Mothers as Children's "First and Best Teachers:"
An Institutional Ethnography

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For my daughters with love.

Mothers as Children's "First and Best Teachers:"
An Institutional Ethnography

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This dissertation examines how women's mothering practices are coordinated and

constrained by discourses and expert knowledge that they encounter through their

participation in "Ready to Learn (RTL)," a national parent education program.

Utilizing institutional ethnography, I examine how the expert knowledge and

discursive themes of the program coordinate mothers' work with the schooling

system through the institutional goal of producing "school ready" children. Through

in-depth interviews with mothers, RTL parent educators, and program administrators,

I explore how women's commitment to intensive mothering ensures that they will

monitor and facilitate the growth of their babies and toddlers so that they conform to

the normative timeline of development constructed by experts. This conformity is

essential to children's school readiness and educational success. In addition, I

employ participant observation of home visits, play groups, and parenting classes as

well as document analysis of texts that are implicated in the social relations of the

setting. Document analysis includes RTL curriculum and handouts, primary texts

produced by researchers and universities, and documents generated by organizations

that advocate for "school readiness" The primary objective of this dissertation is to

bring visibility to the unpaid work that mothers do in producing "school ready"

children and the strategies they employ in negotiating the numerous demands placed

on their carework.

CHAPTER 1
INTRODUCTION

In a recent conversation, Olivia,[1] mother of a 13-month old baby girl,

vocalized her anxiety regarding her daughter's development by saying, "I'm freaking

out now because I read somewhere that she should be saying 2-5 words, and she

isn't." This mother then turned to her baby on her hip and asked, "Where's mama?"

Her daughter turned away, uninterested. "I try," says her mom. And she does. This

mother owns stacks of child development books, researches child-rearing on the

internet, and is enrolled in a parent education program, Ready to Learn (RTL).[2] Due

to her research and involvement in RTL, Olivia knows what her baby "should" be

doing and just as important, what she as a mother ought to do to foster that list of

"shoulds." Like many educated, middle-class mothers, Olivia actively monitors and

works on her daughter's development and consents to the discursive construction of

her toddler as a "learner" and she, as a "good mother" – the teacher.

This dissertation examines how the mothering practices of educated middle-

class women like Olivia are coordinated and constrained by the mothering and child

development discourses that they encounter through participation in RTL. Increasing

"school readiness" through the monitoring and facilitating of children's development

is one of the primary goals of Ready to Learn, a national, universal-access education

program that serves parents of children from birth to age three. I utilize institutional

ethnography (IE), a method of inquiry designed by Dorothy Smith to explore the

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[1] I use pseudonyms for all participants to ensure their anonymity.
[2] I have changed the name of this program to protect the anonymity of the research participants

social relations of everyday life and how they are put together. The "local," everyday experiences of mothers provide the standpoint from which I investigate institutional and discursive relations; they are the starting point for the "map" I construct as to how those experiences came to be.

"Your baby was born to learn, and as a parent, *you* are your child's first and best teacher.[3]" This statement summarizes the philosophy of Ready to Learn; there mission being, "To provide the information, support and encouragement parents need to help their children develop optimally during the crucial early years of life.[4]" The free, universal-access program serves families with children from birth up to kindergarten-age, depending on local resources. The Lawrence, KS program serves families of children from birth to age three due to its constrained budget.

The Lawrence, Kansas RTL program is fifteen years old and in 2007, the year in which I collected data on the program, it employed five parent educators, served 250 families, and had a waiting list of approximately 60 families. Parent educators reported that the majority of the families that they serve fall into the category "high-functioning;" meaning, primarily middle-class and educated. All of the parent educators in the Lawrence, Kansas program are white, middle-class, educated mothers with degrees in early childhood education or related fields[5].

Through their involvement in RTL, mothers receive home visits every four to six weeks from their "parent educator," a woman who has been trained in the

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[3] http://www.parentsasteachers.org/site/pp.asp?c=ekIRLcMZJxE&b=272119
[4] http://www.parentsasteachers.org/site/apps/s/content.asp?c=ekIRLcMZJxE&b=289389&ct=321730
[5] For more information regarding the program please see Appendix A.

program's child development curriculum. Mothers receive lessons in child development, assess their child's skills and knowledge, and learn ways to enhance their physical, emotional, intellectual, and language growth. RTL lessons urge women to engage in intensive mothering: They are asked to read their infant's cues, monitor the number of hours their children sleep, track the number of words their toddlers can speak, and provide stimulating and developmentally appropriate environments for their children. For the educated middle-class mothers of this study, RTL reaffirms their belief in scientifically-guided intensive mothering as the best possible child-rearing approach for their children.

From birth, children enrolled in the program are treated as learners and their development is monitored by charts and milestones derived by experts. They are categorized as "normal," "delayed," or "advanced" based on their abilities and skills as they grow. This dissertation examines how RTL and the wider society links children's development to the quality of their early "environment," namely, their mothers' conformity to middle-class, scientifically-based standards of child-rearing.

Mothers' "cognitive care" – the monitoring and facilitating of children's development (Griffith & Smith 2005) – is a corollary of *intensive mothering,* the dominant ideology that promotes mothering as exclusive, child-centered, emotionally painstaking, and time consuming (Hays 1996). "Good mothering" is not only intensive, but guided by science, particularly child development knowledge (Apple 2006; Beatty et al 2006). Women's commitment to scientifically-driven intensive mothering ensures that they will assume the role of their child's "first and best

teacher," an explicit goal of the program, and one upon which the institution of education relies. Not only is the success of *individual children* dependent on mothers' cognitive care, the *system of schooling* relies on the work of mothers researching child development and incorporating their detailed knowledge into their practices.

The schooling system expects children to enter kindergarten "ready to learn;" equipped with literacy, cognitive, and social skills that will enable them to succeed in the classroom. The national goal to ensure that every child enters school "ready to learn" was one of the six educational goals identified in 1989 at the Education Summit attended by George Bush, Sr. and the nation's fifty governors. This dissertation explicates the relation between mothers' unpaid carework and this national goal and demonstrates how institutional actors target children's early learning as a means to further educational and economic goals. Mothers are expected to produce "school ready" children so that the institution of education can efficiently process students into the kinds of workers necessitated by the global economy. Thus, women's unpaid (often invisible) carework is central to not only the institutional order of education, but the larger political economy.

Mothers willingly take on this work because they care deeply for their children's well-being; yet, intensive mothering does not come without personal costs to mothers. Mothers voiced anxiety, loneliness and feelings of frustration with the infinite demands of mothering. While involvement in RTL intensifies mothers' cognitive care, and thus, their anxieties regarding their children's development, it also

provides a support system for mothers. The isolation of the private, nuclear family is alleviated by the community and fellowship women experience through their involvement in the program. Home visits and the relationship mothers create with their parent educator offer a respite from the isolating effects of modern-day motherhood, even as it ensures that they will perform the often emotionally-taxing work of intense cognitive care.

Research Questions

Quite simply, IE strives to answer, "How did things come to be the way they are?" Returning to Olivia as an example: How did she come to know that her daughter ought to speak 2-5 words? Articulated more generally, my study explores the following questions: 1) How are mothering practices coordinated and constrained through involvement in RTL? 2) How is the cognitive care of babies and toddlers connected to the institutional goal of school readiness? 3) How do women actively participate in the discursive regulation of motherhood? 4) How do parent educators mediate and disseminate expert knowledge to mothers? In other words, how are mothers' everyday lives connected to and impacted by policies and goals constructed extralocally?

I argue that through their participation in mothering and child development discourses mothers take on the institutional goal of "school readiness" as their own. Mothers learn through involvement in RTL and beyond, that "good mothers" provide intensive care which includes the monitoring and facilitating of their children's development so that they conform to scientifically-derived milestones. I demonstrate

how the optimally developed child is constructed through the child development discourse and is utilized by institutional actors in the quest to achieve educational and economic goals.

In the following section I provide a brief sketch of relevant concepts and literature to provide a context for my study. I begin with the classic work of Adrienne Rich who identified key concepts that continue to be relevant to feminists' study of motherhood. I go on to begin a map of "how things came to be" by outlining the emergence of ruling relations in the context of motherhood.

Literature Review

In her immortal book, *Of Woman Born,* Adrienne Rich made the critical distinction between *mothering* and *motherhood.* The latter refers to motherhood as a patriarchal institution that prescribes to women male-defined definitions of "good mothering." In contrast, Rich conceived of *mothering* as a counternarrative to patriarchal motherhood, referring to the potential empowerment that can be experienced when women are freed from the confines of the dominant discourses of motherhood (Rich 1976; O'Reilley 2004). I begin this review with Rich's conceptions because they continue to be powerful tools with which feminists can interrogate the institution of motherhood (O'Reilley 2004).

Specifically, Rich's analysis points to two characteristics of patriarchal motherhood that continue to constrain women's lives. First is the designation of mothers as the proper caregivers of children, from which the ideology of intensive mothering has emerged (Hays 1996; O'Reilley 2004). Second is the recognition that

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many women have little power or control over the conditions within which they carry out their mothering work or the standards to which it is held (Rich 1976). My research demonstrates how women continue to confront these characteristics of motherhood: Expectations for mother-work continue to expand and intensify as children's needs are continually redefined by child development experts. In addition, responsibility for economic and social problems is persistently shifted to the home, away from centers of wealth and power, where mothers' work is expected to infinitely expand (Acker 2005). I draw from Rich's conception of "motherhood as institution" to demonstrate how women's participation in mothering and child development discourses organizes their experiences, feelings, and practices of motherhood so that they conform to translocally constructed, standardized "rules."

Motherhood and the Emergence of the Ruling Relations

Power disparity between mothers and fathers was explicit and easily recognized during the colonial era. "Rule of the father" demanded obedience of children and women in the home as fathers were viewed as the natural "head" of the family to which wives were to succumb with complete deference (Demos 1970). Women were viewed with suspicion during this era, as members of the sex that brought down the fall of man, as relayed in the Biblical story of Adam and Eve. Thus, throughout all sectors of colonial society - the family, religion, and the law - women experienced very little social, political, or personal power during this era (Demos 1970). The overt patriarchy of this time ensured that even as women gave birth to babies, they were not hers; ultimately, children belonged to their father.

Today, mothers are governed more implicitly, through the ruling relations of experts and the discursive rules and actions of institutions. Power has become more diffuse through the development of capitalism; it extends beyond the boundaries of the local, embodied experience (Smith 1990/2005). Olivia is not under the direct control of her husband; yet, her mothering practices are constrained by the powerful interests of institutional actors. I begin the mapping of "how this came to be," with a sketch of the historical trajectory of an important concept for institutional ethnographers, *ruling relations,* and how they have impacted motherhood as an institution.

Much feminist scholarship is devoted to revealing motherhood as a cultural construction impacted by economic, cultural, and social factors (e.g. Rich 1976; Hays 1996; Rothman 1989; Crittenden 2001; Thurer 1994; Collins 2000). There is no universal experience of motherhood; there are dominant constructions of "good mothering" that have emerged over time and are socially and historically situated. Likewise, constructions of "bad mothers" have circulated throughout history and have subjected racial-ethnic, single, lesbian, working-class, low-income, and immigrant women to labels of deviancy when their mothering practices diverge from those of the white middle-class (Arendell 2000; Ladd-Taylor & Umansky 1998).

Motherhood has not always been discursively regulated by the ideology of intensive mothering. Colonial women had little time to devote to the explicit instruction or hands-on care of children that is required of mothers today (Hays 1996). Daily survival demanded that women tend to a multitude of tasks, working

alongside their husbands to run the family farm and household. The Bible was the authoritative guide for child-rearing, espousing "spare the rod and spoil the child" as proper discipline for children who were viewed as innately sinful (Demos 1970). Texts that specifically addressed child-rearing were very sparse; those that existed were addressed to *fathers*, who bore responsibility for the moral upbringing of children (Hays 1996).

Through industrialization, a gendered labor of division was institutionalized, particularly within the middle classes, so that the private sphere of the home was assigned to women while men were expected to work for wages outside the home. Although few families could experience this middle-class family arrangement, it became the cultural ideal to which all were expected to conform. The home became a private, nonproductive realm in which women were to take on child-rearing as their highest priority (Coontz 1992).

As women increasingly took on full-time mothering in the private sphere, the maternal ideal ensued, defining women as naturally suited for the nurturing of children. The newfound importance of motherhood occurred as women's economic contribution to the family was lost as family farms gave way to rapid industrialization and urbanization. Throughout the late 19th and early 20th centuries, child-rearing became central to women's domesticity. Children were redefined as innocent and in need of protection and women, characterized as the morally superior sex, provided the care and domesticity that properly sheltered children from the cruel harsh realities of the outside world (Welter 1966; Cott 1977).

Child-rearing literature emerged during this era, targeted to *mothers*, giving a range of information that was often conflicting (Hays 1996). While the texts did not promote one coherent message, the idea that women necessitated expert guidance for the important work of child-rearing took hold as religious leaders, doctors, and educated mothers disseminated manuals with ideas about proper care (Degler 1980; Ryan 1985).

Even as privileged women actively participated in and promoted "moral motherhood" through various reform movements such as anti-slavery and temperance, the ideology of separate spheres ensured that the private realm of the family would remain outside of the power structures of society. "Separate spheres" emerged in tandem with the *ruling relations*, described by Smith (2005), as "distinctive modes of organizing society" that materialized during the late nineteenth century (18). Although the home was conceptualized as a "haven" removed from the harsh realities of the capitalist world, it was very much subjected to the detached, disembodied knowledge that was constructed within the public sphere.

Through the emergence of separate spheres and the re-organization of knowledge and social power, the daily realities of most women remained anchored in the local and particular experiences of child-rearing and domestic work (even as it was often combined with paid employment) while middle-class men participated in the abstract, conceptual modes of the public sphere (Smith 1990). The gender divide intensified as, "the domestic sphere of the middle classes became increasingly

ancillary to the translocal organization of power knowledge, and opportunity in which men were at work as subjects and agents (Smith 2005:19)."

Technological advances that allowed for movable type allowed for the wide dissemination of texts of all kinds that connected people in different locations to the ruling ideas of those in power. Texts, such as those espousing proper child-rearing techniques served to standardize people's work so that they could be more easily governed (Smith 2005). Child-rearing, like so many other social activities became regulated and defined by translocal, institutional relations, namely, child development discourse.

Child development as a discipline of study emerged in the context of social and cultural concerns for raising better children, and thus creating a better nation (Smuts 2006). It created a discourse of the "natural child," and asserted that children's optimal development was dependent on the type of environment in which they were reared (Griffith 1995). Prescriptive literature to mothers grew throughout the late nineteenth and early twentieth centuries as child development became an established discipline and purveyor of knowledge, to which middle-class mothers "naturally" complied.

During this Progressive era, the emphasis on proper mothering motivated not only experts, but middle-class mothers working in reform movements and charitable organizations, to disseminate child development knowledge to otherwise "ignorant" mothers (Mink 1995). Concerned with the high rates of immigration from non-English speaking European countries and the incidence of urban poverty, privileged

women accepted scientifically-based principles of proper mothering and sought to shore up the deficient practices of poor, working-class, immigrant and single mothers (Gordon 1994; Ryan 1985). Immigration from southern and eastern Europe, in particular, fueled social anxiety regarding the state of nation. The "not quite white" (Brodkin 1998) immigrants did not conform to the ideology of separate spheres; women worked for pay and families combined resources to ensure their survival (Brodkin 1998).

At this time, the eugenics movement agitated for selective breeding in the effort to construct a "better" humanity and to preserve the "morally superior" white race (Litt 2000). In contrast to the biological determinism of eugenics theories, the discipline of child development emphasized the role of "nurture" in creating superior children (Smuts 2006). In this same vein, women reformers in this era called for social policies that would facilitate the assimilation of immigrant women and produce the circumstances necessary for their "modernization," meaning their conformity to middle-class mothering. (Ladd-Taylor 1994). Mothers' pensions, the elimination of child labor and the development of mothering classes were some of the efforts aimed to assimilate the "not quite white" mothers into the dominant ideology and practices of middle-class mothering.

Science became the authoritative voice of the time and was believed to empower mothers and to cure social ills through proper rearing of children. Like industrial work and transportation, child-rearing was thought to improve with the application of scientific principles (Litt 2001). Researchers and scientists in the many

"child-helping" fields, including the multi-disciplinary realm of child development created the knowledge and philosophies that mothers were (and still are) expected to incorporate into their mothering practices. As science became the authoritative way of knowing the world, including children's needs and how best to fulfill them, all mothers were increasingly targeted with expert advice and knowledge in the form of pamphlets, magazines and books (Ehrenreich & English 1978). Science was hoped to bring the diversity of mothering into a monolithic, homogenous practice that would serve national goals (Litt 2001). This theme persists, as RTL endeavors to assimilate all mothers into middle-class, scientifically-driven child-rearing practices in the effort to produce school ready children.

The proliferation and eventual dominance of scientific knowledge throughout the late nineteenth and twentieth centuries is well documented as contributing to the emergence of "scientific motherhood" (e.g. Smuts 2006; Arnup 1994; Apple 2006; Grant 1998). "Good mothers" are expected to shape their care practices in alignment with the latest scientific knowledge, whether it espouses "breast is best" (Blum 1999) or "babies are born to learn" (RTL motto). School readiness is a contemporary illustration of the persistent cultural belief in science as a means to unearthing children's true needs and abilities. Through scientifically-guided intensive mothering, it is believed that children will realize optimal development and thus enter school "ready to learn," achieve academic success, and provide meaningful contribution to the national economy.

Integral to institutional ethnography is Smith's observation that there is "a conceptual distinction between the world as we experience it and the world as we come to know it through the conceptual frameworks that science invents" (Smith 1990: 374). Thus, two ways of "knowing" motherhood emerged through the development of the ruling relations of capitalism; one is from the experiences of mothers and the other, through the narrow lens of experts who declare what children need and thus what mothers should provide.

Through the emergence of the ruling relations the experiential knowledge of the "local" was subjugated to the governing knowledge of institutions – government, schooling and the realm of science. The field of child development emerged as part of the ruling relations of capitalism; it reified the concept of "separate spheres," naturalized mothers as children's proper caregivers, and institutionalized expectations for mothers' carework.

Sociology, too, circulated and contributed to these discursive themes. Andre Turmel (2008) identifies a scientific division of labor between psychology and sociology that emerged towards the end of the 19th century in the study of children. Psychology is the foundation of the discipline of child development and centered on *children*, while sociology primarily focused on the *family* as an agent of socialization. This division of academic labor led to sociologists' uncritical acceptance of child development knowledge and the ensuing emphasis on the socialization of children in "proper" families.

Nowhere are these themes more evident than in the work of Talcott Parsons. He identified the functions of the modern family to be the reproduction and socialization of children. Because the family in modern industrial societies no longer bore the responsibility for the economic production necessary for survival, it was able to specialize and concentrate on the emotional and psychological needs of its members. Parsons argued that the gendered division of labor within the family provided the necessary interdependence between male and female adults and the proper sex role modeling for children. The division of labor in Parson's functionalist viewpoint is based on a biological imperative:

> The bearing and early nursing of children establishes a strong presumptive primacy of the relation of mother to the small child and this in turn establishes a presumption that the man, who is exempted from these biological functions, should specialize in the alternative instrumental direction (Parsons 1955: 23).

Drawing from psychoanalysis, Parsons posited that proper sexual development occurred within two-parent heterosexual families wherein fathers enabled children to pull away from the primacy of the mother-child love bond. Parsons upheld the distinction between public and private, the notion of separate spheres, and traditional gender roles. Thus, sociology developed as a discipline within the ruling relations that drew from and, in turn, buttressed other realms of abstract knowledge regarding children and mothers.

By the end of the twentieth century, mothers increasingly turned to the baby gurus for child-rearing guidance. The most popular of whom were Benjamin Spock, Terry Brazelton, and Penelope Leach, each promoted the basic ideals of intensive mothering; the mother as primarily responsible for children's care and the

emotionally-absorbing techniques that children required (Hays 1996). The wide dissemination of the texts produced by the baby gurus and the documented popularity of their advice ushered in the intensive mothering that continues to be the dominant mothering ideology today.

Intensive Mothering

Mothers' carework continues to be constrained and coordinated by the vast interdisciplinary complex of child development knowledge, in even more intensified ways. Children's needs are defined through the lens of child development and science, a textual conversation that continually redefines the particularities of those needs, and thus, mothering. While specific information has changed over time (i.e. the best method of infant-feeding and discipline strategies [Blum 1999; Hays 1996]), what remains the same is the expectation of intensive mothering, that mothers put the ever-changing and ill-defined needs of their children before their own (Hays 1996). The detrimental effects of this phenomenon have been widely explored by feminists, including Adrienne Rich, whose work predates the intensification of proper motherhood.

Contemporary critics of intensive mothering abound, including Judith Warner (2005) who writes about it as "mommy madness" and the new "problem that has no name (53)." Warner's analysis highlights the increased anxiety that middle-class mothers feel in the age of countless decisions and intensified scrutiny of motherhood. Mothers in my study attested to this intensification of motherhood and the anxiety

and stress of making countless decisions, all while being policed not only by institutions, but other mothers.

Susan J. Douglas and Meredith W. Michaels open their book, *The Mommy Myth: The Idealization of Motherhood and How it Has Undermined Women,* with a pertinent interview excerpt from Vanna White in *Good Housekeeping* magazine, "When I hear [my son] cry at six thirty in the morning, I have a smile on my face, and I'm not an early riser" (2004:1). This demonstrates the authors' crucial point – within the construction of "good mothering," there is no room for women to have their own needs. "Good mothers" are portrayed as selfless and intellectually, emotionally, and psychologically absorbed in the care of their children (Douglas & Michaels 2004; Hays 1996; Warner 2005). Of course, mothers *do* have needs of their own; Chapter Six of this dissertation describes the social needs of women and their desire for companionship and community to support their mothering work.

A significant subset of the mothers I spoke to referred to their mothering style as "attachment," which takes intensive mothering to even higher standards. In her work, *The Paradoxes of Natural Mothering,* Chris Bobel (2002) describes attachment parenting from the perspective of gurus Dr. William Sears and his wife, Martha who explain in their child-rearing manual the basic tenets of this philosophy to be; connect with your baby early, read and respond to baby's cues, wear your baby (preferably in a sling), breastfeed, and co-sleep (Sears & Sears 1993). The culture of parenting in Lawrence, KS, especially for the educated, middle-class, is very in touch with this philosophy. Attachment mothers are very visible in the community; they

wear their babies in slings or backpacks, breastfeed in public, and cloth-diaper their babies. AP-mothers tend to eschew conventional child-rearing wisdom but adhere to the most vital mothering rule of all; they engage in intensive mothering, even more intense than their "conventional" counterparts and they believe that their children's development and happiness are enhanced because of it. They do not question developmental knowledge; they utilize it to defend their practices as developmentally-appropriate and monitor their children's growth in much the same way as other mothers.

Much of the literature that addresses the ideology of intensive mothering, like Hays' work, centers on women's work-family choices and the tension between intensive mothering and paid employment (1996). Indeed, research consistently demonstrates how the normative conceptions of motherhood shape women's relationship to paid employment (Garey 1999; Hattery 2001; Johnston & Swanson 2007; Guendouzi 2006). Hays (1996) demonstrated how women engage in ideological work to justify their work-family choices, always acquiescing to intensive mothering, while Johnston & Swanson (2007) describe the "cognitive acrobatics" mothers perform in their attempt to alleviate the tension between the competing demands of paid work and intensive mothering.

Ultimately, the cultural ideal of "good mothering" relies on the breadwinner-homemaker model of family in which women are relieved of breadwinning and can devote their time to child-rearing. Those who unable or unwilling to conform to the ideology of intensive mothering are subject to "deviancy discourses of mothering"

(Arendell 2000:4). While white, middle-class women in two-parent families feel pressure to engage in intensive mothering; low-income, racial-ethnic, and single mothers are often excluded from this cultural ideal. Many racial-ethnic women struggle to ensure their children's physical survival, often have little choice but to engage in paid work, transnational motherhood, and/or political struggle to do so (Dill 1988; Mink 2002; Hondagneu-Sotelo & Avila 2006). While privileged women are expected to emphasize their mother-work over all else, retrenchment of welfare policies compel low-income, racial-ethnic, and single mothers to prioritize paid employment and forego full-time mothering (Boris 1994; Chang 1994; Segura 1994; Mink 1998). These groups, structured by systems of race, class, gender, and sexuality, are unable to fulfill the requirements of "intensive mothering" – complete absorption in nurturing activities within the context of a biological nuclear family (Arendell 2000).

Mothering and Schooling

An important facet of intensive mothering includes the work that mothers do to ensure their child's success in the schooling system. Officially, the state assumes responsibility for the education of children; however, the schooling system is dependent on the unpaid work of mothers preparing their children for school and supporting them throughout their educational careers (Griffith & Smith 2005). While research on the relation between family and schooling has established that it is an integral means of reproducing social inequality (Bourdieu & Passeron 1970, Lareau 1987; Eccles & Harold 1996), this dissertation explores how mothers' carework

supports the institutional structure and goals of education (Griffith & Smith 2005; Griffith 1995; Lareau 1987).

The emergence of compulsory schooling in the late nineteenth century, in conjunction with children's exclusion from paid work resulted in what has been termed, "the institutionalization of childhood" (Nasman 1994). This process has intensified over time, as schooling has extended upwards with the development of high school and college, and downwards, with an increasing emphasis on children's pre-kindergarten learning opportunities (Moss et al 2000). Even children's "free time" has become increasingly institutionalized and controlled by adults (Prout 2003; Lareau 2003).

Annette Lareau's work *Unequal Childhoods: Race, Class and Family Life* delineates class differences in children's free time. Lareau describes how working-class children spend much time in child-led activities free from adult intervention, while middle-class children engage in structured activities led by adults meant to enhance their skills and development. Middle-class child-rearing strategies conform to the "dominant set of cultural repertoires" that are espoused by professionals as proper and right such as reasoning with children and developing their interests and skills. Thus, middle-class children spend considerably more time in structured settings; such as taking music lessons and participating in organized sports, than their low-income and working-class counterparts. Middle-class parents engaged in "concerted cultivation" of their children and were very involved in their children's schooling, which fostered "an emerging sense of entitlement" for their children

(Lareau 2003:31). Middle-class parents endowed their children with the skills and confidence to navigate institutions like the schooling system so that children not only conformed to institutional expectations, but could utilize them to their own advantage.

Conversely, working-class and low-income parents' commitment to "accomplishment of natural growth" emphasized less structuring of children's daily routines so that they engaged in much more free play and television viewing than their middle-class counterparts. She argues that the child-rearing strategy of accomplishment of natural growth which provides less hands-on cultivation of children's development translates to a sense of constraint for children. Parents were not only less likely to be involved in schooling, but were unable to impart the skills and knowledge necessary for successful navigation of institutions, including education. From an IE perspective, the ability to navigate the institutional order of schooling is a class-based form of literacy that reproduces social class inequality (Darville 1995; DeVault 1991; Griffith & Smith 2005).

In Mothering for Schooling, Griffith and Smith (2005) describe how social class mediates the family-schooling relation as well; but consider the gendered nature of this relationship and how it is regulated through the mothering discourse, which they describe as:

> The creation of professionals, popularized in a media aimed systematically at women and designed to coordinate the mothering work done in the home and the work of educators in the public school system (35)

Their study demonstrates the salience of social class, particularly the constraints of paid employment and familiarity with academics, in women's participation in the mothering and child development discourses. The educational capacity of the middle-class school was greatly enhanced by mothers' ability and desire to actively support children's schooling. In this way Griffith & Smith (2005) view education as an "engine of inequality" that intertwines women's unpaid work in the home with the institution of education. It is through the mothering and child development discourses that women are hooked into this social relation.

Indeed, relationship to discourse is mediated by social class. Marjorie DeVault writes about this process in her book, *Feeding the Family: The Social Organization of Caring Work as Gendered* (1991). She demonstrates how women's relationship to the food and nutrition discourses influences how they feed their family. She describes how professional households learned through their own educational experiences to value expert knowledge, especially science. Thus, they participate in the food and nutrition discourses, making their work accountable to its demands. My study contributes to this understanding; the educated middle-class mothers I spoke with readily accept expert knowledge. The less-educated, working and low-income families that RTL serves were described in interviews with parent educators as less aware of expert knowledge and unable to easily incorporate the information into their everyday practices.

Nevertheless, the ruling relations of child development discourse demand that all mothers practice intensive care without regard to the variant material

circumstances within which care is provided. Those mothers who are unable or

unwilling to acquiesce to expert standards are subject to labels of deficiency.

> Discourses of "family life" – instructions for being a "wife" and especially for "mothering" – suggest that for those whom the models are often inappropriate should be held to the same standards as others, and if they do not measure up, should be blamed as inadequate women, for their families' difficulties. (1991: 230)

My analysis centers not only on the broad model of intensive mothering, but the

specific requirements of cognitive care and school readiness that women are expected

to engage in; those who do not are viewed as deficient.

In addition, my study demonstrates how mothering continues to be called

upon to achieve institutional goals, particularly, educational reform through the

"school readiness" campaign. The program RTL is a constituent of this campaign,

promoting mothers as their children's "first and best teachers" to ensure their optimal

development and thus, ability to do well in the schooling system. Although concern

for children's pre-kindergarten skills has intensified in the U.S., it has not been

matched by an increased social provisioning for children's early learning. Especially

as is performed by the program RTL, the responsibility for children's early learning

and skill development remains the responsibility of mothers, children's "first and best

teachers."

Outline of the Dissertation

In Chapter Two I describe the methods I utilized in my exploration of how

mothers everyday work is coordinated and shaped by institutional goals. I provide an

explanation of institutional ethnography and how I engaged in interviews, participant

observation, and document analysis to construct a map of the social relations of mothering work. In addition, I give a brief sketch of the theoretical underpinnings of institutional ethnography, how I utilized the IE framework to make sense of the data, and how I grappled with the role of knowledge-producer and mother.

Chapter 3 reveals the range of work that is required of "good mothers" of babies and toddlers. Mothers described the intellectual and ideological work they perform to arrive at philosophies and practices that they believe are "best" for their child(ren). They work to ensure that their partners adopt their well-thought out child-rearing strategies by introducing them to literature and the ideas that they learn through their own research. Good mothering is contingent on making decisions about what may appear to be mundane to the outsider (e.g. whether or not to serve juice to a toddler) but are taken seriously by mothers as they draw from expert advice and opinions to formulate their decisions. Other choices are quite momentous, such as breast-feeding, how to put a child to bed, and discipline, realms of care that I explore more fully. Lastly, this chapter explores the ruling perspective of parent educators towards "other mothers," women who cannot or do not participate in intensive mothering and have difficulty incorporating scientific principles into their everyday care practices.

