarious security within their NPs with respect to this task, but so do variant phantomising actions contribute towards the lack of engagement in the task.

Kim described a vicariously insecure context during her NP, as demonstrated within Excerpt 7.65. In the narrative below, she reveals the phantomising action of redirecting preoccupation. The concept is indicated, as Kim's concern moved away from the foetus and engaged in matters related to the baby, such as going to the clinic. Kim's narrative reveals how her reported depressed mood and depressing content about being unloved became her preoccupation at the expense of the baby within her NP. Subsequently, she did not engaging in activities, such as going to the clinic.

Excerpt 7.78

Kim:

Even when I would see other people, I would feel that they don't love me. I was feeling so hopeless. Now, I am not going to clinic. I then left everything just like that I was starting to go to work earlier and coming back later at night when they are sleeping. I was so depressed. I didn't know what is happening.

Interviewer:

What do you think kept you from going to the clinic?

Kim:

... I said, as I am pregnant, I will go to the clinic, but when that drama started, yoh, I felt so, I didn't know what to do by that time. I was hopeless and just left everything like that ... I was so crazy, I don't know which way I should go ... if I'm wrong or right ... I was just like a 'walking dead'.

Interviewer:

What do you mean a walking dead?

Kim:

I was feeling too much of stress, so hopeless, I don't know why I am still alive anymore. When people look at me I feel they don't love me. When they talk, I feel they are talking about me, they know I am a useless person

Kim

A further phantomising action, which appears to have a bearing on the women's negation of prenatal baby and self-care tasks, is that of procrastinating. Procrastinating refers to the delaying of addressing pregnancy-related matters. The women told stories about procrastinating on pregnancy tasks, thinking that they will eventually engage in them, but failing to do so.

Excerpt 7.79

So, when I was pregnant, I was thinking that all the things, with time passing, things will be sorted, ill sort it out.

Sam

Similarly, Ann reflects on putting off on going to the clinic.

Excerpt 7.80

Ann:

For the last pregnancy, I never went to the clinic. For the other three I did go, but not for the baby.

Interviewer:

What kept you from going to the clinic?

Ann:

I don't know, it's always work with me ... so, I just, I just didn't go. I kept thinking about going but I kept putting it off. Now I'm not going and eventually I never went.

Ann

A further contributing factor towards negating the task of prenatal baby and self-care is the phantomising action of deprioritising. Deprioritising refers to the notion of actively deprioritising pregnancy-related content and prioritising other matters above the engagement of pregnancy tasks. This is demonstrated in the excerpt below, as Ann actively chooses to prioritise work over attending her clinic appointments.

Excerpt 7.81

Ann:

So, I wasn't like, so it was like, I didn't even have a baby in me, you know? ... I wasn't even taking care of myself. You know?

Interviewer:

What do you mean not taking care of yourself?

Ann:

Like, health-wise, you know?

Interviewer:

In this regard, was this different from your other pregnancies?

Ann:

Yeah it was, because my other pregnancies, I had been attending the clinic on every appointment you know? But this pregnancy, some days I couldn't go because they are short-staffed at work and I couldn't go because I need to help. So, I just said no, I just want to be at work. I don't want to go to the clinic some days

Ann

Below, Ria yields a similar process of deprioritising in terms of reading informative clinic pamphlets.

Excerpt 7.82

Ria:

Eh, they used to give us pamphlets but eh, I didn't read any of it.

Interviewer:

How come?

Ria:

I was too busy.

Ria

The women's stories also revealed how the task of prenatal baby and self-care may have been negated on the basis of maintaining present-past. Amy's story reveals this construct, as she continues to take on work-related activities no longer suited to her pregnant body. The consequence of this is one of going on with life as if she had not been pregnant.

Excerpt 7.83

Amy:

Sometimes we had a project at work that you have to work hard. When you're pregnant, you're not supposed to do the things that can make you so tired ... but when they give me those things, I say it's fine, I will do them. Like its fine, I do the exercise no matter how difficult it is. I do this like I'm not pregnant.

Interviewer:

So, you continued living life as though you are not pregnant?

Amy:

Yes, like that.

Amy

Up to this point it has been demonstrated how the women may negate the pregnancy tasks of prenatal baby and self-care. This was shown either as a consequence of not having vicarious input as well as phantomising actions of redirecting preoccupation, procrastinating, deprioritising, or maintaining present-past. As a result, the baby or pregnancy is not brought into the foreground of the women's minds and, therefore, pregnancy-related tasks are disengaged from.

Previously, the women indicated significant vicarious support in preparing practically for the baby. However, in facing this task within their NPs, the women also demonstrated variant phantomising actions in the denial of this task. As indicated in earlier sections, the women reported abusing substances in an attempt to ignore the pregnancy and foetus. Similarly, such phantomising actions may also result in the women failing to prepare practically for the baby. Tika demonstrates this as she reveals smoking tik at the expense of buying anything for her baby.

Excerpt 7.84

I just want to forget He (referring to her boyfriend) knew and I knew I was pregnant and then we just smoked from a gram to eight or nine grams a day It wasn't the same as with the others (referring to her other pregnancies). I didn't even make an effort to buy anything for her.

Tika

This time, without vicarious input and via the phantomising actions of ignoring, it is demonstrated how the women failed to engage in the task of preparing practically for the baby.

The reader is reminded about the manner in which the task of identifying the baby was approached within vicarious secure contexts. Within such contexts, Ann demonstrated an account where her family initiated and identified her other N-NP children by naming them (See Excerpt 7.49). However, upon direct questioning regarding her experience within a vicariously insecure context, it is observed that this was not the experience of her NP.

Interviewer:

Did you and your family ever think of names for this baby (referring to the NP)?

Ann:
No.

Ann

So, without vicarious support, the identity of the baby is again not brought into the women's minds as previously shown. Subsequently, the task is disengaged from.

The women also reported negating the preparation for birth task within their NPs; whether it was considering the baby's due date or packing a bag for hospital. Ann emphasised the lack of conversation and initiation regarding input from vicarious sources within her NP, in comparison to her N-NPs within Excerpt 7.60 above. Below, she further demonstrates how she failed to engage in the birth preparation task, also as a result of lacking such vicarious support. The concept of preparing for birth by proxy is indicated in her other three pregnancies, as she was able to prepare for their births by packing a bag, via the support of others. This, however, does not appear to be the case for the NP.

Excerpt 7.85

Interviewer:

They did not ask you about the pregnancy? So, what would you have wanted your family or husband to ask you about your pregnancy; while you were pregnant maybe with the last one?

Ann:

I wanted them to ask me if I am okay. I wanted them to ask me if they can help in any way. And with this baby I had nothing prepared. For the other kids, I had stuff prepared for them, for hospital and stuff. But for this baby, I had nothing, I wasn't worried about when the baby would be born or that I would have to go to hospital or to pack a bag for the baby. It was absolutely nothing (emphasis in voice)! Yeah, I just wanted my family to show me some support.

Ann

With an exposition regarding the women's response to the lack of vicarious support as well as the said phantomising actions above, a summation can now be provided on the type of pregnancy engagement among the women's NPs. The sections above revealed that, without the assistance of vicarious initiation, guidance, and support as well as the phantomising actions, the foetus and pregnancy ceases to fully exist within the women's minds. Thus, it is like a phantom, there, but not entirely experienced. Subsequently, the women were shown to not participate within the pregnancy process or tasks. Their approach in manoeuvring around the NPs is, therefore, conceptualised as being a phantomised, disengaged pregnancy. According to this concept, the pregnancy and foetus is not experienced as a reality and not lived according to such a reality. The foetus is experienced as an unreality (a phantom) and the mother negates to participate in the pregnancy process.

Phantomised disengaging and the consequence of not bringing the baby into 'being'

The women's style of pregnancy engagement as shown above, further sheds light on the consequential concept of not bringing into being. According to this concept, the women are observed to refrain from bringing the baby into being, as it ceases to exist within their mind and actions. While the baby may have been vicariously brought into-being within their N-NPs, they fail to do so within the vicarious insecure context and subsequent phantomised disengaged pregnancy.

Phantomised disengaging and playing the role of vicarious mother

On the basis of the nature of the women's pregnancy engagement, further consideration may reveal how the women play the role of vicarious mother within their NPs. The women's actions above demonstrate a disengaged pregnancy. The women were not experiencing feelings towards the pregnancy and baby, they were not making decisions regarding the pregnancy or thinking about the pregnancy, and they were not acting towards pregnancy-related content. Within the vicariously insecure contexts of their NPs, the women are not 'being' through proxy as within their N-NPs. Namely, the women were not feeling by proxy, not decisioning by proxy, and they were not acting by proxy. They are not vicariously mothering. Again, within their phantomised disengaged pregnancies and within such vicariously insecure contexts, the un-'being self is operational, as they refrain from mothering independently. Although they may prefer to 'be' mother vicariously, they are unable on the basis of their circumstances and context.

Phantomised disengaging and the docile nature of gestating

Finally, the women's approach towards gestating within the vicariously insecure and phantomised disengaged pregnancy can be considered. Again, it can be argued that the nature of the women's gestating is underpinned by docility. This time, it is deemed to be docile on the basis of the concept, relinquishing control via abdicating. Within their NPs, the women narrated stories of failing to undertake significant and purposeful action towards the pregnancy and baby, thus yielding the said concept.

7.7.2 Summation of the underlying processes towards N-NP and NP

The gestating phase of physical pregnancy allows an opportunity to see how the women manoeuvre around the pregnancy-related tasks among their N-NPs and NP. During this phase of gestating, the nature of their approach towards pregnancy content is again shown to be one underpinned by docility. This is observed as they relinquish control either via vicarious

enacting or abdicating. As the women manoeuvre around the physical pregnancy, they are seen to play the role of vicarious mother either by 'being' through proxy or via the un-'being' self. On the basis of the previously described processes of vicarious accessing, the physical pregnancy allows an opportunity to witness how the consequential established security context may serve as a platform from which they begin to engage or disengage with their pregnancies. The degree of engagement may range from vicarious engaging, to distorted engaging towards phantomised disengaging. Each type of engagement is attained by and maintained by specific actions, whether they are vicarious actions, misrepresenting actions or phantomising actions. The consequence to the type of engaging is either observed to be the bringing of the baby into-being or failing to bring the baby into-being.

In general, the women's approach towards the physical pregnancy is one defined by docility; as they relinquish control over the pregnancy-related tasks in both their N-NP and NP. Within their N-NP, they report relinquishing control via vicarious enacting. Here, their action towards pregnancy-related content is dictated by others. However, within their NP, they are observed to relinquish control via abdicating as they fail to undertake or fully undertake action towards pregnancy-related matters.

As the women manoeuvre around the variant physical pregnancy-related activities, more is observed on the women's 'being' as mother. The women are observed to play the role of vicarious mother in both their N-NP and NPs. Generally, the women are described as a vicarious mother as they prefer to mother vicariously through another. However, again the expression thereof is different in accordance to their N-NP and NP, with different parts of the vicarious mother being dominant with respect to the different pregnancies. Within their N-NP, the women are able to vicariously mother and they proceed to 'be' through proxy as their actions, decisions and feelings around pregnancy-related tasks are determined by others. Here, they are said to be acting-, decisioning- and feeling by proxy. However, although the women may prefer to mother vicariously, the un-'being' self appears dominant within their NP. With the absence of vicarious sources, the women are also observed to refrain from 'being' mother, whether it be acting towards, thinking about or feeling towards the foetus and pregnancy.

It is also evident within the physical pregnancy experience, that the women's contexts of security serve as a platform from which their degree of pregnancy engaging is determined. Within their N-NPs, the women reported significant vicarious security in the form of input,

initiation of activities, and support from meaningful relationships. However, in contrast to such vicariously secure contexts, their NPs either revealed an unconfirmed assumed vicariously secure context or vicariously insecure context. Within such contexts, the women fail to fully experience significant support, initiation and guidance. Interestingly, despite the women's need for vicarious security among their NPs, their stories still reveal how they may jeopardise obtaining such support within a vicariously insecure context. It would appear that the women's assumptions for accessing continues to play a role in this regard.

Distinction can also be drawn among the women's degree of engaging among their N-NP and NPs. The women's N-NPs are seen to present as vicariously engaged pregnancies. Here, they are able to participate in pregnancy-related activities via close reliance on other individuals. Among these pregnancies they are observed to employ specific vicarious actions. In this way, and as a result of vicarious actions, the women are able to accept the foetus and pregnancy; connect with the foetus; engage in prenatal baby and self-care tasks; anticipate a future for the baby; prepare practically for the baby; identify the baby and prepare for its birth; all by proxy. Consequently, and as a result of the input and efforts, the baby is seen to be brought into the women's minds and they are, thereby, considered to bring the baby into being.

However, it is the NPs that reveal a lesser degree of pregnancy engaging. Firstly, one plausible type of engaging among NPs is distorted engaging, where the women are only superficially seen to participate in pregnancy-related activities. While the women may be observed to employ some phantomising actions within this type of pregnancy as well, they are also seen to distort the pregnancy and foetus by misrepresenting actions. This may concern a variety of actions; however, the current data set reveals misrepresented contemplation of the foetus and misrepresented contemplation of the baby's gender. Moreover, most NPs were described as having very little participation within pregnancy-related tasks; via the type of pregnancy engagement described as phantomised disengaging. This type of engaging occurs as the women are unable to rely on vicarious sources to drive the gestating process of thinking about, feeling and acting towards the pregnancy and foetus. Moreover, they are seen to employ variant phantomising actions that render the baby non-existent within their mind, as if it's a phantom. The phantomising actions may include actions of numbing feelings; ignoring; deprioritising; clouding; redirecting preoccupation; procrastinating; maintaining-present past, or un-projecting futures. Subsequently, the women are not seen to act towards the pregnancy or baby; they fail to consider the foetus, accept the pregnancy, or connect with the foetus. They may negate anticipating and planning a future for their baby or engage in prenatal baby

and self-care activities. They may also cease to prepare practically for the baby and may refrain from identifying the baby or prepare for its birth. Among the NPs, whether it be a distorted engaged pregnancy or phantomised disengaged pregnancy, the women are deemed to negate bringing the baby into being, as it ceases to exist in their mind and lived experience.

This section revealed how the women may have engaged with their variant pregnancies on the basis of the available vicarious security and respective attaining and maintaining actions. The next section will consider the mother's labour and subsequent nature of confrontation with her newborn on the basis of the type of pregnancy engaging. It will be shown how each vicarious context and style of pregnancy engaging has a bearing on the manner in which the mother approaches the birth process and her newborn.

7.8 Labour and Birth

This section considers the women's experience of the labour process and birth in response to and in accordance with each type of pregnancy engagement discussed above. For each type of engagement, a unique reaction is shown to the newborn at birth. The women's stories in this respect concern their experiences as they realise they are going into labour, in managing the task of delivering the baby and finally their first encounter with the newborn after giving birth. Throughout the stories of this gestating event, similarities and distinctions can yet again be drawn between the women's N-NB and NB.

This segment does not introduce new concepts, however, the concepts already revealed are again reinforced as they are now observed to manifest within the labour experience. Moreover, the consequences of the variant concepts are revealed within this phase of gestating along with a consideration for the increasing intensity and persistence of variant concepts.

7.8.1 The labour and birth of the vicariously engaged baby

Up to this point, the data and constructed theory has shown that the mother's approach towards gestating among her N-NPs has been one underpinned by docility, specifically in the form of relinquishing control via vicarious enacting. She was also observed to play the role of vicarious mother via 'being' through proxy. Such enacting is possible as the processes of vicarious accessing allows for a vicariously secure context to be established. Within this vicariously secure context, the mother is able to act, make decisions and feel by proxy. Subsequently, the women were able to vicariously engage with their pregnancy; they were

observed to vicariously bring the baby into-being; to occupy their thoughts, and to experience the baby as a reality. This section will demonstrate the continuation of such patterns within the labour experience as well as the consequences of such engagement.

As the women narrated their experience regarding their impending labour for their N-NPs and the first confrontation of the vicariously engaged newborn, the women's stories continue to emphasise the involvement of others within that space of time. Llyn's emotional expression when speaking about the birth of one of her N-NBs was positive. She explains the reasons for this as being influenced by her family's actions of awaiting the arrival of the newborn. She attributes her happiness to her family's expectation for the birth of her child. So, vicarious security is indicated as well as feeling by proxy, as her positive emotional experience mirrors that of her family's.

Excerpt 7.86

Interviewer:

And when you saw this baby for the first time, what was it like for you?

Llyn:

I was like "Yoh!"

Interviewer:

I see you're smiling?

Llyn:

Yeah, I'm smiling. I was happy because even my father waited for my baby, everyone waited to see my baby ... it was nice.

Llyn

The women also narrated concern for the safety of their newborn among their N-NBs and demonstrated vicarious support and guidance from others as they learned to care for their newborn.

Excerpt 7.87

Interviewer: How did you feel towards the baby (referring to her first baby)?

Kim:

It was so small; I didn't know how to hold her but they teach me how to hold her ... I was so scared I was going to drop this baby, "Yoh, how must I hold it?" ... I didn't want to hurt her. When I was breastfeeding, the sister was helping saying no, hold like this and this and this (demonstrating with the use of her arms). She was so small; I was so scared, 2.5kg.

Kim

Within these births, the women also displayed compassion and feelings of protection towards their newborn together with an intention to comfort the baby.

Excerpt 7.88

Ria:

I was so happy. I felt happy to see that my child is alive and healthy. Especially the first child. I felt so happy ... when he cried I felt bad. But because I just gave birth and the baby cried, the nurses just took the baby away to wipe the baby down and dress the baby.

Interviewer:

So how did you feel when the nurses took the baby away when the baby was crying?

Ria:

It was like, it was like actually I felt bad. Like they didn't want me to make my baby not cry.

Interviewer:

Did you want to make the baby not cry?

Ria:

I wanted to yes, I wanted. I knew that if they just give me my baby, and if I hold my baby and I try to make the baby to stop cry, she will stop crying.

Ria

This section revealed the women's experience of the labour and confrontation of their newborn among their N-NBs and previously vicariously engaged pregnancy. It reveals how these births occurred within vicariously secure contexts and how the women were able to experience positive feelings towards the babies by proxy. Moreover, it also reveals as a plausible consequence to a vicarious engaged pregnancy, an experience on behalf of the mother of having concern, compassion, feelings of protection, and a willingness to comfort her baby. The next two sections will consider the women's experiences of their NBs as it follows a distortedly engaged pregnancy and phantomised disengaged pregnancy.

7.8.2 The labour and birth of the distortedly engaged baby

Up to this point, Ria's NP and distortedly engaged pregnancy was also conceptualised as one having been underpinned by docility. As she was superficially acting towards her pregnancy, she was deemed to relinquish control via abdicating in this regard. She was further observed to play the role of vicarious mother via the un-'being' self as she would refrain from 'being' mother independently. As a consequence to the processes of vicarious accessing, she was observed to operate from a unconfirmed assumed vicariously secure context. Henceforth, it was revealed that her manner of engaging with her pregnancy had been one described as distortedly engaged. She was not describing an experience where she was individually bringing the baby into being, or having it come to exist with full acknowledgement within her mind. While she was also observed to employ some phantomising actions, further misrepresenting actions were observed within her pregnancy, rendering her foetus a misrepresented object. This section reveals the consequences to this type of pregnancy relating and experience, as observed within the gestating phase of labour and birth. The

consequences can be observed in how the women may experience and emphasise a lack of vicarious support as well as the consequences of and continued misrepresentation of the baby.

It is notable to observe that the women emphasised a vicariously insecure context at the moment of birth among their NBs, whether it followed a distortedly, engaged pregnancy or phantomised disengaged pregnancy. Ria's NB early labour process reveals that the vicarious security status the women experienced may change at any time. Initially Ria presented with an unconfirmed assumed vicarious secure context, where she had been uncertain regarding her boyfriend's support for the pregnancy. However, during early labour, Ria became aware of her boyfriend's lack of support and rejection of her; which reportedly angered her. It is within this moment that the context of her pregnancy moved from an unconfirmed assumed vicariously secured context to a more certain vicarious insecure context.

Excerpt 7.89

... it was a Sunday in the midnight about 11 or 12. I started to have labour pains. When I had the labour pains, I just took my phone and phoned my boyfriend. Then, I told him that I'm in the labour pains now and I think the baby is coming. Then he just asked me, "So what must I do?". Eh, at the time I just got angry. I didn't know what I'm going to do. I just dropped my phone and he dropped his too. Then the labour pains continued.

Ria

Her narrative below reveals her expectations and need for vicarious input at birth, so much so that she surmises that the offence would not have occurred had she received support from her boyfriend.

Excerpt 7.90

Interviewer:

So, what could have happened for things to have played out differently then (referring to not taking the life of the newborn)?

Ria:

Eh, I was expecting, when I was in labour, I was expecting the father to come and fetch me and go with me in the clinic. All I wanted was him to help me.

Ria

Moreover, her narratives yielded intensifying emotional expression in response to the lack of support and feelings of helplessness in the face of lacking vicarious support.

Excerpt 7.91

Ria:

My mind was running, running, running, angry. My mind was all over the place.

Interviewer:

So why do you think you felt so very angry?

Ria:

Yeah, I felt very angry, just because I wasn't expecting that to happen. And, even him, he knew that, he knew that there was nothing I was going to do without him helping me. He knew very well.

Ria

As the women compared their NB to their N-NB, all the women, like Ria, mentioned and emphasised having given birth alone and having felt alone at their NB.

Excerpt 7.92

Interviewer:

And with the birth of your other two children, how were those birth experiences different to this birth (referring to the NB)?

Ria:

It was different because at the first time when I first gave birth, although the father of the baby was not there, my mother was helping me at the time. Yeah. And the second

time, my sisters were there. But at the third time (referring to the NB), I was just alone ... I gave birth alone (emphasis on word) in the house. I had to help myself.

Ria

The preceding paragraphs all demonstrate the consequences of lack of vicarious security at the time of early labour. It reveals Ria's expectation that she would be unable to manage without the aid of her boyfriend. In responding to this, intensifying emotional experiences are revealed regarding feelings of helplessness, anger and loneliness.

The women's perceptions of their foetus may have further consequences for the labour experience. As mentioned earlier, Ria had misrepresented the baby as an object that would serve the purpose of winning her love from her boyfriend and strengthening their relationship. However, it is at the moment of birth when Ria is confronted with the reality that this would not be the case. To this point, Ria attributed the neonaticide as a means of getting rid of the misrepresented object that would have caused her to remain involved with the father of the child. The reader's attention is drawn to how Ria continues to focus on her action towards the boyfriend, and not her action towards the child. In this sense, the child remains misrepresented as it continues to represent her connection with her boyfriend, and not a baby in and of itself.

Excerpt 7.93

Ria:

That's when I realised, when I gave birth, that's when I realised, when all the things came to my mind, that even while I was pregnant he wasn't caring about the baby. So, it means he didn't love the baby. So, that's the thing that made me do what I did.

Interviewer:

Okay, so by you taking the life of the baby, what did you think that will do?

Ria:

Okay, I didn't think of anything at the time. I just thought that for me to kill this baby everything will be alright. I didn't think of anything.

Interviewer:

What needed to be alright?

Ria:

That the child will be dead. And I will not have to be still involved with the father of the child. So, I will be alright.

Ria

It is evident that Ria's action towards the baby is both a consequence of a misrepresented baby and that the baby continues to be misrepresented at the moment of birth and neonaticide. Below, Ria elaborates on her experience of the baby as a misrepresented object, even its cries at birth served as a reminder of her relationship to her boyfriend, while neglecting to focus on the baby in and of itself. She expresses that she had hoped she would have refrained from arguing with the father of the baby and that she had acted towards the incorrect object within the moment of birth.

Excerpt 7.94

Ria:

I realised it (referring to the father not caring for her baby) when I already gave birth and saw the baby crying. And all the thoughts came back that the father of this baby told me 'what must I do?' and I saw that he doesn't like this baby. So why must I keep it? Why must I keep the baby?

... all that time from one month to nine months I didn't want me to fight with the baby's dad when the baby is coming. And it just happened. And it happened on the wrong time. And I think that there was the wrong person in front of me. A child.

Ria

Along similar lines, Ria's 'misrepresentation of the neonate' in the above statement links with how she experienced the baby emotionally at the time of birth. Ria reflects on failing to regard the newborn as a baby, merely perceiving it as a 'thing'. As a consequence, she describes lacking compassion for the baby and neglecting to console it as within her N-NBs (see Excerpt 7.88).

Excerpt 95

Ria:

At that time, okay, okay, I didn't feel anything towards the baby. Okay, it was like, it's not even a baby to me.

Interviewer:

So, what was that like?

Ria:

It was just like a thing. It wasn't like a baby.

Interviewer:

If it was a baby, what would that have felt like, if it did feel like a baby?

Ria:

I would have felt sorry for the baby. Because the baby was crying. I would have felt sorry for the baby and maybe just held the baby.

Ria

Moreover, in not seeing the baby as a child, Ria intended to use the baby as an object to punish her boyfriend. Not only do her actions reveal a misrepresentation of the newborn, but they also indicate the concept of non-verbal communicating. Here, the baby was used as a means to communicate to her boyfriend that his actions towards her had been wrong.

Excerpt 7.96

Ria:

... I wanted to punish the father of the baby.

Interviewer:

Alright, can you explain more on how killing the baby would punish the father?

Ria:

Okay, okay, umm, actually, I thought that if I kill the baby everything will be so hard for the father of the baby. He will not, I thought that everything will not go fine for him. And he will always keep asking questions about of what he said to me on that time. Yes. I wanted him to know, to know, to know what he said to me was not right.

Interviewer:

Alright, so you thought if you kill the baby it would communicate those things to your boyfriend?

Ria:

Yes.

Ria

This section revealed the experience of labour and confrontation of a newborn of a NB and previously distortedly engaged pregnancy. As with the phantomised disengaged pregnancies discussed below, the consequences of lacking vicarious support during labour was shown. Increasing emotional expression was observed with feelings of helplessness, anger and feeling alone. Consequent beliefs of being unable to manage the situation independently was further emphasised. Moreover, although Ria's responses are similar in some respect to that of the phantomised disengaged pregnancies below, her unique case offers an opportunity to see a slight variance and outcome in response to misrepresenting the neonate. Previously it was shown how Ria had only superficially engaged in thoughts around the baby and that it had not fully come to exist within her mind. Instead, and as a result of misrepresenting the foetus, her baby represented a tool to aid her relationship with her boyfriend. Even at birth, the presence of the baby and the sound of its cries served as a reminder of her disintegrating relationship with her boyfriend. Subsequently, as per manner of her discussion, she's observed to act towards the relationship by taking the life of the newborn and not directly towards the baby. In fact, by consequence of the misrepresented newborn, she did not experience the baby as a child. Subsequently, she describes not acting towards it as a baby as she had within her N-

NBs. Ultimately, in the act of neonaticide, the baby was misrepresented again, this time as a tool to non-verbally communicate her displeasure and intention to punish her boyfriend.