Chapter 4 examines how women's commitment to intensive mothering ensures that they will engage in the cognitive care of their young children. I describe the work that mothers do as they facilitate and monitor their children's development, the RTL texts that they encounter, and the intervening work of parent educators in the

process.   These educated middle-class women utilize RTL in a class-based way; the information supports their intensive mothering approach so that indeed, their children are primed and ready for school when the day comes.

Chapter 5 explores several primary texts that shape the child development discourse. I explore the emphasis on "early environment" and the neuroscience that fuels the concern for children's early brain development and language skills. I argue that the concerns that circulate within the discourses compel women to engage in mothering for schooling long before their child ever steps foot into a classroom (actually, long before their child ever walks!) and coordinates their work with the schooling system via the institutional goal of "school readiness." The institution of education relies on children's abilities and skills to conform to pre-determined measures of "ready" and "unready" and mothers are categorized accordingly as well. Good mothers have prepared their children for schooling, while mothers who fail to do so, are deemed deficient and their children "unready," or "behind."

Chapter 6 describes the frustrations of intensive mothering; the loneliness and isolation as well as the anxiety and tremendous weight of responsibility women feel to get it right.   From a ruling perspective, these women *are* doing it right; thus, there is no "problem." Yet, the detrimental effects of mothering in isolation with the many demands of intensive mothering are important to consider. I examine the efforts women employ to assuage their loneliness and mothering frustrations and the role of RTL in supporting these mothers.

Chapter 7 concludes the dissertation with a summary of findings and their implications. I propose additional questions that have been raised through this dissertation as well as future lines of research that can expand upon this study.

Significance of the Study

My analysis of mothers' experiences in a parent education program offers a unique contribution to motherhood studies. This dissertation starts with the philosophies and practices of mothers but does not stop there; I demonstrate how mothers' cognitive care of babies and toddlers coordinates their work with the schooling system through the institutional goal of "school readiness." As middle-class, educated mothers, they conform to social expectations of "good mothering;" thus, their experiences are not problematized, they are taken for granted. Yet, many of these mothers spoke of the anxiety, pressure, and loneliness of modern motherhood. Motherhood as an institution – the social expectations of mothers' work – is oppressive, anxiety-producing and exhausting. My study provides a view of the discursive regulation of motherhood from the perspective of mothers, "experts," and the ruling relations of child development.

CHAPTER 2
METHODS

This dissertation examines how mothers' care philosophies and practices are shaped and coordinated by the mothering and child development discourses that they encounter through their participation in a parent education program, "Ready to Learn." I examine not only how mothers construct and enact their ideas of "good mothering," but also how their mother-work supports the institutional processes and structural organization of schools as well as the larger economy. I utilize institutional ethnography, as developed by Dorothy Smith (1990/1987/ 2005) a method of inquiry that enables researchers to examine how the "macro" penetrates the "micro," so that the otherwise imperceptible relations that organize people's everyday experiences can be made visible.

Institutional Ethnography: An Overview

Institutional ethnography grew out of Dorothy Smith's discontent with traditional sociological theory and research methods that she contends merely reproduce the ruling relations of abstract knowledge that transcend the everyday lives of actual people (2005). The disjuncture Smith experienced between her experiences as an academic and a mother, inspired her theoretical and methodological departure from the mainstream:

> My experience was of contradictory modes of working existence: on the one hand was the work of the home and of being a mother; on the other, the work of the academy, preparing classes, teaching, faculty meetings, writing papers and so on. I could not see my work at home in relation to the sociology I taught, in part, of course, because sociology had nothing to say about it.

Traditional sociology begins within the discourse of the discipline and is constrained by its theories and concepts throughout the research process. Smith describes how she recognized the ways in which she and other feminists during the 1960s and 1970s remained "conceptual outsiders" within a male-dominated discipline that utilized concepts and theories that reflected rather than challenged the ruling relations that positioned women as the objects, not the subjects, of knowledge production (1990). Smith's theory of knowledge points to the "bifurcation of consciousness" that ensued as the ruling relations emerged with capitalist development.

> Sociologists, when they go to work, enter into the conceptually ordered society they are investigating. They observe, analyze, explain, and examine that world as if there were no problem in how it becomes observable to them. . . Entering the governing mode of our kind of society lifts actors out of the immediate, local, and particular place in which we are in the body. What becomes present to us in the governing mode is a means of passing beyond the local into the conceptual order. This mode of governing creates, at least, potentially, a bifurcation of consciousness (1990: 16-17).

Two ways of knowing the world materialized; one located in the concrete everyday activities of life (i.e. women taking care of children and the home) – the other, located within the "transcendental realm" of abstract concepts (traditional knowledge production) (1990: 18). Smith problematized traditional sociology because, she argues, it reinforces this dichotomy and ultimately leaves unexamined the locally situated experiences of women (1990). The method of inquiry she developed began as a "sociology for *women*" and has expanded to be a "sociology for *people*," a methodology that works for both men *and* women with the desired goal to

explicate how our lives are put together outside of our everyday knowledge, often in ways that serve the interests of the powerful (2005).

The concept *institution,* as utilized by institutional ethnographers, refers to coordinating and intersecting work processes taking place across multiple sites across society, organized around distinctive functions, such as education and health care (DeVault & McCoy 2002; Smith 2005). To explicate how social institutions shape local experiences, institutional ethnography occurs on two analytical levels: the "local" everyday experiences of people living their lives and the "extralocal" which refers to the social relations that exist outside of the margins of everyday experience (Campbell & Gregor 2002). Institutional ethnographers investigate the disjuncture between these two versions of reality and the unavoidable conflict between knowing something from a ruling perspective versus knowing it from an experiential one (Campbell & Gregor 2002).

Smith writes that, "The institutional is to be discovered in motion" (2005: 225); it is through "work" that people's embodied experiences intersect with institutional regimes. Institutional ethnographers utilize a "generous conception of work:" Work is defined as anything that people do that requires effort, intent, and time (Smith 2005). Thus, this conception transcends the narrow definition of work as paid employment and allows for researchers to examine otherwise invisible work processes. Through interviews and observations, I recognized how the work of mothers and parent educators are coordinated and shaped by the institutional goal of

school readiness. It is through the embodied "work" of mothering and educating that women are hooked into extralocal social relations.

Dorothy Smith (2005) contends that in our text-mediated world, researchers must investigate texts as part of the social relations of the institutions that shape and constrain the "local" contexts of our lives. Doing so allows empirical investigation of otherwise hidden mechanisms of power. Texts reflect the ruling interests of institutions; they establish procedures, rules, policies and official versions of reality that are "activated" by readers in various sites across society. Smith's conception of "text" refers to, "material in a form that enables replication (paper, print, film, electronic, and so on) of what is written, drawn, or otherwise reproduced (Smith 2005: 228). The primary objective of analyzing texts in an IE is to determine how their production, dissemination, and consumption pull individuals into powerful discourses to which their everyday life practices become accountable.

Discourse, then, is integral to an institutional ethnography and is approached as, ". . .people participating actively and embodied in a conversation mediated by written and printed materials" (Griffith & Smith 2005: 34). Griffith & Smith (2005) emphasize that discourse as it is utilized by institutional ethnographers is not an objectified form of knowledge or signification; it is "local practices of translocally organized social relations" (34). It is an orientating framework to which people's actions are held accountable, even if they are unable or unwilling to acquiesce to its demands. The coordination of mothers' work does not result in their loss of individual agency. Rather, the social relations that organize and coordinate mothers'

care practices are comprised only through the everyday activities of women located within various contexts and locations as they make choices and develop child-rearing strategies. Institutional ethnography does not aim to produce generalizable data, but to demonstrate how the lives of similarly located people are shaped by "common set of organizational processes" (DeVault & McCoy, 2002: 764).

Data Collection

The point-of-entry for my research was the everyday experiences of mothers enrolled in a parent education program. Interviews with mothers provided a view of the front line work of producing "school ready" children; even though mothers did not identify the institutional goal of "school readiness" as guiding their mothering work. The problematic I indentified to guide my research centers on how mothers' carework is shaped and constrained by this institutional goal through their participation in the mothering and child development discourses that are disseminated through RTL.

I utilized a multi-level interviewing approach to uncover the social relations of the setting, as Campbell & Gregor (2002) state, "It takes a number of differently located people to enact the event." Entry-level interviews with mothers centered on their everyday care practices, the expectations they have developed for their mothering, and their feelings about the work that they do. Level-two interviews with parent educators reveal how the "work processes" of trained professionals connect mothers to institutional goals and the extralocally-derived "rules" of child development and mothering discourses. Interviews with parent educators centered on

their work as disseminators of expert knowledge, the expectations they have for mothers' work, as well as their role in providing mothers the support and companionship that is quite lacking elsewhere in society.

In addition to qualitative interviewing, I performed document analysis and participant observation in my investigation. I enrolled in the program with my newly born daughter; thus, I received home visits from a parent educator, participated in RTL playgroups and parenting classes, and collected parental handouts that are routinely distributed by the program. In addition, I investigated entry-level as well as second-level documents that coordinate and constrain mothers' work. I identify the parental handouts as entry-level documents, as they are the texts that mothers encounter as part of their participation in the program. RTL curriculum and the expert knowledge generated by researchers, policy advocates, and institutions of higher education comprise level-two texts; they are not read by mothers but by institutional actors within the ruling relations. These level-two texts trickle down to mothers through their participation in RTL and hook them into the social relations of schooling.

Mothers' commitment to intensive mothering is reinforced through their involvement in RTL (see Chapter 3). As "good mothers" they engage in intense cognitive care of their young children (see Chapter 4), work that is socially sanctioned through the schooling system's reliance on "school ready" children (see Chapter 5). Furthermore, as I construct a map of the social relations of the setting, I explore the disjuncture between the ruling perspective and its expectations for

mothers' work and how it obscures the experiential perspective of mothers (see

Chapter 6).

 A Note about Gaining Access. RTL is part of the Lawrence, Kansas public

school district; therefore, I was required to submit my research proposal to the

district's institutional review board prior to any contact with mothers or parent

educators. Upon the district's approval of my study, I approached the principal of the

Washington Education Center[6], the site that houses the RTL program to solicit the

program's participation. I met with the principal of the school along with the

program coordinator, both of which agreed to facilitate my research. It was decided

that each family enrolled in RTL would be given a flyer that I constructed with

information about the study. I provided 150 flyers for distribution. In addition, my

flyer was printed in the program's monthly newsletter. From there, I received phone

calls and e-mails from mothers who were interested in participating in my research

project.

Entry-Level Data: The Everyday World

 Interviews. Interviews with mothers enrolled in RTL provide the point-of-

entry for my study. I conducted interviews with 16 mothers who responded to one of

my various calls for research participants. In addition to finding respondents with

the flyers I constructed for distribution by RTL (n=8), I found informants through

word-of-mouth recommendations from mothers enrolled in the program, as well as

recommendations from friends who were aware of my project and my need for

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[6] I have changed the name of the school to protect the anonymity of the research participants.

participants (n=4). I recruited a woman who taught pregnancy fitness classes that I participated in at the local hospital. She made a recommendation to all of the mothers in our class to participate in the program Ready to Learn. I requested an interview with her based on her personal experiences, to which she agreed. I also posted my research request on the local attachment-parenting listserv, which resulted in three participants. I have been a member of the listserv for several years and was aware that many of the AP mothers were involved in RTL.

I utilized a standard interview schedule (see Appendix B) during each interview which provided a guide for my discussions with mothers. Most interviews took place in mothers' homes as we cared for our children (my infant daughter accompanied me to all but 2 interviews); thus, as is often the case when children are present, our conversations were intermittently interrupted. Children's diapers were changed, glasses of milk were retrieved from the refrigerator, babies were nursed, and discipline was enacted as we conversed about mothering practices, philosophies, and involvement in RTL. The interview schedule was merely a guide; conversations adapted to the topics and interests of mothers as they discussed their carework. These discussions lasted between 60 to 90 minutes and were digitally recorded and fully transcribed by myself. Often, dialogue was a mother-to-mother exchange of ideas, points of pride, even frustrations. I enjoyed these conversations and believe that mothers, too, appreciated the opportunity to speak about their mothering.

All of the mothers I interviewed are educated, middle-class women. Several told me that they contacted me to participate in my project because they "know how

important research is." As a self-selected sample, it reflects the comfort of educated, middle-class women with the research process. In addition, it reflects their class-based relationship to institutions; they do not feel the need to protect their mothering practices or philosophies from the expert or "outsider" gaze (Lareau 2003). Part of the population I interviewed was acquired through a convenience sample via my middle-class social connections, thus, it reflects a lack of class diversity.

The women's education varies from "some college" (n=1), four-year college degrees (n=5), master's degrees (n=7), PhD students (n=2) and a PhD (n=1). Income varied significantly as well, with some mothers reporting a family income of less than $30,000 a year, others with access to a mid-range family income, those with higher income, and two with a family income of over 100,000 dollars. Despite the variation in family income, I classify all of the women as middle-class due to their educational backgrounds and proficiency in class-based discourses (Lareau 2003; DeVault 1991, Griffith & Smith 2005).   Appendix B charts the women's income and education, as well as other characteristics that are integral to this research project, including number of children and familial structure.

All of the women mother in two-parent nuclear families. While no men contacted me to participate in the study; two fathers were present during interviews. In one case, the father cared for the couple's young child while I interviewed the mother and would occasionally agree with comments or observations she shared with me. In the other case, the father was studying in an adjacent room to which his wife, during our interview, would occasionally yell a figurative question, (Right, Jack? I'm

kind of anal about the homework aren't I?). My minimal interaction with fathers

reflects the gendered division of parenting work within the families. Even as women

reported that their husbands were very involved and interested fathers, it was most

often mothers who organized their lives around the care of children. Only three

mothers work full-time jobs; most others engage in intermittent, flexible paid work

such as providing piano lessons, teaching classes at the University, selling jewelry,

attending graduate school, or assisting births as a doula (n= 10). Still others work

regularly scheduled part-time jobs (n= 2) while one mother did not work for pay. Not

only did women's paid work accommodate for their mothering, they were often the

primary participant in RTL. Interviews revealed that it is mothers that take the

"executive" role in the parenting team (see Chapter 3) and guide the couples'

philosophies and practices. Furthermore, women reported that the tracking and

facilitating of children's development, an integral component of "good mothering,"

was not an integral feature of fathers' carework.

   Participant-Observation. In addition to formal interviews, I informally

interacted with mothers at RTL playgroups. RTL hosts four to six playgroups a

month for parents and children, most often in the mornings, at the Washington

Education Center. A large classroom serves as the RTL play room which is stocked

with toys and books for children ages zero to three. I attended approximately twenty

playgroups with my daughter. In addition to the playgroups, I attended a four-week

session of parenting classes that took place in the evenings. These classes centered

on teaching parents about Love and Logic, a discipline philosophy espoused by RTL

as an effective means of shaping children's behavior. The five-week session involved watching L&L videos which were often followed up by the parent educator / host's own personal stories, tips, and opinions about discipline (see Chapter 3). My status as researcher was widely known throughout the RTL community as I attempted to recruit mothers for interviews and openly discussed my project with women in play groups and parenting classes. Nevertheless, some mothers may not have realized that I was participating in RTL not only as a mother, but a researcher as well.

In addition to participating in RTL structured activities, I received home visits from a parent educator on a regular basis. My experience with the program includes my previous involvement with my eldest daughter (now 9 years old) in Webb City, Missouri and then in Warrensburg, Missouri after our move for graduate school. I remember signing up for the program out of an interest for learning more about parenting and consciously strove to construct child-rearing strategies that diverged from the constrained practices of my own working-class parents. I was fairly obedient to the lessons I received as a young mother; I monitored Luna's development with much anxiety and fervor.

This time around, I had developed what I view as a healthy skepticism to expert knowledge and the many demands it places on mothers. Although I enjoyed my visits with Morgan, my parent educator, I often felt irritated by the lessons that expected me to closely monitor my baby's development. My involvement in the program this time was primarily as a researcher; yet, I did enjoy the playgroups and interactions with my parent educator. In addition, I appreciate the support I received

from Morgan when I discussed the various challenges I experienced with my daughter and am grateful for her helpful suggestions and advice. I did benefit from the program and am thankful for my experiences in it.

Texts. RTL disseminates a range of texts including parental handouts, a monthly newsletter, and information from other agencies, such as Reading is Fundamental (RIF)[7] and Zero to Three[8]. Parent educators distribute two different sets of RTL handouts; one is designed for "high-functioning" families with the capacity and desire to consume a lot of child development information. All of the mothers I interviewed fall into this category, as do I. "High-risk" mothers are given handouts that were described by parent educators as simpler and more focused. I received all of the same handouts that the mothers in my study are given, thus far, approximately fifty. In addition to handouts, the program mails a monthly newsletter with parenting tips, recipes, activities, and a calendar that lists all of the program's activities.

Level-Two: The Intermediary and the Trans-local

An integral consideration for an institutional ethnography is how the work of people across sites is coordinated (Campbell & Gregor 2002; Smith 2005). Level-two data collection enables the researcher to "map" how the everyday experiences of people are connected to the institutional processes of the ruling relations. To this end, I interviewed parent educators and examined numerous texts that are implicated in the social relations of the setting. These texts include a portion of the RTL's *Babies are*

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[7] A non-profit literacy organization that distributes free books and literacy resources to children and families.
[8] A non-profit organization with the mission to promote the health and development of babies and toddlers.

Learners[9] curriculum, primary texts produced by researchers and universities, and documents generated by the school readiness campaign.

Interviews. Interviews with parent educators provided a view of RTL from a ruling perspective which is quite a different standpoint than the perspective of mothers. Parent educators discussed their philosophies, struggles, and convictions that frame their work with mothers. I interviewed the five parent educators that were employed by the program at the time of this study, one of which serves as the program's coordinator. In addition, I interviewed the program coordinator for the Blue Valley RTL program whose roles also include that of national trainer and program advocate. She spoke to me after a recent training session in Iowa where she trained visiting nurses with the program's *Babies are Learners* curriculum. She helped found the Kansas Ready to Learn Association, an advocacy organization that seeks to increase state funding for RTL and served as its president for six years.

Conversations with parent educators were guided by a structured interview schedule (Appendix D) and adapted to the interests, concerns, and issues that developed along the way. Interviews lasted from 60 to 120 minutes, were digitally recorded and transcribed by myself. All of the parent educators are middle-class, educated mothers with degrees in early childhood education.

Texts. Level-two texts, those that are circulated within the ruling relations, are not directly consumed by people in their everyday lives. Nonetheless, these powerful texts penetrate the local through the work practices of parent educators, child

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[9] The name of the curriculum has been changed.

development experts, educational leaders, economic and political leaders whose interests align with the overarching institutional goal of producing "school ready" children. I identified key texts that represent and reinforce the dominant themes of the child development and mothering discourses. I analyzed a range of second-level texts and incorporated into my analysis the most representative and widely circulated documents.

My analysis within this level of texts includes a sample of RTL *Babies are Learners* curriculum, made available on the program's national website. In addition, I examined the textual conversation of experts as is disseminated through various documents that are intended (mostly) for the expert audience. Due to the immensity of child development knowledge, I made strategic choices about which documents to examine in the effort to identify the major themes of the discourse that mobilize institutional actors to the school readiness cause. I examined texts that are implicated in the cognitive care mothers provide; specifically, the emphases on brain development and language skills. To this end, I examined the renowned *From Neurons to Neighborhoods: The Science of Early Childhood Education* (Shonkoff & Phillips 2000). In addition, I examined the work of Harvard University's Center on the Developing Child and the documents that are produced from this site of knowledge production. Furthermore, I explored the work of Drs. Todd Risley and Betty Hart (1995) in language development. Their study is widely cited across disciplines (even sociology) and is an important contributor to the emphases on children's environment and language exposure. In addition, I explore the institutional

construction of "school readiness;" what it means and how it is to be achieved through an examination of documents produced by school readiness coalitions. Finally, I explored the work of prominent economist James Heckman who reigns as expert of human development formation and has become a significant institutional actor within the school readiness discourse.

Analysis and Data Interpretation

Analysis is, in short, making sense of the data (Campbell and Gregor 2002). To do so, I began with Liza McCoy's (2006) suggestion to "interview" the data. Throughout the process, I engaged with the following questions, What kinds of work are mothers describing? What kinds of knowledge and skills are necessary to perform this work? How is the work of the mothers connected to the work of other people: mothers, workers in institutions, policy makers? What is being asked of mothers? What expectations for mothers' work are taken-for-granted? What are the pleasures and problems that surface through this work? How is the work shaped by the institutional order? (McCoy 2006).

After interviews were transcribed, I printed them out and began a process of "coding" and developing themes. In my interviews with mothers, I recognized the importance of expert advice for mothers, the desire to ensure their children are "on track" developmentally, the fact that they had performed much research even before their participation in RTL, loneliness and isolation they face, their desire for recognition and companionship and the sometimes very strong identification with a particular mothering style. As an institutional ethnography, I endeavored throughout

the analytical process to keep the institution "in view;" to identify how the local was organized by extralocal forces.

I wrote field notes about my experiences at playgroups, parenting classes, home visits, and interviews. I drew from these reflections as I "mapped" the experiences of mothers. I utilized the methodological tool of "memo writing" to help me organize my data as well as my thoughts (Charmaz 2006). Memos enabled me to pull together themes across interviews with mothers and parent educators to arrive at distinct ideas regarding the coordination of various work knowledges. These memos provided a starting point for the daunting task of putting together the various data of my study.

Reflections of a Mother-Researcher

The only way of knowing a socially constructed world is knowing it from within" (Smith 1990:22). Where we stand within the world affects what we see, how we see it, and what becomes known. Thus, I recognize that my own experiences as a mother are important to the research process. As a mother of two young girls (ages 9 and 2), my everyday life is ground in the realities of motherhood: carpools, field trips, piano lessons, diapers, pediatrician appointments, sippy cups. I share this world with the women of this study, enabling me an understanding of their lives that I would not have if I, too, were not in the thick of mothering young children.

I began this research as a mother of a new baby and shared many of the experiences of which mothers spoke. In addition to the joy I experienced through the birth of my second daughter, I also felt overwhelmed, exhausted, and lonely; feelings

I heard expressed by women time and again in interviews. I enrolled in RTL as a researcher, but also experienced it as a mother. Although I deliberately shunned the baby gurus and expert knowledge (to avoid the anxieties I experienced my first daughter), I found that through talking to mothers, reading the texts that they read, and participating in RTL, I was subjected to those forces, even as I was critical of them. An excerpt from field notes taken after a playgroup demonstrates this phenomenon:

Today I went to a RTL playgroup for the first time with Marigold who is 7 weeks old. I have to admit that it was a little overwhelming; the parent educator who hosted this playgroup readily shared her expert advice. Immediately when I walked in, she looked at Marigold and revealed that she was focusing on one object! This is a milestone, apparently one that I did not know about. . . I told her that Marigold will probably only play about 15 minutes at a time. She told me that was good! And that she should not be awake more than 2 hours at a time. I commented on how she seemed to be outgrowing her crying spells at night. She told me to try swaddling her – that babies really need swaddled and then rocked and/patted to help them calm. I told her that Marigold did not like being swaddled because she likes to move her arms. The parent educator was persistent and said that many babies will fuss even more (or scream) at first but will calm down "within two minutes." She told me a story about her child who was screaming and/inconsolable as an infant – she was walking inside, outside, rocking, bouncing, singing to try to calm her. Finally, she laid her in the middle of the bed so she could use the bathroom and her baby calmed

down. She said that it was her, the mom, who was over-stimulating her child and just

needed to let go. I told her that Luna (my older child) was a fussier baby and she

suggested that maybe I didn't know what I was doing with the first one – that maybe I

was unable to pick up on her cues, especially as a first-time parent. In all honesty, I

left the playgroup feeling like I didn't really know what I was doing

This feeling lingered, but, overall, my journey as a mother has taken a detour

from the anxious intensity that I experienced with my first child nine years ago. A

scholar of motherhood, I developed a critical stance towards expert advice and the

absolutes of motherhood that are circulated through discourse. I have benefitted from

what Dorothy Smith explains as the ultimate goal of institutional ethnography:

> . . .it allows one to disclose (to the people being studied) how matters come
> about as they do in their experience and to provide methods of making their
> work experience accountable to *themselves*. . . rather than to the ruling
> apparatus of which institutions are a part" (Smith 1987: 178, my emphasis).

Through my research on motherhood I have come to understand it differently and

recognize, through experience, the distinction between *motherhood* and *mothering*

(Rich 1976). Rich contends that women must become "outlaws from the institution

of motherhood" (195) to experience mothering as empowering and life-affirming. In

Of Woman Born, Rich shared a personal experience of mothering outside the confines

of the institution of motherhood, where she experienced empowered mothering and

utter joy with her sons. With her husband away for several weeks in the middle of

summer, she described how her life with children "fell into a delicious and sinful

rhythm" free from the constraints of school schedules, regular meals and bedtimes;

free from the rules of "good mothering." Rich wrote, "I felt enormously in charge of my life" (195).

My hope for this dissertation is that it truly can be a "sociology *for* people," or, more specifically for *mothers*. By connecting the everyday practices and actions of mothers to the extralocal relations of ruling, I not only demonstrate the constraints of motherhood as institution, I explore the possibilities (like that described by Rich) that are eclipsed by the way in which motherhood is currently socially organized (see Chapter 7). To begin this "sociology for mothers," the following chapter explores how mothers and parent educators participate in discourses of "good mothering."

CHAPTER 3
INTENSIVE MOTHERING

This chapter examines the range of work that is required of "good mothers" of babies and toddlers. Women described the intellectual and ideological work they perform to arrive at philosophies and practices that they believe are "best" for their child(ren). They work to ensure that their partners adopt their well-thought out child-rearing strategies by introducing them to literature and the ideas that they learn through their own research. Furthermore, mothers as well as parent educators described "good mothering" as contingent on making decisions about a range of topics, especially infant feeding, sleep and discipline. Women seek out expert, research-based information and utilize RTL to varying degrees in their decision-making. For the most part, they do not draw from the experiences of the previous generation whose ideas and practices are viewed as out-dated and inappropriate for today's children.

The discursive representation of good motherhood today is the "intensive mother" (Hays 1996) who devotes copious amounts of time to hands-on child-rearing practices that are child-centered and often emotionally painstaking. The philosophy of intensive mothering is predicated on the definition of children as unique individuals in need of an attentive, reflective caregiver who can ensure that they achieve their highest potential. Mothers are expected to effectively and appropriately respond to the distinct needs of the child. Mothering is central to the identity of all the women of this study. They think about, research, stress over, discuss, practice, and even become political about their child-rearing choices. This chapter describes

the enormous amount of mental, emotional, and ideological work that women engage in as they strive to be "good mothers." Lastly, I explore the ruling perspective of parent educators towards "other mothers," women who cannot or do not participate in intensive mothering.

Mother as "Executive"

Ready to Learn consistently uses gender neutral language in its handouts, website, and in interviews with parent educators, most often referring to children's caregivers as "parents," as if mothers and fathers are equally involved in the care of their children. Yet, gendered parenting is acknowledged by RTL in a parent handout that encourages "active and involved fathers," and espouses the importance of fathers in children's development. The handout acknowledges the gendered nature of parenting, claiming that men's proclivity to engage in "rough and tumble play" along with their analytic abilities (math and science) are important for children to experience as they develop ("Why Dads are Important" 2006). This is one of the few exceptions to the gender neutral "rule" of RTL's information and official stance towards "parenting." Reflecting a traditional perspective regarding children's socialization, not only are men's gendered parenting practices accepted, but they are naturalized as something children "need." The handout goes on to encourage fathers to share in the work of diaper changes and infant feeding and to approach parenting as a "partner."

All of the mothers I spoke with described their partners as active and involved fathers. Many of them even described their progressive views on gender. Yet,

caregiving arrangements reflect, to varying degrees, gendered parenting. Mothers and parent educators expect men to be interested and involved in their children's lives; yet "mothering" and "fathering" are experienced as two very different orientations to the care of children. Women are assigned the "executive" role in the family; they construct a mothering philosophy, choose the corresponding child-rearing practices, and then teach and guide their partners, who, without the guidance of mothers would rely on "instinct" or their own experience.

Teaching and Guiding Fathers. This section examines the experiences of women as the "executive" parent, the family's guide to determining acceptable parenting practices, overall philosophy, and all things research-based. Unlike fathers, mothers consume a great deal of information as they determine the philosophies and practices they will incorporate into their mothering style. Women spoke to me about how their partners are not motivated to research child-rearing on their own. Instead, fathers receive child-rearing lessons from mothers who have gained expertise from reading literature and participating in RTL.

Tracy, mother of a two year-old, described herself as "the mother who reads it all." Although her husband is involved in the care of their son, he is uninterested in studying child-rearing literature. Part of Tracy's job as a good mother is to school her husband in the proper ways to handle their son's behavior:

> I'll tell him something and you know, point out, "This is a chapter – this is a point to read." And I'll read it with him or something. So yeah. I always feel like I'm the one helping him along. He doesn't, he thinks *he knows it all.* I don't know (pause). He likes to learn, he just doesn't seek it out as much. So yeah, I'm the one – (gasp) "Here's what I read!"

Tracy's husband "thinks he knows it all," reflecting the tendency of men to approach parenting instinctively and to draw from their own experiences. Isabella, mother of two, described how her husband "follows his nose," in stark contrast to her approach which involves researching child-rearing practices so that they are guided by expert knowledge.

Maya, mother of one, lives a very unconventional existence: She breastfeeds her two year-old son on demand, bikes or walks around town as much as she can, sports unshaved legs, and chooses not to immunize her son. Yet, she has not escaped the conventional division of caregiving labor. Her work as a musician, quilter, and birthing attendant revolves around her top priority; to be home with her son while her husband works at the University. She, like all of the mothers I spoke with, is the executive of the parenting team, believing that, "It is hard to be a good mother and work [outside the home]." Her husband is unable to participate in RTL because he is "at work all day." Maya directs her husband to information when necessary:

> Sometimes he'll ask what's going on [with their son's behavior] and I'll say, "Look! Here's what's going on [motions to a RTL handout]. I usually read the information and tell him about it.