While this section emphasised the plausible consequences of a misrepresented baby within a distortedly engaged pregnancy at birth, the next section will focus on the consequences of a phantomised disengaged pregnancy.

7.8.3 The labour and birth of the phantomised disengaged baby

Similar to the distortedly engaged pregnancies, it has been shown that the phantomised disengaged pregnancies are underpinned by docility; in the form of relinquishing control via abdicating. It was also shown here that the women play the role of vicarious mother via the un-‘being’ self through refraining from ‘being’ mother independently. Up to this point it has additionally been revealed among such pregnancies that the vicarious accessing processes often result in the establishment of vicariously insecure contexts. Subsequently, the women are observed to employ phantomising actions, rendering the baby non-existent within their mind and experience. A consequence of this phantomised disengaged pregnancy is that the baby is not brought into being by the mother.

This section reveals the consequences to the phantomised disengaged pregnancy during this gestating phase. From the women’s narratives, consequences are observed for their labour, the birth of the neonate and their confrontation with the newborn. The consequences can be observed in the face of lacking vicarious security as well as reports on an increased awareness of vicarious insecurity at the time of birth. Further consequences of the previously utilised phantomising actions are observed for the moment of confronting the newborn while the use of phantomising actions are further shown to gain intensity and persist in variations at the time of giving birth and taking the life of the baby. Finally, it will be revealed how the persistence of such phantomising actions render the baby non-existent at birth as well as the act of neonaticide itself.

In describing their early labour experiences among their NBs, the women emphasised the lack of vicarious security within these contexts. The women especially stressed the experience of rejection and abandonment prior to and during the early labour experience. The case of Ann is utilised below to demonstrate the experience of several abandoning sequences and the extent to which this experience forms part of her NB narrative. The excerpts will further demonstrate how the abandoning experiences are linked with the other concepts constructed in this theory,

namely the processes and assumptions for vicarious accessing. Finally, concerns regarding being alone as a consequential emotional experience is emphasised.

Below, Ann describes the first abandoning event as her husband had moved out several days prior to her giving birth.

Excerpt 7.97

... but just before that night, just before I can have that baby, its maybe like three or four days before I had the baby and he says to me, you know what he's going to stay with his mom. I was already nine months by then So, he went, he left me alone and he went. Just before I can have the baby.

Ann

The next event in the sequence of abandoning events occur when Ann realised that she had been in labour. It should firstly be mentioned that the abandoning event transpires among a multitude of interacting complexities that refer to the concepts constructed within this theory. Firstly, Ann demonstrates contemplating vicarious accessing and emphasises her experience of fearing judgement and anger. She also demonstrates the concept unconfiding communication and withholding communication; Ann expresses being unable to go to her parents and sister to assist with the labour to the extent that she does not inform them that she was in labour. Vicarious insecurity is indicated here as she does not perceive her family as being available to aid in specific reference to her labour.

Excerpt 7.98

Interviewer:

Alright, and can you maybe take me to the day of the birth of your baby (referring to the NB)?

Ann:

Okay. (Long pause). Umm. My small sister was still at home and my parents was there and my brother was there Everyone was sleeping in the night (slower rate and lower tone of voice than previously), everyone was fast asleep. And umm, maybe it was like 11 in the night. My kids were sleeping in the room ... and umm, umm I felt pains coming on and stuff. Yeah I was just feeling the pains, labour pains coming, coming. Now because I was not talking to my parents, I didn't know, (interrupts self) you must know, I always had this fear for my dad. You know, because I used to get in trouble when I was small. I always had that fear you know? I was always the one getting shouted at and getting a scolding. I always grew up with that fear now what is my dad going to think. Although I was an adult, I was living under his roof and I was always scared. So, they was sleeping and they wasn't talking to me at that time so I didn't go to them. I went to my sister. Because my sister, I didn't have a phone or anything, so the first person I could think of calling was him (referring to her husband). So, I go to my sister, we wasn't close at that time, but I go to her and she's sleeping and I tap her. And I say, "You know what?" (interrupts self) I didn't even tell her I'm having labour pains. I say, "You know what?" "Please lend me your phone, I need to phone my husband". She said to me, "But umm, oh I don't have much airtime, now you want to use my

phone?” And I say “Please, please”. You must know I’m now in so much pain. And umm, she gives me the phone and carries on sleeping.

Ann

As Ann continues her narrative regarding the early labour experience, the next abandoning event occurs as her husband fails to respond to her need for support.

Excerpt 7.99

And umm. I phone him (referring to her husband) and he answers the phone. I tell him, “You know what? I’m in labour, please phone the ambulance for me. Please send the ambulance for me.” Because I wasn’t speaking with my parents so I didn’t want to trouble them. So, he’s the only person I could think of. So, I say, “Please phone the ambulance”. He says to me, “Why are you phoning me?” He told me, “Why are you phoning me?”. And I think his mom, because he was talking quite loud, and I think his mom, I don’t know, I heard a voice in the back say, “What’s wrong?”. And he says, “She says she’s in labour, she wants me to phone the ambulance.” And she says, “Now why is she troubling you? She has got her parents there, why don’t she call them?” Then he says to me, “Don’t call me.” And he cut the call. You know?

Ann

It is interesting to observe that the women may maintain their experience of vicarious insecurity on the basis of their actions. Ann demonstrates this as she reflects on her actions around the time of early labour.

Excerpt 7.100

But now I wish I did go to my parents at that time. I know they would have helped me. Obviously, they are not going to turn a blind eye. You know? But at that time, I don’t know, I just didn’t feel comfortable going to them.

Ann

Ann’s responses also indicate the concept of following communications within this experience, as she expects to engage in conversation on the basis that it should be initiated by her parents. Ultimately, this serves as an additional maintaining factor in failing to seek assistance from her parents.

Excerpt 7.101

Interviewer:

So, when you realised you were going to give birth, you didn’t tell anyone? What do you think made you not want to wake anyone up or not to involve anyone?

Ann:

It was like I said, I wasn’t talking to them and if they don’t want to talk to me then I will not make the first move. I will always wait for them.

Ann

While Ann elaborates on her experience in this regard, her story reveals her fears and concerns about being alone and the impact of such lack of vicarious security in the early labour process.

Excerpt 7.102

Then he cut the call, you know? So, it was like I couldn't handle that. Him cutting the call on me. You know? And that I would be on my own in this. Not even to phone the ambulance from where he was. You know? So, that must have all just got to me at that time.

Ann

As with the distortedly engaged pregnancy, all participants emphasised the consequences of the lack of vicarious security during their pregnancy and labour on the eventual commission of the offence. Below, Ann specifically indicates that she would have refrained from taking the life of the newborn if her parents had been more supportive (vicarious security) and if her family had been accepting and excited for the baby (accepting by proxy). Her thoughts also reveal her need to have confided in her family and to have discussed her pregnancy with them. In this sense, the consequences of unconfiding communication and withholding communication are indicated for the labour encounter.

Excerpt 7.103

Ann:

I just felt like, if I had that support from both sides, you know from my husband and my parents, maybe in a way I wouldn't have done what I had done had they been supportive towards me, you know? ... I think that if they were excited about the baby maybe in a way I would not have done what I had done. I would have thought they would help me with the baby and they would be okay to help with the baby. Maybe things would have turned out different. I don't know whether maybe, in a way, I was kind of like scared or trying to please again other people. Now it's like everyone is angry with me because I'm pregnant again. I think if maybe I had more support maybe things would have turned out differently. Because then maybe I could confide in them. And talk to them about my pregnancy. And then when I was in labour, giving birth, I could have went to my parents. You know. But because I wasn't speaking to them and stuff I just couldn't go to them at that time. I just couldn't feel that they will do anything for me. You know? ... But umm, when the social worker came home she came to talk to my family (referring to the sentencing phase of the trial) ... because when the social worker asked, she asked a whole lot of questions, but when the social worker asked was she (referring to her mother) there for me when I was pregnant. Was she there for me? A lot of hard questions you know? And my mom just sat down and thought. She sad, I admit, I haven't been there for her. I haven't been there for my daughter. And in a way because of them I did what I did.

Ann

While the above yields the consequences of vicarious insecurity and the intensifying experience thereof to the birth experience, it is also necessary to consider the impact of

phantomising actions in this regard. Previously, the women narrated having refrained from engaging in tasks related to their pregnancy; secondary to negating the contemplation of the baby in their mind. Subsequently, the women narrated feelings of shock and unpreparedness during the early labour. Incidentally, Sam reflects on feelings of surprise during her early labour. Despite having carried the baby full term, she mentions feeling shocked once the labour commenced.

Excerpt 7.104

Sam:

... and now it's the time for me to get my baby ... I was like it's a pain, its pain ... I'm alone now. The water its coming now ... the time the pain started was at six o' clock in the morning, like the pains after five minutes, I wasn't thinking the pain was the real thing. I say to myself I want to bath. I go out to the bath, then my water broke. I was shocked, I was shocked and nobody was there.

Interviewer:

You felt surprised?

Sam:

Yes.

Interviewer:

Was it not time for the baby to come yet? Or was it nine months already?

Sam:

Yes, it was nine months.

Sam

Within the next narrative, Ann reveals that she had felt prepared and ready for her N-NBs, but that the nature of the NP resulted in her failing to prepare and to feel ready for the birth. She attributes this to problems with her family and being alone (vicarious insecurity), seeing to the kids and being busy (deprioritising and maintaining present past) and not thinking about preparing (un-projecting futures). Her statements, therefore, reveal the impact and consequence of vicarious insecurity and phantomising actions for the birth.

Excerpt 7.105

I think for my first baby and my second baby I was excited and ready and waiting for this baby. But I think that time (referring to the NP) I was not in good terms with my family and his family. And so, it's like I've been on my own. Seeing to the kids. So, it's like it never crossed my mind to get ready because I was so busy. So, I would just come home, do what I need to do, and go work the next day. So, I never really thought about packing and stuff (referring to the packing of a hospital bag). I was too busy, you know? ... I don't think I even thought about all of those things. I was just working and seeing to the kids, worrying about my husband, where he is. Financially it was such strain on me and my parents wasn't talking to me, so yeah, it's like, I don't even think about packing a bag for the baby.

Ann

The women's narratives around the time of birth revealed a further persistence and culmination of phantomising actions directed towards the newborn, the birth, as well as the act of neonaticide. The phantomising actions of clouding, un-acknowledging, numbing feelings, and un-projecting futures again appear to feature here, with significant intensity. The experience of such phantomising actions at the time of the offence will, therefore, be explored next.

The excerpts that follow demonstrate the different properties of clouding within the gestating event of labour and birth. Clouding is firstly indicated in Tika's experience of her NB as she describes the lack of clarity within the NB situation.

Excerpt 7.106

Tika:
I was like in a blur.

Tika

As a further presentation of clouding, the women seemed to experience difficulty in reflecting upon their thoughts and experiences when they first encountered the baby at the NB.

Excerpt 107

Interviewer:
Okay, but when the baby came out for the first time, what did you think about the baby?
Like what was it like to see the baby?

Kim:
I don't know. I don't know. Because there are other things I always ask myself. What's happening really? What was I thinking? But I can't remember. I want that answer but I can't remember.

Kim

Clouding is also indicated as the women vaguely describe experiencing something as being wrong at the time of birth, without necessarily attributing it to anything specific. Ann's excerpt below indicates the vague experience of clouding.

Excerpt 7.108

As soon as the baby came out, I never even heard a cry, all I know is like for me at that time something is wrong. I'm doing something, something is wrong. Even when the baby was there, something is wrong

Ann

Sam reflects on a seeming sense of confusion, also indicating the concept clouding, as she describes her mind as "mixed" when confronting her newborn at her NB.

Excerpt 7.109

I was shocked and you know if you got the birth pain, the mind it's like you are not right. And I was doing it myself to give birth ... and I took my mind, my mind was like I was in trouble. My mind was mixed. I killed him there (pointing to her throat). I cut a small cut there.

Sam

Sam's further statement also demonstrates clouding, this time, in the form of experiencing her thoughts as having been "blank". She clarifies that "blank" for her was experienced as if she was not thinking about her actions.

Excerpt 7.110

Sam:

The day I killed my baby, if I'm not mistaken, the time I kill my baby it's the time I was blank in my mind ...

Interviewer:

What do you mean your mind was blank?

Sam:

Not thinking at all. So, if you are doing the thing (referring to the act of neonaticide) you are not thinking. I was not in my senses. And you know if you feel the pains and now you are alone you don't know how to do the things.

Sam

The concept and experience of clouding may also gain intensity with a peak described as losing control. Here the women define this experience as a snapping mind. The experience thereof concerns the build-up of confusion, experiencing multiple vaguely defined thoughts and feelings to a point of taking the life of the newborn.

Excerpt 7.111

Ann:

... I didn't, what I was thinking, my mind is mixed up with so many emotions and the things I've been going through (speaking at a rapid pace). I think it just took a toll on me, I think I just snapped. And now I think, maybe something triggered you know? And this is what I've done ... I know within myself something snapped inside of me. Something triggered off. I don't know what it is ... But at that moment I just lost it.

Ann

Based on the abovementioned descriptions, the women emphasised the experience of the birth experience lacking clarity, difficulty reflecting upon the experience, a vague experience of something being wrong at birth together with feelings of confusion and negating to think. While the experience of such clouding was emphasised by the women, further phantomising actions were also indicated.

Previously, it was shown how the mothers had not brought the baby into being among the phantomised disengaged pregnancies and that it had ceased to fully exist within their mind. This appears to have consequences for the first encounter with the newborn as well. Persisting along similar lines, it is within the stories of confronting the newborn for the first time that the phantomising action of un-acknowledging was indicated yet again. Here, the women discussed being unable to acknowledge the baby in their presence. Sam reflected on being unable to “see” the newborn and that her consequence thereof was one where she failed to care for it as a child.

Excerpt 7.112

... That time, you know I didn't see the child properly. I felt I didn't care it was a child.
Sam

The excerpt below elaborates on a similar experience where the concept un-acknowledging takes the form of failing to notice the newborn or an experience where the child was not experienced by the mother as her own child.

Excerpt 7.113

Interviewer:

So, when you saw the baby for the first time, what was your reaction like?

Ann:

I didn't think anything about it. It's like I didn't even see it's a baby. I didn't even take notice of her. You know? ... It was like I wasn't seeing the baby, I can't tell that (interrupts self), but that time it's like, it wasn't my baby. It's like I don't know what came over me. What would make me do that. I think with everything that has happened so far, you know, with having these problems with my husband, my parents, I wasn't even thinking properly at that time.

Ann

Moreover, below Ann elaborates on her experience of un-acknowledging the newborn as a baby as well as failing to feel something towards the baby. In this respect, the accompanying concept of numbing is indicated with the consequence of a phantomised newborn.

Excerpt 7.114

Ann:

It's really hard because at that time I wasn't feeling anything. I wasn't feeling anything for this baby. I didn't even see a baby. It wasn't like there was a child in front of me.

Interviewer:

If you were to see a baby, how would you feel differently towards a baby. You say it almost wasn't like a baby, so if it was a baby, what would that kind of feeling have been? Or what would it look like?

Ann:

Maybe if I would have acknowledged a baby. Maybe I would have called off for someone, my parents, because I know they would have come. But at that time, I didn't want to call them. But I know if my eyes had seen a baby I would have called for help.

Ann

Upon direct questioning, the women reflected that the experience of un-acknowledging the newborn as their own child or as a child at their NB had been specific to their NB. The women indicated they had been able to acknowledge the baby as their own at their N-NB. Sam's response can be seen as an example of this.

Excerpt 7.115

Interviewer:

So, when you saw the baby for the first time, what was going through your mind?

Sam:

If I tell you truth, I didn't know the child properly. I didn't know ...

Interviewer:

So, when you saw the child it felt like you don't know this child?

Sam:

I don't know the child. If you know your child you would say yeah, it's my child.

Interviewer:

For the first pregnancy, when you saw the baby for the first time did it feel like you knew that child.

Sam:

Yeah, the first time I saw my child it was a child and I see this, it's my child.

Sam

Based on the exploration of phantomising actions utilised in the previous sections, it is evident that the baby was phantomised during pregnancy, existing in the mother's mind only as a phantom; or something that is not real or fully experienced. However, the persistence of phantomising actions reveal how the baby also ceases to exist for the mother at birth. Here, the newborn is not seen for what it truly is, a child and the mother's own child. While it has been revealed how the phantomising actions may contribute towards a phantomised baby during pregnancy and at birth, the following paragraphs will further reveal how phantomising actions may phantomise the act of neonaticide. Here, the act is not experienced for what it is, namely, that of taking the life of the newborn. Ultimately, this has a further bearing and contribution towards the act.

The women may begin to phantomise the act of neonaticide via the phantomising actions of un-projecting futures, clouding, and un-acknowledging. At the time of the NB, the concept of un-projecting futures speaks to the mother's failure of considering the consequences of any action towards the baby, as the women report experiencing as if they were only thinking for the moment.

Excerpt 7.116

Ann:

I was only thinking about that moment.

Interviewer:

Help me understand what you mean by that?

Ann:

I was thinking of nothing else. At that time, it was just like being scared. It's just like I'm scared for myself and I feel like if I don't get rid of this baby or something my husband is going to leave me or my family will get so mad at me it's just that moment. You know?

Interviewer:

So, was it like a very impulsive kind of moment?

Ann:

Yeah

Ann

Here, Ann reveals acting for the moment; an impulsive action for how she had felt within that moment. Below, Ann elaborates further on her experience of negating to fully consider the consequences to her actions around this time.

Excerpt 7.117

... I didn't have a decision. It wasn't like I, must I do this, or mustn't I do this. I just did. I didn't question myself. I didn't ask myself anything. Whether I must do it, whether it's wrong, whether people are going to find out, nothing. At that time, I felt like I wasn't doing something wrong. I was so numb. I didn't see it's a baby, it's my baby, I'm doing this to her. I didn't ... I don't think I would have done what I had done if I thought first about what I was doing.

Ann

Moreover, even the method selected to take the life of the newborn may be impulsive without much consideration for the approach to be employed. Ria reflects experiencing as if she was not thinking at the time, yielding an accumulation of approaches, including clouding and un-projecting futures.

Excerpt 7.118

Interviewer:

So why did you choose this way to take the life of the baby? You put the newspapers in her throat? Why did you choose this way?

Ria:

Okay, I didn't think of anything at the time. I just saw the papers and took the papers.

Ria

Similarly, Ann's statement reveals the consequent impulsive action towards her baby following her previously narrated approach of clouding and un-projecting futures.

Excerpt 7.119

Interviewer:

Why did you choose this method of taking the life of the baby?

Ann:

At that time, I didn't, when I gave birth, it didn't come to my mind like, I mustn't do it like this I must do it like that. It just happened. I just looked around the bathroom and I saw this t-shirt and then I just used that, you know? And I didn't like, think about what, which way I want to do it or what I want to do.

Ann

In addition to un-projecting futures and the consequent impulsive action, clouding and un-acknowledging was narrated again at the time of taking the life of the newborn. This time it was shown to feature regarding the negation of focused contemplation of the wrongfulness of the act. Here, the women may have experienced a vague sense that that which they are engaging in is wrong, but the experience is clouded in that they report as if they are unable or unwilling to fully acknowledge and experience the wrongfulness thereof.

Excerpt 7.120

There was some washing in the bathroom. And there was a t-shirt of my other son's and I took that and I strangled the baby (speaking in a quiet voice). At that time, I didn't think it was wrong what I was doing Now, it's like, in a way now, in my mind I know I'm doing something wrong, but also in a way it's also like I'm not doing something wrong.

Ann

Although extending beyond the purpose of this thesis, it is noteworthy to observe the extent and persistence of phantomising actions immediately after and far beyond the act of neonaticide. It was elected to include this aspect of the women's experience here, as it sheds light not only on the profound impact of it on their capacity to commit the offence, but also on the management of their life afterwards. The following section will reveal the consequences of phantomising actions in phantomising the act of neonaticide itself. The women negate engaging in content pertaining to the act. It is observed here that the act is phantomised, as the women are able to proceed with life as if the act had never occurred. The phantomising actions of numbing feelings, moving towards un-acknowledging the wrongfulness of the act and ignoring the reality thereof, clouding, as well as maintaining present-past are observed.

Following the act of neonaticide, the women told stories about how their emotions had navigated from the intensity described previously, as within the experience of their snapping mind, to numbness yet again. Ann demonstrates this experience below.

Excerpt 7.121

Ann:

When I gave birth the same time, then it was fear. But when I, then I started panicking, I can't explain why I was panicking. Then I strangled the baby. Then I felt numb. Afterward. You know? I just, I just felt numb I felt nothing at that time but at first I felt fear. And scared about something. But I don't know what I was scared of.

Interviewer:

So, in the moment that you strangled the baby, at that point you were still feeling fear?

Ann:

A little bit, yeah a little bit.

Interviewer:

And then after that you felt numb, there was nothing?

Ann:

Yeah.

Ann

Ria describes the extent of her experience, with her feelings returning to the same status as before, as if no significant event had occurred.

Excerpt 7.122

Interviewer:

What did you feel like after you took the life of the baby?

Ria:

After I killed my baby I didn't think anything, I didn't feel anything. It was like usual.

Yes.

Interviewer:

Like any other day?

Ria:

Yes.

Ria

Via numbing feelings, it is observed that the experience of the act was being phantomised, as the women were able to move closer to an experience as if the event had not occurred.

Moreover, after the act of neonaticide, all of the women told stories about hiding the body of the baby, whether it be in the cupboard, a bin, under the bed, within a self-dug grave, or in one of their other children's school bags. The women also reported cleaning up after the act and falling asleep shortly thereafter. Although several functions may be plausible, the women appeared to hide the baby to obtain a phantomising state of un-acknowledging the wrongfulness of the act. Below it is observed that Ann acknowledges experiencing as if she had done something wrong to a certain extent. However, it would appear that she rushed to clean the bathroom and hide the baby in a shopping bag as if nothing had occurred and she had not done something wrong.

Excerpt 7.123

Ann:

I strangled the baby and there was a packet laying in the bathroom ... I took that packet and I put the baby inside (speaks softly, looking down and appearing ashamed). You know? (long pause).

Interviewer:

Why did you put the baby inside the packet?

Ann:

I don't know, it's like I want to hide her away you know? I put her in the packet and then I took her with the packet and I put her in my wardrobe, in the drawer (statement was made in a soft surprised tone). And I cleaned the bathroom and everything. It's like I never had a baby there. I left that bathroom clean, clean, clean ... I guess, in that moment, like me thinking like I'm doing something wrong, so it's like I want to clean up the bathroom and rush and do everything. Like I told you before, I rushed I cleaned up everything and nobody would say I had a baby in there. Then it was like I did nothing wrong because like I said, I went afterwards and just slept.

Ann

The consequence of the above appears to be one of phantomising the act, as the women describe that it had been as if there had not been a baby there. Subsequently, the women are able to persist with the phantomising actions of either un-acknowledging the wrongfulness of the act, or secondly, to ignore that it had happened. The phantomising action of ignoring in this respect is revealed by Ria's statement below. Ria comments on ignoring or avoiding thoughts about the baby following the act.

Excerpt 7.124

Interviewer:

What did you do after you gave birth and after you placed the baby in the bin, what happened then?

Ria:

I cleaned the floor and went back to sleep.

Interviewer:

And when you woke up? What kind of thoughts were going through your mind?

Ria:

Nothing was going on. I just woke up and continued with my work.

Interviewer:

Did you actively try to avoid thoughts about the baby or was it just that you were not thinking about it?

Ria:

I was avoiding to think about it. Yes.

Ria

Similarly, Ann's statement below yields the experience of the phantomised act by going through the following day as if the act had not occurred.

Excerpt 7.125

Interviewer:

And when you woke up that morning, what was the first thought that came to your mind when you woke up?

Ann:

It was nothing. It was like a normal day. And umm, I was bleeding now and I put on a pad. It's like, I'm just menstruating, you know? Not that I had a baby. Now that time I didn't know that I have a baby and that the baby is in the cupboard. Nothing, I don't even know the baby is there.

Ann

Despite hoping to return to life as before, the women reveal attempting to maintain a state of having phantomised the act in spite of potential physical reminders of the act. Again, this is attained by phantomising actions, whether it be clouding or un-acknowledgement. Below, Kim demonstrates an experience of disbelief regarding her actions and this time clouding the act is indicated as she vaguely experiences that she had committed the act but reflects on responding to reminders of it with a sense of disbelief and apparent un-acknowledgement. An oscillation between disbelief and un-acknowledgement is demonstrated. She also demonstrates a sense of confusion as she responds to the reminders, all while attempting to continue with her daily routine as before.

Excerpt 7.126

Kim:

The last thing I remember is when I put the baby in the school bag and everything that I put into the small cupboard. Then I slept and the next morning I woke up. I bathed my son and I bathed myself and after that I go to work, with that bag (referring to the baby containing the corpse of her baby). When I got to work, I was alone that day. My mind was coming back again, what is in that bag? I was already forgetting what was happening. When I looked, it was like "yoh, it's a baby". When I check my trouser, I'm bleeding, "what's happening?" Then I check that baby properly, and it's not breathing. Its dead. Then I catch a taxi, I go to the police station. When I reach it I say no man, I can't do this to myself. "What's happening?" I take the taxi back, going back to work. I stay there, stay there until I knock off. When I knock off I go with my parcel again (referring to the school bag containing her baby's corpse)... There was a small bridge. There is a large dustbin and I put it there and I go away. It was at night. Tomorrow, they find that baby. Find that baby. There are people coming to the shop with photos I say, "Show me that baby". They show me, so cute, cute baby girl. And when my mind comes back again, the school bag, its mine. And there's evidence again there, there's socks, the socks is mine. So, when other people show other people the photos, they send me the photos too. When I come home my aunt say, "Yoh they find a baby on the bridge. Don't you know this baby? And these socks? And this school bag?". I touch my head, that thing comes again, it's like every minute it comes again. I say I have a headache I must go sleep. When I reach my room I say, "Sjo, really, really, really did I do it? Did I hurt my baby? Why?".

Kim

Ria's experience in this respect is unpacked below and she reveals that, along with the hiding of the baby and checking on it, she did not experienced significant feelings. Her experience was like any other day. Her actions indicate numbing feelings and also the clouding of the reality and consequences of the act itself as well as the wrongfulness thereof. This also reveals the concept of her phantomising the act and returning to life as it had once been.