Cecilia, a stay-at-home mother of eighteen month-old Tasha, shares many of the same unconventional characteristics as Maya. She, too, has chosen to divide caregiving labor in a conventional way; she is not only the primary caregiver, she governs the couple's parenting philosophy and practices:

> My husband calls me a hippie because I'm a big proponent of natural birth, breastfeeding, cloth diapers, co-sleeping – all of the things that he thinks of as "hippieish." He had a very standard, mainstream upbringing and I had sort of hippie parents. My mom was not successful breastfeeding us, but *wanted* to,

she didn't have a support network. And she had natural births in hospitals and you know, co-slept with us all and cloth diapered. There was no spanking in our house or grounding in our house, so I was raised in a much more attachment parenting home before there was a name for it. My husband was – babies in cribs and babies with bottles – and a much more mainstream upbringing.

Her daughter, Tasha is breastfed, sleeps in her parents' bed, wears cloth diapers and was born at a nearby birth center with a midwife. Cecilia views her mothering style, also known as "Attachment Parenting (AP)" to be superior to the mainstream upbringing her husband experienced. She works to ensure that her daughter experiences AP caregiving from both parents and she views her role as liberating her husband from the limitations of mainstream parenting:

> You know, on some days I think his instincts are a lot like mine, but otherwise he would override it to the way things "should" (quotation gesture) be. So I give him permission to be a little unconventional.

Cecilia has read numerous books on AP parenting and researched various aspects of child-rearing, allowing her husband to rely on her to guide the household's parenting approach. He may have an "instinct" as to how he wants to parent their daughter, but ultimately, he can rest-assured that Cecilia will make certain that they engage in sound, albeit unconventional, parenting practices.

Even when fathers are responsible for providing care on their own, they do not feel the need to research child-rearing. Kelly, mother of two children, works part-time as a hair stylist in the evenings and weekends while her husband is with their children. She appreciates the fact that her husband has the opportunity to parent without her interference, referring to herself as "the bossy one:"

It's cool on one hand because we both get to be the parents without each other interfering because I would be considered the bossy one (laugh). Uh, so it's neat because he know what it's like to be with the kids all day because on Saturdays – are my big long days – I'm gone for nine hours. So he's Mr. Mom and so we can both really appreciate each other's perspective.

Although he's on his own with the children during the evenings and every Saturday, Mr. Mom is relieved of taking the executive parenting role. Kelly described how even in her absence, she feels responsible for the research-side of parenting. For example, although she had never experienced her daughter's nighttime colic because she is at work during her children's bedtime, she researched solutions for her husband.

I really haven't experienced the colic – at all. And so we kind of have totally different ideas of our daughter. He's like "Oh my gosh, she's so hard [to care for]!" And I'd say, "She's really wonderful! What are you talking about?" Because it's night and day and so – yeah, I would try to read and offer him solutions or look up solutions or techniques and stuff like that for him.

While her daughter's colic was an issue her husband faced, Kelly was responsible for guiding him through the challenge with research-based solutions. Physical caregiving of the children is divided quite equally, yet the intellectual work of seeking out knowledge remains Kelly's job. Similarly, Tracy, mother of one, works outside the home full-time but assumes the responsibility of directing and shaping her husband's child-rearing practices. When I asked Tracy if any of her ideas about child-rearing had changed through her involvement in RTL, she instead spoke of how she worked to change her husband's discipline philosophy:

I think for one thing, it has really helped me to educated James on why we shouldn't spank. I think that's really big. Helping James – helping *me* find ways to communicate with James about well, why *I* want to do something (laugh). Really, so it supports what *I* want, like you know, I read all the stuff

and just really. . . to support why I think spanking is wrong and to kind of get some ideas as to why we're not going to do that.

Tracy's story exemplifies how mothers are not only responsible for understanding the latest child-rearing standards (which includes reasoning with children, not spanking) but to also ensure that they are implemented by their partners. Expert knowledge helped Tracy formulate a strong argument against corporal punishment so that her husband would comply. Her parent educator even supplied her with brochures that explain why spanking is wrong so that she could given them to her husband's parents. "They all think I'm crazy, but you know, oh well (shrug)."

As will be discussed in more detail, Tracy's ideas about child-rearing diverge from those of the previous generation and draw heavily from expert advice and literature. Indeed, middle-class educated mothers tend to eschew the dated child-rearing customs of the previous generations while prioritizing expert knowledge as they construct their mothering philosophy with which they guide their partners to ensure that their children are parented with the "best" possible child-rearing techniques.

Developing Mothering Philosophies and Practices

Unlike fathers, middle-class mothers are compelled to develop a mothering style, a foundation from which they consume information and make the countless child-rearing decisions with which they are faced. "Good mothering" requires women to engage in serious intellectual, ideological, and mental work. Infant feeding and sleep are two realms of child-rearing that mothers discussed as central to their mothering style. Through an exploration of these two issues, I demonstrate the

ideological and intellectual work mothers perform as they work to align their mothering practices with those ideas that they have come to accept as "best."

The Burden of Choice

"Choice" is a good thing, right? The ability to choose who to vote for is the foundation of a democracy. Having choices at the grocery store is a sign of abundance and wealth. Choice is freedom, an exercise of autonomy. Yet, choice is also responsibility: When confronted with options, one must make the *right* choice. In the context of mothering, the number of decisions is seemingly limitless, ranging from whether or not to use a pacifier to how to put a child to bed (should they cry it out or be rocked to sleep?). Making the "right" choice is crucial for a child's well-being is involved. Women consistently work to ensure that their child(ren)'s needs are met to the fullest extent as they research and reflect on their mothering practices.

One reason mothers seek out and remain involved in RTL is the support and information it provides for the many child-rearing decisions they face. Common concerns that mothers talk to their parent educators about are the perennial parenting quandaries; how to potty train, get their child to sleep at night; what and when to feed babies, and how to discipline without spanking.

Mothers are expected to pursue information so that they can make educated, sound decisions that are in their child(ren)'s best interests. Parent educators spoke about how they offer information and strategies from which mothers can choose as they construct their practices. Pamela Reeves discussed the goal of the program to empower "parents" to make decisions that work best for *their* family:

RTL is what we call a "strengths-based" program where *we* don't identify a problem. The *parent* identifies a problem. We share development, we share strategies. But the parent identifies the need and we offer strategies and the *parent* identifies the strategy that is going to work *for them. You* are the one in charge. I can't tell you how to do this, because then it's *my* idea. Then you are not empowered as a parent.

I spoke to my own parent educator about the issue of sleep after my child turned two years-old I was interested in getting her out of my bed and into her own. At each home visit with my parent educator, we would discuss how things were going with sleep and if our current practices were working for our family. Often, I would say yes, that co-sleeping was still fine for us. At one of these visits, Morgan replied:

We just want to make sure that we aren't just experiencing inertia because of lack of motivation. If it still works for you, that's great. But we want to make sure it is an active decision.

Parenting practices are respected by parent educators as long as they are made within the context of intensive mothering. If I was allowing my child to sleep with me just because I was too lazy to change the sleeping arrangements, that would be viewed negatively. If I do the intellectual work of mulling over my choices, thinking about how they would affect my family, and *then* arrive at co-sleeping as our best option, I have fulfilled one of the important mandates of intensive mothering; conscious, reflective, decision-making. It is incumbent upon all mothers to go through this process to decide what is best for *their* family.

Katie, mother of two year-old Eli, spoke about the weight of making countless child-rearing decisions. While Pamela framed choice as empowering, Katie experienced it as overwhelming:

You know, you make this decision that, I don't know, like organic food or not organic food? You know what I'm saying? Sugar or no sugar? Juice or no juice? Like, whatever. And you make a decision and then you go to someone's house and they're like, "Oh, we only eat organic in our house." And all of a sudden, you're like, "Crap! Am I doing the best thing for my child?" You know what I mean?

Confronting the divergent decisions made by other mothers forces women to constantly reflect on the choices they make and whether or not they are serving the best interests of their child. The framework for determining what is "best" is constructed from mother to mother, but within this group of women, always acquiescing to intensive practices. While my working-class friends don't think twice about allowing their children to eat sugary snacks, drink juice, and watch television, middle-class educated mothers do not have this luxury. Even if they allow their child to watch television before the age of two (which is against the recommendation of the American Pediatrics Association) mothers engage in a lot of mental labor as they try to "be ok" with their decision. Katie described this mental work:

I went back and forth on the whole TV thing forever. I was like, (gasp) "He's not going to watch TV until he's two!" . . . I mean that was a hard one for me because I was just like – and then I guess I gave in – I don't know… 16,17 months and I do limit it to an hour a day. But it's like, when he's sitting there watching, I'm like, "Ah!! Is this ok?? . . . I feel good that I at least limit it to a short amount but I mean it's just (sigh). . . You know what I mean? These decisions!

I went on to ask Katie if her husband helps in the decision-making process. She spoke about her husband's "laid back" approach and how he doesn't "sweat the small stuff:"

He's not one to put emphasis on so many little things, you know? It's like, I mean he's just more laid back than I am. So he does help, but at the same time he's like, "Ok, that's what we did and that was fine and I don't think it's

going to scar him for life." When I'm like, (gasp) "AHHHH!" Which is a good balance because it's good to have someone who's like "Not that big of a deal." Like you know, it's really not that big of a deal. So…You know, like, he asked me, "Did you eat organic food?" "No" "Are you fine?" "Yeah." Ok, move on.

This father's approach to child-rearing demonstrates how "good fathers" are not required to perform the mental, intellectual, and ideological work of making and justifying decisions on behalf of their child(ren)'s well-being. It is mothers' work to do the research and construct a position on organic food or television-viewing, while fathers can remain oblivious to the pros and cons of each decision.

RTL's official doctrine is one of "cultural sensitivity" and respect for a range of philosophies and practices. Parent educator, Deidre, mother of two girls, described her thoughts on decision-making, especially as it relates to unconventional parenting practices. Two of the families that she visits utilize an approach to potty training that is traditional in Chinese culture and has become popular in AP parenting circles – "elimination communication," also referred to as "diaper-less." Parents using this approach forego diapers altogether (often from birth on) and monitor their child for visible signs that they need to use the potty. Babies are often held over a sink, while toddlers use a potty chair. Deidre's description of this parenting choice echoes RTL's stated philosophy of respecting parenting decisions (so long as they are deliberate and researched):

> My perspective is that if you choose to go outside that mainstream – The majority of the time, the people who choose to go the non-mainstream route do so because they've done their homework. With diaper-less – I don't agree with it. But I have two families that have done it. I don't, I don't *get it*. I don't know why you'd even try. But is it *bad*? No! When your twelve month-old sits on the potty and tinkles in the potty and I hear mommy go, "An

empty bladder is a happy bladder!" And when they pee on themselves and mom goes, "Ooops, let's change that." And they're loving and caring about it. Then how can I say, "No, that's wrong." You know? It's just – different. So, generally, the people who go outside that norm have done their homework, they've done their research. They've got their reasons, their convictions behind it. So, I don't think necessarily that it's better or worse. I think I almost respect it a little bit more because that person has gone outside of that norm and has researched. They're a very thoughtful parent and how can you not respect that?

Although she uses the gender neutral term "parent," Deidre is really talking mothers and the work they do to become educated so they can make deliberate choices. She went on to explain how a diaper-less child once urinated on her teaching materials during a home visit. "No big deal," she said. "I just cleaned my stuff up later." Even though this practice diverges from RTL's literature that espouses that children are not developmentally ready for potty training until they are over the age of two, Deidre accepted mothers' decision to go diaper-less. This choice was researched and reflected the thoughtful, hands-on mothering that is expected of women. In a different context, say a working-class home where the mother does not practice intensive mothering and has not researched the details of "elimination communication" – a child going without a diaper all day and urinating in inappropriate places – would be condemned. The key to good mothering is whatever her decision, a mother must research the issue, be educated, and reflect on her practices.

Maya is one of Deidre's mothers who practices elimination communication with her son. She adopted this practice when her son became distressed during diaper changes and did not want to lie on his back while she cleaned him. Despite the many

unconventional choices she has made as a mother, she told me that she felt

comfortable with Deidre as her parent educator:

> Yeah, I mean, her advice is always, "You make your own decisions." And you guys just need to sit down and decide where you're going to draw the line, when it comes to Linus' behavior. What's going to fit your family? And Deidre is very good at – I've never felt judged by her. I never felt like she was saying "There's a right way to do this and a wrong way." She's very much, "Well, here's some options; here are some things that other people have tried." And, "Here's something you might see in the next couple of months [from Linus]. At the end of the day you figure out what works for your family.

Maya may mother in very unconventional ways, yet she adheres to the highest

of all mothering laws: Her mothering is very intensive. When he was an infant, she

watched her son's facial expressions for signs that he needed to go potty and she

would never think of using a pacifier, "I don't want my child sucking on plastic. As a

stay-at-home mom, it's my job to be his pacifier." Her mothering style does not

diverge from the imperatives that it be intense and comprised of deliberate,

researched decisions.

Vera's experiences with her particular parent educator were a little different.

She sensed disapproval of her choices to breastfeed and sleep with her toddler. She

was unsure if it was RTL philosophy that she was breaching, or just the personal

preferences of her parent educator.

> Sometimes it's hard to separate the educator from the philosophy of RTL. Every educator brings their own experiences even though they're not supposed to talk about them. I think that sometimes it matches the RTL suggestions or philosophies and sometimes it doesn't. I felt pressure from RTL – like the educator mentioned a couple of times over a couple of visits that they have this weaning pack that we could check out. And with sleep, I think that I felt like, again, a little bit of pressure to put him in his own room, put him in his own bed and that was the best thing and that this was just a

phase. A little bit of disapproval… I don't think it was ever verbalized. But I just felt that, like the RTL parent educator would look at her notes and ask if he was still sleeping in our bed as if it were an issue, you know? But it wasn't really anything at that time that we were trying to move away from.

Vera arrived at her mothering choices through research and thoughtful reflection about what kind of mother she wants to be. Although her philosophy diverged from her parent educator's, Vera remained in the program, believing it to be a valuable resource to assist her in tracking her son's development, work that I explore in more detail in Chapter Four.

Beth's experiences with her parent educator were similar to Vera's. She, too, chose to exclusively breastfeed her son and avoided any scheduling of feedings or naps. She thought it a "bummer" that she could not share her AP philosophy with her parent educator:

> I think she was really kind of trying to push me to try to get him using a bottle soon – all these different things and I was kind of like, "No. I plan to try to be around quite a bit so we're not really going to do that," Or, I don't know - we're introducing different foods kind of slower and *real* foods instead of canned stuff – and I think the family bed really freaks her out.

Beth discussed two issues that are central to mothers' overall philosophy, especially those that identify with attachment parenting. How a mother "chooses" to feed her child and get them to sleep are realms of child-rearing that require much ideological, emotional, and intellectual work. For many mothers, the decisions regarding breastfeeding and sleep are momentous and become non-negotiable practices, the linchpin of their mothering philosophy. These issues have become contentious and emotionally-laden in today's mothering climate.

The Moral Imperative of Breastfeeding

For many child-rearing issues, mothers are expected to conduct research and construct a position – to make a choice. In the realm of infant feeding the "choice" for middle-class, educated mothers is pre-determined: They will breastfeed, for this is the healthiest choice for their child (Blum 1999). Examination of how mothers manage this mandate reveals the great lengths that they go to in order to fulfill this crucial requirement of "good mothering." Mothers spoke about breastfeeding in a myriad of ways; as a struggle, a failure, or even as a political issue.

Breastfeeding was essential to Cecilia's mothering identity as the "crunchy," hippie, AP mother. Unfortunately, her body did not produce the amount of milk her daughter needed the first six months of her life. Nevertheless, she went to great lengths to align her mothering practices with her philosophy that "breast is best."

> I kind of had a borderline supply and I never could get quite. . . we were always like an ounce or two shy a day. Just enough where she was gaining two or three ounces a week instead of four or five. Even on fenugreek and stuff, so, we did a *tiny, tiny, tiny* bit of supplementing with a "supplemental nursing system." But that was *my* choice. Nobody said, "You have to do this." So she got a *can* of formula in her lifetime. And that, over two months, she got about two ounces a day through a supplemental nursing system (SNS) and that was enough to boost her up where she got a little chubby by four months and then we just kind of coasted to six months and she got pretty skinny again by six months. And then we could feed her food and were fine after that.

It was very important to Cecilia to maintain a sense of autonomy, "choice" in the matter of her daughter's feeding and nutrition. She was unable to exclusively breastfeed her daughter and supplemented with (a tiny bit of) formula not because a doctor told her she had to, but because she *chose* to. Her struggles with breastfeeding

prompted her to research the topic extensively. Through her research she discovered

the "supplemental nursing system." I asked her to describe the SNS:

> The supplemental nursing system is just a little bottle. A plastic bottle with a cap on it and there are two rubber tubes and you hang I around your neck. You put the formula or breast milk in it and you tape the tube to your nipple and then they get – they nurse and they get the extra milk. And you get the breast stimulation while you do it. So it helps with supply, you don't have to worry about nipple confusion. Tasha would never take a bottle anyways. I had to pump every day. When I was fighting the supply issue I would nurse her and then pump on the side she just nursed. She'd finish nursing and then I would pump on that side just to give extra stimulation, not really to get more milk, but to signal my body. It was a very stressful time.

Clearly, this "natural" practice required a lot of expert knowledge and even special

equipment. On top of it all, Cecilia experienced a lot of stress and anxiety regarding

her daughter's health and her ability to provide the most nutritious milk for her.

Tracy, mother of two year-old Ian, described the anguish she endured when

breastfeeding did not work for her and her son. An educated mother, she knew that

much of the child-rearing literature espoused the philosophy that breast is best. Her

experience demonstrates the significance of infant-feeding decisions and the mental

and emotional labor women endure when their practices don't align with the

breastfeeding mandate.

> We tried the breastfeeding early on and Ian didn't take. And we worked with lactation consultants and I worked with *everyone*. And it just didn't, and I mean, they tell you one thing and you go back and they say, "Oh, well, you probably shouldn't be doing that. Let's do this." And it went on and on. So between trying to do the breastfeeding and pumping, Ian had breast milk for his first six months but it was SO stressful. Oh my gosh. It was just, I mean it was just – I was in tears.

Tracy did not feel like she had a choice in the matter of breastfeeding her son.

Despite the negative experiences with nursing and the stress it caused her, she

continued to try and make it work. Her mission was guided by professionals, child

development literature, and as she later described, the pressure of mothering in

Lawrence, KS. A liberal, University-town, Lawrence has a sizable and very visible

population of educated, AP mothers. It is common to see mothers nursing babies in

the library, at the pool, at the park, in churches, at coffee shops, in every possible

public space.

> Especially in Lawrence you get the idea that if you don't breastfeed there's
> something wrong with you and it's a *huge* stress for a new mom. Ya know,
> everyone was like, "Are you going to breastfeed?" and I'm like, "If I can,
> yeah, definitely." I just went into with a really open mind and we just – I
> wasn't opposed – I wanted to do it – but it was like, he just didn't take. It was
> one of the most stressful things. . . I remember being at – Hank had gone out
> when Ian was seven or eight months and Hank went out to get formula but got
> the wrong kind. So I went back and of course, I had done all the research to
> find out what was the best, what wasn't going to hurt him. I went to exchange
> it at Wal-Mart and the girl was like, "Oh, I breastfed. Blah, blah, blah." And
> I just thought, "Oh, that's good for you."

Unable to fulfill the breastfeeding mandate, Tracy did what any good middle-class

mother would do; she did extensive research to determine what kind of formula to

feed her son.

The topic of breastfeeding reveals another important aspect of mothering –

policing. Tracy was chastised by a Wal-Mart employee for bottle-feeding her son

which demonstrates the monitoring and regulating that mothers are often subjected to.

I encountered this policing in my interview with AP-mother Cecilia, who judged her

parent educator, Alexis, for bottle-feeding both of her children.

> I find it very odd that a parent educator bottle fed from day one. She has a
> twelve year-old and a four year-old. Now the twelve year-old, I can
> understand. But the four year-old? Obviously, she didn't have the right

information or however she made choices for herself. I think a lot of that is lack of education and pervasiveness of formula advertising.

Cecilia's perspective reveals how the mothering climate has changed over time so that breastfeeding is an expected feature of educated mothering. While she can forgive her parent educator for bottle-feeding her twelve year-old, the climate has changed so that, really, breastfeeding is viewed as the only well-informed "choice" when it comes to infant-feeding.

Mothers who take an activist stance towards breastfeeding become annoyed, even angry, when bottle-feeding is presented to women as a legitimate "choice." Cecilia described how she will only read pro-breastfeeding literature like *Mothering,* a magazine that emphasizes "natural" mothering and AP-parenting philosophy and practices.

> We only read *Mothering* magazine in this house because all the other ones make me shout! We get *American Baby* for free, nobody has to pay for it and I had gotten a free copy of something else. . . I think something called *Parents* and the breastfeeding advice in this is always so full of fallacies! Oh my God! There was an issue of *American Baby*, it might still be under the couch because I was so mad I threw it under there. I was so mad. It was talking about how to wean at various stages, like how to wean at a month, how to wean at three months, how to wean at six months, how to wean at a year. And it specifically was talking about going back to work and the default they tell you was using formula while at work and breastfeeding at home! Then they *mentioned* that the mother they talked to, her supply dried up and after that it says, "Or you could pump." Yeah, that was the last time I ever read one. They came into the house and went straight into the recycling bin from that point forward and I got a subscription to *Mothering*.

Grace, mother of two, is the leader of the local La Leche League (LLL) chapter, an organization that promotes breastfeeding and provides support to nursing mothers. She describes how women cannot merely examine a culture's current norms

regarding infant feeding. To make a well-informed choice, mothers must take into consideration their child's "true" biological needs and how those needs have been addressed for thousands of years.

> What is truly, developmentally, biologically appropriate? Lots of people in this society seem to think it's developmentally appropriate for an eleven month-old baby to be weaned. I don't believe that. I don't think biology was created that way. I don't think thousands of years of other people nursing their children until they were four or five has changed. We haven't evolved as Americans to be separate from the rest of the human world. So, you know, what is truly developmentally appropriate? Not what society has deemed developmentally appropriate.

AP mothers view their unconventional practices of extended breastfeeding, co-sleeping, and baby-wearing as addressing children's "true developmental" needs.

In line with the philosophy of LLL, Grace is a firm believer in extended breastfeeding and is currently nursing her three year-old son. Although breastfeeding has emerged as a mandate for middle-class mothers, the practice of extended breastfeeding is not as popular as LLL or mothers like Grace would like it to be. She was equally critical of introducing solid food to babies before they are six months old. Her perspective reveals the stance of AP mothers that it is not good enough for mothers to be educated and well-informed; they must be critical and discerning of all "mainstream" information. Good mothers cannot be "average Americans."

> The average American just doesn't know. If a baby is ready to be weaned at like, nine months, then they *would*. Why would you want to make them? I mean, they're animals at the base and so that just really didn't make any sense to me. . . You know, it doesn't make any sense to me to shove food in a baby's mouth who doesn't sit up or chew! What other animal on the planet does that? (laugh). It just didn't make any sense and it was fairly astounding to me in some ways that other people accept these conclusions so readily. So readily!

Grace went on to criticize RTL for offering information to mothers that includes

bottle-feeding as a legitimate choice. She was particularly concerned about "at-risk"

mothers and their exposure to the message that bottle-feeding is just as good as

breastfeeding:

> Because you know all these papers come from big state agencies. There's lots
> of talk about bottles and stuff. And every exposure that someone has to those
> – a parent at risk – to those images – in their mind and in text and pictures and
> things – every time that comes across it puts a little dent in their resolve [to
> breastfeed], you know? To continue on and so I wish that – I wish that stuff
> just wasn't there and I'm sure I probably mentioned that to my educator.

Mothers with an activist stance towards breastfeeding not only think that

"breast is best," but believe that *all* women should nurse their babies. Grace and

Cecilia's conviction that breastfeeding should be the only option presented to mothers

is an intensification of the breastfeeding mandate. Not all middle-class mothers hold

this intensified belief but all of them know that breastfeeding is expected.

Sleep Choices

Anyone who has had a baby join their household knows how precious sleep

becomes to the weary parent! Kelly, mother of two, described the sleep deprivation a

new mom experiences as "brutal" and something rarely spoken about. While

mother's sleep may not be the topic of much discussion, baby's sleep is the subject of

countless child-rearing books. You would think that infant sleep is the most

complicated matter that human beings have ever crossed, as there is a plethora of

books devoted to the subject, offering a wide range of perspectives and practices from

which mothers are to choose. Thus, sleep presents another arena in which mothers

are faced with an integral decision; how to teach their child to sleep. Choices run the

gamut: Let them cry to sleep in a crib (sleep training), rock them to sleep then lay

them down, nurse to sleep, or co-sleep (baby sleeps with parents in their bed). Much

like infant feeding, this choice evoked emotion and anxiety from mothers.

Along with her philosophy on infant feeding, Grace's approach to sleep

reflects her AP philosophy. Again, it was not enough for her to make her own choice

on the issue; she voiced concern for not only the child that is left to cry in a crib, but

for "society as a whole." Her perspective reflects the belief that again, mothers must

be critical of mainstream child development information, lest they fall into the trap of

"listening to one dude."

> I really fear for and worry about those parents that don't know stuff and
> haven't taken it upon themselves to do the research. They don't question
> [conventional knowledge] and look for additional information. I think that is
> doing a disservice to the child and obviously the society as a whole. That's
> probably how we got in this situation [of allowing babies to cry in cribs] in the
> first place – listening to one dude!

Grace went on to explain how her first baby did not sleep well, an issue that she

shared with her parent educator during a home visit. To Grace's dismay, her educator

recommended a book by child development guru Dr. Richard Ferber, who advocates

sleep training:

> My educator said, "You should read Ferber's book." And I was like, "Ok,
> take it with a grain of salt." I'm all about don't ban anything, bring it all in so
> we can make a decision. I got the book and read it. Not that I was going to *do*
> it, but that was fine. And you know, after that happened, I actually talked to
> Janet about it. I wrote it down on one of their little – whatever – "How's it
> Going/Tell Us What You Think" things. I also talked to Janet about how you
> know, that *I know stuff!* I'm *educated* and I'm *confident* in my parenting
> choices but there are a lot of women that you talk to who aren't. So I would
> think that it would be wise of you to offer Ferber's book and something else.
> Like, if you guys really believe that, that's great but did you know that Dr.
> Sears [AP-guru] also has a book all about sleep? It would be nice to offer a

mixture of things rather than pigeonholing everybody that you talk to into this. I suggested that they invest in more AP-friendly materials for their library.

Grace's story reflects the middle-class value of making choices; being presented with a range of information, knowing all the sides to an issue, and then choosing an approach. This is exactly what Tracy did to arrive at her choice to sleep train her son. When I interviewed her I was seven months pregnant and she offered a book recommendation that has become very popular with mothers, *Healthy Sleep Habits, Healthy Child* by Dr. Marc Weissbluth:

> And I told everybody about it and it is such an incredible book. It is SO good and it – I just liked it – it gives you different options like the cry it out method or the go to them every time and the positives and negatives of both and kind of really. . . OH, it is such a great book. It was *so* helpful. I mean it just saved *everything*. (laugh).

Tracy described how sleep training helped her son to "love sleep. He is so easy to put to sleep." She was confident that she had made the right sleep choice for her son. Her mothering dilemma centered on her son's attachment to his bottle of milk at bedtime when he was laid in his crib. Tracy went through an intense process of reconciling her mothering practices with the research that unanimously warns against allowing babies to go to bed with a bottle. Tracy described how she searched on the internet, met with her child's pediatrician, and even received permission from her family dentist before she felt comfortable allowing her son to have his bottle "with about half an ounce of milk and the rest water" at night for sleep. Tracy's experience demonstrates the intellectual and ideological work women perform when making decisions, especially when they breach expert advice.

Kimberly experienced stress and anxiety regarding sleep decisions as well. She described herself as "crunchy" and "mostly AP." When I visited her for an interview, she voiced her exasperation regarding her current sleep arrangement and was looking to make a different choice for her family. She and her seven month-old baby were sleeping together in the guest room so that her husband could sleep uninterrupted and be well-rested for his day at the office. Her daughter cried any time she was separated from her mother – including nap time and evening sleep.

> You know, Olive is just completely attached to me and there is one mom that I've met at La Leche League. Her daughter's two-and-a-half and still co-sleeping and still nursing and you know it kind of drives her crazy and she was somebody that I called and asked her, "I need to know if you would have done anything differently because its driving me crazy and I need a little 'rah! rah!' (cheer) about continuing to do this because I'm having a really hard time, I need some space." 'Cause I remember when she was having a hard time and came to a meeting and said, "I think I want to wean, I'm going insane." And she ended up telling me, when I called her, "I wouldn't have done anything differently." And I was like, Ok. It's ok to be crazy.

Kimberly turned to a fellow AP mother and LLL member for guidance and support. She wanted to follow the mother's advice, as it was in alignment with her own mothering philosophy, but as our conversation progressed, Kimberly revealed how completely exhausted she was and how much she missed sleeping in the same bed as her spouse. Trying to align her practices with AP philosophy was making her "crazy" and despite her reservations, she did confess that she was ready to try sleep training with her daughter. She voiced regret for the path that they were on and was ready to make a different choice regarding sleep. This was a difficult decision, given that her LLL and AP support groups warned against ever allowing a child to "cry it out."

Uncommon Ground

Like Kimberly, mothers turn to their peers, expert knowledge, or their parent

educator for advice and child-rearing information. When in need of resources to

support their decision making, mothers are often unable to turn to their own mothers

or their partners' mothers for assistance. For one, many mothers do live in the same

community as their extended family. In fact, Janet Erikson referred to Lawrence as a

community that is "almost transient because of the college." As a university town,

families often come and go and thus cannot utilize the systems of extended family

that once characterized family life and child-rearing strategies. In addition, women

are unable to turn to the wisdom of grandmothers, as the practices of the previous

generation are viewed as outdated, even inappropriate for today's mothers. As

mothers adhere to the dominant standards of "good mothering" as intensive,

reflective, and actively constructed, they often find it difficult to find common ground

with their children's grandparents.

Forging a New Path

In our interview, Jessica, mother of two, struggled to articulate her desire to

forge her "own" approach to mothering, separate from that of her own parents and her

partner's parents. As a new mother, she wanted to build her own foundation:

> Our biggest thing was, for both of us, our families live here. My husband is a
> twin and I'm the youngest of four. And I, we, wanted to – our biggest thing
> was we kind of wanted to develop our own type of how we were going to
> raise our children, you know? How are we gonna come up with discipline?
> And, that's even how we got into Love and Logic as well, but its definitely –
> we wanted anything to help us so that we could have our ground to build
> from, you know? . . . .A foundation.