Excerpt 127

Interviewer:

You said you put the baby in the basket and left it there for about ten or 11 days. Why didn't you get rid of the baby?

Ria:

I didn't know what to do with the baby actually. It didn't come to my mind to do something with the baby.

Interviewer:

You decided to leave the baby there?

Ria:

Yes

Interviewer:

Did you ever think about the baby there in the basket?

Ria:

Sometimes I went there to lift the basket to see if the baby is still there.

Interviewer:

Were you hoping that maybe the baby wasn't there? Or why were you checking if the baby was still there?

Ria:

Eh, eish, actually I don't know. I just felt that I should just check. Just check. I don't know what for.

Interviewer:

And when you see the baby is still there, what would come to your mind?

Ria:

Nothing would come to my mind. I would just leave it there and I would sleep. And after I wake up I would clean my room and see if the baby is there. And continue to do my work. Yeah. Nothing came to my mind.

Interviewer:

So, when you picked it up and would feel the baby is there, how would you feel inside?

Ria:

Actually, I didn't feel anything. I didn't feel anything. Actually, it's like I didn't, it was like I didn't know it was wrong. It's like that. I didn't know it was wrong.

Interviewer:

What do you mean wrong?

Ria:

It was feeling like I didn't know that it was wrong for me to keep the baby there. It's like I didn't feel like I did something wrong. I didn't feel anything. Everything was just fine. Yeah.

Interviewer:

Do you mean it felt just like any other day?

Ria:

Yes

Ria

The women emphasised the notion of the act not having “felt” wrong to them. Amy, who dug a grave and buried her baby shortly after the act, demonstrates clouding the wrongness of the act while burying her baby. She describes the experience of confusion and a sense of the situation as being acceptable.

Excerpt 7.128

Interviewer:

When you put the baby in the grave, how did you feel?

Amy:

Like my mind was not working anymore. It was not working anymore. Like I was confused. Like everything now is okay. Even though it was wrong, everything for me is right now. It's like everything I did was fine to me.

Amy

Following significant exploration regarding this matter, it was my experience that the women were able to appreciate that taking the life of one's newborn would be wrong, however, the manner of their experience denotes a clouding of wrongfulness. In this sense of the concept, there appears a certain degree of emotional and conceptual distance from the act and also its wrongfulness; as the experience remains vague. Ann demonstrates the vague notion of having done something wrong without being able to fully experience this awareness with conviction.

Excerpt 7.128

Ann:

... I didn't realise what I had done. I didn't think it was anything bad. I did think it was something bad but not really actually remembering what I did ...

Interviewer:

So, was that the first time when it felt like what happened was real?

Ann:

Not at first, when afterwards when I went to the hospital, I knew I did something wrong. But I never really acknowledged it. But in a way, I knew I did something wrong but in another way, I was so calm, you know (appearing surprised at the notion of feeling calm)? So now it's like no I didn't do anything wrong. But then another part of me is knowing I did something very bad.

Ann

In addition to clouding, the women also demonstrated other behaviours where they persisted with phantomising actions as a means to avoid confrontation with the reality of having taken the life of their newborn. Kim demonstrates this below as she reports avoiding her baby's funeral in an attempt to ignore the reality of the act.

Excerpt 7.129

Kim:

They told me, we are going to fetch that baby and we are going to bury it. If you want to come you must tell the police and they will let you come. I say no problem; I don't want to come. I don't want to see what I have done

Kim

Another phantomising action with the aim of living life as before is that of maintaining present past. Ann describes below returning to the same activities as she had prior to the offence, to the extent that she had experienced as if she had forgotten about the offence.

Excerpt 7.130

Ann:

Um at that time I didn't really think now about what I did. Like I forgot about that now. And now my mind is on him (referring to her husband). Focused on him and the children again. It's like I never thought about what I did was wrong. Now it's just focused on him and the children.... Even though that time my husband says he wants me, meanwhile he was just using me but I was happy. You know? I felt like he's mom too, she's okay with me. Like now I know in the back of my mind I did something wrong. I can't actually think about the details of what I've done wrong. But I know I have done wrong. But um, they want me back, they are accepting me back. Everything is okay Then the cycle started all over again because now I'm working again.

Ann

Finally, it is noteworthy to observe the role that vicarious sources play in the acknowledgement of the wrongness of the act and overcoming clouded wrongfulness. Firstly, attention is drawn to the consequences of when vicarious sources do not engage the women in conversation regarding the act and that this results in a phantomised experience of the act. Ann indicates that people initially refrained from asking her about the act and that it was subsequently forgotten.

Excerpt 7.131

Every time I was going (referring to going to court) it was getting adjourned, adjourned, adjourned This happened for two years I was outside (speaking about being on bail). Nobody asked me nothing. Nobody questioned me nothing. It was like it was forgotten.

Ann

However, Ann had been referred for psychotherapy and she indicates that it was through these sessions that she was able to more thoroughly engage in contemplation and acknowledgement regarding the wrongfulness of the act.

Excerpt 7.132

Ann:

But its only after I saw my psychiatrist and counsellor and stuff and when they were talking, I can't remember what questions they were asking me but something opened up you know. That made me see what I had done. Then slowly, slowly, it became clear to me that I did kill the baby Still I wasn't thinking I did anything wrong. It was only coming towards the end of my sessions with my psychiatrist and stuff, then only I realised it was like, I acknowledged what I had done wrong.

Ann

In summary, this section revealed the women's experiences of labour and confrontation of their newborn following a phantomised disengaged pregnancy. Firstly, as with the distortedly engaged pregnancies, the women emphasised the experience of vicarious insecurity at early labour and while giving birth. Moreover, the persistence and exacerbation thereof was shown following a number of abandoning sequences prior to giving birth. Despite the discomfort of this experience, it was noteworthy to observe how this security context was compromised and maintained by the processes and assumptions for accessing held by the women. As with the distortedly engaged pregnancies, the women emphasised the experience of feeling alone at birth, while indicating that the offence would most likely not have occurred within a context of vicarious security. Moreover, the consequences of the phantomising actions employed during the pregnancy were observed during the gestating event of labour and giving birth. The women reported experiencing feelings of shock, surprise and unpreparedness following a pregnancy where the baby was not fully experienced within their mind. Additionally, the women also experienced the newborn as if it was not a baby, and not their own child. Consequently, the women were not observed to act towards it as a baby, neither behaviourally or emotionally as observed within their N-NBs. The women's narratives further yielded a persistence and a culmination of phantomising actions prior to and during the act of neonaticide. As the women make use of clouding, they approach the birth lacking clarity, a vague experience of something undefined being wrong and experiencing confusion. It is at birth where this experience is intensified and seen to reach a peak defined by the women as an experience of a snapping mind. Here, they think they have lost control. Consequently, a feeling of impulsive action is reportedly experienced. The women are then further observed to negate acknowledging the newborn as their own child and they describe numbing their feelings towards the newborn. Finally, it is within the context of un-projecting futures where the women act just for the moment, without concern or consideration for consequences; as well as the clouding and un-acknowledgement of the wrongfulness of such an act; where the mother is able to take the life of her baby.

After the act, it was shown how the act itself had been phantomised, and that the reality and experience thereof was not integrated into the women's' lived experience. In so doing, the women were shown to numb their feelings towards the baby and act of neonaticide with the consequence that the women may go on with life as before. After hiding the baby as well as the phantomising actions of ignoring, clouding, un-acknowledging the wrongfulness as well as maintaining present past, the experience ceased to fully exist within the mother's mind.

Finally, the important role of vicarious sources within the process of acknowledging the incident and eventually, the wrongfulness thereof was shown.

7.8.4 Summation of the underlying processes of a N-NB and NB

The labour and birth process afforded an opportunity to see the consequences of the women's previously mentioned approaches towards pregnancy. Based on the variant outcomes at birth, it is evident how the following interacting processes underpins a N-NB or NB: a) The women's nature towards gestating; b) The manner in which they play the role of vicarious mother; c) Their actions during vicarious accessing; d) The consequential contexts of security; e) The manner of their pregnancy engagement; and finally, f) Persistence of such associated actions. This section serves to summarise and address the question on how women come to commit neonaticide, as it summarises the two pathways towards a N-NB and NB.

For this sample of women, the nature of both their N-NB and NBs are underpinned by docility. However, the expression thereof within their N-NB, is one of abdicating responsibility via vicarious enacting. Thus, action towards the pregnancy is dictated by others. Throughout the variant phases of gestating the women are seen to play the role of vicarious mother via 'being' through proxy. As a result of successful vicarious accessing, they are able to establish a context of security where they can act, make decisions and feel by proxy towards the baby and pregnancy. Subsequently, the baby comes to exist within the women's mind and experience as they engage vicariously with their pregnancy. It is, thus, argued that she vicariously brings the baby into being. Successively, at the time of birth, the women are ready and prepared for the impending birth of their child. It is within a context of vicarious security that they are able to deliver the baby with a certain degree of accompanying feelings of concern and compassion towards the baby.

With respect to the women's NBs, it is also observed to be underpinned by docility, but this time in the form of relinquishing control via abdicating. Here, they are observed to negate undertaking or fully undertaking action towards the baby and pregnancy. Prior to these births, they are also playing the role of vicarious mother; but this time the un-'being' self is active. They are observed to refrain from being mother, whether it be acting towards, thinking about or feeling with respect to the baby and pregnancy. Secondary to the processes of vicarious accessing, the women may either establish a security context, where vicarious security may be expected but also doubted (unconfirmed assumed vicarious security); or a context where the women fail to experience vicarious security (vicarious insecurity). It is within these

pregnancies that the women negate to think, feel or act towards the baby and pregnancy directly. Either the women misrepresent the pregnancy and baby as something other than a baby in and of itself (misrepresenting actions); or the pregnancy and baby ceases to exist within their mind and the baby is rendered a phantom (phantomising actions). Subsequently, such babies are not brought into being as it ceases to fully exist within the mind of the women. It is then at birth where they are surprised and shocked at the onset of labour. Their emotional experience is intensified as they are yet again confronted with their vicariously insecure context with subsequent overwhelming feelings of being alone and helpless. When the women are finally confronted with their newborn, they experience as if that which they see is not a child and struggle to fully acknowledge that it is their child. The feeling is, in part, experienced as a result of misrepresenting actions or phantomising actions used throughout the pregnancy, but also as a result of the persistence of such actions towards the baby. Through the use of such actions, the women are able to take the life of their newborn as they act towards something that is not fully experienced as their child. Finally, the women are seen to persist with phantomising actions towards the act of neonaticide. Subsequently, the act itself is phantomised and ceases to be integrated into their lived experience. They are then able to persist with life as before until the process is interrupted by vicarious input.

7.9 Summary and Linking of Concepts with the Study Question

This section serves as a summary of the core category and major conceptual categories and to link them with the research question and study objectives as presented in Section 2.3.2.2. The concept, docile gestating, addresses the question about how the women approach content related to their pregnancy and baby. The concept refers to a passive approach towards pregnancy-related content, where the women await instruction on how to think, feel and act towards such content. The women either relinquish control by having others dictate how to think feel or act, or relinquish control by abdicating responsibility and negating to think, feel and act towards such content. The concept, vicarious mother, addresses the question on the role the women enact with respect to 'being' a mother. The concept reveals how the women enact being a mother vicariously through others; or in the absence of others, negate to 'be' a mother at all. Vicarious accessing, as a concept, addresses the question on how the women engage with their interpersonal environment with respect to pregnancy and baby-related content. It concerns the manner in which the women engage with their interpersonal environments and the interaction and communication strategies employed in an attempt to secure support. The concept, contexts of security, addresses the question on what the consequences are for the nature of their interactions (vicarious accessing), revealed as the

extent of support secured. Degree of engaging addresses the question on how the women behave in response to the established contexts of security, thus revealing the behavioural outcomes. The concept concerns the extent to which the women engage with the pregnancy process. Vicarious actions, misrepresenting actions and phantomising actions reveal the behaviours that determine the nature of and degree of engaging, addressing the question on the forces at play by which the behavioural outcomes are attained or maintained by. The degree of engaging is shown to be attained and maintained by behaviours such as acting through another (vicarious actions), acting towards something other than the foetus and pregnancy (misrepresenting actions), or behaving in a way to render the foetus and pregnancy as being unreal (phantomising actions).

In the previous sections, the concepts were organised according to, and are shown to occur, recur and interact over time across the gestating events continuum of pre-pregnancy, receiving pregnancy news, sharing pregnancy news, physical pregnancy, and finally, labour, birth and afterwards. It is through these interactions that the different plausible pathways towards a non-neonaticidal and neonaticidal pregnancy is demonstrated among this population of women. The N-NPs shows how the women need to engage in thoughts, feelings, actions and ultimately the pregnancy experience via close reliance on another. In the absence of such support, the NPs show that the women refrain from engaging in the pregnancy process and, ultimately, act towards a newborn that never fully existed in their experience and mind. Thus, the theory addresses the research question by revealing the nature and formative processes of the women's thoughts, emotions and actions as they underpin NPs and N-NPs. Thereby, one comes to understand how women come to commit neonaticide among the sample studied.

7.9 Chapter Conclusion

This chapter served to present the findings and also reinforce and bolster the theoretical concepts constructed in the study. Through the interacting concepts of docile gestating, the vicarious mother, vicarious accessing, context of security, and degree of engaging, different underpinning processes towards a N-NP and N-NB as well as a NP and NB could be shown. It was revealed that neonaticide is a complex phenomenon and that the individual should be considered via unique interaction with their environment over time, to understand the underpinning pathways towards the act. This is especially shown to be the case for the sample population.

CHAPTER EIGHT: DISCUSSION AND CONCLUSION

8.1 Chapter Introduction

This chapter endeavours to offer a response to the United Nation's (UN) Sustainable Development Goals (SDG) as well as world leaders' 2030 vision for humanity, seeking to address the problem of child morality and homicide matters (United Nations, 2016; You et al., 2015). The thesis set out to address the issue of neonaticide from a mental health perspective by offering an understanding of the women who commit such offences. Specifically, it set out to understand the women's conceptual and emotional processes as well as actions that underpin the act. Thus, the constructed concepts within this study reveals the formative processes involved, as well as the nature of the women's thoughts, feelings and actions that underpin the sample's non-neonaticidal pregnancies (N-NP) and neonaticidal pregnancies (NP). By way of the concepts constructed in the study, a plausible pathway towards neonaticide is revealed. The constructed concepts open room for academic debate regarding how the underpinning processes may be linked to existing knowledge in the field and recommendations on how understanding this population of women may be enhanced by further research. By reflecting on the findings and the constructed concepts in this chapter, recommendations are made to stimulate debate and action on intervention and prevention efforts. Subsequently, SDG3 can be addressed as initiatives can be directed and informed on how to pursue optimal psychological functioning (good health and well-being) among the population concerned. Thereby, SDG 16 may be addressed as the aforementioned efforts can be made in pursuing peace, justice and strong institutions.

This chapter begins with a summary of the main study findings. The focus of the chapter is then on making the grounded theory relevant and useful to people. Commentary is delivered throughout the chapter on how the data may be used by professionals employed within the forensic mental health setting. Emphasis is placed on how the theory may aid in the understanding of neonaticide. It is also considered how the theory may inform approaches towards rehabilitative treatment and also prevention. This is attained by considering the theory in relation to existing literature. Essentially, this chapter re-integrates the theory with existing knowledge. It reveals how such information may be added to the theory to broaden its perspectives, or how the theory aids in conceptualising already existing knowledge. Within this chapter, I also resume the position of clinician and reflect on possible clinical conceptualisations as stimulated by the constructed theory. An evaluation of the quality of the theory on the basis of the evaluation criteria of grounded theory studies as well as a

consideration for the limitations of the study is further provided. On the basis of the discussion points given, recommendations for future research are made throughout the chapter. Finally, the chapter concludes with some closing remarks concerning the study.

8.2 Summary of the Study Findings and Constructed Concepts

The study questioned “What are the conceptual and emotional processes as well as actions underpinning a NP and N-NP among women who commit neonaticide?”. The purpose of the study was to provide a substantive theory on how women from criminal populations come to commit neonaticide. An abstract theoretical account was, thus, provided on the underpinning conceptual and emotional processes as well as actions that reveals how women come to commit the act. The underpinning processes were revealed in the previous chapter via a comparison of the women’s thoughts, emotions and actions of their N-NPs and NP.

The theory was constructed via constructivist grounded theory (CGT) methods. Initial explorations were sensitised by the symbolic interactionist (SI) perspective, emphasising that individuals behave (emotional experiences and actions) towards things on the basis of their meaning (thoughts) of those things (Blumer, 1954). Symbolic interactionist is also attuned towards focusing on the formation of individual’s thoughts, emotions and actions via social interaction. The conceptual concepts constructed in this study, thus reveal the nature and formative processes of the women’s thoughts, emotions and actions in accordance to their respective N-NPs and NP.

The theory consists of one major category, which is the most abstract category with the most explanatory power and to which all other conceptual categories relate. This concept is termed docile gestating. Four major conceptual categories were also constructed, including, a) The vicarious mother; b) Vicarious accessing; c) Contexts of security; and d) Degree of engaging with its associated concepts of vicarious actions, misrepresenting actions and phantomising actions. In the previous chapter, the concepts are shown to present, recur and interact over time in unique ways according to the N-NPs and NPs. In revealing the concepts and overall theory, a narrative structure is used to discuss the recurring interactions over time, referred to as the gestating events continuum. The gestating events continuum consists of several pregnancy events, including: a) Pre-pregnancy; b) Receiving pregnancy news; c) Sharing pregnancy news; d) Physical pregnancy; and finally, e) Labour, birth and afterwards. On the basis of how the constructed concepts interact over time, the different underpinning pathways towards a N-NP and NP among this population of women is revealed.

The concept of docile gestating reveals the manner and nature in which the women approach pregnancy and mothering-related content. The nature of their gestating is shown to be passive as the women relinquish control over the situation. Control refers to taking responsibility or initiating action (thinking and feeling about or behaving) in response to the pregnancy situation. In their docile approach towards gestating, the women are relinquishing control over the pregnancy situation in two unique ways. In the N-NPs, the women relinquish control by preferring to await and receive instruction from others with matters pertaining to the pregnancy and foetus. In the NPs, the women relinquish control again, but this time it is by means of abdicating responsibility, negating to think, feel or behave in response to their pregnancy and foetus; or only superficially doing so.

The concept of the vicarious mother refer to the roles the women enact with respect to 'being' a mother. The data shows that in the N-NPs, the women enact the role of mother, meaning thinking about, feeling and acting towards their pregnancy and foetus via close reliance on others. The women vicariously engage in the mothering role so much so that it is experienced as if the supporting individual (vicarious source) is the one who is pregnant. The vicarious source's initiated thoughts, emotions and suggested actions are all assumed by the mother as her own (decisioning by proxy, feeling by proxy and acting by proxy respectively). In the NPs, the women may refrain from 'being' a mother as there is a lack of vicarious sources to vicariously mother by. Subsequently, the women do not think about, feel or act towards mothering-related content, or only superficially do so.

The concept of vicarious accessing refers to the processes involved in establishing vicarious sources via whom the women may vicariously gestate by. At the outset of the women's pregnancies, whether it be N-NP or NP, the women are confronted with a set of assumptions about whether or not a pregnancy may be shared with someone as well as strategies on how this may be communicated. In the NPs, the women mostly feel unable to share their pregnancy news and draw in vicarious sources on the basis of such assumptions. In all the pregnancies, the women are seen to prefer an approach where they do not initiate a conversation on the matter. Rather, the women prefer to have others observe signs that she may be pregnant and for the women to respond in the affirmative once questioned. The process of accessing may also be compromised on the basis of situational circumstances on the basis of how significant others respond to the women in this.

Contexts of security refers to the outcome of the above process of vicarious accessing. In the N-NPs, the women are able to establish vicarious sources that may initiate thoughts, feelings and actions on behalf of the women (vicarious security). In cases of the NPs, the women may either: a) initially assume that support may be provided, but which later proves not to be the case (unconfirmed assumed vicarious security); or b) find themselves in a context lacking vicarious support (vicarious insecurity).

The context of security established then serves the platform for the expression of the next concept, namely, degree of engaging. This refers to the extent to which the women may engage (thinking about, feeling and acting toward) specific pregnancy-related content and the nature thereof. In the N-NPs, the women engage in the pregnancy process in a vicarious secure context by vicariously engaging in thoughts and actions, where she can consider the pregnancy and foetus, anticipate and plan a future concerning the baby, think towards and participate in prenatal baby and self-care, prepare practically for the baby and self, identify the baby and prepare for birth. With respect to feelings, the women may come to accept and connect with the foetus via adopting other's feelings as their own. However, in the NPs the women are not seen to engage in such tasks or only do so superficially. In the context of unconfirmed assumed vicarious security, the women may, via misrepresenting actions, represent the baby as something else (perhaps an object to win the father's affection and support) and the women negate to directly think, feel and act towards the foetus.

Subsequently, she only superficially engages with the pregnancy and foetus. Alternatively, among the cases of NP and in the contexts of vicarious insecurity, the women may refrain from thinking about, feeling or acting towards their pregnancy and foetus and thereby refrain from engaging in the pregnancy. By means of various cognitive strategies (phantomising actions), the foetus and pregnancy is ignored and avoided to the extent that it is experienced as if it ceases to exist in their mind.

Essentially, the final theory reveals how the women need to engage in the pregnancy experience via close reliance on another (non-neonaticide). In the absence of such support, the women may refrain from engaging in the pregnancy process and, ultimately, act towards a newborn that never fully existed in their experience and mind (neonaticide). With a summation of the theory in place, the reader will now turn to how the findings and constructed theory can be useful to people, elaborate understandings on the phenomenon and contribute towards prevention and rehabilitation interventions.

8.3 The Use of Literature Following Data Collection

It was previously mentioned that grounded theorising requires distance from literature, so as to mostly refrain from its interference in shaping theory construction. With this in mind, a preliminary review of the literature was completed prior to data collection. The purpose of this was to identify areas of exploration concerning the phenomenon of interest. This chapter revisits the critical claims made within the preliminary literature review and reveals how the study addresses some of the gaps identified within the literature. Moreover, after observing content highlighted by the participants and following theory construction, relevant comparative literature was consulted. This chapter, therefore, integrates this literature to reveal how such knowledge can extend the properties of the constructed theory as well as how the theory may add to existing knowledge.

8.4 Towards Understanding the Act of Neonaticide

The theory constructed within this study is useful and relevant to people on the basis that it offers an understanding of the ‘bigger picture’ of neonaticide. Within this study, ‘bigger picture’ is defined by providing an understanding of processual in-depth knowledge on variant unfolding temporal sequences indicating action and interaction, sequences and changes in a variety of contexts and conditions. This section reveals how the constructed theory offers an understanding of neonaticide by providing an account of the dynamic processes involved in the act. Via the processual understanding, the question of ‘how’ women come to commit neonaticide is addressed. Moreover, the question of ‘how’ may also be seen as a golden thread that links previously isolated variables and themes. The constructed theory reveals interacting relationships, contexts and dimensions among such previously isolated ideas. In this manner, the constructed theory further offers an understanding of the ‘bigger picture’ of neonaticide, as it provides an understanding beyond the questions of ‘who’, ‘what’ and ‘why’. The sections that follow firstly introduce the idea of a processual theory offering an opportunity to observe the ‘bigger picture’ concerning neonaticide. Thereafter, previous literature is revisited and it is explained how the theory can expand upon existing knowledge concerning the act.

8.4.1 Towards an understanding of the ‘bigger picture’

The preliminary literature review provided in Chapter Two yielded how psychological knowledge on the subject of neonaticide has been limited. It was previously argued that science has failed to consider the ‘bigger picture’ of neonaticide on the basis that it has lacked abstract theoretical understandings on the topic. Through the constructivist grounded theory

research approach, it is revealed how neonaticide ought to be considered beyond static descriptions. Instead, the results expose the complex, dynamic and interactional as well as recurrent processes which plausibly underpin the phenomenon. This holds true for the sample under discussion. It is argued that the interaction among the abstract concepts constructed within this study reveals a plausible ‘bigger picture’ of the phenomenon among the population studied. The constructed theory is, therefore, argued to reveal the ‘bigger picture’ as it reveals action and interaction of concepts, moving sequences over time as the women are confronted with gestating as well as variant changes in contexts, conditions and consequences (Charmaz, 2006).

The constructed theory exposes how the phenomenon of neonaticide should be considered from the vantage point of an individual in unique interaction with their environment and circumstances over time. The theory reveals the value in coming closer to understanding neonaticide if science were to be concerned with understanding unique patterns of gestating, patterns of ‘being’ as mother, patterns of relating and communicating, as well as patterns of consequential relational contexts that may be established. Thereafter, patterns of behaviour and maintaining forces can be identified, unique to neonaticide and non-neonaticide births. However, this is all to be regarded within dynamic interactions over time as the theory has already shown in the previous chapter. It is this processual focus that sheds light on the question of ‘how’ women come to commit the act. It is further argued that the phenomenon of neonaticide can, thus, not be fully understood in a deterministic sense, with the hope that it can be reduced to a few singular and isolated variables.

Not only does the constructed theory reveal the possible dynamic intricacies of the individual in interaction with their environment, but it offers an opportunity to regard the act beyond previously explored domains of focus. This is considered next.

8.4.2 Broadening perspectives on ‘who’ the women are

In considering the constructed theory, commentary is delivered below on how perspectives on ‘who’ the women are may be broadened and expanded upon. Firstly, opinion is provided on recognising challenges in order to understand this unique group of individuals. Henceforth, the concept of the vicarious mother is explored and the possibility of integrating existing psychological theory is provided as a means of further broadening perspectives on ‘who’ the women are. The theory is deemed to further broaden outlooks by corroborating the constructed theory with other psychological clinical findings and concepts. Finally,

personality diagnoses and characteristics are considered along with interpersonal relations and communications.

8.4.2.1 Considering challenges in exploring ‘who’ the women are

The literature review elicited little information regarding the nature of the women who commit neonaticide. As discussed, domains most typically investigated within the academic community concern demographic characteristics concerning this population of women (Ciani and Fontanesi, 2012; Stanton, Simpson, Wouldes, 2000; Malmquist, 2013). I set out to move beyond demographic characteristics to understand this group of individuals. However, the biggest challenge concerning data collection in the study was obtaining a sense of who the women are, especially with regard to how they think and feel personally about their unique worlds and mothering content. I struggled to elicit an in-depth honest reflection of their inner lives, their own sense of identity, and what roles they perceived important to prescribe to in life, specifically with regards to motherhood.

On the basis of the information provided by the women, it was observed that the women would mostly report feelings, thoughts and actions towards pregnancy content by referring to their interaction with significant others. However, when such sources were unavailable during their neonaticidal pregnancies, the women struggled to offer an account of their independent thoughts, actions and feelings towards the foetus as mother. Subsequently, the construct of vicarious mother was constructed as it speaks to a mother who is able to ‘be’ mother or engage with mothering content through others, namely, by proxy. But when such sources are unavailable, the construct of the un-‘being’ self comes to the fore. Then it is the part of the mother who enacts a role of somebody who is not ‘being’ mother. Via such enacting, they engage in phantomising actions and subsequently cease to think and feel towards, as well as act as mother.

It was not the purpose of the study to rely on my clinical judgement when engaging with the women. Instead, the purpose was to construct a theory on the basis of the stories provided by the women. However, I could not help but imagine the women’s challenges regarding their difficulties with introspection and self-reflection. This concerns one’s capacity for observing and analysing one’s own mental (thoughts) and emotional processes (Fonagy and Target, 1997). Challenges in this respect may also result in difficulty in one’s ability to interpret experience and to exhibit a sense of oneself as a distinct individual (ibid). This appears to link

with the concept of the vicarious mother, struggling to engage in mothering content individually, without ideas on how to mother when deprived of the input of others.

The challenges mentioned above, experienced in obtaining a sense of the women as mother in itself, are argued to reveal who the women are as mother. That is, an individual whose action or inaction as mother is dependent on the availability and instruction of others. It raises the question whether there is a 'self' as mother to be discovered; or whether the actor who engages or disengages in their pregnancy may be like an empty vessel awaiting instruction. This may be one of the first attempts to describe the women as mother, however, this attempt together with the reflections on their capacity for introspection and self-reflection already broadens perspectives on who the women are as mother.

8.4.2.2 Broadening perspectives on the 'self'

Although the current constructed theory offers a starting point to understanding the women's functioning of the 'self' as mother, further psychological theory may offer insights beyond the concept of mother, towards the women's relation to themselves and their world in general. A significant proportion of psychological theories may be incorporated to extend the properties of the constructed theory with respect to this component of the women's sense of self. Among others, this may include Donald Winnicott's (1971) concept of the false self, concerning a self that never gains independence and experiences problems with their capacity to assert themselves. Alternatively, the concept of separation-individuation from the viewpoint of object relations may be useful to explain how the women may present with challenges in the attainment of independence and a unique sense of personal identity (Blos, 1975). For purposes of brevity, I elect to address only one theory here, namely, Murray Bowen's concept of self-differentiation (Bowen, 1976; 1978). I elect this concept for further discussion as I perceive Bowen's (1976; 1978) ideas to best provide explanatory potential regarding more general underpinning processes of a self (an undifferentiated self) who is unable to mother autonomously.

The concept of self-differentiation concerns a developmental component of functioning within the family systems theory framework (Bowen, 1978). The concept refers to one's capacity to experience one's own feelings and thoughts and to distinguish them from that of others, especially within emotional relationship systems (Bowen, 1976; 1978). It is considered a personality variable and important component for maturity and psychological health (Bowen, 1978). There are two main components to self-differentiation. The first

component is an intrapsychic component, which concerns one's capacity to differentiate what one is thinking from one's feelings (Bowen, 1976; 1978). In this regard, one's behaviour would be either dictated by one's thoughts or emotions. Greater differentiation in this regard is generally argued to result in better adjustment and the capacity to behave rationally in emotionally charged situations (Bowen, 1978). On the contrary, poor differentiated individuals may present as more emotionally reactive, be impulsive and struggle to remain calm and contained in challenging situations. The second component appears especially relevant to the constructed theory and refers to interpersonal functioning (ibid). At the interpersonal level, self-differentiation concerns one's capacity to experience independence from others and the capacity to take an "I" position within interpersonal relationships (Bowen, 1978). Individuals who are well differentiated are deemed to be more likely to maintain a clear sense of self and have strong personal convictions despite when challenged by others (ibid). On the contrary, poorly differentiated persons present with few firmly held beliefs and convictions, are dogmatic and compliant towards others, and prioritise acceptance and approval above any aim (Bowen, 1976). Poorly differentiated individuals are generally observed to present with psychological maladjustment (increased anxiety, somatisation, mood disorders, substance dependence and psychoticism) and are more likely to experience separation from others as emotionally overwhelming and struggle to behave autonomously (Bowen, 1978). Their self-esteem is mostly based on the approval and affirmation of others (Bowen, 1976).

The aforementioned may be incorporated into the constructed theory to add a backdrop towards the women's functioning in general. Within the psychological frame, the women in the sample may be conceived as being poorly differentiated, having few convictions on their own accord concerning mothering-related content. This concept may be further explored and extended in the current theory with further research. Moreover, the constructed theory may add to the work of Bowen (1976; 1978) by revealing how the concepts of the poorly differentiated individual may relate to and underpin specific role-taking opportunities, for instance, motherhood and gestating. This offers further opportunities for scientific exploration and extension of the concepts.

8.4.2.3 Broadening perspectives on psychological functioning

The manner in which the women may play the role of vicarious mother corroborates with the clinical observations often made among this population of women. The theory may, thus, broaden perspectives on the women's psychological functioning and subsequently further add

towards understandings of ‘who’ the women are. The relevant clinical content discussed from the preliminary literature review is considered again, this time in relation to the data obtained and constructed theory. Additional clinical considerations on my behalf, following data collection and theory construction, are also provided.

Previously discussed retrospective case analyses revealed that women who commit the act may be inclined to present with poor coping resources, feelings of powerlessness, immaturity, dependency, passivity and low self-esteem (Friedman et al., 2005; Krischer et al., 2007; Spinelli, 2003; Vellut, Cook and Tursz, 2012). While it was not the purpose of the study to seek out the abovementioned presentation among the data obtained, I could not remove my clinical hat completely; this presentation was also observed among the current study population and conceptualised within the constructed concept of the vicarious mother. Without the proximal vicarious source, the women narrated feelings of powerlessness regarding actions pertaining to motherhood. In a similar vein, without assistance from others, they are seen to lack confidence and self-esteem to act on their own accord. As the women are observed to relinquish control via vicarious enacting and await instruction and guidance on how to mother, they are observed to be dependent and passive. Ultimately, it may be argued that their dependency demonstrates immaturity and poor coping resources. The constructed theory is, thus, useful as it adds a backdrop towards understanding how the women may come to present with the aforementioned clinical observations. That is, via playing the role of vicarious mother.

The constructed theory further elicits clinical thought regarding the coping style of the women observed. The concept of the un-‘being’ self with its associated phantomising actions and negating to act towards the pregnancy and baby appears to link with the concepts of avoidance and minimising, lacking responsibility and self-agency as well as an external locus of control.

The women’s use of phantomising actions may be seen to relate to the clinical concept of an avoidant coping style or escape mechanism. Such a coping style refers to efforts on behalf of an individual to avoid dealing with a stressful situation (Balmores-Paulino, 2018). While neonaticidal research refers to the poor coping resources observed among this population of women, the specific avoidant coping style may be regarded as a further pathological coping manoeuvre (Balmores-Paulino, 2018). The concept can be integrated as explanatory power within the current constructed theory, as the women’s phantomising actions may be seen as an

attempt to avoid dealing with their pregnancy and baby. This can be expanded upon in further research as a plausible reason for such phantomising actions. Moreover, the specific phantomising actions employed among this unique population of women among their neonaticidal pregnancies may expand on the different techniques used to engage the escape mechanism or avoidant coping. In this sense, the un-‘being’ self is seen operable through such avoidance and specific phantomising actions.

The act of phantomising the pregnancy, the baby, and the act of neonaticide itself may relate to the concept of minimising. Minimising is defined as a cognitive bias, a form of denial or self-deception, where an individual underplays a circumstance or the severity of the circumstance (Henning and Holdford, 2006). Minimisation has been linked with offending behaviour in a variety of criminal cases (Henning and Holdford, 2006), but does not appear to be emphasised among neonaticide literature. This relates to the women reporting that they had not truly felt they had done something wrong following the act. Through phantomising actions, the women are observed to refrain from acknowledging and experiencing the reality of her pregnancy and baby. Moreover, via such phantomising actions, especially via clouding and un-acknowledging, they are further seen to minimise the reality of the offence. The concept can, thus, be meaningfully incorporated into the constructed theory. Moreover, the identification of phantomising actions can be researched in other areas of criminal behaviour as a possible means of minimising. Moreover, while minimising may relate to the criminal act specifically, the current constructed theory shows that it may relate to other areas of functioning as well and form part of an interactional or coping style in general.

The concept of the vicarious mother reveal the women’s reliance on others to mother vicariously or not to mother at all in the absence of such input. Subsequently, their manner of gestating (docile gestating) is seen to be one of relinquishing control either via vicarious enacting or via abdicating. The concept of control within the context of gestating was regarded as the main concept within the constructed theory as it was deemed to relate to all other constructed concepts. Nevertheless, the docile manner of being may be linked with the clinical concept, external locus of control. External locus of control is a personality concept that refers to the individual belief that matters occurring in one’s life is the result of external factors as opposed to matters related to one’s own doing (Hunter, 1994). Subsequently, such individuals may be seen to take less responsibility and appear to lack agency within their own lives (ibid). Sense of agency refers to one’s capacity and subjective experience of exhibiting, initiating and executing control over one’s life (Desantis et al., 2011). A more recent review of the literature revealed another grounded theory study concerning cases of concealed

pregnancies completed around the same time as the current study (Murphy-Tighe and Lalor, 2019). Murphy-Tighe and Lalor's (2019) research also emphasise the concept of self-agency as a major underpinning factor towards concealment of pregnancy. Moreover, significant research points to the problematic presentation of such an external locus of control and lacking agency among offender populations. The reason for this is that such individuals are more likely to blame external circumstances as opposed to taking responsibility for their lives and actions (Hunter, 1994). With further research, the concept may be usefully incorporated to conceptualise the women's 'being' as mother as well as approaches towards gestating.

8.4.2.4 Broadening perspectives on personality diagnoses and characteristics

In considering who the women are, the constructed theory should also be considered within the clinical context and backdrop of personality disorder diagnoses in accordance with the Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM 5) (American Psychiatric Association, 2013). The preliminary literature review emphasised the presence of borderline and/or antisocial personality disorder among this population of women (Putkonen et al., 2007). The disorders were previously defined (See Section 2.2.4.1) and are grouped under Cluster B of personality disorders within the DSM 5 (American Psychiatric Association, 2013). Cluster B refers to a category of disorders characterised by individuals who may be described as emotional, dramatic and erratic (American Psychiatric Association, 2013). Although it was not the purpose of the study to evaluate and diagnose personality functioning, on the basis of my clinical judgement, the data obtained and theory constructed may be related to such diagnoses made in previous studies. It is considered specifically how features of the disorders may link with and contribute towards the interacting processes of the concepts constructed in the theory.

In considering the presentation of a borderline personality structure, the significant efforts to avoid abandonment, as often characterised by this disorder, may be understood as a contributing feature within the process of vicarious accessing (American Psychiatric Association, 2013). In this sense, should the women experience this presentation as part of their personality structure, they may be deemed more inclined to contemplate the fearing judgement threshold and evaluate their degree of burdening. Moreover, another criterion of exhibiting an unstable self-image or sense of self may corroborate with the notion of the vicarious mother, where their 'being' depends heavily on the proximal interference of others without clear conviction of who they are independently (ibid). On the other hand, stress-

related dissociative symptoms (experience of detachment) may relate to the phantomising action of clouding or numbing feelings or be an extreme presentation thereof.

When contemplating the presentation of an antisocial personality structure, lack of remorse may be considered within the context of failing to see the newborn as a baby and neglecting to act towards it with compassion (American Psychiatric Association, 2013). Impulsivity and failing to plan ahead may be conceptualised within the conceptual frame of un-projecting futures (ibid). The criterion of disregarding the safety of oneself and others (American Psychiatric Association, 2013) may be observed according to the concepts of procrastinating and redirecting preoccupation, where the women neglect engaging in prenatal care. However, there appears to be greater underlying processes, such as the purpose for and context of such phantomising actions, that may be overlooked in so doing. Furthermore, the criterion of lacking responsibility (ibid) may be seen to present within the context of docile gestating as the mother is seen to relinquish control via abdicating.

Through my clinical judgement and contemplation of the constructed theory, I recommend consideration of a dependent personality disorder as well as an avoidant personality disorder among women who commit the offence. The data suggest traits of these disorders that require further clinical and research investigation. These two personality disorders are categorised under Cluster C, which concerns individuals who present as anxious and fearful within their personality structure (American Psychiatric Association, 2013).

An avoidant personality disorder is characterised by a “pervasive pattern of social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation” (American Psychiatric Association, 2013, p. 672). The process of vicarious accessing reveals attempts to avoid the sharing of pregnancy news on the basis of fearing disapproval and rejection. Further characteristics of being preoccupied with being criticised and rejected, viewing the self as inferior or reluctance to engage in new activities are also evident among the women’s narratives when considering the enacting of the vicarious mother.

Finally, a dependent personality disorder is characterised by a “pervasive and excessive need to be taken care of that leads to submissive and clinging behaviour” (American Psychiatric Association, 2013, p. 675). The characteristics of experiencing difficulty in making decisions without excessive reassurance and advice from others, needing others to assume responsibility on one’s behalf, experiencing difficulty in expressing disagreement,

problems with self-confidence and initiating activities, and feeling helpless when alone have all been revealed by the women's narratives. This is especially relevant as the women are unable to mother independently.

This section merely touches on the possibilities of integrating clinical diagnoses of personality disorders within the conceptual lens of the constructed theory. This would allow for a more comprehensive understanding regarding the women's functioning. However, further research is needed that would focus on extending this component of the theory and clinically evaluating each characteristic of relevant diagnoses as it manifests within the population concerned. It must further be considered that irrespective of the personality functioning on the presentation of variant constructs, the complexity of the theory still reveals a variety of interacting concepts that should be considered when seeking to understand the act. A mere diagnosis of a personality disorder may not be sufficient to explain the underpinnings of the act.

8.4.2.5 Broadening perspectives on interpersonal relating and communicating

Beyond playing the role of vicarious mother, more can be known on 'who' the women are by considering their manner of relating to others, specifically their communication strategies. Previous retrospective case analyses data also reveal that this population of women frequently present with poor communication in interpersonal relationships (Vellut, Cook and Tursz, 2012). It is via the concepts of vicarious accessing and their associated assumptions for accessing and situational limits to accessing that shed light on the unique component of the women's functioning. As the women narrate needing to 'be' mother by proxy, their need to draw in vicarious support becomes evident. However, on the basis of the constructed theory, as they expect to have reached the burdening threshold or judgement threshold, they are immobilised and unable to communicate. Alternatively, the women may choose not to communicate on the basis of expecting their communication to be powerless or feeling as if they are unable to confide in others. Moreover, their attempts at communicating, whether it be communicating through proxy or non-verbal communicating may be unsuccessful. Alternatively, opportunities for following communications may not appear or the women may simply choose to withhold communications when the situation seems to demand it. Finally, variant situational limits may hamper the women's access to others. Therefore, the constructed theory reveals the complexity regarding the women's communication manoeuvres.

The constructed theory further reveals the significant implications of the women's capacity for interpersonal relatedness and communication in the context of the commission of the offence. It is, thus, deemed likely that this component has been underexplored and underemphasised in previous literature. The women's unique attempts at vicarious accessing and communication have consequences to the type of security context or interpersonal context that is experienced. Without the aid of vicarious sources, the women are seen to refrain from 'being' mother and from engaging in their pregnancy; ultimately underpinning a neonaticidal pregnancy.

Up to this point, the discussion has focused on how variant clinical concepts, previous literature, and psychological theory may be integrated into the constructed theory. It was argued that such conceptualisations would broaden perspectives on what is already known regarding 'who' the women are that commit the offence. The section that follows will focus on how the constructed theory may broaden perspectives on 'what' the women do and the actions that are taken in cases of neonaticide.

8.4.3 Broadening perspectives on 'what' the women do and actions taken

The preliminary literature review revealed variant actions taken on behalf of women who commit the act. It concerns the attempt of science to address the question of 'what' women do who commit the act. The review revealed typical pregnancy behaviours, setting of the murder, nature of the act, and actions taken after the act. While each area is typically investigated separately in retrospective case analyses, these aspects remained disjointed and seemingly disconnected in the literature. However, the current constructed theory contributes to existing knowledge in this domain by providing an account on variant processes and interacting abstract categories of concepts that may underpin the actions taken. The theory reveals how the same interacting concepts have a bearing on and consequences for each of the aforementioned domains. In this regard, the theory provides greater perspective on how the women come to act in the manner they do.

8.4.3.1 Broadening perspectives on pregnancy behaviours

The current constructed theory is deemed to broaden perspectives on pregnancy behaviours by expanding knowledge on various actions taken during pregnancy. This includes the behaviours of concealing and denying the neonaticidal pregnancy. Within this section, it is argued via the constructed theory how this event should be regarded as a complex process. Perspectives are further broadened by considering the psychological constructs of pregnancy

denial. Furthermore, the expression of passivity is considered through the lens of the constructed theory. Finally, an exposition is provided on the integration of attachment theory within the constructed theory as well as how the constructed theory may expand knowledge on attachment perspectives.

The previously reviewed literature revealed how women may conceal and deny their pregnancies or fail to inform others they are pregnant (Friedman and Resnick, 2009; Manchester, 2003; Shelton, Mirhead and Canning, 2010; Stanton, Simpson and Wouldes, 2000; Vellut, Cook and Tursz, 2012). The current study sheds light on how the processes of vicarious accessing may influence such actions and outcomes. It is through this process where it is seen that the outcomes are complex and involve more than a mere single decision on behalf of the women to conceal their pregnancy. The theory reveals how women may refrain from sharing their pregnancies on the basis of their assumptions for accessing. The extent to which they may be perceived as a burden or their concerns around judgement and anger may be seen to influence this process. Moreover, their expectations for communicating and strategies employed in communicating may have further consequences to whether or not the news may be shared. Also, the theory reveals how the process of vicarious accessing have consequences for the rest of their pregnancy, whether they are able to establish a source of input and support for themselves and how they subsequently manages and engages with their pregnancy.

With respect to actions taken during the neonaticidal pregnancy (NP), the denial of pregnancy is a matter that requires further deliberation. The constructed theory reveals how the women's pregnancies are not contemplated within their mind and neither is the foetus during the course of their neonaticidal pregnancy. The pregnancy and baby is, thus, not experienced as a reality and not lived as a reality. Contemplation of the women's phantomised pregnancy and foetus at the close of the study alarmed me regarding the clinical knowledge and existing terminology of pregnancy denial. The concept is defined as an absence of subjective awareness regarding one's pregnancy (Beier et al., 2006). A literature search focusing specifically on this matter was subsequently completed. The outcome reveals that there has been growing interest and academic debate regarding the subject matter since the commencement of this study in 2016 (Antic, 2017; Klier et al., 2019). It is evident that the current theory may be further informed by, but also contribute towards understandings regarding pregnancy denial.

Concerning the action of pregnancy denial, the research reveals that women may negate to respond in the affirmative regarding questions concerning their pregnancy status, be completely unaware of their pregnancy or repress (rejecting from consciousness) or refuse to accept their pregnancy (Antic, 2017; Jacques et al., 2018 Klier, 2019). It is evident that the extent to which the women accept and experience the reality of being pregnant may occur according to a spectrum or degree of acknowledging the pregnancy and foetus. The denial may, thus, be complete or partial (Beier et al., 2006). Nevertheless, it is argued in the literature that such women may be deceiving themselves (Antic, 2017).

The current theory provides insight into how the women may employ phantomising actions to render the pregnancy and foetus non-existent within their mind and experience. It is shown that phantomising actions may include the numbing of feelings associated with the pregnancy or foetus; the active ignoring of such content; deprioritising of matters related to the pregnancy; the clouding or vague contemplation of the matter; the redirection of preoccupation towards other non-pregnancy-related content; procrastination of pregnancy matters, neglecting to contemplate the foetus or matters related to its future; continuing with the same day-to-day concerns as before; or, failing to acknowledge the pregnancy and foetus. All such actions are seen to contribute towards the experience of a phantomised pregnancy, or alternatively, pregnancy denial. Moreover, the theory offers a perspective on the consequence of such actions, namely, a pregnancy that is never fully engaged with and in.

While this sheds light on how phantomising actions may contribute towards a pregnancy that is denied, the constructed theory further reveals the contributing component of vicarious sources and vicarious security in this regard. By providing a perspective on the processes that underpin the women's non-neonaticidal pregnancies (N-NP) among this population of women, the pivotal role that supportive sources may play in such pregnancies are revealed. From the data, it is evident that vicarious sources play an important role in recognising the pregnancy, contemplating the foetus, acknowledging the pregnancy and foetus, and subsequently engaging in pregnancy-related tasks. This is a unique perspective in relation to the concept of pregnancy denial and requires further scientific investigations.

The study makes a further unique contribution towards understanding the actions taken during the women's NPs. The study introduces the concept of docile gestating. Here, the women are seen to relinquish control regarding their pregnancy, either by awaiting initiation and input from others as seen within their N-NP or via abdicating and negating to respond to the

pregnancy as observed among the NPs. The previously reviewed literature often describes this group of women as passive in character (Vellut, Cook and Tursz, 2012; Resnick, 1970). The study offers an opportunity to see the function of such passivity as it manifests in the nature in which the women approach gestating. In the current study, the women are seen as passive and docile across her N-NP and NP. However, the theory also reveals the interaction of the women with their environment and how this has a bearing on the expression of such docility. In the context of vicarious security, the women are seen to remain passive but to respond to their pregnancy via reliance on others. In a context of vicarious insecurity, though, the women remain passive as they negate to act on their own accord. The study, therefore, offers an opportunity to see the unique interacting concepts and circumstances that result in the different expressions in passivity and subsequently pregnancy engagement.

Moreover, engagement with the data and the constructed theory alerted me to the relationship to that of already existing theoretical knowledge, specifically that of attachment theory. This concerns the actions taken by the mother in relation to the foetus during pregnancy.

Attachment theory is a psychological theory stemming from the joint works of Ainsworth and Bowlby (1991). The theory speaks to the quality of the emotional bond experienced between a caregiver and their infant (Bowlby, 1952). The bond is deemed necessary for the infant's survival and development as the quality of the relationship ensures the caregiver's capacity for love, comfort and protection of the infant (ibid). Academic literature reveals that the attachment process begins in the prenatal period, as the mother begins to invest cognitive and emotional energy towards the foetus (Bowlby, 1973; Brandon et al., 2009). According to Brandon et al. (2009), maternal-foetal attachment occur as a process throughout the pregnancy as the mother begins to conceive of the foetus as more human, as a separate being, and as she begins to experience increasing feelings of affection towards the foetus. In this process, the foetus becomes a part of the mother's everyday life as she begins to consider the foetus or experience dreams, desires or fantasies of him or her (Perrelli et al., 2014). The term maternal-foetal attachment or prenatal attachment is, thus, applied, which refers to the intensity and extent to which the pregnant women present with behaviours and expressions regarding her connection with the foetus (Cranley, 1981).

The current study reveals that by variant phantomising actions, the women negated to act towards their pregnancy and foetus. Clinicians from the attachment school of thought may argue that this population present with challenges with respect to the attachment process with her foetus. Doan and Zimmerman (2007) argue that women who present with such attachment

difficulties demonstrate barriers in their cognitive capacity to mentally represent the foetus in their mind. The current study reveals that among the neonaticidal pregnancies the women were unable to contemplate the foetus in their mind on the basis of the phantomising actions of: a) ignoring thought content pertaining to the foetus and pregnancy; b) clouding or vaguely experiencing the reality of being pregnant; c) redirecting their preoccupations to other matters; d) maintaining present-past or continuing with the same day-to-day concerns as before; or e) failing to acknowledge the foetus or pregnancy. As a result of the aforementioned phantomising actions, the women also neglected to engage in attachment processes of interacting with their foetus, touching their abdomen, or paying attention to its movements (Perrelli et al., 2014; Taffazoli et al., 2015). Moreover, through the phantomising action of un-projecting futures, the women negated to engage in attachment-related activities of considering the baby at older ages, envision themselves caring for the baby or considering the baby in relation to its siblings and other family members (Perrelli et al., 2014; Taffazoli et al., 2015). It is observed that the extent of the phantomising in neonaticidal cases was so significant that the women negated engaging in attachment type thoughts around their pleasure or even displeasure in caring for the baby once they would give birth (Stern, 1995). As the women fail to contemplate the foetus or pregnancy, they are also not seen to engage in thoughts around their acceptance of their maternal role towards the baby. This may be a further attachment-related activity that was negated (Taffazoli et al., 2015).

Even among the distortedly engaged type pregnancy mentioned in the current study, the women were not observed to fully engage in the abovementioned attachment-related activities. Instead, by misrepresenting actions, their representation of the foetus was misrepresented, as was their contemplation of the baby. Ultimately, among the neonaticidal pregnancies, the women were not seen to fully engage in the pregnancy content and, thus, negated the attachment-related activity of donating themselves to and taking responsibility for the baby (Perrelli et al., 2014).

The abovementioned reveals how attachment theory can valuably be incorporated into the constructed theory to offer insight on how the women's phantomised disengaged and distortedly engaged pregnancies may indicate attachment difficulties. Furthermore, the constructed theory offers value to attachment theoretical perspectives, as it reveals the type of phantomising actions or misrepresenting actions employed that would hamper the attachment process. Further research is necessary to determine if this is specific to cases of neonaticide.

According to the literature, a specific attachment style may be deemed a constant and enduring pattern of relating (Ainsworth and Bowlby, 1991). However, the current study raises the question of why the same women would appear to represent attachment within their N-NPs and fail to do so within their NPs? The constructed theory sheds light on the role vicarious sources play within their N-NPs and how the women are seen to engage in pregnancy-related content and act towards the foetus by proxy. The theory, therefore, offers value towards attachment perspectives, as it reveals that vicarious sources may play an important role among women who present with attachment-related problems or circumstances. The role of vicarious input and attachment by proxy should, thus, be deemed a worthwhile area of scientific enquiry. This may be particularly relevant to women who present with other mental health concerns in general.