As a new mom, Jessica was unsure of how she would approach mothering decisions like how to discipline her children, but one thing she did know was that she did not want to blindly follow the practices of the previous generation. She wanted parenting choices to be guided by her and her partner's distinct approach.

"Good mothering" necessitates reflection, an act that Grace views as necessarily leading mothers away from the norms and beliefs of the previous generation.

> Most of us, left to, sort of on our own, probably fall back upon the way that we were parented. Say the things that were said to us and most of that I think is subconscious. I mean, how much do you really remember about being two years old? But it's in there – somewhere – and these things come out of you and, uh, I think it is really much wiser to be able to make a conscious choice that you're going to construct what it is that you're going to do – to understand the ramifications of the things that you say and don't say, and how you react to your child.

Unlike their working-class counterparts, middle-class mothers are unwilling to "fall back upon the way that they were parented." Inherent in Grace's argument for conscious and reflective mothering is the belief that the previous generation made parenting mistakes that she believes can be avoided. In order for mothers to be the best they can be, they must actively construct their approach.

The cultural messages from which mothers construct their idea of "best" change over time. In the 1950s women learned that bottle feeding was the "best" infant feeding option for their children and that corporal punishment was necessary for well-behaved children. Vera, mother of one, recognized how the differing definitions of "best" between her and her mother-in-law prevented her from seeking advice or knowledge from her 1950's outdated practices and philosophies:

Her approach was just really, really, different. [My partner's] older than me so his mother's a lot older and so her mentality is *very* different. She did everything in the house. She stayed home. I think the kids didn't even help with chores or anything. His father worked. She didn't breastfeed at all. Totally – this is in the 50's. Totally, totally different. I mean a different generation. It's really even hard to compare (laugh).

Vera works part-time as a librarian and described her mothering style as "Really relaxed. Trying to follow my son's cues as far as what he's ready for, not only in the long-term, but also in the short-term." To this end, Vera told me that she plans to continue nursing and sleeping with her two year-old son until he shows signs of wanting to stop.

Kelly's parents, immigrants from Korea, parented in a much more restrictive way than she chooses for her children. Like Vera, Kelly wants to follow her children's lead. Mother of two, Kelly talked about what matters most to her:

Especially the whole, letting you experience – that's my big thing. Letting you *experience* life and go with the flow. I didn't have a lot of that because it was very sheltered, very protective, very, "I don't know the unknown so ah! Stay close." And that kind of backfired on them, the older I got, so I don't want that. I want my children to be like, "It's cool. Life is good."

Mothers mentioned how their own parents view their practices with skepticism, yet respected the boundaries that they established. Tracy described her son's grandparents as very respectful even though they think she is "crazy" for not spanking him.

I tell them this is what we're doing. My husband's dad and stepmom are just like the *best* grandparents and never want to step on our toes, so it's awesome. *Very* respectful. But ya know, they still think we're a little lax (laugh).

AP mothers with their unconventional practices, often have an even harder

time finding common ground with grandparents. For example, co-sleeping is a vital

component of Clara's mothering approach. As a full-time researcher for the

University and a mother of two children under the age of three, she finds comfort in

sharing sleep time with them in the same bed. She explained to me how, when she

visits her in-laws, she has to repeatedly explain why her baby does not sleep in the

nursery that had been set up for her daughter.

> *My* mom knows me well enough that she's like, "Oh, Clara's going to do what
> she wants to do and that's that. Now my husband's mom might be a little – I
> know when we go visit his parents, like his mom bought the whole crib and
> she's got this whole gorgeous nursery, you know. Nicer than our whole
> nursery here! We have a crib and I think she's [two year old daughter] taken
> like two naps in it and it's the biggest waste of money we've ever spent. But
> anyways, she's got this whole gorgeous yellow nursery with bunnies – the
> whole nine yards. So, we go visit and she's like, "Don't you want her to sleep
> in the nursery?" And we're like, "No. She sleeps with us."

In most families, grandparents' role is no longer to hand down child-rearing

traditions, advice or knowledge. Their responsibility is to respect mothers'

philosophy and practices; for Clara's mother-in-law, to accept that their grandbaby

will not sleep in the yellow-bunny sanctuary she put together for her.

Grace explained how her parents took their rightful place in the family,

accepting her mothering practices even when they view them with suspicion.

> My parents are very… well, my mother especially, my dad keeps his mouth
> shut because he knows better. Mom's very respectful of our choices and is
> totally fine with it. And she has enjoyed learning different ideas through her
> grandchildren so that's pretty cool.

Clearly, what constitutes "good mothering" is historically situated and changes over

time. For this reason, middle-class mothers are unable to find common ground with

their children's grandparents on the prominent and contentious issues of infant-feeding and sleep. Yet, the construction of discipline philosophies and practices was the most discussed realm of child-rearing that diverges from previous generations.

Love and Logic

Love and Logic ® is a discipline approach founded by a father and former teacher that emphasizes offering children choices, "locking in" empathy, and using "logical" consequences for misbehavior. I learned about this discipline approach through my interviews with mothers, parent educators and my participation in a five-week Love and Logic ® (L&L) course offered by RTL free of charge.

The L&L course was facilitated by parent educator Deidre Little who came from an "authoritarian household where children were seen and not heard." The authoritarian style of parenting mentioned by Deidre is marked by low levels of nurturance and arbitrary, punitive control of children (Baumrind 1971). This parenting style conflicts with the "dominant set of cultural repertoires," espoused by professionals that defines reasoning, consistent and moderate control, and high levels of emotional support as "best" (Lareau 2003). Deidre described how L&L offers discipline techniques and strategies that will foster children's sense of responsibility and shape their behavior in more democratic and gentle way, an authoritarian style of parenting that is embraced by many middle-class parents (Baumrind 1971).

The parenting classes primarily consisted of watching videos of L&L founder Charles Fay and his son Jim, as they described the main ideas of the approach. Their overall messages to parents were (1) Parents need to shape their children's behavior

so that they grow to be responsible adults; (2) Spanking and yelling at children are not effective in this goal; (3) Children need structure and predictability and L&L can provide it.

I learned over the course of five weeks that the parents who took the course shared a common motivation to spend four Thursday evenings learning about L&L. For example, Rose, mother of two, voiced a common sentiment: She told me that she wanted her and her husband to be "on the same page" when it comes to disciplining decisions. Reflecting her role as the executive parent, she was concerned about Dave's experiences in an abusive home. Rose hoped that by taking L&L classes together, they could come to an agreement on how to gently discipline their very young children who were only one year a part in age. "I'm beginning to see some things that I think we need to work on," Rose explained. This was the theme of the class; constructing a "new way," a different and better path than that of previous generations.

In interviews, parent educators spoke enthusiastically about L&L. Parent educator Rebecca believed that learning L&L techniques made her a better mother to her five year-old daughter and twelve year-old son. Rebecca told me that she was once an "at-risk" mother, giving birth to her son when she was still a teenager. She has revised her mothering philosophy and practices over time, adopting an educated perspective on the topic:

> I, myself, as a parent used to spank, you know. With my second child, now, it's *really* hard. I mean, to not spank, because it's kind of a – I don't want to say a "natural" reaction, but it's just so much easier, you know? And you, you don't have to control yourself. But just learning how to, you know, when I do

start to get worked up about you know, my daughter's behavior, you know. Really having to *think* more now. "Ok, how do I deal with this? What are some different ways I can handle this?" And I just, I *feel* better as a parent, you know? Knowing that I have that control now that I didn't use to have. But, I mean, it's really hard!

You know, I always say, "I'm off the wagon." Sometimes I fall off the wagon. Like, I'm off right now and I need to get back on. But I *know* what I need to do. But *at least* I'm not spanking, you know? And that's the most important thing for me.

Rebecca recognizes that disciplining without spanking is difficult; it requires a lot of thought, restraint and continuous reflection to stay on the L&L "wagon."

Mothers have definitely received and responded to the messages that corporal punishment is no longer an acceptable discipline strategy. Love and Logic expands this message by teaching parents that children are more likely to behave when given choices ("Jimmy, do you want to wear your orange shirt or your blue shirt today?). When a child does not make an appropriate choice, parents are instructed to show empathy ("How sad. Jimmy does not want to get dressed today.") and then follow through with a "logical" consequence (The parent chooses the shirt for the child or puts the child in the car without a shirt). Offering choices and thinking about logical consequences are time-consuming and mentally taxing discipline strategies. But when your child's future ability to be a responsible adult that can "make good choices" is on the line, it is well worth the effort.

Maya, mother of two year-old Linus crafted a discipline approach for her son that drew heavily from L&L. She not only attended the classes, but receives regular guidance from her parent educator during her monthly visits. Hoping to share some helpful information with me as a mother, Maya gave me detailed descriptions of some

L&L techniques. She began with a description of the "uh-oh song," a L&L technique

to be employed when a child's behavior needs addressed:

> They call it the "uh-oh song." (laughing) What you're supposed to do is when a child is doing something that needs to be stopped; you go up to them and say the exact same thing every time. You say like, "Uh-oh. I see that this can't happen." Or you know, "This is sad. Looks like we're going to cradle time." You pick one place in your house that they always go. In our old house it was the stairs, in this house it's the cradle. And they go in the cradle and then, you know, that's all you say about it. You put them in the cradle and then you start the timer as soon as they're calm and they're there for a minute or whatever. Whatever you feel is appropriate and when it's done, you give them a big hug and they can you know, come back.

Maya echoed the main ideas of L&L philosophy: empathy, consistency and structure.

The L&L classes I attended emphasized those same things and gave concrete

examples as to how to apply the philosophy to problem behavior ranging from

tantrums to children getting in their parents' bed at night. I witnessed Maya's use of

L&L when her son became fussy near the end of our interview. After being asked not

to, Linus interrupted her again, demanding that she read him a book. Consequences

ensued and Linus was put in "cradle time" to which he showed immediate displeasure

with screams and tears.

> See, it's that consistency! And that's the hardest thing about parenting! Especially because I think my parents *weren't* consistent, you know? But I had already told him, "I'm not going to let you interrupt me. There's not a reason that you need to." And with this age it's been really hard to bridge that space between learning that his desires are no longer his needs, ya know? Cause when they're little they really *are* needs, ya know?

> The line between need and want is one that develops as the child ages.

Discipline decisions and strategies are very much about knowing developmental

information. As they work to construct appropriate discipline practices, mothers

move into the terrain of experts; the understanding of child development.

Thoughtful, time-consuming discipline is important in regards to a child's

development as well. Pamela Reeves explained how a healthy understanding of child

development is crucial to this realm of child-rearing decisions:

> If you don't have an education background and if you don't know that when a
> fourteen month-old who has been the delight of your life for the first fourteen
> months, turns around and stamps their foot and says, "No!" to you for the first
> time. . . If you don't know that that should be a celebration of their cognitive
> development and you misinterpret that as willful disobedience, you know…
> Well, how sad! Because instead of celebrating that this is a huge leap in their
> cognitive development, that they now see themselves as a separate wonderful
> little individual (shakes head) it can be unfortunate. And also, if the parent
> doesn't have the resources to know that you don't squash that "willful
> disobedience" but instead enrich it and help them to learn their way… you
> know, it's just. . . (sigh).

In the realm of discipline, RTL endorses L&L philosophy and focuses on

developmentally appropriate behavior for children. It is important for parents to have

a realistic understanding of their child's needs and abilities so they can take them into

consideration when formulating expectations. Jackie, a former parent educator who

now participates in the program with her son, believes that the developmental

information positively affected her attitude towards her (now) three year-old

daughter's behavior:

> I think that one thing that RTL helped me with is that its helped with my
> patience level to have someone say, when she hit fourteen months, for them to
> say, "Ok, *now* the 'terrible twos' start. At fourteen months, not at two years
> old. Be prepared for that." And that's one of the big things we talked about at
> the fourteen-month visit is – this is when we start getting the "no's". This is

when we start getting the striving-to-be-independent-at-any-cost kind of thing. And I think that made a *big* difference in how I parented.

As will be discussed in more detail in the preceding chapter, educated mothering is heavily guided by child development knowledge. Mothers become experts as they learn very specific developmental information that in turn, guides their mothering practices. This is especially true in the realm of discipline, as mothers construct effective strategies for guiding children's behavior based on their development stage. As parent educator Rebecca described it, this method of discipline takes more time, thought, and energy; just like all facets of intensive mothering.

Conclusion

This chapter describes how mothers' carework involves much more than hands-on nurturing. Mothers engage in research, school their partners in the "best" child-rearing practices, worry about their choices, weigh the pros and cons of decisions big and small, and constantly reflect on their mothering practices. The intellectual, ideological, and emotional work that mothers perform is a significant facet of their intensive mothering. Much of this work is directed towards making the "right" choices for their children and then implementing them as best they can. Motivated by their child's best interests, mothers' choices are always those that reaffirm intensive, research-based mothering. This often means that their mothering practices diverge quite strongly from those of their own mothers; thus, women are often unable to turn to their older family members for guidance or information. The ever-changing "dos" and "don'ts" of motherhood leave little common ground

between mother and daughter in regards to child-rearing. Often, this means that grandparents must "keep their mouths shut" and support the child-rearing decisions of their children for the sake of maintaining peaceful relationships. Ultimately, women choose practices that often diverge from their own mothers' philosophies in the effort to be the best possible mothers and cultivate the best possible outcomes for their children. Next, I will explore another realm of intensive mothering to which women channel much emotional and intellectual energy: the monitoring and facilitating of their child(ren)'s development.

CHAPTER 4
COGNITIVE CARE

Chapter Three examined how mothers acquiesce to intensive mothering as they construct their philosophy and practices. As described, women defined good mothering as reflective, research-driven, and contingent on educated choices, especially in the realms of infant-feeding, sleep, and discipline. This chapter further explores "good mothering;" specifically, the obligation of mothers to engage in *cognitive care*, the monitoring and facilitating of their child(ren)'s development. The work of parent educators, women's mothering practices, and children's needs are shaped by the tenets of the child development discourse: Babies are learners and their development must be vigilantly monitored and facilitated to ensure optimal outcomes. Science frames children's development as "normal," "delayed," or "advanced" based on their conformity to milestones that have been derived by experts. Throughout this chapter I weave the experiences of mothers and parent educators with the textual messages of RTL's curriculum and parental handouts to provide a multi-layered view of the discursive organization of mothers' cognitive care.

Babies are Born to Learn

"Babies are born to learn and you are your child's first and best teacher." This often-cited quotation is more than just an adage, it reflects the foundation of Ready to Learn's mission to ensure that all children grow to their fullest potential through educated parenting.[10] Neuroscience lessons are central to the pedagogical objectives of RTL which connect mothers' care practices to children's brain development. For

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[10] http://www.parentsasteachers.org/site/pp.asp?c=ekIRLcMZJxE&b=272119

instance, mothers are welcomed into the program with a variety of handouts,

including "Attachment and Brain Development." This introductory handout reflects

the significance of neuroscience in the child development discourse:

> *Neuroscientists* report that feelings of trust develop at the same time as trillions of connections are forming in the parts of the baby's brain that control language, thinking, and motor functions. Teaching your baby that he is loved and can trust you helps to structure his brain for later success.
>
> *Secure attachment* occurs when you try to understand your baby's individual cues and attempt to meet his needs each day. Children who develop feelings of trust early in life feel good about themselves. They are usually more successful in school and with social, emotional, and intellectual endeavors throughout life. (emphasis in original).

This text exemplifies how a child's needs, even as an infant, are defined by

neuroscience and linked to his or her future ability to perform in the school setting.

Neuroscience consistently positions the child's brain as a critical "site" for his or her

optimal development and mothers' care. Even "attachment" is constructed as a

means to that end. In this section I explore how RTL lessons, handouts, and formal

screenings connect women to the child development discourse, particularly

neuroscience.

Neuroscience Lessons

As I sat in a local coffee shop with Pamela Reeves, national trainer and

advocate, we discussed RTL while my four-month old daughter sat on my lap.

Marigold was content to chew on her hand, drool all over my pants, and periodically

kick her legs. I gave no thought to what she may be sitting there "learning;" yet as

Pamela described RTL's curriculum, she defined my baby as a little learner.

> Ready to Learn's curriculum is development-based and it is revised about
> every five years. The main curriculum, the *Babies as Learners* curriculum,
> was most recently revised in '05 and when it was revised they added to it all
> of the neuroscience. So all of the neuroscience that's been done in the last ten
> years about how the brain works, they took that and they put it into the
> curriculum because we knew about babies but we weren't sharing with
> families the brain research behind it. The *why*. So, why is it important that
> she's putting her whole hand in her mouth and chewing on it? [Pointing to
> my daughter]. What is she learning right now?

Pamela did not go on to answer her last question, "What is she learning right now?"
But she did answer the big "why." Why do we monitor children's development and
work to maximize learning at a young age? Brain development. While Pamela did
not go on to explain what my daughter was learning by chewing on her hand, I could
safely assume that it had something to with her brain development. No matter how
young the baby or mundane the action, child development discourse positions the
child as learner and the "good mother" as teacher.

The "Attachment and Brain Development" handout emphasizes a prominent
theme of the child development discourse; that a child's early environment is critical
to his or her future success. Thus, it is essential for mothers' care to incorporate
expert knowledge so that she can deliberately shape her babies' environment to suit
his or her developmental needs. RTL's curriculum, *Babies are Learners,* is
constructed on this premise. I examined the curriculum's lesson for the two-month
visit wherein the concept "windows of opportunity" is presented to the parent
educator:

> Windows of opportunity are periods of time in the development of baby's
> brain when specific types of learning take place. During these periods, the
> development of connections (synapses) between neurons is most sensitive to
> stimulation from the environment. Once the sensitive period for an ability has

passed, it is harder to change the structure of the brain to accommodate new learning. Synapses have become permanent and space in the brain has been taken up by synapses serving other abilities. (PATNC 2005: 199)

To the untrained eye, a two-month old baby does little more than eat, cry, and dirty diapers; however, RTL curriculum maintains that there is much more to consider. The curriculum goes on to describe the two-month old baby as working to achieve a specific developmental milestone, "overhead batting" (the ability to bat at objects while lying on his or her back). This ability is described as important because, "a child has to coordinate motor, intellectual, and visual skills." And is a "step toward being able to reach for and grasp objects" (PATNC 2005: 200). The curriculum goes on to explain that at two-months of age, the "window of opportunity" opens for the development of vision, "The baby's eyes should move together to focus on an object, so that vision centers in the brain can integrate images from both eyes" (PATNC 2005: 200).

The curriculum translates complex brain research into terms that can be utilized by parent educators. The information is abridged even further in parental handouts that accompany each home visit. For example, the handout that corresponds with this month's curriculum, "Windows of Opportunity" instructs mothers that:

> Vision, hearing, language, movement, problem solving – each of the areas of your baby's brain responsible for different abilities has a sensitive period for development. During these prime times, your child's brain is most ready to make connections for learning new skills. These critical periods are called "windows of opportunity" because, during these times, parents have the opportunity to work with nature to help their baby develop the abilities she is acquiring.

Following the curriculum, parent educators are to describe ways that mothers can "work with nature" during this "window of opportunity" by tying yarn, ribbon, or elastic across a crib, swing, or the legs of a chair and attaching interesting objects so that baby will be motivated to reach for the homemade "bat mobile." This is just one example of how babies, no matter their age, are positioned as learners and in need of lessons that coincide with their brain development. Educated mothers know that their young baby's brain is busy with all kinds of learning, that windows of opportunity open and close, and that they should shape their baby's environment to foster his or her development. Neuroscience presents nurture and nature less as a dichotomy and more as a relationship, with the emphasis on how mothers' nurturing (e.g. construction of a "bat mobile") will allow nature (child's brain development) to unfold most efficiently.

Parent educator, Abigail, discussed the curriculum's emphasis on brain development and how she has been trained to discuss neuroscience at each home visit:

> Really, at every visit we're supposed to touch on brain development. But, [when I evaluate my job performance] I always give myself a lower score on the brain development because I understand it, but I don't always explain it the right way so I tend to be fearful. I'd rather not say anything at all than to mess up. And I don't want to use the big words because that doesn't come across right, so I try to use some of the metaphors that we learn, like, you know – when you think of pathways in the brain. If you walk on grass continually the same way every day, that's going to become a path and you think about it the same way when you read the same book everyday and the same routine everyday with your toddler. . . Yeah, I'm not 100%. I'm probably 50%.

Even with her college degree in early childhood education and her training in the

neuroscience-infused *Babies are Learners,* Abigail confessed that she has difficulty

integrating the scientific rationale with the child development lessons that she gives to

mothers. Abigail explained how this neuroscience may emerge in a home visit when

parents note their child's inclination for repetition:

> Sometimes [brain development] naturally comes up. Like, talking about that
> repetition because I might ask parents, "Is he starting to show an interest in
> books?" And they say, Yeah, they have to read the same one every night.
> That opens the door to that repetition. Or "we have to play the same song
> eighteen times. . . Especially in the newborn. That's when we're talking about
> reading cues and all that's happening. Even though they are sleeping and
> eating and pooping and that's about it, there's so much amazing stuff that's
> going on in that brain. And we have a picture of all the dendrites and
> synapses of how – when they're first born, you know, it's just like some
> branches. And even two or three weeks later it's like, doubled. And then by
> three months later it's like (arms spread out above her). So, that's really a
> great picture to share.

Reading and re-reading the same book over and over has become a rite of passage for

parents of toddlers. I know that my husband and I could "read" Bill Martin's *Brown

Bear, Brown Bear, What do You See?* with our eyes closed to our one-year old

daughter. This custom is defined through the lens of neuroscience: Reading the same

book every night, playing a child the same song "eighteen times" is defined as

integral for the dendrites and synapses of the child's brain. This concrete activity

provides the means through which Abigail incorporates neuroscience lessons into her

home visits.

The terms *dendrites*, *synapses*, and *neurons* derive from a specialized form of

knowledge that is seldom the topic of mothers' everyday conversations. In

interviews, mothers rarely spoke in explicit terms about brain development; most

often, they verbalized their aspiration to ensure that their child achieves predetermined skills and milestones at the correct age. Isabella, mother of two, was one exception. Devoted to learning as much about child-rearing as she possibly could, she was the only mother to explicitly link her mothering practices with her sons' brain development. She described how she exposes her boys to various experiences outside the home to maximize their brain development:

> I read all this about how the brain makes connections in the first few years and I want them to have as many experiences as possible, you know? To be exposed to things that they won't necessarily remember, but that make for a different experience and for their brain to develop and to grow. So, I don't know, like a…like when we lived in Los Angeles before we moved here, we took Christian to museums and strange things and adapted to the kid's style. Like if you have to go to a museum you go fast and stop just to see one thing that calls his attention. It's fine. But the experience is there, you know. So, I enjoy doing that. And I know he doesn't remember a single thing (laugh).
>
> Interviewer: But you do think it makes a difference, to do those things?
>
> I think so, I think so. You know, it's like reading. He's five, he's reading because he was exposed to reading since he was very, very, young. Sure, he doesn't remember any of the books, but that's not the point.

Most mothers talked about their child's brain development more implicitly, in terms of "tracking" development and worrying if a child did not achieve a milestone or exhibit a skill "on time." These concerns are produced through their exposure to child development knowledge, specifically neuroscience that constructs children's development as unfolding over time in a linear progression. Mothers learn that they should maximize a baby's learning by capitalizing on the "windows of opportunity" that emerge in the child's brain so that he or she can progress along the developmental timeline on schedule.

The Normative Path of Development

Nearly every mother I spoke with revealed that a significant incentive for her involvement in RTL was to ensure that her child was "on track," achieving the milestones and skills that correspond with their child's age. Mothers' knowledge of this "track" was not limited to the information they receive through RTL, as this developmental timeline is ubiquitous. It circulates across sites; mothers learn about it from their child's pediatrician, child-rearing books, magazines, internet sites, the library, and brochures and pamphlets that are distributed throughout the community.

This "track" is the foundation of RTL's standardized curriculum so that the topic of each home visit is determined by a child's age. Parent educator Rebecca described how she has memorized the developmental information:

> I figure out how old the child is. . . I go through the discussion points and I try to read the entire thing where it talks about what we should be talking about during each topic. But honestly, I don't do that very often. I've done it for seven years so I know basically, what I need to do. If you tell me a month, I'll know what it is and what activity I need to do and what topics we usually talk about. I mean, I pretty much have all that memorized. The curriculum tells exactly what to do. It tells us what to talk about, tells us different facts, statistics, whatever we need to know to tell a family.

The developmental timeline standardizes ideas about children so that like Rebecca, mothers think about children in its terms; the four-month should old roll over, the eight-month old should babble; the one-year old should walk. A child's progression along the path of development is the topic of every home visit and parent educators assist mothers in evaluating their children's development. Another important part of the home visit is the predetermined activity that is called for in the *Babies are*

Learners curriculum. Isabella recognized how her parent educator was testing her

son's ability to throw a ball during one of her home visits:

> She brings something new all the time. She brought a basket and a ball and
> some – we didn't talk about what the scarves were for but it's a – it's obvious
> to me that she's looking at the developmental landmarks. But it's very
> seamless. It's built into the meeting and doesn't feel like a test or anything.
> And I knew, I had just read that at 18 months they should be throwing a ball
> overhand.   And so I just had read that so that's why I noticed that – otherwise
> I wouldn't have known. And so he grabs the ball (laugh) and throws it and
> makes a basket – you know perfectly (laugh). It was just by chance but it
> looked so funny. After you know, he didn't want to throw the ball. So she's
> saying to him, 'throw the ball, throw the ball' and I thought she was thinking
> he *couldn't* throw the ball and . . . .and then he throws the ball and makes a
> basket – it was like – wow!

Isabella was proud that her son seemed "advanced;" he achieved milestones before he

was scheduled to. I asked her how important this was to her:

> Ok, I'm inclined to lie to you and say 'Oh, its fine… whatever…' But,
> (laugh). But I have to confess, it does make me proud that he goes ahead of
> the curve, you know? . . . I don't know how accurate this book is because you
> know, the landmarks were more clear when he was a baby – and now it's all
> these things. . . but you know, he's supposed to be putting 5 blocks on a thing
> and he puts 7 – oh wow! (laughing). So, I look at them because I want to
> know that he's going ok. But most of the time he's ahead and it makes me
> really happy.

This method of framing children's growth constructs categories of children

based on their conformity to the "track." Children are defined as "normal,"

"advanced," "delayed," "behind," and/or, (as will be explored in Chapter Five, "ready

to learn"). Every mother wants for her child's development what Isabella described;

if not "advanced," at the very least, "*normal*." Isabella was relieved to know that her

son, "Has a big brain. It's tough out there. You want your kids to have the best

tools." A child's ability to stack five blocks or to throw a ball overhand may seem

like trivial skills to the outsider; yet, to the mother immersed in child development knowledge, it is the difference between "normal," "advanced," and "delayed," and ultimately, his or her ability to succeed in the world.

Kimberly, mother of two, told me that, save for her son's language at twelve-months, her children were hitting all of the developmental milestones "on time." This made Kimberly feel good about her work as a mother:

> I appreciate the validation of it all. She (parent educator) leaves and I always feel really good about where the kids are at and what I'm doing and I feel like I'm doing the right stuff and making the right decisions.

Kimberly expressed a sentiment shared by many of the mothers: Home visits with parent educators confirm that they are providing the best possible environment for their children's development. This mother went on to explain that she valued another tool utilized by RTL to assess children's development, a formal screening that is implemented for each child on an annual basis. "I really do enjoy the Denver screenings. I just think those are nice to have and its stuff to watch out for." The "Denver" refers to The Denver Developmental Screening Test (DDST), a widely used standardized screening that determines if a child's development is within the "normal" range. Parent educators and mothers appreciate the test for its seeming objectivity. For mothers with developmentally "normal" children, it is a formal acknowledgment of that normalcy. For parent educators, it is "leverage" to help them convince some mothers that their child is "delayed" and in need of intervention.

The DDST is implemented as close to the one-year and two-year visits as possible and takes approximately one hour (an entire home visit). The child's

development is tested through a series of questions and requests posed by parent

educators and/or parents, such as, "Throw the ball!" or "Who is your friend?" As the

educator witnesses a skill, she marks it on the test's rubric and compiles the results at

the end of the assessment.

The regular home visits ensure that the parent educators are well aware of a

child's development long before the assessment. Yet, in those cases in which a

child's development is outside of the "normal" range, the standardized assessment

presents the evaluation in "objective" terms. Abigail told me about a child that she

knew would not pass the Denver even before he took it. She viewed the screening as

an opportunity to raise her concerns about the child's development with the parents:

> I do have a family right now – their little boy – ever since I've know him I've
> had a concern. He used to come to playgroup and spin things, like spin and
> spin and spin and not engage, not make eye contact. And was very intelligent
> but it's like [he says] "Green car." "Green car." It's not like, "See this blue
> car?" And when I've gone on visits he never really cares about the things I
> bring. He never engages with me. He doesn't engage with mom and dad.
> And I remember my heart just like *pounding* when I did the Denver which is
> our developmental screening. I knew he was not going to pass it. But I told
> myself that this would be my in-road to say "Let me explain this to you." I
> basically said that, "I would be remiss if I didn't tell you that I have some
> concerns. You have a wonderful and intelligent little boy but I just have a
> feeling that there's something not going" … I didn't say that quite right. I
> mean, I remember practicing my wording!

In this particular instance, Abigail was worried the child was exhibiting signs of

autism, a developmental disability that has received much attention the past decade.

Naturally, this is every parent's nightmare and for the parent educator, pointing out

delays is a very stressful part of the job. Especially for those parents who are viewed

as "in denial," the labeling of their child as abnormal can be met with hostility.

Parents may be unwilling to admit that their child is in need of intervention, that their care alone is insufficient to meet the developmental needs of their child. Abigail told me that she gets quite anxious in these situations:

> Oh yeah, very, very. And um, mom and dad kind of looked at me and like, part of me felt like they were [thinking], "Yeah, I kind of know what you're talking about" and part of me was felt like they were thinking, "No! I'm on the defensive. I'm not quite sure what you're talking about, here." And I just said, "What I would suggest is for you guys to contact Tiny-K and have him evaluated and you know. We'll talk again at our next visit."

The child's parents reluctantly had their child screened through Tiny-K, a program that specializes in developmental delays. The child qualified for services but his parents declined the intervention, deciding to "wait and see." This approach was viewed negatively by Abigail, who, like all child development professionals, believes that parents should do everything in their power to ensure that their child's learning is maximized, especially if that entails utilizing expert intervention. Particularly in the context of "windows of opportunity" and the brain's synapses, *early* intervention is defined as key to children's optimal development.