Moreover, according to Doan and Zimmerman (2008) variant situational circumstances may moderate attachment to a foetus. This may include the extent of social support, personality disorders or mental illness, especially depression and anxiety (ibid). Although it was not the purpose of the current study, on the basis of my clinical experience and subsequent judgement, I was able to identify the presence of such factors among the women's stories. The current study reveals the specific actions (phantomising and misrepresenting) that present in the context of such moderating circumstances. Subsequently, this provides a more detailed understanding on the consequent behaviours that may contribute towards such moderating factors.

The constructed theory also offers an opportunity to observe the plausible consequences of a distortedly engaged and phantomised disengaged pregnancy. The consequences may also apply to attachment perspectives. As a reminder, the data reveals that the women failed to fully engage in pregnancy-related content or to engage with the foetus, as seen among their distortedly engaged or phantomised disengaged pregnancies. Attachment theorists would argue that they had failed to represent the foetus within their mind (Doan and Zimmerman, 2007). Irrespective of the terminology used, the current study reveals the consequences of such engagement. The constructed theory denotes that as a consequence of phantomising actions or misrepresenting actions the women were never able to 'bring the baby into-being'. Consequently, at birth, the women are seen to experience feelings of shock and unpreparedness towards the labour. Moreover, the women consequently report as if they had not fully experienced the child as their own baby or even regard it as a baby in need of

protection and compassion at all. Subsequently, the women are able to take the life of her newborn.

The above sections reveal how the constructed interacting concepts expands on current understandings regarding pregnancy denial, passivity as well as aspects related to attachment. In elaborating on understandings regarding actions taken among neonaticidal cases, the setting of the murder is considered next.

8.4.3.2 Broadening perspectives on the setting of the act

The preliminary literature review yielded the context in which the women often give birth among neonaticidal pregnancies. It was previously discussed how the women give birth within an isolated setting (Friedman and Resnick, 2009; Manchester, 2003). The current theory offers the opportunity to observe plausible processes that lead up to the situation of giving birth alone. While the processes of unsuccessful vicarious accessing and the experience of a vicariously insecure context may have preceded the birth, the women are observed to experience abandonment and isolation long before the birth.

Moreover, the study also reveals the perpetuation of such processes at the moment of birth and how the women eventually maintain this circumstance. In some cases, it is observed how situational limits may play a role in the inability to secure vicarious sources prior to giving birth or how an enduring pattern of perceived abandonment is amplified at the birth encounter. The theory offers further perspective on the consequences of such isolation at birth as the dependant vicarious mother, in significant need of vicarious input and support, is left feeling helpless and incapable during labour.

8.4.3.3 Broadening perspective on the nature of the act

On the basis of the preliminary literature review, most of the research describe the women's method of taking the life of their newborn (Friedman and Resnick, 2009; Razali et al., 2014). The review of literature following data collection yielded very little new approaches and understandings regarding the actual act of taking the life of the newborn. However, the current study revealed that the aforementioned phantomising actions persist and are even heightened at the time of the commission of the offence. This section reveals that, by considering such actions, the current theory is deemed to broaden perspectives on the nature of the act. Henceforth, the constructed theory further elicits thought on the psychological concept of dehumanisation and the possibility of integrating this concept towards broadening

perspectives on the nature of the act. Finally, this section indicates how the constructed theory broadens perspectives on the action of hiding the child's body at the time of the commission of the offence.

As described, the constructed theory reveals how phantomising actions contribute towards the commission of the offence. This is observed to be especially relevant concerning the actions of clouding, un-acknowledging, numbing feelings, and un-projecting futures. The theory offers an understanding not only on the continuation and increasing intensity of these actions but reveals what happens cognitively and emotionally for these women as they engage in the act of neonaticide. By phantomising actions, the women are reportedly experiencing feelings of lack of clarity, confusion and unreality regarding the situation, while, at the same time, feeling as if they are 'losing control'. As a result of un-acknowledging, the women emphasise feeling as if they had not acknowledged the baby for what it truly is, their own child; while also numbing their feelings towards the baby. By un-projecting futures, the women refrained from engaging in thoughts in the moment regarding the consequences of their actions. Subsequently, quick impulsive action is observed as the women feel they are acting 'just for the moment' without in-depth contemplation regarding the consequences. The study, therefore, corroborates the experience reported in Riley's (2005) study regarding the impulsive nature of the offence but offers an opportunity to see the conceptual processes that underpin the experience.

Another concept that may add value to the current constructed theory is that of dehumanisation. Dehumanisation concerns the act of obscuring an individual's identity to that of something less human (Bartol and Bartol, 2005). Dehumanisation has been regarded as a consistent property of offending behaviour, especially in cases of homicide (ibid). According to Bartol and Bartol (2005), this occurs as the offender is able to act towards something that is less than human without being overwhelmed by feelings of guilt. Via the phantomising actions and misrepresenting actions employed within the study sample, the women consequently narrated not seeing the child for what it had been, a young vulnerable person. It may, thus, be considered that the baby had been dehumanised secondary to such actions. With further exploration, the concept may be meaningfully incorporated into the constructed theory.

The literature discussed within the preliminary literature review was shown to emphasise the women's action of hiding the corpse following the act of neonaticide (See Section 2.2.3).

While this may be a useful component in observing the women's capacity to appreciate the wrongfulness of the act, the theory again offers an opportunity to regard the persistence and role of phantomising actions in this. Following the act, the women are observed to, yet again, employ phantomising actions, however, the actions are observed to serve the role of minimising their experience of wrongfulness. I critically considered their stories around this and reasoned that the women were able to perceive their actions of taking the life of their newborn as wrong, but that they had hoped to phantomise even the act itself. It appears that the purpose of this had been to refrain from experiencing it as a reality with significant consequences. This reveals how the theory can broaden perspectives on actions taken during the act of neonaticide. Next it must be considered how the constructed theory may elaborate understandings regarding actions taken following the act.

8.4.3.4 Broadening perspectives on actions taken after the act

Existing research emphasises the detached attitude women experience following the offence, as the women are observed to go on with life as if nothing had happened (Ciani and Foutanesi, 2012; McKee and Egan, 2013). The constructed theory reveals how, by phantomising or misrepresenting actions, the pregnancy and baby is made to never be fully experienced by the women. Moreover, the act of neonaticide itself is also argued to be phantomised via the same phantomising actions. It is by these phantomising actions that the women refrain from exerting focused cognitive energy towards the wrongfulness of the act. Furthermore, the theory also reveals the importance of vicarious input in acknowledging the reality of the offence after it had occurred. As a result, it is seen how these conceptual processes may underpin the detached attitude and afford its persistence.

8.4.4 Broadening perspectives on 'why' women commit the act

The constructed theory also offers an opportunity to reconsider understandings regarding the question 'why' women commit the act. The theory offers an opportunity to critically evaluate the use of classification systems in this regard and reveals how the constructed theory may add to conceptualisations in this manner. Furthermore, by reflecting on the constructed theory, recommendations are made on how the theory may be extended upon in cases of mentally ill women. The purpose is argued to facilitate understandings on how and why women from this population may come to commit the act.

8.4.4.1 Moving beyond motive

The seminal work of Phillip Resnick (1969; 1972) and D'Orban (1979), as outlined in the preliminary literature review (See Section 2.1.1), provide some perspective on understanding neonaticide from the point of view of motive. However, in the face of the constructed theory it is important to consider what the theory may reveal in terms of the limitations of such classifications. It is further important to consider how the constructed theory may add to the work of Resnick and D'Orban and how their work may, in turn, be integrated into the theory. It is firstly considered how the data questions the practical usefulness of classification categories. The usefulness of questioning 'how' as opposed to 'why' (motive) is then introduced. Finally, it is argued how the constructed theory reveals a possible conceptual trap when there is an over-reliance on classification systems. It is motivated to move beyond the focus on motive if the aim is to understand the act of neonaticide, but not to discard of classification systems in its entirety.

On the basis of their work, the intent to commit the act is shown to occur based on variant motives, whether it be an altruistic filicide, acutely psychotic filicide, unwanted child filicide, accidental filicide, or spousal revenge filicide (D'Orban, 1979; Resnick, 1969; Resnick, 1972). The women's stories, as obtained within this study, revealed that one woman may fit into more than one classification category. In my data collection encounter, one woman vaguely alluded to having considered the depressing circumstances her baby may have experienced, how the child had been unplanned and that she had experienced feelings of abandonment at the time of birth. Resnick and D'Orban's categories of altruistic filicide, unwanted child filicide, and spousal revenge filicide may be imposed upon the data respectively as she narrates her story.

It should firstly be noted that the purpose of theory construction in the current study was not to impose already existing concepts to the data, but that this was a mere observation throughout the research process. Nevertheless, the encounter stimulates some academic debate on the matter. While identifying motive may be a useful aspect to determining intent and, thus, guilt in a court of law, the usefulness of such classification categories for this population of women must be questioned. This is especially the case if the aim is to understand the women's psychological experience, irrespective of guilt and their offender status. If one individual were to fit into more than one classification category, it is questioned what the practicality would be to place the women into different classification categories.

Surely, if separate classification categories were to be employed, each category would need to communicate something specific about those placed within the named category?

The current constructed theory suggests that there is more than what meets the eye beyond motive in the commission of the offence. Firstly, it must be noted that I still encourage the application of Resnick and D'Orban's classification systems to the women's stories. This is motivated mainly by conceiving the type of motives within the neonaticide. However, the current constructed theory may add to the work of Resnick and D'Orban, as the underpinning pathways presented in the previous chapter may run through as a golden thread despite the type of motive identified. So, patterns of gestating, patterns of 'being' mother, patterns of interacting, communicating and securing interpersonal support. and patterns of engaging with pregnancy-related content may occur in unique combination in spite of the type of motive. While this may be true for the women consulted in the current study, with time and ongoing research, the current theory may be expanded to that of a formal theory with significant explanatory power (Charmaz, 2014).

The abovementioned dynamic patterns and processes may be seen to add value towards the quest of understanding neonaticide. If commonality in patterns may be observed despite the type of motive, the question of 'how' may now become more useful than the question of 'why'. The question of 'why' is addressed by establishing motive. However, along the same lines of reasoning as Lambie (2001), Bourget and Gagne (2002) or Haapasalo and Petaja (1999) (see Section 2.2.4.2), the reasons for not wanting a child are shown to be endless (motive of unwanted child). Moreover, more recent literature on motive consulted after the theory construction, reveal that there may be no motive identified in some cases of neonaticide (Amon et al., 2020). Nevertheless, the golden thread of interacting abstract concepts of docile gestating, vicarious mother, vicarious accessing, contexts of security, and degree of engaging offers an opportunity to observe commonality in experience among this population of women. With the advancement and further development or construction of such commonalities, more opportunity exists for targeted intervention geared towards rehabilitative and prevention efforts. This is expanded upon in Section 8.4 below.

Up to this point, it has been argued how the newly constructed theory offers insight into the direction to which science can move. Namely, one of maintaining the focus on motive but also another of being more clinically useful where science would move beyond motive towards processual understandings of that which underlies the act; irrespective of motive.

Nevertheless, the theory also offers insight into a possible conceptual trap in which forensic mental health care workers may fall via the application of such classification categories. This is considered next.

The concepts of phantomising actions and phantomised disengaging introduces the idea of how pregnancy-related content, thoughts, emotions, experiences, and actions are not necessarily at the forefront of the women's experience during their neonaticidal pregnancies. Reflections in the previous chapter reveal how a pregnancy experience and foetus may not be fully acknowledged and where it may be ignored. This was seen to be especially true in the context of lacking external influence and support. Subsequently, the women are seen to neglect to fully engage in contemplation regarding the foetus' existence and how to act towards it during the pregnancy and future. Similar to Riley's research (see Section 2.2.5.4), at birth, the act of taking the life of their newborn is impulsive. In the current research, neonaticide was seen as a seeming in-the-moment decision towards something that never fully existed within their mind and experience. Consequently, the women's experience may be different to what Resnick and D'Orban's classification systems may lead one to believe.

At the outset of the research, I expected to find significant negative contemplation of the foetus on behalf of the women during their pregnancies. I expected that the women would have spent the nine months of their pregnancy contemplating thoughts about how there were rescuing their newborn from a dreadful life and, thus, would eventually decide to take its life. Alternatively, I was expecting to hear stories about the women reflecting on how the child they were carrying was unwanted or how they thought about taking revengeful action towards their partner during the pregnancy. However, in my attempt of having the women's stories guide theory construction, I became more aware of how classification systems such as that of Resnick and D'Orban, informed my expectations. My expectations were taken for granted without my full awareness thereof initially. It is an important observation that these aspects are not what was emphasised by the women in their in-depth explorations regarding their experience.

The aforementioned encounter reveals the conceptual trap in which one may fall on the basis of classification systems. Classification systems based solely on motive may emphasise the pre-meditative component of neonaticide. In so doing, the emphasis may be solely on the aspect of intent. Emphasis on this component minimises a significant property of the women's experience, namely a pregnancy and foetus that was phantomised and not acted

towards with purposeful intention for the duration of the pregnancy. I am not denying that the moment of birth is characterised with intentional action towards the newborn. However, I am arguing, on the basis of the study findings, that forensic mental health care workers should not merely focus and emphasise motive at the expense of other cognitive and emotional experiences that play an important part in underpinning the act.

In sum, the theory constructed within this study reveals that more is to be understood regarding neonaticide beyond classification systems that emphasise motive. Furthermore, the use of classification systems may be seen to have limited the focus to motive at the expense of missing the women's experience during their pregnancy as being one lacking significant contemplation of the pregnancy and foetus. Subsequently, the women's actions at birth as being directed towards something that is not fully experienced as their own newborn is not considered. Instead, too much room may be left for practitioner's assumptions and anticipation that the mother had acted towards a devalued and unwanted child. While the conceptual traps may be shown, it is not argued to 'throw the baby out with the bathwater' and completely negate motive as a component to understanding the phenomenon. Instead, it is argued that it should be incorporated as an important component and property along with the other complex processual experiences as revealed within the current study and theory. Further research will play a pivotal role in this regard.

8.4.4.2 Moving towards new understandings in mentally ill populations

One final aspect that should be considered as to why women may commit the act, is the presence of psychiatric diagnoses. The purpose of the current study was to look at women from criminal cases, and not those who had been found to be not criminally liable on the basis of mental illness. However, this does not suggest that the population concerned did not present with symptoms of mental illness. As discussed in the previous chapter, some women reported to have felt depressed around the time of the offence. While the women may still have been able to distinguish between 'right' and 'wrong' and the capacity to act on such knowledge, it is still important to consider the role of mental illness as a contributing factor towards interacting concepts and phantomising actions. For instance, some women narrated having faced challenges in their lives that had left them with feelings of depression. In this manner, the concept of redirecting preoccupation is relevant, as the women focus their attention on more depressing concerns at the expense of the foetus. Subsequently, and via such phantomising actions, the women are not observed to engage in the pregnancy process.

It is, thus, necessary for further research to investigate the presence of mental illness and its impact thereof on the degree of engaging within the pregnancy process. This is especially relevant in the face of South African studies revealing that 40% of women living in relative poverty experience perinatal depression (Manikkam and Burns, 2012). Moreover, Marsay et al.'s (2017) study indicate a perinatal mental illness rate of 38.6% at a local hospital in Johannesburg, South Africa, of which 19% presented with a depressive disorder and 21.4% with a trauma or anxiety-related disorder. Beyond depression, symptoms of an anxiety disorder or trauma-related disorder may serve a similar role in redirecting preoccupation. It is also reasoned, that in cases of a psychotic disorder, the women are incapable of engaging with their pregnancy and in a similar manner the baby does not 'come into being'. This aspect is, therefore, deemed likely to contribute towards the act of neonaticide, as they act towards something that is not experienced as a baby. Such research would further extend the properties of the current theory and afford further understandings, even in cases of mentally ill individuals.

In summary, the aforementioned reveals how the constructed theory offers a dynamic account of interacting processes that are seen to underpin the act of neonaticide. It is through such processes, over time, where the women in the sample are seen to commit the act. By understanding the 'bigger picture' of how women come to commit neonaticide, perspectives are also broadened on who the women are, what actions they take, and why they commit the act. It was shown how psychological concepts such as pregnancy denial, introspection, and self-reflection as well as clinical observations concerning poor coping resources, dependency, and passivity can be meaningfully understood via the theory and incorporated into it. It was also shown how psychological concepts of avoidance, minimising, an external locus of control, as well as lacking agency may be meaningfully incorporated to extend the properties of the constructed theory. Similarly, the theory is seen to add to but also be potentially extended by and corroborate with psychological theories. This concerns especially the work of Murray Bowen (1976; 1978) as well as attachment perspectives. Reflections on the theory is not only seen to broaden understandings regarding the phenomenon but is also deemed useful by affording a prospect to consider opportunities for prevention and rehabilitation preventions methods. This is considered next.

8.5 Towards Rehabilitative and Prevention Methods

The constructed theory, together with the integrational components discussed above, reveals possible domains of exploration concerning prevention and rehabilitation interventions. On the basis of the complexity of the plausible processes involved in the act of neonaticide, an inter-disciplinary approach is deemed necessary. The approach may require assistance from variant mental health care practitioners, as well as obstetricians and individuals involved with community outreach and campaigning. The sections below consider possible prevention and rehabilitation initiatives via incorporating input from such individuals.

8.5.1 Towards combatting incidences of neonaticide

This sections reveals limitations towards current attempts aimed at combatting neonaticide on the basis of the constructed theory. Alternative approaches that may possibly aid in this regard are mentioned, together with the foreseeable challenges. Recommendations are made towards the use of technology as well as the use of community intervention efforts. Commentary is also provided on possible risk assessment efforts.

A common suggestion among academic literature in combatting the incidence of neonaticide is on educating mothers on alternatives (Antic, 2017). This may include the termination of pregnancy (TOP), adoption, or the use of safe-haven baby boxes that would allow one to drop off an unwanted baby. Among the narratives obtained within the study, the women revealed an awareness of alternatives such as TOP or adoption, however, the women reported negating to consider such options. This is seen to form part of the process of phantomising the pregnancy, where the women refrain from engaging in any content pertaining to the pregnancy. So, the pregnancy and foetus is not experienced as a reality and, thus, not lived as one. By phantomising actions of un-projecting futures, the women are not seen to engage in any contemplation regarding the management of the situation. Even in the face of being aware of alternatives, hence, the women may fail to engage in thought regarding such alternatives as it is not deemed relevant to their experience.

In order to provide education around alternatives as a useful preventative intervention for this population of women, efforts would first need to be made to aid the women in fully acknowledging their pregnancy and foetus. This may be a significant challenge, as the study reveals through docile gestating that this population of women may be more passive in attending to mothering and pregnancy content. While still relinquishing control, the study reveals that the women may come to act towards and contemplate their pregnancy mostly via

the input of vicarious sources. However, before such sources may be secured, the complex process of vicarious accessing reveals how this may, at times, be unsuccessful. It must be contemplated how to reach this population of women so they can engage in thought regarding their pregnancy.

It may be useful to make alternative resources available to women that would also serve a role in engaging women in greater contemplation and problem-focused thought regarding their pregnancy situation. Such sources would need to overcome the potential limiting forces of the women's assumptions for accessing. In this sense, it would need to eliminate barriers in expectant evaluations regarding their degree of burdening and fearing judgement and anger. It would need to overcome the challenges of feeling that their communications may be powerless or that they are unable to confide in anyone. The approach would need to offer them alternative ways of communicating that would overcome the barriers of communicating their pregnancy through proxy, non-verbally, or by expecting to follow communications.

Technology may be used as a potential resource in addressing the above. A smartphone application may be developed that would facilitate thought on one's pregnancy. Through community outreach advertising initiatives, women could be encouraged and invited to anonymously engage with an app regarding the possibility of being pregnant. The application could serve as a vicarious source that would guide thought from questions about the possibility of being pregnant towards acknowledging the pregnancy and followed by problem-focused thought on how to manage the pregnancy or how to access potential resources. However, significant challenges such as poor cell phone reception in urban areas, socio-economic challenges in terms of obtaining access to a smartphones, and problems with illiteracy may hamper such initiatives.

Alternatively, social community outreach initiatives may be required to encourage women to speak about their pregnancies in general. Under the commonly used South African phrase 'it takes a village to raise a child', community initiatives may use the phrase as a slogan for a campaign that would create a greater sense of freedom to discuss pregnancy-related matters. The community should be especially encouraged to reach out to staff at clinics, whether it be psychologists, nursing staff, social workers, obstetricians, or midwives to contemplate pregnancy-related matters. The non-judgemental and confidential nature of such engagements would need to be emphasised. In turn, professionals employed within such settings should be particularly aware of problems with vicarious accessing, limitations to vicarious security, as

well as the potential of distorted engaging or phantomised disengaging as possible risk factors for a neonaticidal pregnancy. Extra precautions would need to be taken within such cases.

The study reveals the significant impact of a woman who may distortedly engage with her pregnancy or fail to engage in her pregnancy via phantomised disengaging on the eventual act of neonaticide. Professionals involved in pregnancy-related matters should be attuned and equipped with skills in evaluating potential risk for neonaticide in this regard. The use of the Maternal Foetal Attachment Scale (MFAS) may be especially useful to evaluate the extent to which a woman is contemplating her foetus (Shin, 2007). The scale consists of twenty-three indicators that are divided into five scales concerning: a) self-differentiation; b) differentiation of the foetus; c) interaction with one's foetus; d) attributing characteristics to the foetus; and e) donating oneself and taking responsibility for the foetus (ibid). The tool may be used as an adjunct in the evaluation process. However, problems with standardisation of the tool within the South African context should be considered and addressed with further research.

The discussion above reveals the possibility of addressing prevention efforts from a multidisciplinary approach. It reveals the need to implement alternative approaches to reach this unique population of women. The possibility of incorporating risk assessment methods has also been revealed. While the aforementioned may just be a starting point or effort at addressing neonaticide, the following provides possible rehabilitation efforts to curb incidences thereof.

8.5.2 A starting point towards rehabilitation

Although not a frequent occurrence, research reveals that there are incidences of reoffending among women who commit the act (Klier et al., 2019). By considering the processes deemed to underpin the act within the constructed theory, recommendations can be made on possible areas of intervention and treatment targets for this population of women. Possible treatment targets may include mobilising the women for change via aiding in the acknowledgement and wrongfulness of the act; and taking responsibility thereof. Henceforth, improvement of the women's capacity for reflective function may be necessary as well as improving the women's capacity to engage in independent decision-making concerning motherhood. Further treatment may focus on shifting coping resources from avoidant coping to that of problem-focused coping. Finally, efforts may be made to assist the women in their interpersonal functioning as well as communication strategies. This section elaborates on each of these

treatment targets. The employment of an integrative approach involving variant psychotherapeutic modalities is motivated to address the varied aims.

In phantomising actions, the constructed theory reveals how the women may negate acknowledging the act of neonaticide itself, as well as its wrongfulness. By such seeming minimisation and self-deception, the women may be unlikely to seek psychotherapy as they would be unlikely to acknowledge the problem concerning their actions. This may be further exacerbated by their apparent docility. It is, therefore, advised that such women are referred for psychotherapy through the court system, as intervention would most likely need to be initiated by external forces.

On the basis of the aforementioned phantomising actions, one of the first aims of psychotherapy would need to be the mobilisation of women to acknowledge the act and the wrongfulness thereof. This may also concern the women's regard for the consequences of such actions on other's lives as well as their own. Should the women continue to refrain from such acknowledgement, they would be unable to accept the need to address the underlying problems and to mobilise for change. The approach towards such aims would need to be done in a supportive, understanding and non-judgemental manner. It is reasoned that if the women were to experience judgement regarding their actions, that this would further elicit the need for employing phantomising actions as a possible defence towards deceiving and protecting themselves.

As discussed previously, the women within the sample presented with difficulty regarding their reflective capacity. This may pose a challenge to psychotherapy, as the women may firstly lack insight on their own thoughts and feelings. The initial stages of psychotherapy require the person-centred approach as advocated by Carl Rogers (1957). As a psychotherapeutic stance, the approach requires a non-judgemental attitude as well as congruency (genuineness), empathy, and unconditional positive regard (acceptance) for the client (*ibid*). According to Rogers (*ibid*), the stance facilitates self-exploration and is deemed as necessary conditions for change. It is indicated that the approach can facilitate change within the individual, both at a surface level as well as deeper levels in a direction that would allow "... greater integration, less internal conflict, more energy utilisable for effective living; change in behaviour away from behaviour generally regarded as immature and towards behaviours regarded as mature" (Rogers, 1957, p. 95).

Psychotherapy should also focus on aiding the women in building self-confidence as well as a sense of independence and as having a separate identity. This relates specifically to the women's apparent difficulty in managing the mothering world and mothering content independently as revealed by the concept of the vicarious mother. In a response to the discussion above, psychotherapy may aid in obtaining greater self-differentiation in accordance to Murray Bowen's (1976; 1978) conceptualisations. So, the women may be seen to act towards mothering content with greater conviction of their own thoughts and feelings, independent from needing overwhelming input and guidance towards gestating from others.

Previously it was revealed how the phantomising actions employed may be regarded as a form of avoidant coping. As the women may be seen to gain confidence within themselves and their own thoughts and feelings, psychotherapy may then aim at shifting the focus away from avoidant coping towards that of problem-focused coping (Folkman and Moskowitz, 2004). Problem-focused coping is a way of coping that is focused on addressing problems instead of avoiding them (ibid). Via variant cognitive behavioural techniques, the approach proves to be useful for individuals who may deny, minimise or avoid dealing with stressful life circumstances (Holahan et al., 2005).

Finally, the constructed theory also reveals communication difficulties as well as problems with interpersonal relationships via the concept of vicarious accessing. Psychotherapy may usefully incorporate the interpersonal effectiveness module of Marsha Linehan's (1993) dialectical behaviour therapy, which may impart skills regarding interacting with others and communicating more effectively.

The above recommendations are a mere starting point towards the rehabilitation of women who commit neonaticide. It is based on potential underpinning processes of the act as revealed by the constructed theory. On the basis of the varied techniques and integrational input required from variant modalities, it is presumed that such intervention would be lengthy. Further research is needed on the effectiveness of the recommended approaches. Further prognostic concerns need to be investigated as well. Firstly, it is uncertain the extent to which the plausible underpinning processes are entrenched within the women's functioning and the feasibility of creating shifts. Moreover, prognosis is further questioned in the face of the degree of remorse experienced and the capacity for remorse. It is only via further research that incorporate such elements of investigation that the effectiveness of the recommended therapeutic interventions would be shown.

8.6 Summary of the Recommendations for Future Research

This section summarises the recommendations for future research as made within this chapter. The recommendations are motivated on the basis of extending the properties of the constructed theory as well as to elaborate understandings regarding the phenomenon of neonaticide. With the introduction to the concept of the vicarious mother, links are shown relating to the psychological concept of self-differentiation as proposed by Bowen (1976). Future research may prove useful in investigating the concepts of this theory to elaborate on the general underpinning processes of women who commit the act. The concepts of autonomy and independence seem particularly relevant. The concept of phantomising actions appear to share connections with an avoidant coping style, yielding the importance of evaluating this pathological coping style among the women concerned specifically. On the basis of the women phantomising their pregnancies, attention was drawn to the concept of minimising. It may be useful to investigate this concept as a cognitive bias among the population concerned, especially in the form of self-denial and self-deception. The concept of relinquishing control seems to share connections with the concept of having an external locus of control. Future research may, thus, prove useful, especially in terms of this personality concept and the associated concepts of lacking agency.

While research already show connections between borderline personality disorders and antisocial personality disorders, the women's challenges experienced in mothering independently suggest the value of investigating the presence of a dependant personality disorder among the population concerned. The concepts of vicarious accessing and challenges faced with avoiding the sharing of news on the basis of fears of disapproval and rejection reveal the value of investigating avoidant personality disorders among neonaticidal women.

In studies concerned with the concept, denial of pregnancy, it is deemed useful to investigate the role that significant others play in recognising and acknowledging the pregnancy. This was informed by the insights obtained via vicarious engaging and vicarious sources as constructed in this study. For researchers concerned with maternal-foetal attachment or prenatal attachment, considering the role of vicarious sources as a moderating factor to attachment or unique attachment approaches may prove to extend existing theories on attachment. Furthermore, while dehumanisation is deemed a consistent property in offending behaviour, the phantomising actions and misrepresenting actions demonstrated within this study suggests the utility of investigating this concept among neonaticidal women. It was also shown that research on neonaticide may benefit from extending investigations beyond motive

and that such research is deemed important to expand understandings regarding the phenomenon. Finally, as stimulated by the concept, redirecting preoccupation research on the role of mental illness as shifting the focus away from the foetus and serving as a potential phantomising action, as constructed in this study, is further encouraged.

8.7 Quality Evaluation of the Theory

The study endeavoured to ensure scientific rigour and good scholarship. The approach utilised to ensure trustworthiness and quality of the data was previously discussed (See Section 5.7.3). This section merely serves to provide the supporting claims to confirm the attainment of the required quality criteria. Via integrating the criteria for qualitative studies, as proposed by Lincoln and Guba (1985), as well as the quality criteria as recommended by Glaser (1978) and Charmaz (2006; 2008), the analysis is addressed in accordance to the categories of credibility, originality and ‘work’, resonance, usefulness, and finally, dependability.

8.7.1 Credibility

The study aimed to afford credibility of findings, namely, to provide a theory that is deemed plausible (Charmaz; 2014). This criterion is considered to have been reached, as the concepts demonstrated and the claims made about them are substantiated in the previous chapter via example excerpts provided (ibid). The concepts are further shown to recur in a variety of ways over time (moving from pre-pregnancy through to post-birth), thereby yielding adequate data to merit the claims made (ibid). The criterion is further deemed to have been met as each category of concept provides a wide range of observations (ibid). So, each category is expanded upon by including a variety of concepts and properties that all speak to the relevant category and also connect with other categories of concepts. Thus, depth and dimension is obtained among the data as well as relationships and variances (Charmaz, 2016). On the basis of the extent of the scope and coverage of each category revealed in this regard, theoretical saturation is argued to have been reached (Bryant, 2018).

8.7.2 Originality and ‘work’

An important quality criterion for the study was to offer a scientific piece that would offer new insights (Charmaz, 2006). Glaser’s aim of ‘work’ was further applicable, referring to the intention of providing a theory that would offer analytical explanations concerning how women come to commit neonaticide (Weed, 2009). It is argued that by through the complexity of relationships among the constructed concepts, the study yields an analytic product that offers new theoretical insights on the underpinning processes involved in how

women come to commit neonaticide (Charmaz, 2014). The study is unique as it moves beyond description and reveals variant interacting patterns of 'being' mother; in interaction with her environment; with subsequent interpersonal contexts that, in turn, impact on the expression and engagement with her pregnancy and foetus. Such persisting engagement styles and actions are shown to have consequences for how the mother perceives and acts towards her newborn at birth and beyond the act.

Moreover, originality is ensured as the constructed theory offers new insights beyond the previously explored domains of 'who' the women are, 'what' they do, and 'why' they do it. As argued above, the question of 'how' women come to commit neonaticide adds scientific value to the field, as it offers a golden thread that links with previously explored and disjointed characteristics. In a similar vein, it extends conceptions by making proposals on moving beyond each of the aforementioned domains on the basis of the findings. As the constructed theory is further seen to connect with existing psychological theories and clinical observations, recommendations are made to integrate such existing knowledge within the constructed theory. This is further seen to elaborate understandings regarding the phenomenon. Furthermore, the sections above reveal how the constructed theory challenges the previously firmly held classification systems in understanding the act. Thereby, it advocates for the use of alternative research approaches, as adopted within this study, to understand the phenomenon.

The constructed theory is further deemed to offer social and theoretical significance as it reveals possible areas for intervention. While the constructed theory offers plausible underpinning processes towards neonaticide, potential prevention and rehabilitation efforts have been recommended above. The constructed theory reveals potential challenges towards such aims and reveals the importance of a multidisciplinary integrative approach in this regard.

8.7.3 Resonance

The study further aimed to achieve resonance, meaning it was concerned with obtaining an in-depth understanding of the women's experience that would also resonate with them. Initially, within the research encounter, the women all emphasised having felt unaware of why they had committed the act or how they had gotten to such a point. As the theory was being constructed via the iterative process of moving back and forth between data collection and analysis, the women were also consulted on the developing concepts. Towards the end of the

data collection process, the women reported greater insight into the factors that had contributed towards the commission of the offence. As the women were able to elaborate on needing support but also struggling to establish such support, their experience was seen to resonate with the concept of the vicarious mother and vicarious accessing. While the women expanded on the different type of support experienced through their non-neonaticidal pregnancies as opposed to their neonaticidal pregnancies, their experiences started to resonate with the concept of contexts of security. The women's participation within the different pregnancies was also seen to resonate with the concept degree of pregnancy engaging with its respective associated actions. As the women expanded upon the different manners of not taking control among the different pregnancies, the concept of docile gestating was also observed to resonate with them.

8.7.4 Usefulness

The constructed theory is deemed useful as it sparks ideas for further research regarding the phenomenon. It reveals novel ways of investigating the phenomenon as well as understanding it. The study reveals that taking a constructivist grounded theory approach towards researching the phenomenon can expand current conceptualisations regarding the phenomenon. This is true as it provides a processual understanding of the plausible underpinnings of the act. Moreover, it has been reflected throughout this chapter how further research can expand on and add towards the current theory as well as understanding of the phenomenon. Moreover, the theory is deemed useful as it offers feasible recommendations towards addressing the phenomenon that can be investigated and elaborated upon within further research. The theory is, therefore, deemed relevant, meaningful, and helpful in practice as it initiates different ways areas of understanding as well as intervening concerning the occurrence of the phenomenon. However, the transferability of the data, namely, the ability to transfer the findings to other settings, are further reflected upon within the limitations section of this chapter (Lincoln and Guba, 1985).

8.7.5 Dependability

Dependability is deemed to have been attained within the current study on the basis that the prescribed process towards data collection and analysis was completed as discussed within the methodology section of this thesis (see Section 5.7.3.5). Dependability is also deemed to have been attained through transparency, namely, the reflexive statements provided throughout the thesis (Charmaz, 2014; Lincoln and Guba, 1985). Hence, throughout the thesis, I have shown how my background experiences, philosophical assumptions,

disciplinary and theoretical perspectives, power dynamics during interviewing, and interaction with the data have all influenced my approach towards the research and the claims made about it.

8.8 Limitations of the Study

Before concluding the study, it is also important to consider the limitations of the research. The limitations are considered on the basis of the nature of grounded theorising, limits of data pertaining mostly to direct action following the offence. Further limitations concerning the study population as all having been convicted and incarcerated for the offence is considered.

Through the underpinning postmodern paradigm and nature of the constructivist grounded theory (CGT) philosophy and method, I can only claim that the present study is but one plausible explanation on how women come to commit neonaticide. However, in this instance I would need to reference George Box's Dictum stating that all models are wrong, but that some are useful (Bryant, 2018). The value of the study is motivated in that it serves as a backdrop from which clinicians may consider relevant and new cases. Where parallels exist, the constructed theory and recommendations may serve useful in beginning to conceptualise and implement strategies for change. Moreover, the study remains a starting point for theorising and reveals how similar theorisations may be useful in revealing the complexity of the phenomenon (Charmaz, 2014). Although the constructed theory has not said all there is to say concerning the phenomenon of neonaticide, the account provided has assisted in establishing surer ground for understanding neonaticide than previously offered.

It is further considered that, on the basis of the CGT approach, different researchers may see different things and criticise the research for not emphasising one aspect over another. In this regard, one researcher may have hoped to emphasise the structural limitations impacting on neonaticide or another researcher may have hoped to emphasise the role of cultural influence. For instance, the current study did not emphasise the broader landscape of the women's social contexts. It does not explore the wide range of conditions and circumstances that result in risk factors or antecedents for neonaticide that typically fall under other disciplinary works. Such research may explore structural and institutional contexts, for example poverty and female imprisonment. However, the present study was constructed on the basis of the aspects emphasised by the women and my personal interaction with the data. While there may be additional components to consider, I believe I have saturated my categories sufficiently and that they are adequately robust to render an understanding regarding the phenomenon (Bryant,

2018). As is true to the CGT form, alternative perspectives may also be integrated by further researchers to extend theorising. It is acknowledged that local structural, institutional and systemic contexts are important in understanding neonaticide in South Africa and deserve further investigation.

In line with the above statement, it must be mentioned that the current study sought to reveal the ‘bigger picture’ of the phenomenon by definition of providing in-depth processual and interacting knowledge on the subject. By this definition, the aim of providing a ‘bigger picture’ is considered to have been achieved. However, other disciplines may refer to the ‘bigger picture’ as revealing the broader landscapes of structural and institutional contexts. From this perspective, it is argued that the current study may be deemed but one piece of a ‘bigger picture’.

All of the women who participated in the study were incarcerated at the time of interviewing. So, the ideas are seen to represent women who are incarcerated for the act and should be understood as such. Similarly, all of the women took direct action in taking the life of their newborn, as opposed to indirect actions such as passive neglect or abandonment. Again, the stories may be mostly seen to represent women who take direct action during the act. Further research is that needed that would consider the experiences of women who had not received a prison sentence or of women who had taken indirect action towards their newborn.

8.9 Study Contributions and Closing Remarks

Regarding the closing remarks of the study, reflection is needed on the nature of the study and its contributions towards advancing science. This study is deemed a novel approach towards researching neonaticide in that it sought to understand the phenomenon of neonaticide by asking the question of ‘how’ women come to commit the act. This was in opposition to seeking singular isolated variables on ‘who’ the women are regarding their individual and demographic characteristics, ‘what’ actions the women took at the time of the act, or ‘why’ the women did it. Instead, by focusing on a question that affords a processual focus, the complexity of the phenomenon could be revealed. However, despite the endeavour of steering away from the questions of ‘who’, ‘what’, and ‘why’, the processual nature of the question ‘how’ ultimately afforded an opportunity to move in the direction of seeing connections between the previously isolated ideas. It is argued to begin serving as a golden thread towards understanding the act. Therefore, the study reveals the leaps that science can take if it were to approach research on the phenomenon from a different angle; an angle that is exploratory and

interpretive in nature, directed on obtaining information directly from the viewed with fewer impositions on what could be found. Thus, it is argued that more research is required on the phenomenon that would start to consider it from the bottom-up, as opposed to top-down from the start.

8.10 Chapter Conclusion

This chapter provided a discussion on the study and serves to conclude the thesis. It was revealed how the constructed theory may be used to broaden perspectives on the phenomenon of neonaticide. Specific recommendations were made for future research to continue moving towards such aims. Some recommendations towards prevention and rehabilitation efforts constituting multidisciplinary and multi-modal and integrative perspectives were provided as starting points towards such aims. The study's evaluation regarding its capacity for credibility, originality, resonance, usefulness, and dependability all speak to the acceptable quality of the theory. Finally, while some limitations of the study findings are revealed, the study is still argued to make a valuable contribution towards establishing surer ground on the plausible underpinning pathways towards neonaticide.

REFERENCE LIST

- Abrahams, N., Mathews, S.M., Martin, J.L., Lombard, C., Nannan, N. and Jewkes, R. (2016) 'Gender differences in homicide of neonates, infants, and children under 5y in South Africa: Results from the cross-sectional 2009 national child homicide study', *PLOS Medicine*, 13(4), April, [Online]. Available at: <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002003> (Accessed 28 June 2017).
- Africa, A. (2016) 'Bad girls to good women – women offenders' narratives of redemption', *Agenda: Empowering Women for Gender Equity*, 29(4), pp. 120-128. doi: 10.1080/10130950.2015.1124501
- Ainsworth, M.D. and Bowlby, J. (1991) 'An ethological approach to personality development', *American Psychologist*, 46(4), pp. 333–341. doi: 10.1037/0003-066X.46.4.333
- Alarid, L.F. and Vega, O.L. (2010) 'Identity construction, self, perceptions, and criminal behaviour of incarcerated women', *Deviant Behaviour*, 31, pp. 704–728. doi:10.1080/01639620903415943
- American Psychiatric Association (2013) *Diagnostic and statistical manual of mental disorders*. 5th ed. (DSM-5). Washington, DC: American Psychiatric Publishing.
- Amon, S., Klier, C.M., Putkonen, H., Weizmann-Henelius, G. and Fernandez Arias, P. (2020) 'Neonaticide in the courtroom - room for improvement? Conclusions drawn from Austria and Finland's register review', *Child Abuse Review*, 28(1), pp. 61–72. doi: 10.1002/car.2589
- Andrews, T. (2012) 'What is Social Constructionism?', *Grounded Theory Review: An International Journal*, 11(1), June [Online]. Available at: <http://groundedtheoryreview.com/2012/06/01/what-is-social-constructionism/> (Accessed: 21 February 2017).
- Antic, I. (2017) 'Neonaticide', *FACTA Universitatis - Law and Politics*, 15(3), pp. 211–221. doi: 10.22190/FULP1703211A
- Artz, L., Hoffman-Wanderer, Y. and Moul, K. (2012) *Hard time(s): Women's pathways to crime and incarceration*. Cape Town: GHJRU, University of Cape Town.
- Aydin, S., Cicek, A.C., Artunay, M.C. and Certel, A.B. (2016) 'An Essay on the phenomenon of violence and alienation in the context of the symbolism and signification process', *International Journal of Social Science and Humanity*, 6(5), pp. 402–407. doi: 10.7763/IJSSH.2016.V6.680
- Babbie, E. (2005) *The basics of social research*. 3rd ed. London: Thomas-Wadsworth.
- Badassy, P. (2011) *A Severed Umbilicus: Infanticide and the Concealment of Birth in Natal, 1860-1935*. Durban: University of KwaZulu-Natal.
- Balmores-Paulino, R.S. (2018) 'Avoidance coping strategies', *Encyclopaedia of Personality and Individual Differences*, pp. 1–3. SpringerLink [Online] doi: 10.1007/978-3-319-28099-8_645-1

Bartol, C.R and Bartol, A.M. (2005) *Criminal behaviour: A psychosocial approach*. 7th ed. New Jersey: Pearson Prentice Hall.

Beckenridge, J.P., Jones, D., Elliot, I. and Nicol, M. (2012) 'Choosing a methodological path: Reflections on the constructivist turn', *Grounded Theory Review: An International Journal*, 1(11), [Online] Available at: <http://groundedtheoryreview.com/2012/06/01/choosing-a-methodological-path-reflections-on-the-constructivist-turn/> (Accessed: 10 November 2015).

Beier, K.M., Wille, R. and Wessel, J. (2006) 'Denial of pregnancy as a reproductive dysfunction: A proposal for international classification systems', *Journal of Psychosomatic Research*, 61(5), pp. 723–730. doi: 10.1016/j.jpsychores.2005.11.002

Berg, L.B. (2019) 'Case study on infanticide in South Africa', *Journal of Psychiatry and Mental Health*, 4(1), pp. 1-4. doi: 10.16966/2474-7769.130

Berring, L.L., Pedersen, L. and Buus, N. (2016) 'Coping with violence in mental health care settings: patient and staff member perspectives on de-escalation practices', *Archives of Psychiatric Nursing*, 30(5), pp. 499–507. doi: 10.1016/j.apnu.2016.05.005

Birchmann, B.S. and Sollie, H. (2014) 'Struggling with and for a grounded theory of parents managing life with hard-to-treat ADHD teenagers', *Grounded Theory Review: An International Journal*, 13(1), [Online]. Available at: <https://ntnuopen.ntnu.no/ntnu-xmloi/bitstream/handle/11250/293312/Støre+Brinchmann%2C+Berit+-+Struggling+with.pdf?sequence=3> (Accessed 10 November 2015).

Birks, M. and Mills, J. (2011) *Grounded theory: a practical guide*. London: Sage.

Blos, P. (1975) *The second individuation process of adolescence*. New York: Springer.

Blumer, H. (1954) 'What is wrong with social theory?', *American Sociological Review*, 22, pp. 683–690. doi: 10.2307/2088165

Blumer, H. (1969) *Symbolic interactionism: Perspective and method*. Oakland, California: University of California Press.

Bourget, D. and Gagne, P. (2002) 'Maternal filicide in Quebec', *Journal of the American Academy of Psychiatry and the Law*, 30, pp. 345–351. *PubMed* [Online] Available at: <https://pubmed.ncbi.nlm.nih.gov/12380412/> (Accessed: 13 January 2016).

Bowen, M. (1976) 'Theory in the practice of psychotherapy', in Guerin, P.J. (ed.) *Family therapy: Theory and practice*. New York: Garner Press, pp. 42–90.

Bowen, M. (1978) *Family therapy in clinical practice*. New York: Jason Aronson.

Bowlby, J. (1952) *Maternal care and mental health: A report prepared on behalf of the World Health Organization (WHO) Monograph*. 2nd ed. Geneva, Switzerland: WHO.

Bowlby, J. (1973) *Attachment and loss: Volume II: Separation, anxiety and anger*. London: The Hogarth Press and the Institute of Psycho-Analysis.

Brandon, A.R., Pits, S., Denton, W.H., Stringer, A. and Evans, H.M. (2009) 'A history of the theory or prenatal attachment', *Journal of Prenatal and Perinatal Psychology and Health*,

23(4), pp. 201–222. *National Institute of Health* [Online] Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3083029/> (Accessed: 2 August 2020).

Bryant, A. (2007) ‘A constructive/ist response to Glaser’s “Constructivist Grounded Theory”’, *Historical Social Research*, 19, pp. 106–113, *JSTOR* [Online]. Available at: <https://www.jstor.org/stable/40981072?seq=1> (Accessed: 03 November 2015).

Bryant, A. (2018) 3rd *International summer school on grounded theory and qualitative research, Kaunas, Lithuania* [Lecture series: Constructivist grounded theory methods]. Attended 11–15 June.

Bryant, A. and Charmaz, K. (eds.) (2007a). *The Sage handbook of grounded theory*. Thousand Oaks, California: Sage Publications.

Bryant, A. and Charmaz, K. (2007b) ‘Grounded theory in historical perspective: An epistemological account’, in Bryant, A. and Charmaz, K. (eds.) *The Sage handbook of grounded theory*. Thousand Oaks, California: Sage Publications, pp. 31–57.

Charmaz, K. (2000) ‘Grounded theory: Objectivist and constructivist methods’, in Denzin, N and Lincoln, Y. (eds.) *Handbook of Qualitative Research*. 2nd ed. Thousand Oaks, California: Sage Publications, pp. 509–536.

Charmaz, K. (2002) ‘Qualitative interviewing and grounded theory analysis’, in Gubrium, J. and Holstein, J. (eds.) *Handbook of interview research: context and method*. Thousand Oaks, California: Sage Publications, pp. 675–694.

Charmaz, K. (2006) *Constructing grounded theory: A practical guide to research methods*. London: Sage Publications.

Charmaz, K. (2008a) ‘Constructionism in the grounded theory’, in Holstein, J.A. and Gubrium, J.F. (eds.) *Handbook of constructionist research*. New York: The Guilford Press, pp. 39–412.

Charmaz, K. (2008b) ‘Grounded theory as an emergent method’, in Hesse-Biber, S.N. and Leavy, P. (eds.) *Handbook of emergent methods*. New York: The Guilford Press, pp. 155–172.

Charmaz, K. (2012) ‘The power and potential of grounded theory’, *Medical Sociology Online*, 6(3), pp. 2–15. *Semantic Scholar* [Online]. Available at: <https://www.semanticscholar.org/paper/The-Power-and-Potential-of-Grounded-Theory-Charmaz/93d28c60474e31cedd4464c5b24ae0af2efbc090?p2df> (Accessed: 10 November 2015).

Charmaz, K. (2014) *Constructing grounded theory*. 2nd ed. London: Sage Publications.

Charmaz, K. (2016) *International summer school on grounded theory and qualitative methods, Pisa, Italy* [Lecture series: Constructivist grounded theory]. Attended 6–10 June.

Charmaz, K. (2018) Constructivist grounded theory enquiry [email correspondence]. 22 April.

Charmaz, K. (2019) Constructivist grounded theory enquiry [email correspondence]. 10 December.

Cho, J.Y. and Lee, E-H. (2014) 'Reducing confusion about grounded theory and qualitative content analysis: Similarities and differences', *The Qualitative Report*, 19, November. Available at: <http://nova.edu/sss/QR/QR19/cho64.pdf/> (Accessed: 24 December 2015).

Ciani, A.S.C. and Fontanesi, L. (2012) 'Mothers who kill their offspring: Testing evolutionary hypothesis in 110-case Italian sample', *Child Abuse and Neglect*, 36, pp. 519–527. doi:10.1016/j.chiabu.2012.05.001

Clarke, A.E. (2003) 'Situational analysis: Grounded theory mapping after the postmodern turn', *Symbolic Interaction*, 26(4), pp. 553–576. doi: 10.1525/si.2003.26.4.553

Corbin, J.M. and Strauss, A.L. (1990) 'Grounded theory research: Procedures, canons, and evaluative criteria', *Qualitative Sociology*, 13(1), pp. 3–21. doi: 10.1007/BF00988593

Corbin, J.M. and Strauss, A.L. (2008) *Basics of qualitative research: Techniques and procedures for developing grounded theory*. 3rd ed. Thousand Oaks, California: Sage publications.

Cranley, M.S. (1981) 'Development of a tool for the measurement of maternal attachment during pregnancy', *Nursing Research* 30(5), pp. 281–284. doi: 10.1097/00006199-198109000-00008

Creswell, J. W. (2013) *Qualitative inquiry and research design: Choosing among five approaches*. 3rd ed. Thousand Oaks, California: Sage Publications.

Daly, M. and Wilson, M. (1988) *Homicide*. New York: Aldine de Gruyter.

Denzin, N. K. (2001) *Interpretive interactionism*. Thousand Oaks, California: Sage Publications.

Denzin, N.K. and Lincoln, Y.S. (eds.) (2000) *Handbook of qualitative research*. 2nd ed. Thousand Oaks, California: Sage Publications.

Denzin, N.K. and Lincoln, Y.S. (eds.) (2003) *The landscape of qualitative research*. 2nd ed. Thousand Oaks, California: Sage Publications.

Desantis, A., Roussel, C. and Waszak, F. (2011) 'On the influence of causal beliefs on the feeling of agency', *Conscious cognition*, 20(4), pp. 1211–1220. doi:10.1016/j.concog.2011.02.012

Devakumar, D. and Osrin, D. (2016) 'Child homicide: a global public health concern', *PLOS Medicine*, 13(4), April [Online]. Available at: <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002004> (Accessed: 28 June 2017).

Doan, H.M. and Zimmerman, A. (2008) 'Prenatal attachment: A developmental model', *International Journal of Prenatal and Perinatal Psychology and Medicine Vol. 20*, 1(2), pp. 20–28. [Online] Available at: http://mattes.de/buecher/praeinatale_psychologie/PP_PDF/PP_20_1-2_Doan_Zimmerman.pdf (Accessed: 7 September 2020).

- D'Orbán, P.T. (1979) 'Women who kill their children', *British Journal of Psychiatry*, 134(6), pp. 560–571. doi: 10.1192/bjp.134.6.560
- du Toit-Prinsloo, L., Pickles, C., Smith, Z., Jordaan, J. and Saayman, G. (2015) 'The medico-legal investigation of abandoned fetuses and newborns – a review of cases admitted to the Pretoria Medico-Legal Laboratory, South Africa', *International journal of legal medicine*, 130(2), pp. 569–574. *Springer Link* [Online] Available at: <https://link.springer.com/article/10.1007/s00414-015-1198-y> (Accessed: 15 July 2016).
- Edge, A., Subramaney, U. and Hoffman, D.C.J. (2017) 'Women who commit filicide in the context of having a severe mental illness: Current reflections and future directions', *Archives of Psychology*, 1(3), December [Online]. Available at: <https://archivesofpsychology.org/index.php/aop/article/view/19> (Accessed: 10 January 2018).
- Engdahl, E. (2016) *International summer school on grounded theory and qualitative methods, Pisa, Italy* [Lecture: Group work and participants' corner]. Attended 10 June.
- Fernandez, C. (2012). Guest editorial, themed section. *The Grounded Theory Review* 11(1), pp. 7–28.
- Folkman, S. and Moskowitz, J. T. (2004) 'Positive affect and the other side of coping', *American Psychologist*, 55(6), pp. 647–654. doi: 10.1037/0003-066X.55.6.647
- Fonagy, P. and Target, M. (1997) 'Attachment and reflective function: Their role in self-organisation', *Development and Psychopathology*, 9(4), pp. 679–700. doi:10.1017/S0954579497001399
- Freed, A.F. (1999) 'Communities of practice and pregnant women: Is there a connection?', *Language in Society*, 28, pp. 257–271. *JSTOR* [Online] Available at: <https://www.jstor.org/stable/4168928?seq=1> (Accessed: 03 December 2015).
- Friedman, S.H., Horwitz, S.M. and Resnick, P.J. (2005) 'Child murder by mothers: A critical analysis of the current state of knowledge and a research agenda', *American Journal of Psychiatry*, 162(9), September. doi: 10.1176/appi.ajp.162.9.1578
- Friedman, S. H. and Resnick, P.J. (2009) 'Neonaticide: Phenomenology and consideration for prevention', *International Journal of Law and Psychiatry*, 32(1), pp.43–47. doi:10.1016/j.ijlp.2008.11.006
- Frigon, S. (1995) 'A genealogy of women's madness', in Dobash, R.E., Dobash, R.P. and Noakes, L. (eds.) *Gender and crime*. Cardiff: University of Wales Press, pp. 20–48.
- Gerber, E.G. (2002) 'Deconstructing pregnancy: RU486, seeing "eggs," and the ambiguity of very early conceptions', *Medical Anthropology Quarterly*, 16(1), pp. 92–108. *JSTOR* [Online] Available at: <https://www.jstor.org/stable/649522> (Accessed 03 December 2015).
- Glaser, B.G. (1978) *Theoretical sensitivity: Advances in the methodology of grounded theory*. Thousand Oaks, California: Sociology Press.
- Glaser, B.G. (2007) 'Doing formal grounded theory', in Bryant, A. and Charmaz, K. (eds.) *The Sage handbook of grounded theory*. Thousand Oaks, California: Sage Publications., pp. 97–113.