In those cases when parent educators recommend intervention, parents are expected to comply. Parent educator Rebecca explained, "I've got some kind of in denial parents. I've raised my concern and they kind of say, 'Eh, we're going to watch it.'" The approach of "waiting and watching" flies in the face of the expectation that mothers engage in hyper vigilance of their child's development. Merely *watching* development is not acceptable for any child; mothers should capitalize on windows of opportunity. For the child who is "delayed," watching and waiting is viewed as downright harmful to the child's development. Whether the

child's brain develops optimally is dependent on the kind of caregiving received, and

for some children, whether or not intervention services are accepted.

Like Abigail, Rebecca is uncomfortable addressing developmental delays but

finds comfort in using the DDST:

> [Pointing out delays] usually is uncomfortable for me. Fortunately, when I do
> the Denver, usually there are no surprises. Like, if it's something the kid's
> behind in, it's something that I've talked to them about already. I haven't had
> like any major surprises in seven years. Sometimes the Denver will reaffirm
> what I've already talked to the parents about, like you know, he really should
> be combining words by now. "Oh no, he's fine. He just doesn't want to talk."
> Well, then they take the Denver and it's like ok, the *Denver* says… and its
> nice for them to see, ok, it's not just me. This is actually a screening that says
> he's behind, you know. But you know most of my parents – almost all of my
> parents – I can remember one time in seven years my parents have always
> been receptive, because you know, they want to help their kid. . . Well, I had
> one family who was in denial. That was really tough, doing those visits
> because I *knew* something was not right, I mean and the mom probably still to
> this day doesn't want to admit it. And you know, you can only deny it for so
> long. You know, its time to accept it and figure out what you can do to help
> rather than just not think about it or not deal with it.

Program coordinator, Janet, described how, for some families, it is difficult to

accept any intervention beyond RTL services. Currently, Janet has a family that will

only allow intervention if accompanied by her:

> This family's always been kind of like "Yeah, I really don't want anybody in
> my home." But, *I* can bring somebody. You know, I'm concerned. The 33
> month-old has vowel sounds instead of consonants. He should be *talking* and
> he's not. And the baby has a flathead. So yeah, I'll bring my buds in [Tiny-K
> specialists], 'cause you know, I'm safe to this mom. But I need somebody
> else to say "Miss, look at your baby. Your child needs speech therapy and we
> can come in once a week." You know and all that…
>
> Interviewer: And better now…
>
> Yeah, to wait thousands of dollars later is the whole thing. Yeah.

The DDST facilitates the parent educators' work of pointing out delays and making referrals. Janet also spoke about how the test shows parent what they "should" be doing with their child, "And so parents are finding out like, 'Oh, I'm supposed to give him a spoon at this age?' So it's a good thing." Kimberly expressed how her child was asked during the assessment, "Who is your friend?" She told me, "And I was like , 'Oh, we don't say it – I mean we don't say that. Like, this person is your friend.' You know? But now I know that it's on the questionnaire I use it all the time!" Likewise, Olivia described how she planned to buy some wooden blocks so that her daughter could practice stacking them to develop her skills before her next screening.

Cecilia, mother of one, enjoys meeting with her parent educator who tells her "how smart Tasha is." However, in our interview, she revealed that her daughter "failed the Denver." Although Cecilia seemed unconcerned about Tasha's performance, I noticed that she identified the specific skills her daughter *could* do as she explained the situation to me.

> She failed her 12- month one because she was not waving or throwing a ball. But it was just a caution. Alexis, our parent educator was not concerned in any way. So there was a couple of things on there she wasn't doing…but…she didn't wave, but she signed [used sign language]… and she threw a ball the very next day! And she was ahead on other things so Alexis *really* was not concerned because she knew a few more words than was expected at a year and was stacking one block on top of another which was more than a year… so..

Cecilia was assured that her daughter's performance on the standardized test did not mean that she was in need of special services. Although the DDST appears as an objective measurement, there are many factors involved in a child's performance; not

the least of which is their willingness to cooperate! During my daughter's DDST screening, she refused to stack the blocks, preferring instead to line them up side by side. She did comply with enough of the requests that she "passed," but our parent educator did remind us that the Denver is but a snapshot of where the child is on a particular day. While Cecilia's daughter would not through a ball during her test, she threw a ball "the very next day."

Cognitive care requires mothers to be educated; they must understand the importance of brain development, windows of opportunity, the "track" of development, and accept those terms as legitimate ways of categorizing their child as "normal," or "delayed." Next, I examine even further, the experiences of educated mothers and their work monitoring their children's development.

Monitoring Children

Olivia, mother of one, relayed an emotionally-laden story to me about her fears regarding her daughter's development. She "kept checking online lists" to see what verbal skills her one-year old should be exhibiting. Her daughter was saying eight words when all of the information told Olivia that her daughter should be in the range of 15-20. Olivia became fearful that her child was "delayed" or even autistic. A formal screening by Tiny-K relieved some of Olivia's anxiety; however, the entire experience caused her much stress and emotional turmoil. She worried that it was somehow *her* fault that her daughter was "behind." Olivia's story is every intensive mother's story: She views her child through the professional lens of child development knowledge and monitors her daughter very closely. She views her

daughter's developmental success as her responsibility and measures her child's abilities with the milestones created by experts. Olivia has even told me that she knows her daughter will not be "a genius" like another child she knows whose verbal skills have far surpassed her daughter's.

Like Olivia, mothers of this study did not solely rely on RTL information regarding child development; they sought this information from doctors, magazines, books, and the internet. Thus, as educated mothers, the benefit of RTL is less the information and more the assistance in tracking and monitoring their child(ren)'s development. This section address mothers' experiences as recipients of RTL information, their reliance on the program for reassurance regarding their child's growth, and their anxieties about their children's development, especially in the realms of physical development and verbal skills.

RTL Reassurance

All of the mothers of this study acknowledged that, even before their involvement in RTL, they participated in the child development discourse. Thus, RTL does not "teach" them about child development, rather RTL facilitates their cognitive care by providing a reassuring professional evaluation of their child on a regular basis. RTL shares information; yet, even more important for these mothers, the program makes sure the child is "on track." Even as many mothers believe they don't "need" RTL, several stories emerged in my interviews regarding developmental challenges (real and imagined) for which they sought support through the program.

Educated Mothering. Jackie reflects the perspective of these educated mothers. A self-proclaimed "research junkie," she told me that, "if information is research-based, I pretty much run with it." I *love* education and I love to learn as much as I can." Similarly, Isabella, a Math instructor at the University, described herself as an "intellectual." She culls child development information from books rather than magazines. She told me that she seeks a "scientific angle with more meat." She particularly loves theory and philosophy and described to me how her boys' "love of wheels" prompted her to read several books about gender and child development. She explained her desire to "know things," particularly through the lens of science:

> Sure, I'm looking for parenting tips, sometimes. But I want, I want a
> scientific base for things, you know.   Even if the book won't solve my
> sleeping problem or whatever practical problem – I just want to *know* things.

These women *do* "know things." Mothers reported that they already knew most of the information they were given through RTL but appreciated the reassurance offered by RTL parent educators. Cecilia described herself as "an avid reader" and thus, well-schooled in the developmental timeline. She told me that RTL is helpful, "Because it's nice to have another set of eyes. Somebody who can say, "Oh, that's normal or, 'You should expect this next.'"

Beth, mother of one, is a former preschool teacher and current PhD student in early education. She appreciates how RTL puts her in touch with specific information about her son's age. RTL information is a nice supplement to her expertise in the area:

When I had Finn it just seemed like the thing to do because I am very familiar with what four-year olds should be doing. But I just don't remember all the things that you know, the little ones are supposed to be doing so it's really nice to have somebody come in and say, you know, here's kind of where he should be. Here's some things you can do.

I don't know if I was *taught* stuff but she definitely always put a – you know – "At this age kids are doing this" and I probably, I already knew a lot of that ... because of my background.

Jackie, "research junkie," is a former parent educator who had recently lost her job due to the loss of a significant grant. Her involvement in the program began as a mother enrolled in the program. When a position opened up, she applied and became an RTL parent educator herself.

. . . it's an interesting thing because when I took the job I was a parent in the program. And when I took the job I thought Ok, well I guess I'll have to stop being in the program. And Janet Erikson [program coordinator] said, "No. You keep having her come. It's different when it's your own child." And I guess that ultimately that's what it is.

Jackie went on to explain how she appreciated being introduced to developmentally-appropriate activities to do with her children, things she would have never been motivated to do "on her own." She told me, "It's like the chef that never cooks at home." Obviously, as a former parent educator, Jackie was not lacking the information; she appreciated how her participation in the program motivated her to engage in developmentally-appropriate activities with her children to enhance their growth.

Tracy acknowledged that she is "one of the parents that read all the books." She enrolled in RTL to have professional contact with child development information and to extend her resources so that she has access to even more expert knowledge:

Um, I'm one of the parents that reads all the books and brings in. . . I want as much knowledge as possible – I'm not saying I'm going to follow all of it, but I like to get as much knowledge to make – I want to be the best parent I can be and when I heard about this it was just another way, an experience to have somebody come. . .plus its through the public schools so its obviously education-based, so they're going to give you ideas and just to help – you know, be the best parent I can be – learn better ways and better techniques or different ways and different techniques…

Grace, leader of the local La Leche League had in-depth child-rearing knowledge and discussed her resentment towards her parent educator for assuming that she lacked information. She told me, "I *know* things." Her confidence in child development and rearing went so far as to speculate that her parent educator learned from *her*:

[A]fter a while I felt good in that I was probably sharing just about as much information with Tina as she was with me and that maybe she would take that somewhere. . . I don't think I'm the target audience for Ready to Learn. I may be eastside and low- income but I'm certainly educated. I know there are an enormous amount of people out there who could really benefit from the information they provide, but I don't recall any big visits where I was like "Oh, that's stuff I don't know."

Even though her family income is modest, Grace's education sets her apart from mothers who do not pursue child development information. For sure, her participation in the discourse distinguishes her from mothers who *don't* "know things."

Clara, a PhD, with a family income of over $100,000, is firmly planted in the upper middle-class. As an educational researcher at the University, she expressed similar feelings about RTL as Grace, explaining her belief that "other mothers" need RTL information more than she:

So I guess to me, and I told my husband this – I think it's an *awesome* program for maybe like lower income, single moms and stuff like that. And here I am someone who probably doesn't really ever ask questions about what I should do next…

Kimberly, mother of two children under the age of three, expressed her feelings of guilt for being in the program. As a forty-one year old mother with many resources, she viewed a teenage mother as more in need of the child development information and services of RTL:

> I kind of feel like – and this is not a criticism to them – just more that I am on the internet and reading – and networking all the time – that I didn't feel like I was getting a *whole* lot of information . . . … I really do feel bad that I'm on the list. It's like, you know…. I always told them from the very start – I'm like, if there's some teenage mom will you bump me? Because I don't need it! It's not a *need* I have it's a *want* I have – its totally different.

Although Kimberly stated that she does not "need" RTL, in chapter six I will explore the social aspects of participation in the program that help alleviate some of the loneliness and feelings of anxiety mothers experience as they take on the individual work of becoming an expert and learning about and meeting the innumerable needs of their young children. Even in the realm of cognitive care, RTL assists these educated mothers in their work of monitoring children and ensuring they are "on track."

With children's development portrayed as a high-stakes project, RTL restores mothers' confidence that they are doing well by their little learners. Yet, this does not mean that they can breathe easier or let their guard down. I found that quite the opposite happens when mothers become experts in child development: Their children are monitored closely and delays – real and imagined – are found and addressed. RTL is then more than just a means of reviewing information that they already know.

It becomes a significant support. Mothers spoke most often about two realms of development that worried them most - physical and language.

Physical Development

Kimberly, like all of the mothers, was well-versed in the developmental timeline. She knew the sequence that children's motor development should follow; they roll over, sit up unassisted, crawl, "cruise" (walk around furniture while still holding on) and then finally walk on their own. Kimberly became concerned that her daughter never rolled over because she spent a lot of time being held in a baby carrier. She told me that her instinct told her that her daughter was fine, but the literature emphasized the importance of muscle development. She turned to her parent educator to validate her intuition:

> I *think* everything's going ok. But can you [parent educator] just look at everything and say "You're right. Everything is going ok"? Like Olive. I carried her, chasing after Miles. I just carried her. She was in an Ergo [baby carrier]– she was never put down. And she doesn't roll over. She went straight from an Ergo to just sitting straight up. But I was worried about that. I was like, she's never going to learn to roll over. You know? She was like yeah, you can do tummy time but…

> And I was like Ok, thanks. You know? Since she's doing that [tummy time] – she was like "She's fine!" I was like "Ok, thank you."

Even as her parent educator allayed her fear, Kimberly's belief in the importance of monitoring her daughter's physical development remained intact. She indicated that she ensures that Olive gets "tummy time," the topic of an entire handout for mothers of infants. The handout emphasizes that:

> It is very important for your baby to lie on her tummy so her back will be strong. This will help her get strong enough to roll, sit and crawl. Being on

her tummy is hard work at first, and your baby may be fussy or even cry. Soon she will be stronger and tummy time will get easier.

The handout goes on to list things that mother can do to make tummy time more pleasant for her and her baby:

Put the baby on her tummy for three to five minutes, 5 times a day. Keep the time she is on her tummy short, but do it often.

Put the baby on your chest when you lie down. Talk and sing to her as she looks into your face.

Roll up a small towel or baby blanket. Place it under your baby's chest just under her arms so her head and upper body are a little higher ("Tummy Time").

This last technique was actually demonstrated to me by program coordinator Janet at an RTL playgroup. I brought my four-month old daughter to the group and received a short impromptu lesson on the necessity of tummy time. Janet described a growing incidence of "flat head" and pointed to a poster display that was on loan to RTL from another agency, Tiny-K which specializes in developmental delays. The poster was part of Tiny K's Plagiocephaly and Torticollos Awareness Campaign. Plagiocephaly is the scientific word for "flat head" while torticollis refers to a baby's "shortened neck muscle." Pamela encouraged me to make sure that when I hold my daughter on my hip that I regularly alternate sides so that she is not always turning her head one way, which could lead to torticollos. Tummy time was encouraged as an antidote to the incidence of flathead that has emerged since the "Back to Sleep" campaign that was launched in 1994, which encouraged mothers to place their babies on their backs for sleep to reduce the risk of Sudden Infant Death Syndrome.

Armed with this information, I found myself actually thinking twice before I swung my daughter to my hip throughout the day, "Am I putting her on my left side too much?" Jackie, with the help of her parent educator, identified a "flat spot" on her son's head and immediately sought intervention services to correct it. She described how her son's plagiocephaly was not the result of her deficient mothering (i.e. not doing "tummy time" or holding the child in the same position throughout the day), but his "natural tendency" to look one way:

> And so basically what Tiny-K thought was what James and I thought. He just seems to have a natural tendency to want to look to the right – that's just him – and because of that he would always position his head on the right when we was sleeping and he started developing a flat spot back here and so we just started putting him to sleep on his left side… and you know… and so far, its rounded out quite nicely. . .

> But it got to the point where actually one of his ears was further forward than the other one… it was dramatic enough. But it wasn't so bad that they ever talked about putting a helmet on him or anything like that.

Flat head and "shortened neck muscle" are two of the many issues mothers navigate as they monitor their children's physical development. Beth's concern for her child was linked to brain development. Her son skipped crawling and went straight to "cruising." Beth's mother, an RTL program coordinator (in a different community) stressed the importance of crawling to her:

> Finn didn't want to crawl. He had been walking around like that with our hands for months and so we kind of had to force him to crawl. Yeah we did… so that was a little – it seemed like for the normal child – or whatever that is – it seemed like he kind of rolled later than was typical and crawled later than was typical but …

> Interviewer: Does that bother you?

It's odd having my mom be a program coordinator for RTL. She can't really take that hat off when she comes to visit. So she's not really Grandma, she's …"Here's what you need to be doing." So that was probably harder for us to just constantly be hounded by her about things he wasn't doing. So that made it more difficult. Cause she… you know, she would say things like, "Brain development, it's really important that he crawls…and you really gotta work on that." Apparently there's this whole study about it . . . something must be out that it's *insanely* important…

Beth's cognitive care is significantly shaped by her mother's role in RTL. She confessed that her mother can be overwhelming with her information; yet, Beth is definitely interested in doing what is best for her son, which leads her to follow the standards of child development. Confronted with specific information about the number of times a baby should be placed on his or her tummy, fears of flathead and shortened neck muscles, and the connection between physical development and brain growth, it is no wonder that this realm of development is one in which mothers closely monitor, seek reassurance for, and "work on." Yet, even more closely monitored is the realm of language development. This was by far the most discussed dimension of development that mothers monitor with complete vigilance.

Language

When asked by our parent educator at our initial visit what our goals for our (then) one-year old daughter were, my husband and I honestly drew a blank. As the mother, it was my job to be on top of the developmental goals that I wanted for her, and of course, my husband was pretty oblivious. I was relating this experience to another mother involved in RTL who remarked, without hesitation, that her goal for her (then) seven-month old daughter was that she "love to read." Unknowingly, Olivia's goal for her daughter was deeply rooted in one of the major themes of child

development knowledge and RTL information – literacy and language and ultimately, academic performance. This realm of development is one that mothers monitor quite closely with the help of their parent educator.

Kelly enjoys her involvement with RTL, particularly as it pertains to tracking her son's language.

> [My parent educator] has handouts – like what – usually the handout will be what to expect. So, from the previous visit its information of what he should be doing. And that's nice because you can – especially when we started signing [sign language]– we did some signing – and then when he started using his vocabulary – we can track it. We can do a lot more tracking and things like that. So, that's pretty cool.

At the time of our interview, Kelly's son was two-years old and well on his way to language proficiency. The RTL handout that accompanies the visit for this developmental stage points out what to look for and how to foster children's language skills.

> Look for your child to: Initiate and carry on short conversations, and be frustrated when not understood.

> Ways to help: When your child starts an interaction, stop what you are doing, get down on his level, say something to let him know you heard him, and then as a question to help him take another turn talking ("Language Development").

The handout goes on to quantify children's language skills, stating that they should begin to use four-word sentences and even lists specific sounds that (s)he should be making: p, b, m, k, g, w, h, n, t, and d. "You should be able to understand three out of four words your child uses."

This handout exemplifies how the child development discourse not only demands vigilance regarding language development, but stipulates methods of

teaching that are dependent on intensive mothering. "Stop what you are doing" when your child speaks and get down on his level. Track the number of words he uses and keep a tally of which consonants are part of his verbal repertoire.

Mothers learn to monitor their child's language skills from the very beginning and are instructed to have conversations with their infant. The handout "Your Child Communicates" is given at one of the earliest visits, and promises that "With help from you, his basic means of communicating – crying – will soon turn to cooing, babbling and even words around the time of his first birthday." The handout goes on to describe how mothers can teach their baby to talk, that it is, "really very simple. . ."

> When you are talking with a friend and he seems interested in what you're saying, he talks back to you, nods his head, etc. You want to keep talking to him. On the other hand, if you're talking to your friend and he is yawning, and looking bored, and glancing at his watch, you know it's time to bring that conversation to a close.

> Your baby is just like you. If you're the friend who is interested and responding to his cries, he's going to want to keep the conversation going. If you're the friend who responds to his needs without talking, and in a very disinterested manner, your baby will not be encouraged to communicate.

Mothers must respond to baby's cries, be a good friend, and converse with baby in order to foster his or her language development. Kimberly, one of the mothers who believes she "doesn't *need*" RTL, ("I do it for fun"), worried about her son's language skills. He said fewer words than was expected of a one-year old when he was given the Denver Developmental Screening:

> He was actually behind on verbal his first one – his 12 month one which I told myself not to get freaked out about because we are doing bilingual. My husband only speaks German to him. So it was really funny because I was like, I told myself I wasn't going to freak out about it. But I did! I was kind of

like "Oh my gosh!" And then now he's way, way, ahead because he knows everything in two languages.

It was very unsettling for Kimberly to see that her son was "behind" in this realm of development. She continued to count the number of words her son could say as he developed and eventually, her fears about her son's development were laid to rest. Even better, she believes her son is advanced. Although she readily accepted the developmental timeline and monitored her son's language skills, Kimberly viewed RTL's insistence that mothers converse with their infants with suspicion.

> Oh like, they went to the total point of- to me it's just really silly. The whole you know, "babyspeak" and "parentspeak" and you know (using high-pitched voice) "Mommy's going to do this now." Especially with your first. It's like, now I talk all the time – that's because I *have* to talk all the time. With my first I'm just like "I'm just going to wait until he can understand me. He'll figure it out." and I found myself with Henry – and we were talking about the speech stuff – I found myself *not* talking to him all day. I talk to her much more because I'm already into that – like developing that parentspeak thing with him.

Although she knew she was "supposed" to engage in "parentspeak" with her infant, talking to her pre-verbal infant did not come naturally to Kimberly.

Susan, too become concerned about her daughter's language. At two-and-half years old, "she only had five spoken words." Susan heard about RTL from another mother who had similar language issues with her child. While Susan was unable to utilize RTL services with her two-and-a-half year old because of her child's age and the length of the waiting list (children "graduate" at three-years old), she was sure to enroll with her one-year old daughter.

> I'm hopin' that they'll help curb any problems we might have with her you know? Cause Jenna's speech was delayed, ya know, maybe Madison's will

be too and if I'm involved in Ready to Learn maybe they'll catch that earlier and help us not go through all the hassle we've had with Jenna.

Susan has experienced the hassle and extra work that accompanies intervention services. RTL was unable to enroll her daughter Jenna; however, they referred her to Tiny-K. Her daughter received home visits from a speech therapist and is currently working through the school district to get her child "caught up" so that she can enter kindergarten with similar language skills as her peers. Susan told me that her parent educator discussed with her the importance of talking to her children. This subject emerged when I asked her if any of her ideas about child-rearing changed because of her involvement in RTL:

> Yeah, mostly related to her speech. 'Cause like I would talk to her like, you know, like we're talking – she can understand most of what we're talking about and she follows what I'm saying all the time. But, um, one thing that was recommended to me was you know – SLOW down – because she can *understand* what I'm saying but she can't mimic it. So if I slow down and use more baby talk, kind of, she can, it's easier for her to mimic. . . 'Cause I think Abigail was even saying that about Madison – this last – when she came. You know? *Slow down*. And really overemphasize what you're saying. Instead of bbbbbbbbbbb(fast speaking). You know? Because they can understand what you're saying but if they can't mimic it – you're never going to hear it back, so.

"Parentese" is presented by RTL as integral to baby's language development.

> Parents use a different kind of speech with babies than they do with their adult friends. This special speech, called parentese, is a very natural and good way to speak to babies. Babies are fascinated with this special way of talking. They will watch and listen closely when adults use it (parental handout).

Engaging in "baby talk" was not intuitive to Susan; in fact, it was something she avoided with her children. Yet, the experts with whom she was working with encouraged her to speak to her small children in an exaggerated, slow manner. I

noticed that when I first arrived to her home she pointed to my daughter and said, "Ba-by." Susan changed her mothering practices so that they conform to expert knowledge regarding language development and she hopes that her one-year old daughter's language development will progress "normally" because of it.

Clara, mother of two with a PhD in education, is another mother who did not believe that she learned much from RTL and shared with me her disapproval of the program's approach to sleep and infant-feeding. As an AP mother, she was critical of RTL's information about introducing solid food before six-months of age and the insistence that babies need to sleep in a crib. Nonetheless, she did not question the developmental information and actively tracked her daughter's language with her parent educator:

> Um, you know she didn't talk a whole lot which kind of worried… it was always in the back of my mind. And then RTL's person would *always* ask about her speech, every time that she came and she just. . . 'cause I don't think she even said . . . she didn't consistently say "mama" until she was probably about a year old, ya know? And so… she'd have the normal babble but she didn't have any like – Oh, this babble is definitely this word. Of course, now she talks all the time. Now, I'm like, "Please be quiet!" But…yeah, and so, that was always kind of in the back of my head. I was a little worried about her speech but the RTL's person was more worried about her speech 'cause she was just like, "Do you think this babble consistently means something?" And I'm like, "Yeah, no… haven't picked up on it," you know? And so, I know - *every* time she came, she'd be like, "Oh, how's her speech. Is it better?" And you know, I was kind of like, "Oh, she babbles a lot" (laugh). . . I mean, like, I wasn't worried enough to go see an audiologist or speech therapist or anything like that… but I was just kind of like, "She *should* have more words than she does."

Similarly, Jamie described how she became concerned about her ten-month old daughter's language development. Although her daughter's development eventually conformed to the language milestones, she remained involved with RTL

because it ensured that she was "giving Ada lots of opportunities." As an expert

herself, working in the school setting as a Master's level social worker, she feared for

either of her daughters to fall "behind" because she knows how children are affected

long-term.

> Well I want to make sure, for both girls that they are not going to need to struggle. The early invention is *so* crucial I feel very strongly about that. And making sure that they get the right start. And I feel that you know, like, there might have been not really a concern . . . if I didn't do Ready to Learn I can't say for sure yes or no – but it was nice to know we were on track – following it up – doing things that we could do to make sure –
>
> Interviewer: It sounds like it was a peace of mind. . .
>
> It *was* a peace of mind. And if it were to be an issue, we got it early. Its not a… you know what I mean? Because we're still, you know, we're just making *sure.* We're doing what she needs to do. I just feel you know, because then you make those connections so then later when they get to preschool, *kindergarten*, there's going to be huge discrepancies and then you have to really struggle and scramble to get them up to a certain range – when you can do that early on.

Like Clara, many of the mothers I spoke with did not think they "need" the guidance

of RTL; yet several spoke of development concerns that RTL helped them work

through. Sometimes it was just alleviating their anxiety, for other mothers, it was

about accepting intervention services. Either way, mothers were doing what was best

for their children; monitoring, working on, and accepting expert guidance. These

mothers conform to the expectations of "good mothering" that is presented through

this child development discourse; they are steeped in expert knowledge, apply it, and

position cognitive care as central to their mothering practices. Several of these

mothers made reference to "other mothers" who may need RTL information more

than they. Next, I examine how parent educators discussed "other mothers," women who approach mothering quite differently than these educated, intensive mothers.

"Other Mothers"

The child development discourse sets mothering standards to which all mothers are held accountable. Each child is expected to conform to the normative timeline of development and it is a mother's job to be educated, provide the proper environment, and implement expert-driven care practices. Not all mothers in RTL participate in the child development discourse. Unfortunately, I was unable to speak with women who mother outside of the discursive reach of child development. Yet, parent educators had much to say about these other mothers.

Parent educator Alexis described RTL's process of categorizing mothers, an important step in determining who can wait and who needs immediate support. The major distinction in RTL is between "high-risk" mothers and "high-functioning" mothers. Families are categorized on a continuum ranging from one (teen mothers, the highest risk category) to five ("other" which includes second-time mothers like myself.)

> There's some risk factors like English is a second language, involvement with mental health services, lower income, both parents are working. Some of them count, some of them don't. And its supposed to be if they meet three of them. But we are all allowed to take the liberty of going, "This is a two." Whether it says that or not, this is a high stress [family]. If she just has enough stress, I'll count it as a two. Like, I had a court-ordered one where . . . she called, and she's in tears and she's this and this and this (making checkmarks on a list). We made her a two (claps hands). She shouldn't have to wait. . . You know, baby was born premature, that's another one. So, if we think that they should be seen sooner rather than later, that's what we do. So that would be priority number two or one if we felt the need. We do have that latitude.

Unlike the educated middle-class mothers I spoke with, the mother Alexis describes

enrolled in RTL to fulfill a court order. Often, this occurs when a parent has lost or is

at-risk for losing custody of his or her children and are ordered to take parenting

classes. At the time of this study, RTL is the only source for "parenting classes" in

Lawrence; thus, even as a voluntary program, some families that are enrolled do so

because of intense pressure. Parent educator Rebecca spoke to me about her

experience with such mothers in her previous role as a specialist in "high-risk"

families. RTL enjoyed a generous grant for several years that enabled more high-risk

families to receive services with the ability to be visited on a weekly basis (instead of

the standard 4-6 weeks). Rebecca took on mostly high-risk families during that era

and is currently enjoying her break from the intense situations that commonly arose:

> I had 95% at-risk and it was just a lot of no-shows and you know, some scary situations. I've been in some pretty scary situations – drunk, you know, alcohol use or you walk into a home and its full of pot smoke or you know, moms that just got out of prison, gang member-fathers, abusive boyfriends. You know, it was just like every day, I'd be like this is really…I didn't know what to expect. Yeah, and I started to feel like – I started to feel like a social worker, not a parent educator. So, I feel a lot – it's just a lot less stressful to go where they *want* you to be there and where they are going to do what you tell them to do. I mean, what you tell them about – they are going to try the activities… they are going to *read* you know and you don't have to focus on so many other things. . . . I just don't – I don't want to deal with all of that – I'm not getting paid as a social worker, so…

Rebecca prefers to visit home where she is "wanted" and where child

development can be the focus of her interactions with mothers. The unpredictable

lives of high-risk mothers make cognitive care less of a priority. Parent educators

recognized barriers that prevent mothers' ability to specialize in child development;

yet, those issues remained at the individual level and were never described as social

or public problems.

Abigail shared her frustration regarding a mother who not only ignored her

children's development, but seemed unable to fulfill any of the components of "good

mothering."

> Just bad choices and living in the moment… always worried about finding a
> man and things like that and then I heard that she did have another baby and I
> remember thinking –aching- she just got this new baby and she's going to
> *screw* it up. And I've had a couple of other families since then – I'm really
> torn – like I, I want them to do a good job and I know deep down they really
> love their kids, then I've had days where I'm like "ok, I wish I could call
> someone and have the kids removed." . . . And that's not really a parent
> educator perspective – that's not what we – we should be going in there and
> thinking about what are the good things, what are they doing *right*?

Child development had not taken its rightful place in this mother's life as her central

concern; instead she would speak to her parent educator about "finding a man," a

personal concern. Abigail notes that although high-risk mothers "love their children,"

that alone is not enough to constitute good mothering. When mothers lack material

resources and eschew middle-class parenting practices and philosophies, it is difficult

for the middle-class parent educators (who are all mothers themselves) to see exactly

what the "high risk" mothers are doing *right*. As a strengths-based program, their

goal is to praise a mother's accomplishments, which Abigail found hard to do with

another of her "high-risk" mothers:

> Well, safety would come up a lot 'cause she'd just have crap on the floors and
> I kept saying, "They are going to put things in their mouth and they are
> curious and they want to try things and you *have* to put things up or, if you
> don't put things up you have to be prepared – 80 million times a day - to move
> them away and distract them. And you can't say "No" every single time
> because they are going to stop listening to "no."