Glaser, B.G. and Strauss, A.L. (1965) *Awareness of dying*. London: Weidenfeld and Nicolson.

Glaser, B.G. and Strauss, A.L. (1967) *The discovery of grounded theory*. New York: Aldine de Gruyter.

Goulding, C. (1999) *Grounded theory: Some reflections on paradigm, procedures and misconceptions*. Birmingham: University of Wolverhampton.

Gous, A.M.J. (2004) '*The ghosts in the nursery: The maternal representations of a woman who killed her baby*'. Doctoral Dissertation, University of Pretoria. [Online] Available at: <http://repository.up.ac.za/bidstream/handle/2263/27524/Complete.pdf?sequence=5>.

Grix, J. (2010) *The Foundations of research*. 2nd ed. Basingstoke: Palgrave.

Haapasalo, J. and Petaja, S. (1999) 'Mothers who killed or attempted to kill their child: Life circumstances, childhood abuse and types of killing', *Violence and Victims*, 14(3), pp. 219–239. doi: 10.1891/0886-6708.14.3.219

Habermas, J. (1985) *The philosophical discourse of modernity*. Translated by Frederick Lawrence. Reprint, London: Routledge.

Henning, K. and Holdford, R. (2006) 'Minimisation, denial and victim blaming by batterers: How much does the truth matter?', *Criminal Justice and Behaviour*, 33(1), pp. 110–130. doi: 10.1177/0093854805282322

Henwood, K. and Pidgeon, N. (2012) 'Grounded theory', in Breakwell, G.M., Smith, J.A. and Wright, D.B. (eds.) *Research methods in psychology*. 4th ed. London: Sage Publications, pp. 516–484.

Heppner, P.P. and Heppner, M.J. (2004) *Writing and publishing your thesis, dissertation and research: A guide for students in the helping professions*. Pacific Grove, California: Brooks/Cole Cengage Learning.

Hirschman, V.J. and Schmitz, E. (1958) 'Structural analysis of the female infanticide', *Psychotherapy Medical Psychology*, 8(1), pp. 1-20. *PubMed* [Online] Available at: <https://pubmed.ncbi.nlm.nih.gov/1351526/> (Accessed: 20 March 2016).

Hochstetler, A., Copes, H. and Williams, J.P. (2010) "'That's not who I am.'" How offenders commit violent acts and reject authentically violent selves', *Justice Quarterly*, 27(4), pp.492–516. doi: 10.1080/07418820903173344

Holahan, C.J., Moos, R.H. and Bonin, L. (1999) 'Social context and depression: An integrative stress and coping framework', in Joiner, T. and Coyne, J. (eds.) *The interactional nature of depression: Advances in interpersonal approaches*. Washington, DC: American Psychological Association, pp. 39–63.

Hopwood, J.S. (1972) 'Child murder and insanity', *Journal of Mental Science*, 73(30), pp 95–108. doi: 10.1192/bjp.73.300.95

- Hunter, G.C. (1994) 'Who's really in charge of my life, anyway? Locus of control and cognitive substance abuse treatment in federal prison', *Journal of Rational-Emotive Cognitive Behavioural Therapy*, 12(4), pp. 219–227. doi:10.1007/BF02354549
- Hutchinson, S.A., Wilson, M.E. and Wilson, H.S. (1994) 'Benefits of participating in research interviews'. *Journal of Nursing Scholarship*, 26(2), pp. 161–166. doi: 10.1111/j.1547-5069.1994.tb00937.x
- Hurd, T.L. (1998) 'Process, content and feminist reflexivity: One researcher's exploration', *Journal of Adult Development*, 5(3), pp. 159–203. doi: 10.1023/A:1023075811448
- Islam, M.J., Banarjee, S. and Khatun, N. (2014) 'Theories of female criminality: A criminological analysis', *International Journal of Criminology and Sociological Theory*, 7(1), pp. 1–8. [Online] Available at: <http://ijcst.journals.yorku.ca/index.php/ijcst/article/view/39737/35977> (Accessed: 3 January 2016).
- Jacques, D., Maricq, A., Dubois, T., Lepiece, B., Zdanowicz, N. and Delgrange, E. (2018) 'Partial denial of pregnancy at 32 weeks in a diabetic and suicidal patient: A case report', *Psychiatria Danubina*, 30(7), pp. 418–421. [Online] Available at: http://www.psychiatria-danubina.com/UserDocsImages/pdf/dnb_vol30_noSuppl%207/dnb_vol30_noSuppl%207_418.pdf (Accessed: 2 September 2020).
- Kempster, S. and Parry, K.W. (2011) 'Grounded theory and leadership research: A critical realist perspective', *The Leadership Quarterly*, 22(1), pp. 106–120. doi:10.1016/j.leaqua.2010.12.010
- Khromina, S. (2007) 'The broken path: Juvenile violence and delinquency in light of sociological theories', *Human Architecture: Journal of the Sociology of Self-Knowledge*, 5(2), pp. 91–100. [Online] Available at: <https://scholarworks.umb.edu/humanarchitecture/vol5/iss2/9/> (Accessed: 10 January 2017).
- Kincheloe, J. L. (2001) 'From positivism to an epistemology of complexity: Grounding rigorous teaching', in Kincheloe, J.L. and Weil, D. (eds.) *Standards and schooling in the United States: An encyclopaedia* (2 vols). California: ABC-CLIO, pp 325–396.
- Klier, C.M., Amon, S., Putkonen, H., Arias, P.F. and Weizmann-Henelius, G. (2019) 'Repeated neonaticide: differences and similarities to single neonaticide events', *Archives of women's mental health*, 22(1), pp. 159–164. doi: 10.1007/s00737-018-0850-1
- Klunklin, A., and Greenwood, J. (2006) 'Symbolic interactionism in grounded theory studies: Women surviving with HIV/AIDS in rural northern Thailand', *Journal of the Association of Nurses in AIDS care*, 17(5), pp. 32–41. doi:10.1016/j.jana.2006.07.005
- Koenen, M. A. and Thompson, J. W. (2008) 'Filicide: Historical review and prevention of child death by parent', *Infant Mental Health Journal*, 29(1), pp. 61–75. doi: 10.1002/IMHJ.20166
- Krischer, M.K., Stone, M. H., Sevecke, K. and Steinmeyer, E.M. (2007) 'Motives for maternal filicide: Results from a study with female forensic patients', *International Journal of Law and Psychiatry*, 30(3), pp. 191–200. doi: 10.1016/j.ijlp.2007.03.003

Kuhn, T.S. (1962) *The structure of scientific revolutions*. Chicago: University of Chicago Press.

Kvale, S. (2008) *InterViews: An introduction to qualitative research interviewing*. London: SAGE Publications.

Lambie, I. (2001) 'Mothers who kill: The crime of infanticide', *International Journal of Law and Psychiatry*, 24(1), pp. 71–80, doi: 10.1016/s0160-2527(00)00070-4

LaRossa, R. (2005) 'Grounded theory methods and qualitative family research', *Journal of Marriage and Family*, 67(4), pp. e37–857. JSTOR [Online] Available at: <https://www.jstor.org/stable/3600242?seq=1> <http://uk.jstor.org/> (Accessed: 04 January 2017).

Liem, M. and Koenraadt, F. (2008) 'Filicide: A comparative study of maternal versus paternal child homicide', *Criminal Behaviour and Mental Health*, 18(3), pp. 166–176, doi:10.1002/cbm.695

Lincoln, Y.S. and Guba, E.G. (1985). *Naturalistic inquiry*. Thousand Oaks, California: Sage Publications.

Lindquist, C. (2008) 'Being torn: Toward a phenomenology of unwanted pregnancy', *Hypatia*, 23(3), pp. 136–155, JSTOR [Online] Available at: <https://www.jstor.org/stable/25483201?seq=1> (Accessed: 03 December 2015).

Linehan, M.M. (1993) *Diagnosis and treatment of mental disorders. Skills training manual for treating borderline personality disorder*. New York: Guilford Press.

Malmquist, C.P. (2013) 'Infanticide/ neonaticide: The outlier situation in the United States', *Aggression and Violent Behaviour*, 18(3), pp. 399–408, doi: 10.1016/j.avb.2013.04.001

Manchester, J. (2003) 'Beyond Accommodation: Reconstructing the insanity defence to provide an adequate remedy for postpartum psychotic women', *The Journal of Criminal Law and Criminology (1973-)*, 93(2/3), pp. 712–752. JSTOR [Online] Available at: <https://www.jstor.org/stable/1144324?seq=1> <http://uk.jstor.org/> (Accessed 17 November 2015).

Manikkam, L. and Burns, J.K. (2012) 'Antenatal depression and its risk factors: An urban prevalence study in KwaZulu-Natal', *South African Medical Journal*, pp. 940–944. doi: 10.7196/SAMJ.6009

Mariano, T.Y., Chan, C.H. and Myers, W.C. (2014) 'Towards a more holistic understanding of filicide: A multidisciplinary analysis of 32 years of U.S. arrest data', *Forensic Science International*, 236, pp. 46–53. doi: 10.1016/j.forsciint.2013.12.019

Marks, M. (2008) 'Infanticide', *Disorders and Their Context*, 8(1), pp. 10–12. doi:10.1016/j.mppsy.2008.10.017

Marsay, C., Manderson, L. and Subramaney, U. (2017) 'Validation of the Whooley questions for antenatal depression and anxiety among low income women in urban South Africa', *South African Journal of Psychiatry*, 23, pp. 1–7. doi: 10.4102/sajpsychiatry.v23i0.1013

Marshall, C. and Rossman, G.B. (1999) *Designing qualitative research*. 3rd ed. Thousand

Oaks, California: Sage Publications.

McKee, A. and Egan, V. (2013) 'A case series of twenty-one maternal filicides in the UK', *Child Abuse and Neglect*, 37(10), pp. 753–761. doi: 10.1016/j.chiabu.2013.02.008

Mead, G. H. (1934) *Mind, Self and society: From the standpoint of a social Behaviourist*, "Works of George Herbert Mead" (Vol. 1). Chicago: University of Chicago Press.

Mead, G.H. (1967) *Mind, self, and society: From the standpoint of a social behaviourist*. Chicago: University of Chicago Press.

Mendlowics, M.V., Rapaport, M.H., Mecler, K., Golshan, S. and Moraes, T.M. (1998) 'A case-control study on the socio-demographic characteristics of 53 neonaticidal mothers', *International Journal of Law and Psychiatry*, 21(2), pp. 209–219, *National Institute of Health* [Online]. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2174580/> (Accessed: 01 November 2015).

Mills, M., Bonner, A. and Francis, K. (2006) 'The development of constructivist grounded theory', *Journal of Qualitative Methods*, 5(1), March [Online]. Available at: http://ualberta.ca/~iiqm/backissues/5_1/pdf/mills.pdf (Accessed: 23 November 2015).

Moodley, S., Subramaney, U. and Hoffman, D. (2019) 'A qualitative study of mentally ill women who commit filicide in Gauteng, South Africa', *Frontiers in Psychiatry*, 10, pp. 1-14. doi: 10.3389/fpsyt.2019.00757

Murphy-Tighe, S. and Lalor, J.G. (2016). 'Concealed pregnancy: a concept analysis', *Journal of Advanced Nursing*, 72(1), pp. 50–61. doi: 10.1111/jan.12769

Murphy-Tighe, S. and Lalor, J.G. (2019) 'Regaining agency and autonomy: A grounded typology of concealed pregnancy', *Journal of advanced nursing*, 75(3), pp.603–615. doi: 10.1111/jan.13875

Nagdee, M., Artz, L., Corral-Bulnes, C., Heath, A., Subramaney, U., de Clercq, H.G., Erlacher, H., Kotze, C., Lippi, G., Naidoo, S. and Sokudela, F. 'The psychosocial and clinical profile of women referred for psycho-legal evaluation to forensic mental health units in South Africa', *South African Journal of Psychiatry*, 25, pp. 1-8. doi: 10.4102/sajpsychiatry.v25i0.1230

Nau, M.L., McNiel, D.E. and Binder, R.L. (2012) 'Postpartum psychosis and the courts', *The Journal of the American Academy of Psychiatry and the Law*, 40(3), pp. 318–325. *PubMed* [Online] Available at: <https://pubmed.ncbi.nlm.nih.gov/22960913/> (Accessed: 02 November 2015).

Neuman, W.L. (2006) *Social research methods: Qualitative and quantitative approaches*. Boston: Allyn and Bacon.

Perrelli, J.G.A., Zambaldi, C.F., Cantilino, A. and Sougey, B.S. (2014) 'Mother-child bonding assessment tools', *Revista Paulista de Pediatria (English Edition)*, 32(3), pp. 257–265. doi: 10.1590/0103-0582201432318

Proctor, R.W. and Capaldi, E.J. (2006) *Why science matters: Understanding the methods of psychological research*. Malden, Massachusetts: Blackwell Publishing.

- Putkonen, H., Amon, S., Almiron, M. P., Cederwall, J. Y., Eronen, M., Klier, C. and Kjelsberg, E. (2009) 'Filicide in Austria and Finland - A register-based study on all filicide cases in Austria and Finland 1995-2005', *BMC Psychiatry*, 9(1), pp. 74–79, *Springer Link* [Online] Available at: <https://link.springer.com/article/10.1186/1471-244X-9-74> (Accessed: 02 November 2015).
- Putkonen, H., Collander, J., Weizmann-Henelius, G. and Eronen, M. (2007) 'Legal outcomes of all suspected neonaticides in Finland 1980-2000', *International Journal of Law and Psychiatry*, 30(3), pp. 248–254. doi: 10.1016/j.ijlp.2007.03.008
- Razali, S., Kirkman, M., Ahmad, H. and Fisher, J. (2014) 'Infanticide and illegal infant abandonment in Malaysia', *Child Abuse and Neglect*, 38(10), pp. 1715–1724. doi: 10.1016/j.chiabu.2014.06.008
- REPUBLIC OF SOUTH AFRICA (1977) *Criminal Procedures Act 51 (as amended) 1977* (Pretoria) s. 77-79 (RSA.).
- Resnick, P. J. (1969) 'Child murder by parents: A psychiatric review of filicide', *American Journal of Psychiatry*, 126(3), pp. 325–334. doi: 10.1176/ajp.126.3.325
- Resnick, P. J. (1970) 'Murder of the newborn: a psychiatric review of neonaticide', *American Journal of Psychiatry*, 126(10) pp. 1414–1420. doi: 10.1176/ajp.126.10.1414
- Resnick, P. J. (1972) 'Infanticide', in Howells, J.G. (ed.) *Modern perspectives in psycho-obstetrics*. Edinburgh: Oliver & Boyd, pp. 410–431.
- Rid, A. and Wendler, D. (2010) 'Risk-benefit assessment in medical research – critical review and open questions', *Law, Probability and Risk*, 9(3-4), pp. 151–177. doi:10.1093/lpr/mgq006
- Riley, L. (2005) 'Neonaticide: A grounded theory study', *Journal of Human Behaviour in the Social Environment*, 12(4), pp. 1–42. doi: 10.1300/J137v12n04_01
- Rogers, C.R. (1957) 'The necessary and sufficient conditions of therapeutic personality change', *Journal of Consulting Psychology*, 21(2), pp. 95–103. doi: 10.1037/h0045357
- Salvini, A. (2018) 3rd *International summer school on grounded theory and qualitative research, Kaunas, Lithuania* [Lecture: RQDA qualitative data analysis]. Attended 11 June.
- Shackelford, T.K., Weeks-Shackelford, V.A. and Beasley, S.L. (2005) 'An exploratory analysis of the contexts and circumstances of filicide-suicide in Chicago, 1965-1994', *Aggressive Behavior*, 31(4), pp. 399–406. doi: 10.1002/ab.20085
- Shelton, J.L.E., Corey, T., Donaldson, W. and Dennison, E. (2011) 'Neonaticide: A comprehensive review of investigative and pathologic aspects of 55 cases', *Journal of Family Violence*, 26(4), pp. 263–276. doi: 10.1007/s10896-011-9362-8
- Shelton, J.L.E., Mirhead, Y. and Canning, K.E. (2010) 'Ambivalence toward mothers who kill: An examination of 45 U.S. cases of maternal neonaticide', *Behavioural Sciences and the Law*, 28(6), pp. 812-831. doi: 10.1002/bsl.937

- Shin, H. and Kim, Y.H. (2007) 'Maternal Attachment Inventory: psychometric evaluation of the Korean version', *Journal of Advanced Nursing*, 59(3), pp. 299–307. doi: 10.1111/j.1365-2648.2007.04322.x
- Silverman, D. (2013) *Doing qualitative research: A practical guide*. 4th ed. London: Sage Publications.
- Smith, A.J. and Osborn, M. (2008) 'Interpretive phenomenological analysis', in Smith, J.A. (ed.) *Qualitative psychology: A practical guide to research methods*. 2nd ed. London: Sage Publications, pp. 53–80.
- Spinelli, M.G. (2003) 'A systematic investigation of 17 cases of neonaticide', in Spinelli, M.G. (ed.) *Infanticide: Psychosocial and legal perspectives on mothers who kill*. Washington, DC: APA, pp. 105–118.
- Stanton, J., Simpson, A. and Woudes, T. (2000) 'Qualitative study of filicide by mentally ill mothers', *Child Abuse and Neglect*, 24(11), pp. 1451–1460. doi: 10.1016/S0145-2134(00)00198-8
- Stern, D.N. (1995) *The motherhood constellation. A unified view of parent-infant psychotherapy*. New York: Basic Books.
- Stern, P. (2009) 'In the beginning Glaser and Strauss created grounded theory', in Morse, J., Stern, P., Corbin, J., Bowers, B., Charmaz, K. and Clarke, A. (eds.) *Developing grounded theory: The second generation*. Walnut Creek, California: Left Coast Press, pp. 23–34.
- Strauss, A. (1987) *Qualitative analysis for social scientists*. New York: Cambridge University Press.
- Strauss, A. and Corbin, J. (1998) *Basics of qualitative research: Techniques and procedures for developing grounded theory*. 2nd ed. Thousand Oaks, California: Sage Publications.
- Stryker, S. (2002) 'Traditional symbolic interactionism, role theory, and structural symbolic interactionism: The road to identity theory', in Turner, J.H. (ed.) *Handbook of sociological theory*. New York: Kluwer Academic /Plenum Publishers, pp. 211–231.
- Taffazoli, M., Asadi, M.M., Aminyazdi, S.A. and Shakeri, M.T. (2015) 'The relationship between maternal-fetal attachment and mother-infant attachment behaviours in primiparous women referring to Mashhad Health Care Centers', *Journal of Midwifery and Reproductive Health*, 3(2), pp. 318–327. Eprints [Online] Available at: <http://eprints.mums.ac.ir/5325/> (Accessed: 12 September 2020).
- TerreBlanche, M., Durrheim, K. and Painter, D. (2006) *Research in practice: Applied methods for the social sciences*. Cape Town: University of Cape Town Press.
- Thornberg, R. and Jungert, T. (2013) 'School bullying and the mechanisms of moral disengagement', *Aggressive Behaviour*, 40(2), pp. 1–31. doi: 10.1002/ab.21509
- Tie, C.T., Birks, M. and Francis, K. (2019) 'Grounded theory research: A design framework for novice researchers', *SAGE Open Medicine*, 7, pp. 1–8. doi: 10.1177/2050312118822927

Tighe, S.M. and Lalor, J.G. (2015) 'Concealed pregnancy: A concept analysis', *Journal of Advanced Nursing*, 72(1), pp. 1–12. doi: 10.1111/jan.12769

Timmermans, S. and Tavory, I. (2012) 'Theory construction in qualitative research: From grounded theory to abductive analysis', *Sociological Theory*, 30(3), pp. 167–186. doi: 10.1177/0735275112457914

Turner, R.H. (1962) 'Role-taking: Process vs. Conformity?', in Rose, A.M. (ed.) *Human behaviour and social processes*. Boston: Houghton Mifflin, pp. 20–40.

Tursz, A. and Cook, J.M. (2011) 'A population-based survey of neonaticides using judicial data', *Archives of Disease in Childhood-Fetal and Neonatal Edition*, 96(4), pp. F259–F263. doi: 10.1136/adc.2010.192278

United Nations (2016), 'The sustainable development goals', viewed 12 November 2015, <http://www.un.org/sustainabledevelopment/development-agenda/>.

Vellut, N., Cook, J.M. and Tursz, A. (2012) 'Analysis of the relationship between neonaticide and denial of pregnancy using data from judicial files', *Child Abuse and Neglect*, 36 (7–8), pp. 553–563. doi: 10.1016/j.chiabu.2012.05.003

Weed, M. (2009) 'Research quality considerations for grounded theory research in sport and exercise psychology', *Psychology of Sport and Exercise*, 10(5), pp. 502–510. doi:10.1016/j.psychsport.2009.02.007

Whitley, B.E. (2002) *Principles of research in behavioural sciences*. 2nd ed. New York: McGraw-Hill.

Wilson, W. (2012) 'Constructive grounded theory in the search for meaning on global mindedness: A novice researcher's guide', *International Journal of Evidenced Based Coaching and Mentoring*, 6, June [Online]. Available at: <http://www.business.brookes.ac.uk/research/areas/coachingandmentoring/> (Accessed: 11 November 2015).

Winnicott, D.W. (1965) *Maturation processes and the facilitating environment*. London: Hogarth Press.

Wolgemuth, J.R., Erdil-Moody, Z., Opsal, T., Cross, J.E., Kaanta, T., Dickmann, E.M. and Colmer, S. (2014) 'Participants' experiences of the qualitative interview considering the importance of research paradigms', *Qualitative Research*, 15(3), pp. 1–22. doi:10.1177/14687994114524222

You, D., Hug, L., Ejdeymyr, S., Idele, P., Hogan, D., Mathers, C., Gerland, P., New, J.R. and Alkema, L. (2015) 'Global, regional, and national levels and trends in under-5 mortality between 1990 and 2015, with scenario-based projections to 2030: a systematic analysis by the UN Inter-agency Group for Child Mortality Estimation', *The Lancet*, 386(10010), pp. 2275–2286. doi: 10.1016/S0140-6736(15)00120-8

APPENDICES

APPENDIX ONE: PARTICIPANT RECRUITMENT LETTER

TO : Ms _____

FROM : Ms Amanda Edge

SUBJECT : Invitation for Participation in a Research Project

DATE :

Invitation to Participate in Research

I would like you to participate in a research study that focuses on your life story and your experiences surrounding your offence leading to your incarceration.

It is important for you (the participant) to understand the reasons for the research and what is expected from you.

Study Title

How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective.

Purpose of the Study

Neonaticide is defined as the offspring killing of an infant within the first 48 hours of its life. The women's experiences around the event are often varied. Based on other research, women who have committed these offences said that they would like to understand what had happened. To better understand the experiences, this research aims to explore your life story from your perspective.

About the Researcher

I am a qualified Clinical Psychologist and PhD Psychiatry student at the University of the Witwatersrand.

What is Expected of You

I would like to invite you to have a conversation with me about your life. Each session will last about 50 minutes to one hour. The number of sessions will depend on your willingness to continue with participation in the study and also on how long it would take to reach a rich understanding.

What I Hope to Achieve

Through sharing your life story, we can build a way of understanding (a theory) your experiences. This understanding can be useful to you and other women with similar stories.

The theory that will be built will be shared with other health care professionals to develop prevention and rehabilitation programmes.

Your Privacy and Rights

Your privacy and rights are very important. I have attached a consent form to this letter. Should you agree to participate, I will discuss this form with you and will be able to answer any questions you should have.

Please know that should you choose to participate in the study, your input would not affect your imprisonment or sentence in any way (good or bad). The study is completely separate from your imprisonment.

Should you experience any distress or difficulties as a result of your participation in the study, psychological services will be made available to you.

Willingness to Participate

You do not have to decide today whether or not you will participate in the research. Before you decide, you can talk to anyone you feel comfortable with about participating.

Please mark an 'X' below indicating your willingness to participate and place this letter in the envelope provided and seal the letter. Thereafter please give it to _____.

<i>Indicate your willingness to participate by marking an 'X' in the appropriate column.</i>		
I would not like to participate	I would like to participate in the study	I need more information, please make an appointment to see me

Thank you,

Amanda Edge

Clinical Psychologist & Ph.D Psychiatry Student

APPENDIX TWO: PARTICIPANT CHARACTERISTICS AND DEMOGRAPHICS QUESTIONNAIRE

Participant Face Sheet and Demographics Questionnaire		
Characteristics		Participant Number:
Age	Young adult (between 18-25 years)	
	Adult (between 26-39 years)	
	Middle aged (between 40-60 years)	
	Senior citizen (above 61 years)	
Human settlement (rural/urban)	During largest portion of childhood	
	At the time of the commission of offense	
Cultural group		
Language	Home language	
	Rate command of the English language	
Education	Highest level of education	
	Mainstream schooling (yes/no)	
	Special schooling (yes/no)	
	Grades repeated at school (yes/no)	
Previous occupation		
Previous diagnosis of a mental illness Report of mental illness symptoms at the time of the commission of the offense		
Duration of current sentence served at current		
Duration of sentence given by the court		
Name of offence/s for current sentence served		
Previous forensic history	Number of arrests	
	Number of Convictions	
Relationship status	Single, married, divorced, widow	
Children	Number of children	
	Same fathers or different	
Previous pregnancies	Number of pregnancies	
	Carried to term (y/n)	
	Context of deliveries	
Termination of pregnancy	Y/n	
	Number of pregnancies terminated	
	Terminated at number of months	
	Nature of termination	

APPENDIX THREE: INITIAL INTERVIEW GUIDE

Introduction

Today I will be asking you some questions. There is no right or wrong answer, I am more interested in hearing about your experience. You do not have to answer any questions that you do not want to.

Initial questions

- 1) How long have you been at _____ (correctional services facility)?
- 2) Tell me about how you came to be here (probe for charge and sentence).

Intermediate questions

- 1) When did you first notice you were pregnant?
- 2) If you recall, what were you thinking when you first realised you were pregnant? Did this change at any time? (Probe: If yes, how did it change? When did it change?)
- 3) Who, if anyone, influenced the way you thought about being pregnant?
- 4) Tell me about any physical experiences you may have had during your pregnancy? What thoughts came to mind when experiencing such sensations?
- 5) How would you describe the foetus you were carrying? Did this view of the foetus change at all during the pregnancy? (Probe: If yes, how did it change? When did it change?).
- 6) How would you describe the person you were prior to falling pregnant? Did this view change at all during your pregnancy or afterwards? (Probe: If yes, how would you say it changed?)
- 7) How do you think others would describe you prior to falling pregnant? And after falling pregnant?
- 8) Tell me about any thoughts you may have experienced shortly after giving birth?
- 9) Tell me about the actions you took after you gave birth.

Ending questions

- 1) Have you changed in any way after this experience? (Probe: If yes, how?)
- 2) Is there something else you think I should know to understand your experience better?
- 3) Is there anything you would like to ask me?

APPENDIX FOUR: HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL) CLEARANCE

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG



R14/49 Ms Amanda Edge

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)

CLEARANCE CERTIFICATE NO. M160977

NAME: Ms Amanda Edge
(Principal Investigator)
DEPARTMENT: Psychiatry
Department of Correctional Services (DCS)
Kgosi Mampuru II Correctional Centre, Pretoria

PROJECT TITLE: How Women come to Commit Neonaticide: A Theory
of Criminal Cases Informed by a Symbolic
Interactionist Perspective

DATE CONSIDERED: 30/09/2016

DECISION: Approved unconditionally

CONDITIONS:

SUPERVISOR: Prof U Subramaney and Dr DCJ Hoffman

APPROVED BY: 
Professor CB Penny, Chairperson, HREC (Medical)

DATE OF APPROVAL: 06/08/2018

This clearance certificate is valid for 5 years from date of approval. Extension may be applied for.

DECLARATION OF INVESTIGATORS

To be completed in duplicate and **ONE COPY** returned to the Research Office Secretary in Room 301, Third Floor, Faculty of Health Sciences, Phillip Tobias Building, 29 Princess of Wales Terrace, Parktown, 2193, University of the Witwatersrand. I/we fully understand the conditions under which I am/we are authorized to carry out the above-mentioned research and I/we undertake to ensure compliance with these conditions. Should any departure be contemplated, from the research protocol as approved, I/we undertake to resubmit the application to the Committee. **I agree to submit a yearly progress report.** The date for annual re-certification will be one year after the date of convened meeting where the study was initially reviewed. In this case, the study was initially reviewed in **September** and will therefore be due in the month of **September** each year. Unreported changes to the application may invalidate the clearance given by the HREC (Medical).

Principal Investigator Signature _____

Date _____

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES

APPENDIX FIVE: APPENDIX FOUR: HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL) CLEARANCE AMENDED

 UNIVERSITY OF THE WITWATERSRAND JOHANNESBURG	HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)
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02/11/2018

Ms A Edge
School of Clinical Medicine
Department of Psychiatry
Medical School
University

Sent by e-mail to: erasmus.amanda@gmail.com

Dear Ms Edge

Re: Protocol Ref No: M160977
Protocol Title: *How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective*
Principal Investigator: Ms A Edge

Thank you for your letter of 30/08/2018, received here on 03/10/2018.

I confirm that the proposed amendment to your study has been noted and approved.
For the record, the amendment is:

- the addition of two new study sites at Westville and Pollsmoor Correctional Centres

Thank you for keeping us informed and updated.

Yours Sincerely



.....
Mr I Burns
For the Human Research Ethics Committee (Medical)

Works2000/Iain0007/Acknowledge.docx

APPENDIX SIX: DEPARTMENT OF CORRECTIONAL SERVICES RESEARCH COMMITTEE CLEARANCE



correctional services

Department:
Correctional Services
REPUBLIC OF SOUTH AFRICA

Private Bag X136, PRETORIA, 0001 Poyntons Building, C/O WF Nkomo and Sophie De Bruyn Street, PRETORIA
Tel (012) 307 2770

Ms A Edge
12 Reed Drift
Freylina Close Street
Rietvlei Heights Country Estate
Irene
1753

Dear Ms A Edge

**RE: APPLICATION TO CONDUCT RESEARCH IN THE DEPARTMENT OF
CORRECTIONAL SERVICES ON: "HOW WOMEN COME TO COMMIT
NEONATICIDE: A THEORY OF CRIMINAL CASES INFORMED BY A SYMBOLIC
INTERACTIONIST PERSPECTIVE"**

It is with pleasure to inform you that your request to conduct research in the Department of Correctional Services on the above topic has been approved.

Your attention is drawn to the following:

- The relevant Regional and Area Commissioners where the research will be conducted will be informed of your proposed research project.
- Your internal guide will be **Ms Z Radebe: Psychologist, Kgoši Mampuru II Management Area.**
- You are requested to contact her at telephone number (012) 314 1776 before the commencement of your research.
- It is your responsibility to make arrangements for your interviewing times.
- Your identity document and this approval letter should be in your possession when visiting.
- You are required to use the terminology used in the White Paper on Corrections in South Africa (February 2005) e.g. "Offenders" not "Prisoners" and "Correctional Centres" not "Prisons".
- You are not allowed to use photographic or video equipment during your visits, however the audio recorder is allowed.
- You are required to submit your final report to the Department for approval by the Commissioner of Correctional Services before publication (including presentation at workshops, conferences, seminars, etc) of the report.
- Should you have any enquiries regarding this process, please contact the DCS REC Administration for assistance at telephone number (012) 307 2770.

Thank you for your application and interest to conduct research in the Department of Correctional Services.

Yours faithfully

ND SIHLEZANA
DC: POLICY COORDINATION & RESEARCH
DATE: 06/08/2018



correctional services

Department:
Correctional Services
REPUBLIC OF SOUTH AFRICA

Tel: (012) 307 2770

INTERNAL MEMO

DATE:	02 AUGUST 2018	FILE NR:	4/7/6/1
TO:	REGIONAL COMMISSIONER: GAUTENG REGION	FROM:	DCS REC ADMINISTRATION
SUBJECT:	RE: APPLICATION TO CONDUCT RESEARCH IN THE DEPARTMENT OF CORRECTIONAL SERVICES ON: "HOW WOMEN COME TO COMMIT NEONATICIDE: A THEORY OF CRIMINAL CASES INFORMED BY A SYMBOLIC INTERACTIONIST PERSPECTIVE"		

REGIONAL COMMISSIONER: GAUTENG REGION

1. This is to inform you that the application on the above-mentioned research has been approved.
2. You are therefore requested to grant permission to the following researcher to conduct the said research: **Ms A Edge, ID Number: 850326 0191 080**. The researcher intends visiting Kgoši Mampuru II Management Area.
3. Please take note that:
 - 3.1 The researcher is not allowed to use photographic or video equipment during her visits to the Management Area, however the audio recorder is allowed.
 - 3.2 The researcher's internal guide is **Ms Z Radebe: Psychologist, Kgoši Mampuru II Management Area**.
 - 3.3 It is the researcher's responsibility to make arrangements with the Management Area for the visiting times. The researcher has been informed of this arrangement.
 - 3.4 The security measures are still applicable and must be adhered to by the researcher.
4. Should you have any enquiries regarding this process, please contact the DCS REC Administration for assistance at telephone number (012) 307 2770.

Your cooperation is highly appreciated.

ND SIHLEZANA
DC: POLICY COORDINATION & RESEARCH

DATE: 06/08/2018



correctional services

Department:
Correctional Services
REPUBLIC OF SOUTH AFRICA

Tel: (012) 307 2770

INTERNAL MEMO

DATE:	02 AUGUST 2018	FILE NR:	4/7/6/1
TO:	REGIONAL COMMISSIONER: WESTERN CAPE REGION	FROM:	DCS REC ADMINISTRATION
SUBJECT:	RE: APPLICATION TO CONDUCT RESEARCH IN THE DEPARTMENT OF CORRECTIONAL SERVICES ON: "HOW WOMEN COME TO COMMIT NEONATICIDE: A THEORY OF CRIMINAL CASES INFORMED BY A SYMBOLIC INTERACTIONIST PERSPECTIVE"		

REGIONAL COMMISSIONER: WESTERN CAPE REGION

1. This is to inform you that the application on the above-mentioned research has been approved.
2. You are therefore requested to grant permission to the following researcher to conduct the said research: **Ms A Edge, ID Number: 850326 0191 080**. The researcher intends visiting Pollsmoor Management Area.
3. Please take note that:
 - 3.1 The researcher is not allowed to use photographic or video equipment during her visits to the Management Area, however the audio recorder is allowed.
 - 3.2 The researcher's internal guide is **Ms Z Radebe: Psychologist, Kgoši Mampuru II Management Area**.
 - 3.3 It is the researcher's responsibility to make arrangements with the Management Area for the visiting times. The researcher has been informed of this arrangement.
 - 3.4 The security measures are still applicable and must be adhered to by the researcher.
4. Should you have any enquiries regarding this process, please contact the DCS REC Administration for assistance at telephone number (012) 307 2770.

Your cooperation is highly appreciated.

ND SIHLEZANA
DC: POLICY COORDINATION & RESEARCH
DATE: 06/08/2018



correctional services

Department:
Correctional Services
REPUBLIC OF SOUTH AFRICA

Tel: (012) 307 2770

INTERNAL MEMO

DATE:	02 AUGUST 2018	FILE NR:	4/7/6/1
TO:	REGIONAL COMMISSIONER: KWAZULU-NATAL REGION	FROM:	DCS REC ADMINISTRATION
SUBJECT:	RE: APPLICATION TO CONDUCT RESEARCH IN THE DEPARTMENT OF CORRECTIONAL SERVICES ON: "HOW WOMEN COME TO COMMIT NEONATICIDE: A THEORY OF CRIMINAL CASES INFORMED BY A SYMBOLIC INTERACTIONIST PERSPECTIVE"		

REGIONAL COMMISSIONER: KWAZULU-NATAL REGION

1. This is to inform you that the application on the above-mentioned research has been approved.
2. You are therefore requested to grant permission to the following researcher to conduct the said research: **Ms A Edge, ID Number: 850326 0191 080**. The researcher intends visiting Durban Westville Management Area.
3. Please take note that:
 - 3.1 The researcher is not allowed to use photographic or video equipment during her visits to the Management Area, however the audio recorder is allowed.
 - 3.2 The researcher's internal guide is **Ms Z Radebe: Psychologist, Kgoši Mampuru II Management Area**.
 - 3.3 It is the researcher's responsibility to make arrangements with the Management Area for the visiting times. The researcher has been informed of this arrangement.
 - 3.4 The security measures are still applicable and must be adhered to by the researcher.
4. Should you have any enquiries regarding this process, please contact the DCS REC Administration for assistance at telephone number (012) 307 2770.

Your cooperation is highly appreciated.

ND SIHLEZANA
DC: POLICY COORDINATION & RESEARCH
DATE: 06/08/2018

APPENDIX SEVEN: PARTICIPANT INFORMATION SHEET AND CONSENT FORM

PARTICIPANT INFORMATION SHEET

Principal Investigator: Ms A Edge

Supervisors: Dr D. Hoffman and Professor U. Subramaney

Introduction

I would like you to participate in a research study that focuses on your life story and your experiences surrounding the offence leading to your incarceration.

It is important for you (the participant) to understand the reasons for the research and what is expected from you.

I, Ms A Edge, am a Clinical Psychologist and Ph.D. Psychiatry student. Under the supervision of Dr D. Hoffman and Professor U. Subramaney, I will be conducting a study on neonaticide and aim to develop a deeper understanding (a theory) on the subject.

At this point you have received your letter requesting your participation in the study and you have indicated that you are interested in participating in the study. Thank you for your willingness to participate.

This information sheet may contain words that you are not familiar with. Please ask me to stop as we go through the information and I will take the time to explain. Should you have questions later, you may ask me or any of the research contributors noted above.

Purpose of the Research

Neonaticide is something that may occur in some people. It can have very difficult emotional and psychological effects on the person who commit the act, as well as family members, other acquaintances and the community as a whole. I hope that this study will provide us with information to better understand the psychological and emotional processes as well as actions that underpin the act.

In this study, I hope to understand your life story as well as your experiences, thoughts and meanings you may have had prior to being charged and convicted, especially during the time of your pregnancy. You and I will explore this by reflecting back on the past by means of several one-on-one interviews.

It is hoped that the theory developed from the information provided by you as well as other women would help with developing prevention and rehabilitation programmes in the future.

Type of Research Intervention

This research will involve your participation in a one-on-one interview in a private room with myself. I will have some questions prepared to guide our discussion but I am open to explore any areas that may be meaningful to you. The interview will last approximately 50 minutes to one hour. You are welcome to request breaks during any time of our conversations.

Participant Selection

You have been selected to participate in the study as your unique experience can help us build an understanding around neonaticide.

Voluntary Participation

Your participation in this research is entirely voluntary. It is your choice whether to participate or not. Your willingness to participate does not have any influence (good or bad) on your incarceration process or sentence served.

Right to Refuse or Withdraw

You do not have to take part in this research if you do not wish to do so. You may stop participating in the interview at any time that you wish without any consequences to your incarceration process or sentence served. I will give you an opportunity at the end of the conversations to review your remarks, and you can ask to modify or remove portions of those, if you do not agree with my notes or if I did not understand you correctly or even if you wish to express yourself differently.

Study Procedures

You have already shown your interest to participate in the study by marking 'I would like to participate' or 'I would like more information' in the invitational letter I sent you. After you agree to participate in the study and sign the consent form we can set up an appointment for the first interview. In the discussion I will sit down with you in a private room. During this time, I will ask some questions which you may choose to answer. If you do not wish to answer any of the questions during the interview, you may say so and I will move on to the next question. No one else but I will be present unless you would like someone else to be there. After our first interview I will see you a few times, about two to five more times (should you agree to do so), in order to obtain as

much understanding as possible.

The information recorded is confidential, and no one else except the study supervisors and myself will have access to the information documented during your interview.

The interview will be tape-recorded purely for the reason to assist with the data analysis at a later stage. No one will be identified by name on the tape. The tape will be kept under lock-and-key and only the supervisors and myself will have access to it. Note that the information recorded is confidential. The recorded information will be written down word for word to assist with analysis but your name and identifiable information will be removed. The tapes and transcripts will be destroyed after a period of five years.

Risks

I am asking you to share some very personal information, and you may feel uncomfortable talking about some of the topics covered. You do not have to answer any questions or take part in the interview if you do not wish to do so, and that is also fine. You do not have to give me any reason for not responding to any question, or for refusing to take part in the interview.

It is possible that sharing your experiences may lead you to feel unsettled. Should this be the case, you may stop the interview and inform me of your discomfort. You may then request psychological services that will be made available to you, should you find it necessary.

If at any point you experience thoughts or impulses of hurting yourself or other individuals, measures will be taken to ensure your safety as well as that of others. In such instances, a psychologist will consult with you to debrief you. The psychologist would also need to inform your unit prison block manager in order to protect you. The psychologist would also make a referral to the supervising individual responsible for mental health care services at the prison to ensure you obtain further psychological care.

Benefits

There may be some benefit to you for participating in the study in that it can assist you in identifying relevant themes to work on with an individual psychologist should you choose. Exploring your experiences may allow you some deeper understanding of what you went through. Your participation is likely to help other professionals find out more about specific content that may help to develop prevention techniques and improve psychological treatment and rehabilitation strategies for neonaticide. You will however, not be provided with any financial or material

incentive to take part in the research.

Confidentiality

The researcher will not be sharing any information identifying you to anyone outside of the research team (unless it is unavoidable as described in the following paragraph). The information collected from this research project will be kept private. Any information about you will have a number on it instead of your name. As mentioned earlier, only the researcher will know what your number is and I will lock that information up with a lock and key in a file cabinet.

All individuals related to the research project will be requested to sign a non-disclosure agreement form. Such involvement will be kept to a minimum and only those who are essential to the process of your participation in the research will be involved.

Sharing the Results

Nothing that you tell me will be attributed to you by name. The knowledge that I get from this research will be shared with you before it is made available to the public. The results that I obtain from you and other participants will be used to construct a theory. Each participant will receive a summary of the combined results, after this I will request your final input on an individual basis. Then, I will submit the research in a written document to my University for marking. The research will most likely also be published in a scientific journal and presented at conferences and academic settings for other interested people to learn from the research.

Who to Contact

If you have any questions, you can ask them now or later. If you wish to ask questions regarding the study later, you may contact me by _____ (procedures recommended by head of the prison facility) by dialing 079 652 8739 or dialing 011 951 8313 to reach Professor U. Subramaney (research supervisor) or 011 951 8342 to reach Dr D. Hoffman (research supervisor).

Study Approval

The study proposal has been reviewed and approved by the University of the Witwatersrand Research Committee and Ethics Committee, whose task it is to make sure that research participants are protected from harm. The study has also been reviewed and approved by the Department of Correctional Services and the head of this Prison Facility Mr/Ms _____.

CERTIFICATE OF CONSENT

Participant Consent

I have been invited to participate in a research study about neonaticide. I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and any questions I asked have been answered to my satisfaction.

Name of Participant (please print) _____
Signature of Participant _____ Date: _____
(dd/mm/yyyy)

I have been informed of why the interviews need to be audio recorded. I hereby consent to having the interview audio recorded.

Name of Participant (please print) _____
Signature of Participant _____ Date: _____
(dd/mm/yyyy)

Witness Statement I have witnessed the accurate reading of the consent form to the potential participant, and the individual has had the opportunity to ask questions. I confirm that the individual has given consent freely.

Print name of witness _____
Signature of witness _____ Date: _____
(dd/mm/yyyy)

Statement by Researcher: I have accurately read out the information sheet to the potential participant, and to the best of my ability made sure that the participant understands the study procedures, their rights and risks involved for participation. I confirm that the participant was given an opportunity to ask questions about the study, and all the questions asked by the participant have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of this informed consent form has been provided to the participant.

Print name of researcher _____
Signature of researcher _____ Date: _____
(dd/mm/yyyy)

APPENDIX EIGHT: PSYCHOLOGICAL SERVICES SUPPORT LETTER

PSYCHOLOGICAL SERVICES LETTER OF SUPPORT

Enquiries: Dr Swart
Forensic Unit, Valkenberg Hospital
Telephone: 021 8265 853/0834828007
Email: tania.swart@uct.ac.za
Date: 21 May 2018

TO : Ms A Edge
FROM : Dr Tania Swart
SUBJECT : Psychological Services Support

I, Dr Tania Swart am currently employed as a Clinical Psychologist and am in possession of the following qualifications (full CV available on request):

- 1) MSc Clinical Psychology (UKZN)
- 2) PhD in Psychiatry (UCT)

I have been registered with the Health Professions Council of South Africa in the category of Independent Practice: Clinical Psychology/ Psychiatry since 2007. My HPCSA registration number is PS0095788

With this letter, I provide my support to the research project entitled '*How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective*'. I will be available to provide initial psychological interventions to participants in emergency situations.

Upon receiving a referral, I will consult with the participant within the same day. My intervention will focus on debriefing and containment of the participant. In cases where it may be relevant, a suicide or homicide contract will be signed. In such cases the participant's prison block unit manager will be informed of any such ideations. I will then make a further referral for future psychological intervention by informing the supervising individual for mental health workers within the prison.

Any queries can be directed to me at the above-mentioned details.

Regards,

Dr Tania Swart
Senior Clinical Psychologist

(name)
(profession)



PSYCHOLOGICAL SERVICES LETTER OF SUPPORT

Enquiries : Dr Naseema Cassimjee
Telephone : 0837862966
Email : naseemacassimjee@gmail.com
Date : 21/05/18

TO : Ms A Edge
FROM : Dr Naseema Cassimjee
SUBJECT : Psychological Services Support

I, Dr Naseema Cassimjee, am currently employed as a Psychiatrist at Fort Napier hospital and am in possession of the following qualifications (full CV available on request):

- 1) DMH (SA)
- 2) FC Psych (SA)
- 3) MMed (Psychiatry)
- 4) Certificate in forensic psychiatry (SA)

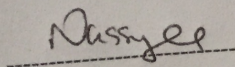
I have been registered with the Health Professions Council of South Africa in the category of Independent Practice: Psychiatry since 2005. My HPCSA registration number is MP 0573167.

With this letter, I provide my support to the research project entitled '*How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective*'. I will be available to provide initial psychological interventions to participants in emergency situations.

Upon receiving a referral, I will consult with the research participant in a timeous manner. My intervention will focus on debriefing and containment of the participant. In cases where it may be relevant, a suicide or homicide contract will be signed. In such cases the participant's prison block unit manager will be informed of any such ideations. I will then make a further referral for future psychological intervention by informing the supervising individual for mental health workers within the prison.

Any queries can be directed to me at the above-mentioned details.

Regards,



Naseema Cassimjee
Forensic Psychiatrist



GAUTENG PROVINCE

REPUBLIC OF SOUTH AFRICA

Enquiries: Ms C Waldeck
Telephone: 074 177 4477
Email: Chantal.waldeck@gmail.com
Date: 18 July 2016

TO : Ms A Edge

FROM : Ms C Waldeck

SUBJECT : Psychological Services Support

I, Ms Chantal Waldeck, am currently employed as a Senior Clinical Psychologist at Sterkfontein Psychiatric Hospital and am in possession of the following qualifications (full CV available on request):

Bachelor of Arts
Honours in Psychology
Master of Arts in Clinical Psychology

I have been registered with the Health Professions Council of South Africa in the category of Independent Practice: Clinical Psychology since 2004 and am currently practicing as a clinical psychologist with an interest in forensic work. My registration number is PS 00 900 77.

With this letter I provide my support to the research project entitled '*How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective*'. I will be available to provide initial psychological interventions to participants in emergency situations.

Upon receiving a referral I will consult with the participant within the same day. My intervention will focus on debriefing and containment of the participant. In cases where it may be relevant, a suicide or homicide contract will be signed. In such cases the participant's prison block unit manager will be informed of any such ideations. I will then make a further referral for future psychological intervention by informing the supervising individual for mental health workers within the prison.

Any queries can be directed to me at the above mentioned details.

Regards,

Ms C Waldeck
Senior Clinical Psychologist
PS 00 900 77

Note. This document will only be used once approval has been obtained from the WITS HREC and DCS Research Committee.

APPENDIX NINE: REFERRAL LETTER FOR EMERGENCY SERVICES

REFERRAL LETTER FOR EMERGENCY PSYCHOLOGICAL SERVICES

Enquiries: Ms A Edge
Telephone: 079 652 8739
Email: Erasmus.amanda@gmail.com

TO :
FROM : Ms A Edge
SUBJECT : Referral for emergency psychological services
DATE :

Dear _____,

Thank you for your support to the research study entitled 'How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective'.

As per our telephonic conversation at _____ (time) on _____ (date), Ms _____ (participant name) at _____ (name of prison facility) requires emergency psychological services.

The referral pertains to psychological distress experienced on behalf of the participant in response to content covered in the research study procedures, as indicated by the following:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Kindly follow the procedures you delineated in your psychological services letter of support addressed to me, Ms Amanda Edge, on _____ (date) (see letter attached for your convenience).

The participant can be reached by contacting _____ (Prison Unit Block Manager) at _____ (telephonic details) and _____ (office number). Mr/Ms _____ (Supervising individual for mental health care at the prison facility) at _____ (telephonic details) and _____ (office number) may be contacted to make referrals for further psychological care.

Thanking you in advance,

Ms Amanda Edge
Senior Clinical Psychologist and PhD Student

APPENDIX TEN: NO-SUICIDE OR NO-HOMICIDE CONTRACT

NO-SUICIDE OR NO-HOMICIDE CONTRACT

Enquiries:
Telephone:
Email:

TO :
FROM : _____ (Participant Name)
SUBJECT : No-Suicide or No-Homicide Contract
DATE :

Sometimes, under some conditions of stress, a person may experience thoughts about hurting him/herself or others. With the aid of psychological services, one may learn to deal with such stress and these thoughts may begin to dissipate.

This contract seeks your commitment to first seek and obtain the necessary psychological help, as discussed with _____, to address the feelings causing such thoughts and to refrain from acting on any such thoughts.

No-Suicide/ No-Homicide Contract:

I, _____ (participant name), hereby agree that I will not harm myself or others in any way, nor will I attempt suicide, or die by suicide.

I will undergo the necessary psychological help as recommended by _____.

When experiencing thoughts of hurting myself or others or any suicidal thoughts I will remind myself of this contract.

I will contact the Prison Unit Block Manager _____ (name) if I believe that I am in immediate danger of harming myself or others.

I will allow _____ sufficient time to contact the supervising individual for mental health care services _____ (name) at _____ (prison facility) to allocate a staff member to assist me with my thoughts and to provide the needed care.

I will continue undergoing psychological services as long as necessary until the suicidal thoughts or homicidal thoughts have subsided.

Signature: _____ Date: _____

Witness: _____ Date: _____

APPENDIX ELEVEN: EDITING CERTIFICATE

Author	Document title	Date issued
Amanda Edge	How women come to commit neonaticide: A theory of criminal cases informed by a symbolic interactionist perspective	28 January 2021

EDITORIAL CERTIFICATE

This document certifies that the above thesis was proofread and edited by Sue Cato, editor.

The document was edited for proper English language, grammar, punctuation, spelling, and overall style. The editor endeavoured to ensure that the author's intended meaning was not altered during the review. All amendments were tracked with the Microsoft Word 'track changes' feature. Therefore, the author had the option to reject or accept each change individually.



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and virtual assistant

28 January 2021

APPENDIX TWELVE: TURNITIN ORIGINALITY REPORT



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HOW WOMEN COME TO COMMIT NEONATICIDE: A THEORY OF
CRIMINAL CASES INFORMED BY A SYMBOLIC INTERACTIONIST
PERSPECTIVE

By

Amanda Edge
Student Number: 1659921

A thesis submitted to the Faculty of Health Sciences, University of Witwatersrand,
Johannesburg, in fulfillment of the requirements for the degree Doctor of Philosophy,
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