This description demonstrates how this particular mother failed to meet two important criterion of cognitive care: she did not provide a developmentally-appropriate environment for her child and her discipline technique is inadequate for the child's current developmental stage of toddlerhood.

Another source of tension described by parent educators exists when mothers rely on traditional knowledge from non-Western cultures. In these instances, parent educators believe it is their job to replace tradition with research-based information and Western knowledge about development. Alexis described her emotional reaction to a Korean mother's attempt to stop her son from sucking his thumb:

> The boy was sucking his thumb and I was just like, "Oh, he just sucks his thumb for comfort and it makes him feel better." And his mom was just like "Well, he should look to *me* for comfort." And she was offended and worried, clearly, and then the next visit I went over and he actually had like a plastic thing/brace over it so he wouldn't suck his thumb. I actually *cried* after the visit. I was very upset just because, in our culture – that's fine, you know… its normal and its even written in our milestones – they use a pacifier or suck their thumbs for comfort and, but I didn't want to offend this mother and I think that was probably half of why I was upset because I didn't know what to do about it and so I brought her a handout about you know, using things like that and I talked to her a little bit more.

Alexis relies on developmental knowledge to guide her work with this mother, noting how the mother's traditional belief contradicts the well-established developmental milestones. Parent educator Abigail discussed another mother who relied on traditional knowledge regarding pacifiers:

> Right now I've got a teen mom who English is her second language and she's Hispanic and its interesting how many pregnancy and child myths there are. Like, she was telling me that her mom told her – and she's 18, 19… her mom told her not to give the little boy a pacifier because it won't allow his teeth to grow in and I said, "Oh, you mean it'll cause them to be crooked?" And she

said, "No, it blocks them from growing in." And…just, and I… when she was pregnant, she was doing the teen class with Gayle over at the high school and something about how she wasn't supposed to eat ice cream because that gave the baby like stomach aches or something…" I mean, all these interesting… and that's kind of a cultural thing – and, I think with her, just having to do – focus on *one* thing at the visit as opposed to trying to cover several different areas like you would with typical families.

In this case, Abigail acknowledges that the teen mother will not become an *expert* in child development information; however, the hope is that she will absorb one research-based idea to which her mothering practices will conform. As a young mother steeped in traditional Mexican culture, her mothering practices conform to very different standards than those of the white, educated middle-class mothers who defer to science as the final authority on what is best for their children.

In summary, "other mothers," those that are labeled "high-risk" by RTL, often struggle with day-to-day living, are unable to devote resources to becoming experts in child development, and sometimes engage in practices that are viewed as bad mothering or overly reliant on tradition. The experiences parent educators have with this category of mothers exist in stark contrast to their encounters with "high-functioning" mothers who follow the "rules" of the child development discourse and spend a lot of time researching, monitoring, and facilitating their child(ren)'s development.

Conclusion

Mothers' commitment to intensive mothering ensures that they will engage in cognitive care and shape their carework to support the construction of babies as "learners." Chapter Three describes various ways in which mothers subscribe to the

ideology of intensive mothering which drives how they interact with the scientific, expert knowledge that is disseminated through RTL. One of the primary goals of RTL, along with enhancing children's development and school readiness is to prevent child abuse. As described, knowledge of children's "normal" development can assist parents in constructing realistic expectations for their children's behavior which can lessen the likelihood of abuse. For "other mothers" who otherwise have little or no access to child development information, this important role of the program may be the most emphasized. For the educated middle-class mothers I spoke with, the developmental information takes on a different meaning; they become experts, and this knowledge significantly shapes their intensive mothering.

As "good mothers" the women of this study take on the role of their child(ren)'s first and best teachers and incorporate child development science into their practices. They track the number of words their child can say, teach their baby to crawl, and construct "bat mobiles" to facilitate their baby's development. Conversely, high-risk mothers were described by parent educators as preoccupied with other matters, unable to focus on mothering, or reliant on tradition instead of the latest science. This subjects these "other mothers" to labels of deviancy (Arendell 2000) and positions them as blame-worthy for their child's future struggles in school.

Good mothers provide cognitive care that not only enhances children's ability to conform to the normative timeline of development, but produces even longer-term outcomes. It sets children on a trajectory for success within the schooling system, all the while leaving mothers' work invisible and unrecognized - yet expected. Griffith

& Smith (2005) describe the discourses of mothering as "mobiliz[ing] the work, care, and worries of mothers in relation to their children's schooling (33)." Most mothers I spoke with did not connect the cognitive care that they provide for their children with their future success in the school setting. Mothers' worries regarding the physical and verbal development of their children were not couched in terms of the institution; women were motivated by the immediate developmental needs of their children. Yet, I argue that their work as their child's "first and best teacher" is shaped and guided by the national goal to ensure that children enter school "ready to learn." Chapter Five explores the extralocal relations of school readiness and child development.

CHAPTER 5
SCHOOL READINESS

Chapters Three and Four described how women's carework is shaped and coordinated by mothering and child development discourses so that cognitive care has become an essential feature of "good mothering." Through the cognitive care of babies and toddlers, women engage in *mothering for schooling* (Griffith & Smith 2005) long before their child ever steps foot into a classroom. The program Ready to Learn is one of the many avenues in which women are hooked into the gendered family-school relation, a coordination that is constituted through the child development and mothering discourses, the individual practices of mothers, and the institutional demand of education for "school ready" children (Smith 2005; Griffith & Smith 2005).

In this chapter I describe the themes of representative "level two" texts to contextualize the efforts of the program RTL as part of the school readiness campaign to explicate how mothers' experiences "came to be." I explore the discursive construction of children's "early environment" as a determinant of individual as well as institutional (education, economy) success, especially in the realm of literacy and reading skills. The discourse creates a dichotomous view of children as "normal" (and thus, ready for school) or "disadvantaged" (and consequently unready for school), conditions that are produced through their early environments. The dominant themes of the child development discourse are utilized by institutional actors in the call for early education as a means of producing children's school readiness and thus, their future academic and economic performance.

The Child Development Discourse

The dominant "way of knowing" children is through the lens of child development, "a set of ideas about child and childhood systematized and promulgated by child psychology" (Stainton Rogers & Stainton Rogers 1992: 37). The field of child development is a vast interdisciplinary textual complex of expert knowledge, all is which is presumed to describe "the natural child" and bring us closer to understanding children's "true" needs (Beatty et al 2006; Apple 2006). The discourse produces categories of "normal" and "disadvantaged" based on children's capacity to conform to the unquestioned age-based charts and milestones. Science has long provided the authority for claims regarding children's needs and capacities; today, *neuroscience* provides the "truth" about child development, bolstering the emphasis on children's early learning as crucial for socially desired outcomes, specifically, "school readiness."

This section examines the discursive themes of child development, particularly, the emphasis on children's "early environment" as a major determinant in their educational trajectories and skill development. In addition, I explore the importance placed on language acquisition and the pertinence of social class in producing desirable outcomes (school ready children).

Early Environment

Neuroscience has emerged as the technological rationale for the discursive focus on children's "early learning." Children's potential and their "needs" are increasingly defined with the language of neurons, synapses, and brain development.

This emphasis is reflected in the literature distributed by Ready to Learn and was described by Pamela Reeves as the impetus for the school readiness campaign, "The brain research – all of the neuroscience – has caught the attention of leaders and policy makers across our country." Her observation is consistent with the "map" I construct through my investigation of the social relations of school readiness; the neuroscience narrative is woven throughout the discourse and is utilized by a range of institutional actors. Furthermore, "school readiness" is the implicit outcome to which children's proper development is to support.

From Neurons to Neighborhoods: The Science of Early Childhood Development (2000) is a highly influential and widely-cited text that represents the major themes of the discourse. This 500-page report of the National Academy of Sciences was developed by a 17-member committee and synthesizes decades of research:

> . . . to identify and discuss early developmental tasks, that, if mastered, appear to get children started along adaptive pathways, and if seriously delayed or problematic, can lead a child to falter (19).

Child development discourse presents children's growth in terms of outcomes; a child must be started on a path for success at an early age. *From Neurons to Neighborhoods* portrays a nuanced explanation of children's development that transcends traditional nurture-nature debates. The text proclaims that children's skills and behavior are not determined by one or the other, but the interaction between the two. Yet, the message is clear that *environment* exacts a powerful influence on children's development and is the dominant theme of child development, including

RTL's curriculum. *From Neurons to Neighborhood* culls the latest child development research and depicts children's early experiences ("nurture") as powerful enough to shape genetic dispositions ("nature"):

> At the moment of birth, each baby is neither a preformed individual whose destiny is set, nor a blank slate whose individuality can be shaped entirely by external forces. Children clearly differ in their genetic endowment from the time of conception. . . Depending on the caregiving they receive and the environments they encounter, shy children can become sociable, fearful children can become secure explorers of their surroundings and highly exuberant children can develop self-control (389)

Children's early years are presented as crucial to the individual child whose environment can enable him/her to overcome faulty inheritable traits so that they can conform to the expectations of the social order. The discourse emphasizes the kind of child that is desired by society; in this example, one that is "sociable," "secure," and with a sense of "self-control." This excerpt exemplifies how the discourse strengthens ideas regarding the "normal" or ideal child as produced through their early environment.

RTL draws on the theme of "early environment" to emphasize the importance of parenting practices in shaping children's skills and behavior, especially those that serve the schooling system. Pamela Reeves, national RTL trainer and program advocate, shared a story with me about a little boy who was born with a traumatic brain injury. This child would never conform to the normative timeline of child development; yet she believed that his potential was greatly enhanced through his parents' caregiving. Her story drew on the discursive theme of early environment as key to children's optimal development:

I worked with a parent about… mmmmm… 10 years ago now and (pause) Their son had had a very traumatic birth and had a brain and body bleed and it lost 90% of its blood and they had to do a transfusion back but consequently it had a lot of strokes at that time and the hospital had told them not to even take him home that it would probably be better to institutionalize him. But the family chose to take this little guy home. He came home with a feeding tube and oxygen and monitors and… and mom and dad decided that dad would stay home and take care of this little guy because dad felt like he could deal with all of the equipment needs and mom would go back to work. And the first time that I visited with them and I knew a little bit about their story but I rang the doorbell and dad hollered to "come in" and dad was holding this newborn who had all of these tubes and bells and whistles and he was holding him in the kitchen. He was sharing this story – he told us that his son would be blind and he would never talk, you know, wouldn't have any cognitive ability. And I said, I can tell you right now, he's looking at you kind of like this (demonstrates) and I could see that. And he said, well they told us he couldn't see and I said well, then just by hearing your voice perhaps he's looking at you and I've seen you look in his eyes and you know, this is what attachment, and we talked about attachment. . .

And Ezekial is in school right now! He walks and he talks. And he has, you know, some special education needs but he's a successful little boy in a classroom. But the family needed from the very beginning to know that something is happening. Something… and *you* are making a difference. And that's what I think we did.

Pamela recounted this story to underscore RTL's role in promoting the family (usually mother) as integral to a child's development of skills and abilities that will contribute to their performance in the schooling system. The power of early experiences enabled a child with severe biological limitations to become a "successful little boy in the classroom." The framing of children's early environment as a major determinant of his or her propensity for educational success draws from and is reinforced by neuroscience knowledge. This discursive theme is critical to the school readiness campaign, and as will be described, one that is employed by

educational and economic actors in the call for intervention for disadvantaged children.

From Neurons to Neighborhoods reads, "Between the first day of life and the first day of kindergarten, development proceeds at a lightening pace like no other (89)." Thus, children's capacity to learn must be exploited long before they enroll in formal schooling. Of particular importance is brain development, which has fast become a significant area of research due to technological advancements in imaging and computational techniques (http://neuroscience.berkeley.edu/techcenters.php). Scientific research portrays the child's brain as developing at an accelerated rate so that, by twelve months of age, children's brain synapse formation peaks for visual, language, and higher cognitive functions (Shonkoff & Phillips 2000). Thus a child's environment the first three years of life is presented as critical to his or her optimal development.

Dr. Jack Shonkoff, editor of From Neurons to Neighborhoods established Harvard University's Center on the Developing Child. The Center's mission is to utilize science to produce better outcomes not just for children, but society as a whole through early education, especially for "disadvantaged" children:

> Science now offers increasing promise as a vehicle for greater understanding of how the foundations of successful adaptation and effective learning in the childhood years lead to better outcomes in academic achievement, economic productivity, responsible citizenship, lifelong health, and successful parenting of the next generation. Through building, teaching, and applying this growing knowledge base, we have an unprecedented opportunity to launch a new, science-driven era to promote the healthy development of all children, particularly those whose life prospects are compromised by significant adversity (Center on the Developing Child 2010a)

As a site of knowledge production, The Center on the Developing Child publishes a range of texts including working papers, policy briefs, and articles that address how children's development is impacted by such things as "persistent fear and anxiety" and maternal depression. The Center produced the report, *A Science-Based Framework for Early Childhood Policy* which offers a science-driven agenda for policy makers on the issue of early learning. The Center reiterates the significance of the early years as providing the trajectory for either positive or negative outcomes:

> Neuroscience, molecular biology, and genomics tell us that early life experiences are built into our bodies. They get under our skin and into the brain and other organ systems, with lasting effects on individuals, communities, society, and the economy. Children subjected to poverty, violence, or neglect during these early years without a supportive network of adults can end up with faulty "wiring" that has long-term consequences well into adulthood. Experiences during the first few years of life – good and bad – literally shape the architecture of the developing brain. (Center on the Developing Child 2010b).

These texts draw on and reinforce not only the critical nature of early development for the individual child, but the entire social order (communities, society, the economy). The discourse produces categories of children; those that come from "good" environments (read: families) and are consequently wired for success, and those that grow up in "disadvantaged" environments and thus acquire "faulty wiring." As an early education and school readiness program, RTL administrators are eager to demonstrate how their work facilitates the development of properly "wired" children. On a recent newscast for the local television station, Lawrence program coordinator, Janet Erikson presented how children in RTL benefit, "They read earlier than other children. They talk earlier. Their parents are more apt

to be involved in school." In essence, RTL improves children's outcomes by strengthening their early environments.

The report *A Science-Based Framework for Early Childhood Policy* (Center for the Developing Child 2007)*,* points to research that demonstrates how children from disadvantaged families score significantly lower on standardized tests than their more privileged counterparts as early as *eighteen months old!* (Sirin 2005). Through the testing, tracking, and monitoring of babies and toddlers, experts can identify their academic trajectory very early. The scientific framing of children's early years has produced the "need" to test and track babies and toddlers so that those who are "behind" can receive the necessary intervention to shore up their skills and set them on the trajectory for successful outcomes.

Standardized tests like the Denver Developmental Screening (see Chapter 4) utilized by RTL are powerful texts that are used to determine not only a child's progress along the normative path of development, but his or her accumulation of skills that will define them as "ready for school." The earlier a child can read or talk the better for the institution that will provide his or her education. RTL assists mothers in tracking and monitoring development through the use of standardized testing and monthly observations so that, if delays are detected, intervention can be applied so that the child will "catch up" before they become a problem for the schooling system. As described in Chapter Four, mothers readily accept this science-driven tracking as part of their cognitive care and watch for signs that their child may need developmental intervention.

Established by science and circulated through texts, children's early years are given importance only in the context of their future schooling and participation in the economy as a productive worker. The emphasis on language, in particular, is driven by socially-desired outcomes and classifies children into categories based on their verbal and literacy skills. What is striking about the discursive emphasis on language development is how it reflects culturally-derived norms of how children's early environments *should* be shaped, specifically, to enhance skills that are required for their success in the schooling system.

Language

Knowledge about children's rapidly developing brain substantiates concern for their learning in the first three years of life, especially in the realm of language development. Chapter Four demonstrates how mothers are asked to cultivate their children's language skills by tracking the number of words their child can say, conversing with the preverbal infant, and speaking in "parentese."

A significant and widely cited text that represents, shapes, and contributes to this theme is Drs. Todd Risley and Betty Hart's *Meaningful Differences in the Everyday Experiences of Young Children* (1995). Their work examines how children's divergent early environments creates educational disparity and is cited throughout the interdisciplinary complex of child development, including *From Neurons to Neighborhoods,* policy documents, working papers, school readiness literature, even the work of economists and sociologists (e.g. Lareau 2003).

Hart & Risley examined children's early environments and focused their attention on the number of words spoken by adults in the presence of children. They found that the average child hears 1,500 words an hour, while children of college-educated parents hear 2,100 words an hour. A striking difference was found in the environment of "welfare families" where children only hear 600 words an hour. The authors calculate that by the age of four, children of educated parents hear 35 million more words than their disadvantaged counterparts. This statistic is widely circulated throughout the discourse as a determinant of the literacy gap between groups of children and has contributed to the discursive emphasis on the number of words children can speak and the importance placed on communicating with babies.

Class-based child rearing practices are evaluated in terms of children's outcomes and how they will fit within the schooling system. Middle-class children grow up "bathed in language" and experience considerable academic advantages over their language-deprived peers (Hart & Risley 1995; Bardige 2005). The middle-class / privileged practices of parents coordinate with the predetermined structure of the institution of education. In contrast, children with less exposure to language, and thus, with smaller vocabularies, are penalized within this system. They are "disadvantaged" due to their parents' class-based child-rearing practices. The schooling system is structured by the normative framework of child development, a set of ideas about children that are not culturally neutral, but in fact, reflects middle-class values (Rogoff 2003).

Children who lack the literacy skills that are demanded by the schooling system do poorly throughout their first three years of formal education and beyond Bardige 2005). Institutional actors consistently point to the cumulative disadvantage of "unready" children without questioning the educational structure itself. For example, the American Federation of Teachers (AFT) claims that children who do not read well by the end of first grade will never acquire the literacy skills that are needed to complete elementary school (2002). This advocacy group reflects the dominant trend of shifting the blame for children's school failure away from the institution and on to the child's early learning experiences. AFT identifies risk factors for school failure to be "inexperience with storytelling" and lack of exposure to reading, not the institution's inability to individualize instruction for each child so that lessons can be tailored or the perhaps, unrealistic expectations placed on children as they enter the schooling system. Institutional expectations for children's skills and abilities are unquestioned; it is the child and his or her environment that are problematized.

Through this pointed examination of representative texts, I have demonstrated how the child development discourse provides a unifying lens through which professionals view children's early environments and language acquisition. This discourse venerates middle-class "environments" and child-rearing practices as the norm to which all families should conform. Next, I explore in more depth the issue of school readiness, how it is measured, how it is to be produced, and how it is presented as the solution to a myriad of economic and social problems.

School Readiness

In his address to the National Association for the Education of Young

Children's annual conference, Secretary of Education Arne Duncan expressed the

importance of children's early learning in terms of the political objective to establish

a "cradle-to-career educational pipeline:"

> Research on brain development provides a lesson that these days is really a
> no-brainer – everyone now recognizes that the most active period of child
> development is from birth through age three. . . I want, once and for all, to get
> schools out of the catch-up business. . . You have all heard President Obama
> speak of the need to develop a seamless cradle-to-career educational pipeline.
> But as the President has pointed out, that pipeline will never work properly
> unless the road to college begins at birth.[11]

From the perspective of political and educational actors, the optimal development of

children's brains is not an end in and of itself, but is instrumental to the

accomplishment of institutional goals. Institutional actors call on early education and

school readiness as a means to process children more efficiently through the

schooling system and to get schools out of the "catch up business" by shifting

responsibilities to parents.

This section examines how increasing children's "school readiness" is

identified as the means to enhancing educational and economic outcomes. I begin

with an examination of how "school readiness" emerged as a national priority and

how it is defined as a multidimensional characteristic of children that should be

produced through the coordination of several institutions, including family, schools,

and healthcare. I explore how, in the current economic and social context, the family-

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[11] http://www2.ed.gov/news/speeches/2009/11/11182009.html

school relation is the most emphasized factor in the production of school ready children and how RTL seeks to initiate mothers into a lifelong relationship with her child's school. Finally, I will explore the economic argument for early education as an important facet of the discursive conversation of school readiness.

Domains and Indicators of School Readiness

School readiness is a rather elusive goal, one that is the subject of much intellectual, political, and scientific discussion. The effort to produce "school ready" children is a decentralized one, taken up by a dizzying array of coalitions, groups, and organizations dedicated to the cause at both the state and national levels (Ready to Learn, Getting Ready, Ready or Not, Kansas Action for Children, Kansas Coalition for School Readiness, and National School Readiness Indicators Initiative, to name a few). RTL emerged as a local program in St. Louis, Missouri in 1981out of the concern of educators for the varying levels of school readiness exhibited by kindergarteners. Pointing to research regarding the importance of parental involvement, early childhood experts advocated for a program that would educate parents about their role in their child's early learning and development. With programs now established in all 50 states, RTL continues to take up the school readiness cause through parent education, testing and tracking of children and referrals to other programs if additional intervention is needed.

The school readiness cause was institutionalized as a *national* priority in 1989 in the context of widespread public discontent regarding schooling and the desire for reform (Vinovskis 2009). Fueled by this concern, an Education Summit was held

wherein President George Bush, Sr. ("the education president") and the nation's fifty governors established six national goals to address the ailing U.S. education system. The first of these goals addressed school readiness, that by the year 2000, "all children will start school ready to learn" (http://govinfo.library.unt.edu/negp/page1-5.htm).

The 1994 Educate America Act established the (now defunct) National Education Goals Panel (NGEP) to monitor progress towards the achievement of the school readiness goal. To that end, the NGEP set three objectives; (a) children will have access to high quality preschool programs; (b) every parent will be a child's first and best teacher; (c) and children will receive the health care, nutrition and physical activities that they need to arrive to school healthy. Thus, as originally established at the federal level, school readiness was defined as a responsibility to be taken up by "parents" as well as preschool and others systems such as healthcare.

The most recent and authoritative attempt to construct clear indicators of school readiness and the means of producing "ready" children was undertaken by the National School Readiness Indicators Initiative (NSRII). Working in partnership with seventeen states, the initiative identifies school readiness as coproduced by various realms of society, not just families. Much like the NGEP's call for social services (preschool, healthcare) to support parents' role as their child's "first and best teacher," the NSRII posits "ready families" as only one factor in the school readiness equation. The document, *The Findings From the National School Readiness Initiative: A Seventeen State Partnership* posits the school readiness equation as:

Ready families + ready communities + ready services + ready schools = children

ready for school (2005: 12-13).

To be "school ready" children need access to healthcare, good preschool, and

affordable housing. In short, all children need access to middle-class amenities if

they are to step foot into the kindergarten classroom with similar skills. The

objectives originally set by the NGEP (and expanded on in the NSRII report) seek to

enhance children's environments through the provision of services so that

"disadvantaged" children can receive similar early learning experiences as their

middle-class peers. Unfortunately, the objectives to ensure that all families have

access to affordable housing or that all children receive health care and high-quality

preschool seem like lofty ideals that are far too "socialist" for the American public to

tolerate. In addition, nearly every state is facing a budget deficit within the context

of the current economic crisis resulting in the retrenchment of basic services

including education. Thus, even as it is acknowledged within the discourse that the

institution of education demands that all children enter schooling with access to a

middle-class environment, there is no indication that any social responsibility for

providing equality of environment will ensue any time soon. Thus, "families," more

specifically, mothers, will continue to shoulder responsibility for articulating their

care practices with institutional demands regardless of their material circumstances.

RTL enhances the school readiness of children through its focus on the

"family" as the most significant factor in the school readiness equation. The intense

cognitive care of mothers as their children's "first and best teachers" produces the

skills that are necessary for success in the schooling system. Mothers construct

discipline strategies that will shape their children's behaviors so that they conform to

dominant expectations, namely, that they will listen to authority figures and cooperate

with their peers. In addition, mothers consistently track and facilitate their children's

development, especially verbal and language skills, so that, when the time comes,

their child will be "ready" for school.

> This work pays off, according to the national RTL website.
>
> Ready to Learn helps parents to build a strong literacy environment for their children from the first days of life. The results of the University of Idaho content analysis [a recent study on the effectiveness of RTL] clearly articulate the connection between Ready to Learn and emergent literacy, emphasizing how the RTL curriculum supports both state and national efforts to advance early literacy.[12]

Interviews with RTL administrators elaborated on how the program not only supports

school readiness, but strengthens the family-school relation. In addition to

monitoring and facilitating their baby and toddler's development, the program

increases the likelihood that mothers will continue to track and work on their

children's learning throughout the schooling process. Pamela Reeves, national trainer

and Blue Valley coordinator, clarifies that even when children enter the schooling

system, "parents" are still responsible for their learning:

> Families that have participated in Ready to Learn - like the research – we mirror it, in that their children are better prepared. But the reason our school district signed on was because we have families that are better prepared – that when their child enters kindergarten they don't say to the school district, "Now he's your job." That the parents come in as a *partner* and they say, "Ok, he starts spelling in kindergarten. When that list comes home, I'm going to practice with him."

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[12] http://www.parentsasteachers.org/atf/cf/%7B00812ECA-A71B-4C2C-8FF3-8F16A5742EEA%7D/NCLB.pdf

Interviewer: Ok, establishing that relationship…

Yes, it's establishing that relationship but it's . . . *also*- parenting is a responsibility and it starts right now and you don't deal it away to a school district. You don't deal it away to somebody else. You still are the one ultimately held accountable. Not the school district. That it's *your* job. That the child may be in school 8 hours a day, but that means that there's so many hours a day that its still – and you are the most influential. And so if that child's going to be successful it still comes back to you. And school districts of course, *need* parents to have that sense of responsibility for the child to be successful. We *can't* be held accountable. It's a partnership and that's what they really see. School districts have also in Kansas seen for *years* that it's the welcome mat. Ready to Learn – we are the first introduction to a school system for families.

Thus, in addition to the cognitive care that "parents" (i.e.mothers) provide before their children begin school, RTL emphasizes that mothers' educational work is integral throughout their child's progression through the educational pipeline. Pamela Reeves describes children's success in the schooling system as dependent on the continual cognitive care of mothers. Good mothers do not shift responsibility for their children's education onto the schooling system, but remain actively involved (and responsible) throughout their child's educational career.

Pamela went on to explain why Kansas school districts devote resources to RTL programs:

. . . They saw the kids coming to school better prepared. And we actually participated in a research project – it's probably been 7 or 8 years ago now. Overland Park Research Training and Associates and what they showed is the parents that had participated in RTL made more contacts with the kindergarten teachers - so *they* (parents) initiated the contacts. They had more follow up on those contacts. And then what we have seen anecdotally over time is that RTL families tend to be the room mothers, the site based leadership council members, the PTO presidents – they really did form a *relationship* with the school district and part of our job is to say, "You are the

advocate for your child – in order to be an advocate you have to be involved." And we've seen that that's what families do. They get it.

RTL emphasizes how the family-school relation is integral not only for children's school readiness, but the continued success of their child and the entire school. Thus, mothers not only provide the cognitive care that will produce the skills that are necessary for success in school, but go on to be "room mothers," supporting, monitoring, and strengthening their children's educational opportunities throughout their academic career.

The NSRII identifies an array of indicators for children's school readiness in the domains of physical well-being and motor development, social and emotional development, language development and literacy, cognition and general knowledge as well as "approaches to learning" (is the child curious?). Thus, the "ready child" is defined by his/her conformity to the developmental timelines and charts that are monitored by mothers and programs like RTL.

The NSRII report further outlines more specific "readiness" skills within these domains of development; for example, the "ready child" interacts positively with peers, follows directions, recognizes the relationship between letters and sounds, knows the basic shapes, has age-appropriate fine motor skills, can count beyond the number ten, sequence patterns, and use nonstandard units of length to compare numbers. Reflecting the themes of child development discourse, literacy is highlighted as an integral characteristic of a "ready" child; "Language proficiency is a key predictor of school success. Children's emergent literacy skills at kindergarten

entry predict their reading abilities throughout their educational careers" (NSRII 2005: 68).

The discourse constructs school readiness as a multidimensional characteristic of individual children, one that can be measured and influenced by early environment. Although it is recognized that children's "early environment" includes more than their immediate family, social support for the production of school ready children via access to healthcare and preschool has not increased. RTL exemplifies the institutional strategy to focus on family as the most important producer of children's skills. I further explore this discursive theme and how it is utilized in the economic argument for early education and school readiness.

The Economic Argument for School Readiness

The institution of education for which children are to be "ready" has evolved into a standards-based system that measures student achievement through regular testing, as established by the No Child Left Behind Act (NCLB) of 2001. NCLB and its system of accountability can be viewed as "a corollary of the human capital revolution," attempting to make schooling ever more productive so that students seamlessly transform into the kinds of workers that are needed for today's economy (Rury 2005). The schooling system is identified as the means through which the nation's economy will remain globally competitive and school readiness has become central in this line of attack, as children's early years are defined as setting them on academic trajectories long before they ever begin kindergarten.

The economic argument for early childhood education and school readiness is an interdisciplinary affair. *From Neurons to Neighborhoods* editor Jack P. Shonkoff and economist James Heckman teamed up with a neurobiologist and psychiatrist to produce the paper, "Economic, Neurobiological, and Behavioral Perspectives on Building America's Future Workforce." They voice the concerns of educational and economic leaders:

> The future success of the U.S. economy will depend in part on well educated and highly resourceful workers who are capable of learning new skills so that they remain competitive in a continually changing global market. That success is in jeopardy because a growing fraction of the nation's work force will consist of adults who were raised in disadvantaged environments, a segment of the population that has historically been less likely to attain high levels of education and skill development than the general population (Knudsen et al 2006:10155).

Politicians and economists are particularly concerned about American students' academic performance in a global context. Wading through literature on school readiness, I was confronted with this concern repeatedly. For example, a New America Early Education Initiative policy brief identifies the poor performance of American students on international standardized tests as indicative of the schooling system's failure to produce globally competitive workers (Boots 2005). It cites statistics that demonstrate educational failure: By fourth grade, students in countries like Singapore, Japan, Latvia and the Russian Federation, surpass Americans in Math (Gonzales et al 2004). Other nations surpass American students in complex problem-solving skills; for example, in Japan and Korea, at least seven in ten students demonstrate this proficiency while less than half of U.S. students perform at this level (OECD 2005). Students do not perform well in literacy either, as the U.S. ranks

behind 15 other countries in literacy of 15-year olds (Olson 2005; National Center for Educational Statistics 2000). The policy brief quotes Bill Gates, "In the international competition to have the biggest and best supply of knowledge workers, America is falling behind" (Boots 2005:1)." Other texts reinforce this contention, noting that American students rank behind 23 other countries in Mathematics and behind 16 others in Science (Gonzales et al 2004). Numbers on graduation rates for high school and college lag behind other nations as reported by The Council on Competitiveness which notes that the U.S. ranks 17th and 14th respectively (Council in Competitiveness 2007).

The efficiency of the "educational pipeline" that Secretary of Education Arne Duncan referred to relies on children's ability to methodically accumulate knowledge and skills, a process that is expected to have begun "at birth." The system does not accommodate for the individual learning needs of children, in fact, the gap between "ready" and "unready" children widens as they progress through the schooling system (Bardige 2005). Thus, the poor performance of fifteen-year old students, as well as the productivity of workers, is linked to their early education and the trajectory upon which they were set before they entered the schooling system.

Increasingly, early education is discussed in terms of its economic potential. Capitalizing on this theme, RTL's national center recently hosted a business summit on the economic impact of early childhood initiatives, with prominent economist James Heckman as keynote speaker. With over 200 published papers, several books, and a website "The Heckman Equation," this University of Chicago professor has

made a career out of formulating an economic argument for early education. His website poses the question, "What's the answer to global competitiveness, better health and education outcomes, and less crime and poverty?" The answer is investing in early childhood education because "skill begets skill." The website extols Dr. Heckman:

> What [Heckman] found dramatically changes the way Americans should look at the human and economic potential of its children. . . Early investment produces the greatest return on human capital (http://www.heckmanequation.org).

The economic argument for early education reduces the problems of economic and educational failure to a matter of children's early environment, specifically their development of socially desired skills. This line of reasoning is utilized by school readiness organizations, including RTL, to validate their cause.

Heckman's economic argument utilizes neuroscience, particularly the theme of "early environment." With Dimitriy Masterov (2004) he writes in "The Productivity Argument for Investing in Children" that the importance of families in the success of children's schooling has been known since the publication of the 1966 Coleman Report. Masterov and Heckman draw on Coleman's findings, emphasizing that academic performance of children across U.S. schools is due to divergent *family environments* not the *variation in per pupil expenditure* or pupil-teacher ratios. The economic argument simplifies the issue:

> Successful schools build on the efforts of successful families. Failed schools deal in large part with children from dysfunctional families that do not provide the enriched home environments. . . (2004: 5).

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This economic argument utilizes the themes of child development, particularly the importance of "environment" in producing ready or "disadvantaged" children. In *Schools, Skills, and Synapses,* Heckman writes that:

> Adverse trends in family environments raise an environmental version of concerns about the quality of the future population analogous to the concerns expressed by the eugenics movement a century ago. Since genetics was assumed to be beyond the control of intervention, the eugenicists forecast a dim future for the human race. Recent evidence suggests that early environments play a powerful role in shaping adult outcomes.
>
> Disproportionately more American children are growing up in adverse environments and this will have adverse consequences for American society. The good news in all of this is that environments can be enhanced to promote the quality of children in ways that were thought impossible under the traditional view of genetic determination (2008: 306).

"Adverse family environments" are defined as those that are less likely to invest in their children and include those provided by young mothers, single mother families, those that experience poverty and those headed by a mother with low educational attainment (Heckman 2008). Children of two-parent "stable" unions can draw on more parental resources and thus do not require the kind of intervention that is necessitated by children of adverse family environments. The traditional family, like those in this study, with a mother who can devote copious amounts of time to the cognitive care of her children, is defined as the ideal environment for the rearing of children. Access to middle-class resources provides children with the proper skill formation for their success in schooling and beyond. Thus, Heckman argues that the best use of public resources is to invest in the early environments of "disadvantaged" children in the form of early education.

Ready to Learn monitors children's growth so that early intervention can correct children's delayed development. It provides a cost-effective means of intervention. Pamela Reeves described this process:

> So when we're able to identify that a child has a delay at eight months and hook them up – not through our program – but hook them up to the appropriate service – that they then get motor therapy or speech therapy – or whatever – but its motor therapy primarily – but at *eight months. . .* and they exit *out* of therapy at 14 months – and never look back and will never receive special education because we jumpstarted that little motor engine in their body. How exciting! You know, they never will be pulled out of a classroom to go get special services. They'll never have a label. They're never… all of that.
>
> Interviewer: And from the perspective of the school district…. the money they have…
>
> Pamela: Saved. Is *huge.* HUGE. Well they, you know, there are a lot of different studies that quote numbers like for every dollar spent here you save 7 dollars when they hit school or a dollar – or now they are quoting even as high as 17 dollars.

Indeed, economists have calculated the "return on investment" of early childhood education to be anywhere from eight dollars for every one dollar of investment, to a ratio as high as 16:1 (Rolnick & Grunewald 2003). Later intervention for children's learning, such as remedial reading and special education, is very costly and argued by economists to be a poor use of resources (Cunha & Heckman 2007). Later intervention is viewed as a poor investment, as many children never "catch up" regardless of the amount of services they have been offered (Cunha & Heckman 2007).

Thus, children's skill formation in their early environment holds the key to alleviating many social and economic problems. In particular, children's literacy

skills have received much attention in the context of economic and individual outcomes. Not only is literacy crucial for children's navigation through the system of schooling, a text-based process, but is linked to many other facets of life. The "Children of the Code" is an on-line social education project that serves as an information clearing house for those interested (teachers, policy makers, researchers) in the critical process of learning to read (learning "the code"). This project defines literacy skills as paramount to a child's future, "More than any other subject or skill, our children's futures are all but determined by how well they learn to read" (http://www.childrenofthecode.org/cotcintro.htm).

The project publishes interviews with researchers that tackle the issues of early learning and reading skills (including Shoknoff of *From Neurons to Neighborhoods,* Dr. James Heckman, and Todd Risley). An interview excerpt with Dr. Paula Tallal, Chair of Neuroscience at Rutgers University reveals how children's lack of literacy skills, are defined as the cause of a myriad of social problems:

> Every public major concern has a much higher incidence of reading problems attached to it: from juvenile delinquency, to teen pregnancy, to failure to graduate from high school, to drug problems. You take anything that we say is a major concern, and there is a higher than expected incidence, by far, of individuals who have struggled with reading or had a frank learning disability (http://www.childrenofthecode.org/cotcintro.htm).

Thus, the "unready" or "disadvantaged" child is an educational and economic burden, set on a trajectory of failure. Economists point to the necessity of intervention for such children as an investment with a high rate of return. Meanwhile, the unpaid work of middle-class mothers in their production of school ready children is taken-for-granted and accepted as the norm to which all should adhere. Few

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resources are devoted to ensuring an equality of "environments" for children to achieve the skills associated with school readiness; nevertheless, school readiness remains the focus of many institutional actors who seek to shore up the nation's educational and economic outcomes in relation to the rest of the world.

While programs like RTL have pursued the NGEP's second objective, attempting to make parents their child's "first and best teacher," the proposition that all children have access to high quality preschool programs, health care, nutrition and physical activities have proven to be out of reach. While these objectives are taken up by a range of advocacy groups, including those that work for universal preschool and health care, none of them have been realized. The initial goal that all children in America will start school ready to learn by 2000 was never realized; yet, school readiness continues to be addressed as the means through which educational and economic problems can be alleviated.

Conclusion

Institutions demand "school ready" children, yet early education continues to be a disjointed and decentralized labyrinth of programs that include those that are for-profit, non-profit, childcare centers, and home daycares. Lacking a national policy, the responsibility for this work falls on to states where it is often pushed into the private sphere of families (Kamerman & Gatenio 2003). The economic argument for investing in children's early learning upholds the doctrine of parental responsibility, positing that unless they are "at risk" *families* are responsible for their children's early years (Bowman 2003).

In her interview, Pamela Reeves voiced optimism about the future of early education in Kansas:

> Early childhood is growing in terms of awareness in our state. Probably the biggest movement right now. . . is a group called the Coalition for School Readiness. It's a group of individuals that are really trying to highlight early childhood and the needs in our state. They have a very specific agenda. . . The group was initially founded with the help of our governor and it is pointing a spotlight on early childhood. And a lot of things – as well as ready to Learn and Kansas Ready to Learn (advocacy group) – is trying to keep the spotlight on RTL. . . I feel like the stars are aligning for early childhood in our state.

Unfortunately, the fate of many states, Kansas included, is public *dis*investment in not only early childhood, but education of all kinds. In 2009 the Lawrence, Kansas school district pulled $10,000 from the budget of the local Ready to Learn program. This is an incredible financial blow to the program, as the state of Kansas matches school district funding at a rate of 1.65 for every dollar. Thus, in addition to the $10,000 removal of local funding, the program will be hit with an additional state reduction of $16,500 dollars. Retrenchment of RTL services is even more severe in Missouri where RTL services are offered through every school district. Missouri governor Jay Nixon announced that he will withhold 2 million dollars from the program this year and will slash funding by the tune of 4.1 million dollars next fiscal year.

In addition to RTL funding, widespread cuts in education are slated for the local school district. With a 5 million-dollar deficit, the Lawrence school board has proposed various "cost-cutting" measures, including changing school boundaries,

closing schools, increasing the student-teacher ratio and further reducing staff and non-mandated programs and services.

Even as school readiness is proposed as a means of furthering economic development and increasing the efficiency of the schooling system, it appears that it will remain the responsibility of mothers, regardless of their material circumstances. Universal preschool or other means of social provision for this work are indeed ambitious, if not unrealistic. Intervention for those raised in "disadvantaged" environments may be the best investment for the good of the economy; however, lack of funding reduces the likelihood that low-income or poor children will have access to the same resources as their middle-class peers. The social desire for children to enter schooling with the skills that are acquired through middle-class, educated mothering will remain. So, too, will the lack of social provision for this national goal.

From an institutional perspective, the ideal scenario is that all "families" provide the kind of early environment for their children that will produce "school readiness." While the mothers I interviewed certainly take on the goal of school readiness through their intense cognitive care, the discursive emphasis on family as the most significant factor in the school readiness equation neglects significant demographic changes. The ability of women to engage in this unpaid work is compromised by the fact that less than seven percent of all families conform to the cultural ideal of the breadwinner-homemaker model of family (Eitzen & Baca Zinn 2005) and two-thirds of all women are in the labor force (U.S. Census Bureau 2002). In addition, 33% of all children are born to single parents (U.S. Census Bureau 2004).

While half of these children likely live with unmarried, but cohabitating parents (Sigle-Rush & McLanahan 2002), this still leaves a significant number of children under the care of one parent. These demographic changes in family structure are virtually ignored by the discourse, except for the allusion to "adverse family arrangements" that lead to less investment in children's early education. The intensive mothering that cognitive care demands is an unrealistic expectation for many families.

In interviews, women did not explicitly discuss their mother-work in terms of school readiness. As mothers of babies and toddlers, their concerns centered on their child's immediate development of skills; an integral, yet, implicit process in producing "school ready" children. Their ability to engage in the cognitive care that is endorsed by RTL reflects how the family-schooling relation is not only gendered, but classed. The schooling system depends on the coordination of mothers' work with educational goals and through school readiness, seeks to align even more families with institutional objectives.

The middle-class educated mothers of this study willingly assume the role of their child's "first and best teacher." They provide the type of environment that is taken-for-granted by the discourse as one that will produce "ready" children. Thus, from this ruling perspective, these mothers do not "need" services. They will, by nature of their education and class position, develop the skills and behaviors in their children that will lead to their eventual academic and economic success. Yet, as is

this nature of the ruling relations, the everyday experiences of mothers, including their struggles, are concealed.

Chapter Six examines the abstract entity that is discursively positioned as the producer of school ready children – their "environment," more specifically, *mothers*. I explore the challenges women described as they shoulder increasing demands on their mother-work with few social supports. Examining school readiness from the perspective of middle-class mothers whose unpaid and invisible work produce this social good, reveals the personal costs of this work. As schools close, student-teacher ratios rise, and more emphasis is placed on children's development of "readiness" skills, mothers shoulder increasing demands on their carework.

CHAPTER 6
NEGOTIATING THE DEMANDS
OF MOTHERHOOD

I pulled up to Kimberly's large home located in a new development on the

Westside of town, grabbed my bag with my notebook and recorder, unbuckled my

baby from her car seat and headed up the snowy driveway. To my surprise, I was

greeted right away by a familiar face, one that I recognized from my prenatal yoga

class from the previous summer. We were both happy to see each other and meet

each other's babies; hers was seven months old and mine had just turned five months.

Kimberly led me to a small sitting room where we sat the babies down on the carpet

(with Kimberly's apology for all of the dog hair that she didn't have a chance to

vacuum before I arrived) and got right to chatting about how things had changed for

us, now that we both have two children. It became clear that Kimberly was

exasperated and really struggling with her daughter who refused to sleep through the

night without her, wanted nothing to do with her father, and demanded to be

constantly held. Kimberly was experiencing motherhood as a challenge, especially

with her children being a mere nineteen months apart in age. She told me about a

recent conversation with her brother's wife: "My sister-in-law is like, 'The children

are such a blessing' and whatever and I'm like, 'ok . . . it's not a blessing! It's not

wonderful! It's hard as hell! Just say it!'" Like all of the mothers I spoke with,

Kimberly was juggling a myriad of concerns (should her daughter be rolling over?

Why doesn't she sleep through the night? Is her two year-old watching too many

videos?) and trying to balance the demands of intensive motherhood with her own needs.

I definitely related to Kimberly's need to commiserate and vent her frustrations with motherhood. As a mother, I understand how it feels to take on the seemingly endless list of practices that comprise "good mothering" along with the never-ending household work. Like all of the mothers I spoke to, Kimberly seeks validation for the struggles she experiences and recognition for the hard work of mothering. Yet she expressed guilt for voicing her true feelings about motherhood. Half-way through our discussion, she expressed concern that she was being overly negative. "I hope this recording doesn't make me sound evil," she said. I assured her that I understood completely, I responded, "No, no! My children are seven years a part [in age] and I'm going crazy." Kimberly replied, "I'm wacked, ok? See, that just makes me feel better . . . It's really hard!"

This chapter explores "the family," that abstract entity society holds responsible for the proper development, education, and economic potential of children. Referred to by institutions as "children's early environment" or "family," it is really *mothers* who take on the bulk of this work and feel the weight of the responsibility. Without prompting, women explained to me the hardships of being their child(ren)'s "first and best teacher", the isolation of mothering, and their need for companionship and validation. From an institutional perspective, these middle-class women achieve the mothering ideal and do not "need" intervention (such as RTL services); yet when investigating their everyday experiences, it becomes

apparent that these mothers struggle to balance their own needs with society's demands. I will explain the isolation of mothers and their efforts to alleviate it through creating networks ("a tribe") and developing a relationship with their parent educator.

Mothers seek social experiences to assuage the isolation of mothering. The private family home in conjunction with the cultural ideal of the nuclear family (with mother as the primary caregiver), are powerful barriers to experiencing social connection. Most of the mothers in this study have organized their days so that they are with their children while their partner is at work, leaving them alone all day with the endless needs and demands of a baby, toddler, or both. For these women, seeking social connection means finding a tribe, escaping the confines of the home, and enjoying the companionship of their parent educator.

Isolated Mothering

"It takes a village to raise a child" goes the African proverb. Although it has become cliché, this proverb reflects an entirely different orientation to childrearing than is experienced in the U.S.; the idea that there should be collective responsibility for the well-being of a society's children. U.S. culture upholds a narrow ideal of child-rearing that poises a child's biological mother as the best and proper caregiver – an ideal upheld in each of the families that participated in my research. So while a child may be cared for by an entire village in one society, in the U.S., children are assigned one or two caregivers, with mother as the ultimate authority. This section

will explore women's experiences with "isolated mothering" which contrasts quite strongly with the village concept.

Most mothers I spoke with are at home all day with their children without their partners – either as stay-at-home or work-at-home mothers (or one that arranged split shifts with her partner.) For them, the loneliness of isolated mothering was most acute and something I could understand. I became involved with RTL just as my second daughter was born and I transitioned from working outside the home to being a work-from-home mother. I attended RTL playgroups with my baby on a regular basis, thankful that my research coincided with my need to "get out of the house" and enjoy the company of other mothers. This sentiment was shared time and again by mothers I encountered at RTL playgroups. Brenda, first-time mother, expressed her feeling of being overwhelmed by the isolation of being at home all day in the middle of a Kansas winter with a newborn baby. "I'll go nuts if I don't get out for a while!" she exclaimed. We all understood: mothering in isolation is difficult and something all of us wanted to escape. All of us mothers, more often than not, are hidden away behind the walls of our private home. RTL playgroups and other structured activities in the community provide the opportunity for mothers to make social connections and escape isolation, even if for just an hour.

Katie talked about the intensity of mothering and the high level of anxiety she encountered when she became a mother. She identified isolation as the greatest challenge of mothering:

> It's a hard job because you feel like… I don't know. There's SO many people doing the same thing as you but you kind of feel like – *alone* – because you are the only one raising *your* kid."

More often than not, mothers perform their work in hidden, private locations. As demonstrated by this research, mothers' work is certainly coordinated by "outside" forces such as scientific information, yet the day-to-day grind of caring for babies and toddlers is privatized. Katie is expected to know what is best for *her* son, to ensure Peyton has all of his needs taken care of, meanwhile, I focus on my own baby and her seemingly endless requirements. We are doing the same work in very isolated ways.

Parent educator Deidre (mother of two) spoke to me about her ideas regarding the changes in society that has led to the increased isolation of stay-at-home mothers:

> I think that stay-at-home mothers are more isolated today than ever. It used to be – when my mom stayed at home – it used to be that everybody stayed at home and so you could go next door and you could have coffee. You could – you just had more resources then.

Deidre went on to explain her strong belief that an important component of good mothering is "setting up systems" of support. She viewed this as the responsibility of individual mothers.

As described in the previous chapter, the view of "family" from a ruling perspective is as an entity that can easily absorb the endless demands placed upon it. Especially middle-class educated families are viewed as the proper site for the early education of children: These mothers are not viewed as "high risk" – they are viewed as naturally aligning their mothering practices with institutional demands. Yet Deidre balked at the idea that "high risk" and the need for support is limited to mothers who lack material resources.

> [The need for support] goes across the board, you know. Low, middle, high [income]. It's across the board. Stress and the need for support – that's one of the things that's so universal about parenting… is we *all* need support because it's a very hard job and it's a job that never ends. It's not like you can just say "Ok, I'm gonna stop being a parent," you know? It's not easier when you work inside the home, it's not easier when you work outside the home. There's no rhyme or reason to it.
>
> A lot of moms of first time babies – it's all of a sudden they go from working outside the home to a – from a high powered job to staying at home and its supposed to be wonderful and the dream that they always wanted and they get there and they don't know how to set up systems for themselves to make it work. You know, so sometimes it's things as simple as system-building. Let's find some new friends because going to lunch and rushing for thirty minutes doesn't work with a baby, especially when they decide as soon as you sit down – that she needs to be fed and so then you've got to feed the baby and then your lunch is cold and people are going - we've got to go back to work – you know? So, there's times and places that you have to set up new systems for yourself.

For the mothers of this study, RTL becomes part of that "system" of mothers supporting mothers. Pamela Reeves, program coordinator for the Blue Valley program, a community known for its wealth and resources, discussed why even those parents that have access to high income are in need of the support provided by RTL:

> I often have legislators and others say – why in Blue Valley? You have families that have income they can purchase services they can purchase quality care… what do you need RTL for? Where do you get 1,000 families that *need* RTL? And I always say parenting is a job for which very few have had training – but it's a job that lasts a lifetime and I have worked many times with dual-income, dual-degree professionals who have never touched a child before until its placed in their hands.

Yes, RTL ensures that mothers are exposed to child development knowledge and that they are schooled in the ways to ensure their child's proper brain development. Yet, just as important, although less discussed, is the supportive role of this program.

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Pamela went on to explain how RTL helps to build community and assist parents in

making connections to other organizations:

> That's another key part of RTL. Families don't grow up in programs.
> Families grow up in communities. So, even though a family may be involved
> in RTL and they're a part of our program, our job is to make sure they know
> of all the other resources in a community. So in Blue Valley for example, we
> – in the birth to three population, for example – they're a very transient group
> of people. They may be upwardly mobile, but they're upwardly "mobile"
> (makes quotation gesture) meaning – companies don't see them as needing to
> put down roots because their children are not in school so they may move in
> and move out of our community – which means they don't know a doctor,
> they have no faith community, they have no friends, they have no support
> system. Their support system may be halfway across the country. So one of
> the biggest parts of our program is networking families so they can meet other
> families like themselves and then finding the other community resources
> besides the one we offer.

On paper, most of the families involved in RTL in both the Blue Valley community

and Lawrence, are not "high risk." They are two-parent, educated, often high-income

families with access to resources. Yet, lack of community and social connection is a

very real weakness of the way in which families are socially organized. An important

role of RTL is to address this vulnerability, one that can lead any mother to the depths

of "high-risk". Deidre explained how she believes we are all "one step away from

being 'high risk:'"

> I would say 'high risk' is – high risk is a term that you can put for somebody
> that is specifically in – you know, some obvious high risk situations – maybe
> an abusive relationship, maybe low mental functioning, financial need,
> homelessness, those are all of our regular – easily categorized – high-risk
> folks. But we have a lot of high- risk families that you know, may live in a
> half- -a million dollar home. Maybe they have a premature child. Maybe they
> have a child with a disability. Maybe they have high-stress family. Maybe
> their husband is gone all the time or they're a single parent and they don't
> have resources. So – I mean, we're all just one second away from high risk.
> You know, *unfortunately* that's the reality of life.

So, we're all just one step away from it so I think that 'high risk' – I go to see families that are low income level, maybe they live in public housing but they have great relationships, there's lots of love. Yeah, they don't have a lot of food, but they figure out, hey, we set them up with food pantries, call these people – call those people – give them other resources. They may not have a lot of money and on paper they're high risk. But when you go, the baby's doing things and you go Oh look at this activity. The mom, next time you come has six bowls out in different places (laugh). [An RTL "homework" activity]. You know, so it is – high risk is really relative.

This perspective mirrors that of the institutional actors discussed in Chapter Five, especially those that focus on the quality of children's early environment and the emphasis placed on the *quality of parenting*, independent of income, wealth, or education. Deidre's explanation is two-fold: Good parenting is not dependent on wealth, income, or education and even the most educated, wealthy, and high-income women can experience motherhood as highly stressful.

Finding a Tribe

While women do not insist that the "village" take responsibility for the rearing of their child(ren); they do recognize the unfeasibility of isolated mothering. In response, mothers actively seek out a tribe with which they can share thoughts, feelings, company, and knowledge. Mothers maintain ultimate responsibility for the well-being of their child. Thus, the tribe that women acquire is to support *them,* not share their childrearing responsibilities. Women craft their tribe from contacts they make through RTL playgroups and other mothering groups such as La Leche League and the local AP group. In addition, for many mothers, parent educators become an important part of the tribe.

RTL play groups take place at the organization's hub, the community's early learning center for "at-risk" children which is located in an older, established neighborhood on the east side of town. The large classroom inside the school that is devoted to RTL playgroups is a child's dream come true. Stocked with toys of every kind, there are developmentally-appropriate toys for every age. A corner of the room is devoted to infant play, padded with a large mirror and bar for baby to pull up on, "baby gyms" for babies to lie underneath and bat at, board books and farm animals. There is an area for dress-up play with firefighter hats, aprons, and other gear; a musical instrument bin, a play kitchen complete with refrigerator and shopping carts, and a slide and climbing structure. At the beginning of my research, playgroups were unstructured: the one hour consisted of mothers arriving, signing in, and finding an area for their child to play while they chatted with other mothers. The parent educator-host mingled, answered questions, offered information, and assisted mothers with checking out books or toys from their lending library. Unfortunately, over the course of the year, I watched the playgroups take on a more pedagogical and structured form with "lessons" and story time, leaving less time for informal chatting between mothers.

Grace, mother of two and leader of the local La Leche League (LLL), told me that she sought out RTL as a new mother because "I just needed somewhere to be." RTL's regular playgroups were, at the time, within walking distance from her home and gave her a structured activity to participate in, with the hope of connecting with other mothers. Although she eventually gravitated towards LLL and the attachment

mothers she met through that group, RTL playgroups helped her to escape the

confines of her home in the early years of motherhood. Grace echoed Kimberly's

sentiments, and was adamant about the need of mothers to have support and candid

conversation about their experiences:

> It is *absolutely* necessary to have someone to commiserate with I think. Um, yeah – being a parent is super and you love your kid and you'd never change any of it but I think its absolutely necessary for women and fathers and everybody to know that its ok every once in a while to say (whispering) I don't want my kid today. Do you ever feel like shakin 'em? I just want to shake 'em. And of course you have these thoughts and these feelings – I think that it's so very VERY important that you be allowed to express them – with people who know you and understand – have been there, maybe and also know that you would never do that. You can't walk up to most people in the world and say (whisper) sometimes I want to smack him! REALLY HARD! REALLY HARD! Ya know? You know, I had a dream that I threw him against the wall it was really great! Ya know? Obviously, you want to be around people who *know* that feeling, *know* the intense emotions and will allow you to say those things without it changing their opinion of you or your child or them calling SRS [child protective services] or whatever (laugh).

Grace described how in the early days of becoming a mother she sought social

interaction, including RTL playgroups. Ultimately, she realized that her mothering

philosophy and practices aligned more with those mothers she met through La Leche

League and the community's Attachment Parenting (AP) group.

> I didn't really make any friends [at RTL playgroup] but at least I was there – I was with some other mothers. I think pretty quickly, over the first several months I realized that I wanted to be with the La Leche League people more than those people. Not that I can categorize. I'm sure there are some AP families involved in RTL – but obviously there are gobs of them in the AP group and in La Leche League group.

Nonetheless, Grace remained involved in RTL, continuing to enjoy her parent

educator's company every month. She described her parent educator, Janet as

Super. . . She's hilarious. Great awesome lady. I love her very much. She seems like a great person to just be friends with. She's awesome. So I enjoyed her very much.

For many of the mothers, the relationship formed with her parent educator is a great source of comfort and companionship, a theme I will discuss later. Most mothers, in interviews and at playgroups, voiced the strong desire to connect with other mothers, to find a tribe or just "get out of the house."

Kimberly described how being confined to her home with her two children for a week due to illness was harmful to her mental health:

Last week when Leo had bronchitis and we were in the house all week, we didn't get to get out *at all.* It was like, ok, this is just downright dangerous! I just… you know? Grocery shopping cannot be my only interaction with other adults. . . we've *got* to do something here.

With the way that family is set up for these middle-class women, they must participate in some kind of structured or planned activity to connect with other adults during the day. Kelly, mother of two children 17 months apart, takes her children to two RTL playgroups a month, library story time every week and the indoors "open gym" at least once a week. "It's cool because we're seeing the same people at these places and getting to know them." Kelly feels a sense of community through her participation in these groups.

Being involved in these structured activities during the day is important for mothers; it gives them the opportunity to escape the isolation of the home and provides the opportunity to connect with other mothers who participate. In a small college town of 90,000 people, I know from experience how quickly mothers get to know each other by meeting up at RTL playgroups, the pool, library, and city gym.

These social connections, even though they may not lead to intimate friendships, is enough of a "tribe" to help mothers feel supported and part of a community.

When I asked Isabella, mother of two boys, her favorite part of being involved in RTL, she did not hesitate. Even with a highly involved partner, she values most the interaction with her parent educator.

> I guess talking to someone. I – you know – sometimes as a parent you're doing things and you feel like you're doing things in a vacuum and I suppose if I was closer to my family or other people with same experiences it would be different. But I'm not and someone who sort of puts your experience in a larger picture is very helpful.

Tracy experienced her first year of motherhood as fraught with anxiety and stress. She voiced appreciation for the support of her parent educator, who eventually became her close friend:

> I just think it's just nice especially in the beginning, ya know, you're home, at least I was. . . and first time mother. . . you're more insecure. . . you're not really sure. . . you think you're going to say the wrong thing and ruin your child and (laugh) you know, I mean its ' what are you going to do?' You want everything just. . . and so. . . I was just looking for lots of resources to help and you know, and help find ways to be the best parent I can. And so you know Rebecca would come in and just the advice, and you know, just sharing, and when I had ideas, getting answers from someone that first of all, has been there, second of all, has experience and education and that just helps a lot.

All of the parent educators are mothers themselves, which is crucial to their ability to relate to women's feelings and gives them the ability to speak from their own hands-on experience. Speaking "mother to mother" and forming a relationship with her parent educator was a great support for many of the mothers that I spoke with.

Mother to Mother

Kimberly clearly enjoyed our interview, using it as an opportunity to vent her frustrations and feel validation for her struggles, and I found myself doing the same with her. For sure, the birth of my second child brought much joy to my life but the struggles, isolation and anxiety, especially the first year, were overwhelming. As I shared some of my own feelings with her, I apologized, "See that's what I do. I get to talking!" Kimberly was not sorry for my sharing at all, "That's what moms do! You could be a parent educator and we could just talk about our babies!" While Kimberly was just being playful with her exclamation that I could be a parent educator, she spoke for many mothers when she voiced the importance of firsthand experience when relating to mothers. It is important that parent educators can truly understand, from experience, the darker side of motherhood: The side that is much less visible in public life and rarely talked about.

Parent educators spoke to the importance of experience as well. Abigail is a mother of two, but started her work as a parent educator before she had children. She talked about how her experience as a mother improved her work, enabling her to understand the struggles of motherhood:

> Well, one thing, when I first started and I might see a mom of a newborn and in my mind at the time I was like, "Oh, this is so amazing, you've got this new baby and how wonderful that is!" 'cause I knew that that was hopefully in the future. But I hadn't, I mean, I was young and my friends didn't have babies. I had no idea of how physically and emotionally what your body goes through, and you know . . .maybe it's a little bit better now, but back then, I don't remember my mom or older people telling me "It's hard." I mean, I knew you didn't get a lot of sleep, but nobody talked about more than that or the "baby blues." . . .I quickly learned [as a mother/parent educator] to you know, tiptoe in and ask how things were going and obviously, be positive, not

like come in and say "Ok, so how bad is it? Are you in the black hole?" I mean, have a sense of humor about it, yet I'm sensitive to the fact that it may not be totally amazing.

… I think just developing that empathy and knowing that it's a *very* hard job, not to say that a parent educator that hasn't had kids can't do the job. But it's definitely a very different viewpoint. And I would imagine that there are some families that are like, "Well, you don't have kids, how would you know what you're talking about?" But, I think when it comes down to training and knowledge about brain development and development itself - whether you have kids or not – it's all important information. But you can probably come across differently when you have your own kids and can relate to those experiences.

Deidre also spoke to me about how becoming a mother changed her perspective and strengthened her ability to relate to mothers:

I think that being a parent after teaching for years and working with parents I think *being* a parent gives you a different perspective. I don't think you have to be a parent to be a good parent educator but I think for me, it gives me a much more compassionate, empathetic understanding, you know. Yeah, this is what you decided to do *before* you had this baby. Now you're in the midst of it and now you need to rethink things you know.

Deidre spoke of the difference between understanding parenting from a theoretical stance versus knowing the ins and outs through experience. This was important to Susan, mother of three. She expressed only gratitude for her parent educator's willingness "to help *me!* So many people are just out there for a buck, but she's just there to help!" She went on to mention that her parent educator was a mother herself and shared her experiences with Jean. I asked her if she thought it important for parent educators to be parents:

Oh, yes. Because you know, sometimes research works in theory but you know, that's *theory,* that doesn't take into consideration the human aspect behind all the words and numbers on the page.

Kristen is the one mother I spoke whose participation in the program occurred several years ago. She met with a parent educator at the time who was fresh out of college and had no children of her own. Kristen described how she disliked her interactions with this childless parent educator and even thought about leaving the program, "I just didn't think it would be a good use of my time" she told me. I asked Kristen if she thought it important that parent educators are mothers themselves:

> I definitely do. Oh, I definitely do – absolutely . . . I mean I just think – especially for first timers – to be able to you know, (pause) real life situations or you know, experiences – I think people can learn from and grow from them – I don't know – I think – I just think you can relate better to them and have a better understanding through personal experience.

Ultimately, Kristen only had two or three meetings with her parent educator before she was replaced by another who was a mother of three grown children. Kristen felt more comfortable with her second parent educator and ended up enjoying her time in RTL.

Although every mother I spoke with valued the fact that parent educators can speak from experience and share more than theoretical ideas about childrearing, this type of sharing is officially against RTL protocol. Parent educators are instructed to refrain from sharing their own experiences and to keep the information they share with mothers research-based and "objective." Program coordinator and long-time parent educator Janet Erikson spoke to this in our interview:

> . . . I have parents looking to me and going, "What did you do?" Well, guess what? We're not supposed to be talking about ourselves at home visits. We're talking about *research* and some choices that the parent can make, not what worked for us.

Despite this, all of the parent educators draw from and share their personal experiences. Rebecca told me that sometimes you just need to relate "mom to mom." I asked her about sharing her experiences:

> I mean, are we supposed to? No. But, I think its pretty, common for all of us to do it every once in a while, especially if they ask, "What did you do?" You know? Because I think that you can hear all kinds of statistics and research and scientifically- based information, but sometimes you know, you just want to say, "Mom-to-mom, tell me what you did, please. Have you *ever* experienced this?" You know, and usually, that's when I'll try to give an example or, if I have an example of something that my kids have done or how I've worked with my kids in the past that relates to whatever we're talking about, then I'll share a story. Again, we're really not supposed to do that very much, if at all, but I think that it's ok every once in a while.

Parent educator Alexis described to me her rule of thumb when sharing experiences: "share your own failures, share other people's successes." She explained how this helps build rapport, makes her more "approachable" and shakes the image of parent educator – as – perfect-parent:

> And so, I try to do that – to let them know I am human. I am not here because I am the perfect parent. I am here because I would *also* like to be a good parent and this is a daily reminder for me how I can be with *my* kids and how children are wonderful and seeing the world through their eyes… it's an amazing place and sometimes we forget that – because they make us crazy, you know? So yes, I share stories, most of [my families] know my kids.

Indeed, parent educators spoke about how they are often viewed as "perfect," because of their expertise in child development and behavior, as if they have no problems with their own children. Of course this is not the case. Abigail noted that she often checks her parent educator skills at the door when returning home:

> People will be like, "Oh, I bet your kids are just so well behaved!" And I'm like, "No, no, no, no, no, no." When I come home, any parent educator brain I have is *mush* in relation to my own kids and you would probably be shocked

at how I respond to my three and a half-year old because he pushes my buttons – a lot!

Rebecca shared the sentiment stating:

> I always joke with people, I'm like, "I need a parent educator!" (laugh). Because you know, sometimes you feel like you *do* need one! You know? I *am* one, but still I need some other advice. I need – we don't have all the answers and that's a misconception. A lot of our families think that we have all of the answers and that we have perfect kids and that we're perfect parents and that's not the case *at al!* I really try to tell my parents that, you know? That we're just trained. It doesn't mean that we're experts. It doesn't mean we're perfect parents.

Sharing their own struggles with parenting enables parent educators to debunk the idea that they "know it all." Through their sharing, they humanize themselves, showing women that they share the common struggles of mothering. Thus, the façade of RTL is another mother – a peer. The child development information and advice is not disseminated by a researcher wearing a white lab coat. It is shared mother to mother.

Having experiential knowledge about mothering guides parent educators' work; through sharing, they build rapport and relationships with other mothers. In addition, their own personal struggles direct their interactions at times. For example, Alexis described how her son's vision problems heighten her attention to this realm of development:

> And my younger son has had eye surgery twice and I share that a lot when I talk about vision of course, because then they'll know why I'm such a freak about the vision issues and why I want to make them go to the doctor really fast because I've had eye surgeries on my son and so I don't want people to blow that off – so…

Other parent educators mentioned potty training and sleep problems with their own children that taught them valuable lessons that they share with mothers. Deidre and Abigail experienced postpartum depression, setting them up to effectively handle this occurrence in mothers they visit. Abigail shared with me how her own experience with postpartum depression prepared her for the intense work of supporting a mother who struggled with an intense case of it:

> Fairly recently in the last year I did have a mom who suffered from severe postpartum depression and she ended up needing medication and she was an entirely different person *on* that medication. She needed to be on it. But I would go on visits and I would feel kind of like she was not the same person that she was. I can remember being on a visit where she was sobbing and like hyperventilating and the husband was there and it was kind of like ooh, this is weird. . . And I just remember, I sat next to her and just, I think I held or hand and just patted her back or something and, at that time, I already had my two kids and I suffered from some postpartum – not nearly as severe as her – but I could relate. And she had a lot of anxiety and that's kind of what I had. It wasn't like a sadness or a detached feeling from my kids, it was just this overwhelming feeling of – *how am I going to do all this*? And so I could relate.

Deidre also experienced post partum depression after the birth of her first child. No one had ever talked to her about this condition, "I would have *loved* to have known what was going on with me. At that time I didn't know. To have someone say, 'Hey you know what? I've experienced that, too' would have been powerful." Deidre makes a concerted effort to share information about postpartum depression with her mothers and to watch for signs of it:

>   Every mother that I see who is pregnant – I talk about postpartum depression *before* they have the baby. And it's in the curriculum and I also talk about it afterwards, too. Some people are really open and honest with it. I had one family – one mom – who was just totally against medication – so, and it wasn't on paper – on paper this family was not at risk! But I – I had the ability to go ahead and say 'Ok, I need to see this family more often' you

know? And I'd say, "You need to call the doctor. You need to tell the doctor you're feeling like this." Because I'm not a medical person but I could be there to support her because I was one of the few outlets that she had at the time.

Indeed, a parent educator can become a valuable ally, an advocate, even a friend.

Jamie, a full-time school social worker, found great relief on those days she met with Janet, her parent educator. Her home visits with Janet made her feel nurtured and comforted:

> Another thing that is very *personal* for me, was it was nice to finally have someone help *me.* (laughs) I was exhausted, you know. I help… that's my job – I help *all* – I help *everyone.* (laughs) And I'm supposed to be the expert on everything – so it was so nice when I was on my way home from work – I'd have to rush – get done with work the time I'm *supposed* to be done – pick up Sophie, pick up Ada – bring 'em home and meet Janet here, you know. But it was great to think about, "I'm going to have someone who will help *me* and I can sit back, relax, and get information from someone else!" So that, that was another benefit– not directly for Ada, but it was nice for *me* as a parent.

Tracy also felt comforted by her parent educator's monthly visit. Her parent educator, Rebecca, gently reminded Tracy that she must take care of her own needs:

> I think it's important to learn that you have to take care of yourself. To be able to make sure you're ok, you don't have to give every single thing – because you *have* to be ok (to be able to be ok for your child. You have to be strong to be able to be strong for them. So, Rebecca's really good at supporting that, 'Make sure you take "you" time. . . make sure, you know, *you're* ok.' And that's one thing that's really good is that they always ask how *you're* doing and its not just about your child. . . so, its about helping you become a better parent and also supporting you as a person, so.

Tracy went on to describe how she and Rebecca developed an intimate friendship over time. Even after she is no longer involved RTL, Tracy plans on continuing her relationship with her parent educator.

> Yeah, she has two kids and so I think with Rebecca – I don't know – we have a lot in common so I think we've almost – you know there's a line and she

and I realize that – that its parent educator and then it goes into friends. And so we try really hard during the visits – that's just parent educator, but on the side, I mean I don't think. I think she said, ya know, all the parent educators eventually have someone that they're closer to… some families they're closer to… but ya know, I… almost like when we stop doing this, Rebecca and I will be friends. I mean, its just, ya know. She has kids – yeah. She shares… well, I ask. She doesn't volunteer right away – will tell me, ya know, different things. And she'll say how she did it but she's not like: This is the way you should do it and that's the only way. She's very good with when I ask – well, how did it work for you? She'll tell me how it works for her and you know – there are some things that yeah, this is the way you do it, but *I* still do it this way.

Jackie concurred. She experienced her parent educator's visits as nurturing, a

reminder to be good to herself.

> One thing that Rebecca is really good about and always has been – I don't know how to put it except for checking on *me*. You know, checking and making sure that I'm doing good, that *I'm* ok – what's going on in *my* life…

When asked if her educator feels like an expert coming over to her house to

evaluate her parenting, Maya replied:

> No, she feels like another mom coming over but she has you know – she has specifically child development type information and stuff with her but – and she is also a mom. I think her younger daughter is only a year or so older than Linus… so she's also in the thick of parenting young children.

Parent educators do not present themselves to mothers as "experts." As middle-class,

educated mothers, they are peers, (sometimes friends) to mothers that they visit.

Parent educator Rebecca shunned the label of "expert:"

> We don't really like to say "expert." We're trained, we're specialists, I guess, maybe… that sounds better to me than "expert."

And that's really the bottom line: Parent educators are mothers with the same

struggles and frustrations experienced by other middle-class educated mothers. They

visit women in their home and drop off the latest neuroscience while providing

companionship, validation, and support. Through their work, parent educators take the abstract faceless information produced by universities and make it personal and relevant for mothers while sharing their own struggles and providing much needed companionship to very isolated mothers.

Conclusion

I have described how schools have come to rely on mothers being ready, willing and able to produce their children as "ready for school." Mothers are incorporated into the schooling project through various means, including participation in RTL and their participation in the child development discourse. For this class of women, it is taken for granted that they will perform this work and produce "school ready" children. What remains hidden from institutional view are the struggles and the negative impact motherhood has on women's lives. We don't expect middle-class mothers to be "high risk" – we don't really expect mothers as a group to have needs of their own or to be harmed by the never-ending demands placed on their mothering work. Yet, women *do* have needs; needs that are not served by the way family and work are currently arranged; thus, they seek companionship through various means, including participation in a parent education program.

CHAPTER 7
CONCLUSION

Summary and Implications of Findings

Utilizing institutional ethnography, this dissertation explicates how the everyday practices of mothers are constrained and coordinated by gendered and class-based discourses that prescribe not only what *children* should be, but what *mothers* should be. Children are learners, future students, and future workers. Mothers are their children's first and best teacher, a role that they must continue throughout their child's progression through the "educational pipeline." All of the mothers of this study consent to and strengthen these constructions through their everyday practices, doing what they believe is "best" for their child.

In talking with mothers, I employed a "generous conception of work" (Smith 2005) to unearth the myriad of tasks and duties, as well as concerns and feelings that are subsumed under the concepts "carework" and "child-rearing." I discovered that while there is variation in how women construct what they believe are the "best" mothering practices, all of the women subscribe to "intensive mothering" and have the resources of time and money to invest in this philosophy. They research, reflect on, and teach their partners what they arrive at as the "best" methods of child-rearing. I found that regardless of their paid employment status, mothers take on the role of "executive parent" and assume responsibility for child-rearing decisions large and small.

Mothers tackle decisions regarding the physical, emotional and disciplinary needs of their children; especially in regards to infant feeding, sleep, and discipline.

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As middle-class, educated mothers they make every effort to conform to the expert-defined prescriptions that "breast is best" and the doctrine that reasoning with, not spanking, children is most effective in shaping their behavior. Sleep is another highly contentious realm of child-rearing that demands mothers' research, reflection, and concern. Women's philosophies as "attachment" or "conventional" guide their choice to co-sleep with their child or let their baby "cry it out" through sleep training. Regardless of the topic, women are to make educated choices in all realms of child-rearing and for the most part, these choices are respected by RTL parent educators. Even if her specific mothering practices breach convention (e.g. extended nursing or elimination communication) so long as she upholds the most important "rule" of all – intensive mothering – she is regarded by the program as a "good mother."

Further exploration of mothers' work reveals that the concerns and practices of women extend beyond caring for children's physical, emotional, and disciplinary needs. Good mothers also provide "cognitive care" by monitoring and facilitating their child(ren)'s development. Thus, mothers' procedures for constructing "best" practices draws from and reinforces the child development discourse which posits a child's biological age as the most significant indicator of what he or she "should" be doing and what mothers ought to monitor and teach. As intensive mothers, these women conform to the expectations of RTL and engage in practices that are aligned with the objectives of the parent education program, hooking them into the social relations of schooling.

The concept *social relation* refers to the "the coordination of people's doings in social sequences that are *not necessarily visible or are not intentional* or managed" (Griffith & Smith 2005:124, emphasis mine). One of the explicit goals of RTL is to enhance children's school readiness; yet, this goal is not one that mothers spoke of or identified as guiding their work. As mothers of babies and toddlers, their concerns center on the immediate needs of their child, those needs defined for them through the child development information that they receive through RTL and beyond. Their commitment to scientifically-guided intensive mothering ensures that they will take on the role of their child's "first and best teacher" and provide early learning experiences that are integral for their child(ren)'s future schooling success and are aligned with the institutional goals of education.

Through their involvement with RTL, mothers receive lessons in neuroscience, learning the significance of early environment for the development of their child's brain and the connections that are formed. Through home visits and parental handouts, mothers learn that they must shape their child's environment in ways that will capitalize on "windows of opportunity" for optimal brain development. Mothers are very vigilant in tracking their children's development and shape their practices to conform to institutional expectations. They count the number of words their child can say, ensure that their baby has had enough "tummy time," and teach them how to crawl, all in the effort to produce optimal outcomes. The capacity of these "good mothers" to engage in the intense cognitive care of their child(ren) differentiates them from "other" mothers, those that do not appropriately shape their

child's environment, engage in intensive mothering, or pursue intervention when recommended by RTL. In this way, the child development discourse not only produces categories of children; "normal" or "behind," but mothers as "good" or "deficient."

The discursive construction of "good mothering" reflects how the ruling relations are mediated through dominant ideologies that reflect the interests of those in power (Smith 2005). Ruling ideas of "good mothering" require mothers to commit to intensive mothering and consume copious amounts of expert knowledge to which their mothering practices must conform. In short, good mothering supports the institutional goal of school readiness while the practices of "other mothers" fall short of ruling expectations. As is characteristic of the ruling relations, the material circumstances of people's everyday lives are disregarded through the abstract conceptual practices of naming and defining the world (Smith 1990).

In *Class Questions Feminist Answers,* Joan Acker defines social class as the "differing and unequal situations in access and control over the means of provisioning and survival" (2005:55). Clearly not all mothers have the resources to support intensive mothering and the cognitive care it demands. One important "resource" is comfort with professional and expert knowledge. The middle-class, educated women of this study described a definite comfort with and preference for expert knowledge in their constructions of "good mothering." Their comfort with the expert gaze is enough to even be critical of some of RTL's information, as was demonstrated by AP mothers, but always in a way that reinforces intensive mothering. The child

development discourse circumscribes "good parenting" as *middle-class* parenting and the extended social relations within which women participate, coordinate their work with the schooling system. As middle-class mothers imbue their children with the skills and behaviors that are institutionally rewarded, the system of social class is maintained and strengthened.

Gender inequality is evident in this process as well. Even as many of the mothers revealed progressive ideas about gender, the division of caring labor in their family reflects the traditional perspective that mothers are children's best caregivers Mothers like those in this study willingly assume responsibility for their child's early education and development, reinforcing the social construction of mothers as the proper caregiver and "best teacher" of babies and toddlers. In addition, gender inequality is strengthened by the way in which motherhood, instead of being a source of solidarity for women, promotes divisiveness instead. Mothering and child development discourses create categories of "good" and "bad" mothering; categories that mothers often take for granted and strengthen through their everyday practices.

Even as I wish to honor the agency of mothers as active participants in this process, I recognize the incredible power differential that exists between the "public" realm of knowledge production (ruling relations) and the "private" realm of mothering. As currently constructed in the U.S., early education and school readiness remain largely the private responsibility of individual "families" (which is really a euphemism for mothers.) The early education of children is of concern for those in ruling positions because of the public consequences of this work. Mothers' work is

problematized and in need of "intervention" when women lack the capacity to engage in middle-class child-rearing practices.

The institutional goal of school readiness (which is linked to the success of the educational and economic sectors of society) can only be achieved if all children have access to middle-class resources like health care, early education and proper housing that provide the circumstances that set them on a trajectory of "success" within the schooling system. Early education (for "disadvantaged" children) is targeted as the most cost-effective means of leveling the playing field; yet, it ignores the other dimensions of children's well-being. Nonetheless, within the context of budget deficits and cuts in services, even this approach is unlikely.

Thus, the work of educated, middle-class mothers like those of this study is a taken-for-granted reality upon which the institution of education relies. Institutional actors desire a standardized child with the skills and abilities that are imbued through middle-class socialization; yet wide variation in children's early environments will continue to reproduce unequal access to early education and divergent skill levels upon kindergarten entry. Responsibility for this work is pushed away from centers of wealth and power (government, corporations, etc.) and into the household where women, working in the best interests of their child(ren) do the work of coordinating their mothering efforts with the demands of the schooling system (Acker 2005).

This project began before the birth of my second child who, as an infant, accompanied me to interviews with mothers and parent educators and slept in a sling wrapped tight around my body as I transcribed many of the interviews. As I write

this conclusion, my daughter is two years-old and I have witnessed her amazing transformation from baby to toddler, a truly mind-boggling period of growth in so many ways. There is no doubt that the first years of a child's life are a period of tremendous growth and learning, this is a biologically-rooted reality. Yet, what we expect of our babies and toddlers is socially-derived. My study explores how the potential for children's capabilities is discursively framed so that mothers' attention is centered on those skills and abilities that will not only serve her child(ren) out in the "real world," but even more importantly, the "real world" benefits from the eventual contributions of the optimally developed child who goes on to be a productive student and worker.

To this end, RTL does not instruct mothers to track children's artistic abilities or encourage them to count the number of times a child shows empathy to another person throughout the day. Mothers learn through their participation in RTL that "good mothers" monitor and facilitate a child's development of skills that will serve them in the current social order. How might children's capabilities be re-imagined within a different social order, one that does not define children's needs in terms of their eventual contributions to capitalism? Although an answer to this question is beyond the scope of this dissertation, this research raises concern with the ever-increasing "trickle down" process of education. So that children do well on standardized tests in high school, they must enter the schooling system "ready to learn." In order to be "ready to learn" children must be taught from birth, their words

counted, colors taught, books read. Not only does this put demands on mothers, but on children, to become what those in ruling positions define as optimal.

The entire society benefits from the optimally-developed child who does well in school and goes on to be a productive worker. Thus, if the benefits are socialized, why aren't the costs? Nancy Folbre (1994) argues that a well-raised child is a public good and those who spend relatively little time child-rearing "are free riding on parental labor" (86). As this study demonstrates, it is really *mothers'* labor that supports and benefits the entire society. To redistribute the costs of child-rearing, we need universal preschool and health care to support the health and development of all children. In addition, the schooling system needs to accommodate the wide range of children's skills and abilities with smaller class sizes, more teachers, and more ways than standardized testing to determine educational outcomes.

Mothers' work cannot be the repository for an endless list of demands. As Chapter Six described, women experience motherhood as demanding and isolating. Nearly 35 years ago, Adrienne Rich envisioned the possibility that women experience motherhood differently; as *empowering* (1976). Although Rich writes very little about how to achieve this alternative, it is widely understood as women mothering *on their own terms*, under conditions of their control, and beyond the limitations of institutional demands and objectives. In interviews, women described the challenges of mothering alone, in isolation from other adults, with the anxiety-producing weight of bearing the responsibility of the many facets of "good mothering." To alleviate the negative effects of motherhood, women need more community support and

opportunities for companionship in addition to social recognition and compensation for the work that they do. To this end, children's well-being must be redefined as a *public responsibility* so that the "family" does not continue to be the black hole that is to absorb ever-increasing institutional demands.

Carework scholars advocate that carework be recognized as civic contribution (Herd & Meyer 2006; Zimmerman et al 2006). Social policy sets the parameters as to who is responsible for carework, how it is compensated or recognized, and who has access to care (Zimmerman et al 2006). Many industrialized nations that are not as wealthy as the United States invest much more in early education (OECD 2002). Denmark, France, Norway, and Sweden spend two to five times as much on early education as the U.S. (OECD 2002; The Future of Children 2001). France and Italy boast that nearly 100% of their 3-4 year olds attend public preschool (OECD 2002). Early childhood education is the foundation of Swedish family policy and is made available with universal entitlements from age one to twelve. In 1996 Sweden transferred responsibility from their welfare department to education with a strong emphasis on learning, not just custodial care of children (UNESCO 2002). The U.S. would do well to follow the example of peer nations and, through social policy, address children's early learning needs as a collective responsibility.

What is interesting about Ready to Learn in Lawrence, Kansas is that it is accessed by those mothers socially defined as "ideal:" They research child development and make their mothering philosophies and practices accountable to it. They seek out "intervention" because the face of the institution, the point of contact is

other women who struggle with mothering in many of the same ways. Mothers participate in RTL for multiple reasons: It has become part of the culture of middle-class parenting in this community, it helps mothers with the intense cognitive care that they have learned they must provide and it provides support and validation for the hard work that they do. Thus, the program is utilized by these women in very class-based ways. The developmental information supports their intensive mothering practices and the middle-class educated women benefit from the praise and recognition that they are, indeed, "good mothers." The "other mothers" spoken about by parent educators (chapter 4) enroll in the program for very different reasons, do not engage in scientifically-guided intensive mothering, and struggle with day-to-day life. These mothers are unable to devote copious amounts of time and resources to shaping their baby or toddler's early learning potential.

We can all agree that early education is a worthwhile societal goal and children will continue to attend schools and grow up to be workers of some kind. My research is not meant to refute the importance of the first three years of life nor am I denying the importance of brain connections and early environment. But I believe that the schooling system must be transformed to one that educates children differently, one in which less emphasis is placed on the standardized testing and measuring of children.

As currently constructed, a lot of children are "left behind" and this is increasingly blamed on their lack of school readiness skills. The gap between children only grows throughout the schooling system; thus, I argue that not only do

we need universal preschool, but the schooling system should be altered so that it is more responsive to the diversity of children that walks through its doors. Yet, asking mothers to do this work for "free" with very little social support is much more attractive within our current economic system that ensures that accumulation of resources remains within the stronghold of the few, but powerful (Acker 2005).

My research expands our understanding of intensive mothering by demonstrating how it supports the institutional goal of school readiness. I explicate not only how mothers' unpaid work benefits the schooling system but how social location, especially social class positioning, greatly shapes women's capacity to perform scientifically-guided intensive mothering. This dissertation expands the work of Griffith & Smith's *Mothering for Schooling* (2005) by demonstrating how mothers' work supports institutional goals long before their child begins formal schooling. From birth, children are treated as learners, and as "good," educated, middle-class mothers, these women willingly take on the role of their child's "first and best teacher."

Directions for Future Research

An integral job for the institutional ethnographer is to define the parameters of the study, lest the inquiry take the researcher into more directions than feasible to pursue for one research project. Thus, this dissertation does not provide a comprehensive overview of the social and material realities of mothering in the U.S. nor does it explicate the wide range of family-schooling relationships that exist across class lines. It is a focused analysis of how women's mothering is shaped and

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coordinated with the schooling system through a specific institutional site, Ready to Learn. This dissertation took as its starting point the experiences of women whose mothering philosophies and practices are constructed within the material and cultural realities of the educated, middle-class two-parent nuclear family. Lack of response from women who mother in divergent circumstances necessarily narrowed the scope of the project to reflect the ways in which the mothering practices of *middle-class* women are discursively shaped and constrained by the family-school relation.

Experiences of single and poor mothers or those who have no experience with college education would have revealed different experiences within the ruling relations and thus, different lines of action to pursue. I am interested in expanding this research to explore how the mothering experiences of women from divergent family structures, social class, racial-ethnic, and cultural milieus are discursively shaped and constrained. How do the mothering and child development discourses affect women who do not participate in them? How do the deviancy discourses of mothering (Arendell 2000) impinge on "other" mothers' lives, feelings, and mothering practices?

I took up the social relations of mothering and schooling, specifically in the form of "school readiness" as the line of action to pursue for this dissertation. I "map" the social relations of mothers' cognitive care, how it is organized by RTL, an arm of the school readiness movement, and how this work furthers educational and economic goals. I explicate how the extralocal, in the form of the institutional desire for the production of school-ready children provides the context for "how things came

to be" for the mothers of this study. As I pursued the school readiness movement, I became deeply interested in the structure of the schooling system, particularly within the context of the impending retrenchment of services due to budget constraints. The family-school relation should be explored further in this context; specifically, how mothers' carework is (or is not) affected by the loss of educational resources in a community.

Interestingly, as many communities, Lawrence included, are witnessing monumental cuts in schooling budgets, President Obama recently unveiled his educational initiative "Race to the Top" a competition-based "reform" measure that requires schools to compete for funding streams. I believe that the disjuncture between (neoliberal) institutional objectives and the material conditions under which they are to be achieved in the area of education is a realm rife with research potential.

APPENDIX A
SYNOPSIS OF THE PROGRAM READY TO LEARN

In the 1970's Missouri educators became concerned about the varying educational levels and school readiness exhibited by kindergarteners. Pointing to research regarding the importance of parental involvement, early childhood experts advocated for a program that would educate parents about their role in their child's early learning and development. With state funding, Ready to Learn made its debut in 1981, in the effort to "level the playing field.[13]" During the 2006-2007 school year, there were over 3,000 RTL programs across the U.S., serving over 300,000 children. The program has an international reach as well, with programs in Australia, Belize, Canada, China, Germany, Mexico, New Zealand, and the United Kingdom.

The Ready to Learn National Center (RTLNC) was established as an independent, not-for-profit organization to serve as the foundation for what has become the largest parent education program in the country. RTLNC provides training and certification for parent educators, monitors early childhood education, and advocates for policies that promote early education. In collaboration with neuroscientists at Washington University in St. Louis, Missouri, RTLNC developed the program's curriculum, *Babies are Learners[14]*. The curriculum translates the latest science into advice for parents to assist them in facilitating their child's development in four realms: socio-emotional, language, intellectual and motor.

Ready to Learn has established four goals:

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[13] http://www.parentsasteachers.org/site/pp.asp?c=ekIRLcMZJxE&b=272094
[14] The name of the curriculum has been changed.

- Increase parent knowledge of early childhood development and improve parenting practices

- Provide early detection of developmental delays and health issues

- Prevent child abuse and neglect

- Increase children's school readiness and school success[15]

Families receive a range of services through RTL including personal home visits with parent educators, parent group meetings such as playgroups and parenting classes, developmental screenings, and connection to local resource networks. The foundation of the program is the regular home visits (monthly, bi-weekly, or weekly) wherein certified parent educators share developmental information with parents, teach them how to monitor and facilitate their child's development, and discuss parental concerns. The Lawrence, KS program visits families every 4-6 weeks depending on the family's needs and each visit lasting approximately 50-60 minutes.

Each family is assigned to a parent educator, a child development professional who has been trained in the program's *Babies are Learners* curriculum. The curriculum culls the latest scientific research on child development and is regularly updated to reflect new knowledge. In 2005, the curriculum was updated to incorporate the growing body of knowledge regarding brain development.

To become certified as a parent educator, individuals attend a five-day *Babies are Learners* Institute. Parent educators continue their training with yearly refresher courses and new material including courses on neurotoxins, father involvement, and Love and Logic.

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[15] http://www.parentsasteachers.org/site/pp.asp?c=ekIRLcMZJxE&b=2720934.

Home visits involve hands-on instruction of parents by parent educators as well as dissemination of parental handouts. The program creates two versions of parental handouts - a version for "high-risk" families who do not have the resources or skills to consume a lot of detailed information and a version for "high-functioning" families which expands on the lesson's themes for those with the ability and desire for more description and information. In interviews, parent educators described how the number of handouts they distribute to a family depends on the education level, age of mother, reading abilities, and stress levels.

Pamela Reeves, Blue Valley coordinator, state trainer, and program advocate explained in an interview that RTL "is a curriculum and RTL is a program." For example, other organizations utilize RTL's curriculum, such as visiting nurses or Headstart. Otherwise, RTL is a program structured differently from state to state, program to program. Pamela explained that in Iowa, RTL programs are funded through Visiting Nurses Association while in Texas RTL programs are primarily funded through mental health associations. In Missouri and Kansas, RTL is sponsored through the public school system.

Thus, a significant portion of Lawrence, Kansas' program funding comes through the school district. The district (prior to the recent 10,000 dollar budget cut) offered 25,000 – 27,000 dollars to the annual RTL budget, to which the state of Kansas matches at a rate of $1.65 for each dollar, a support that ranges between $41,250 – 44,550. Other sources of funding include private contributions, grants, and fundraisers.

MOTHERS AND SELECTED CHARACTERISTICS

Name	Age	Education	Race-ethnicity	Children & their ages	Annual Family Income	Employ-ment	Marital Status
Jamie	34	Master's in Social Work	White	Sophie 6.5 yrs. and Ada, 2.5 yrs.	30,000 – 45,000	Full-time school social worker	Married
Beth	29	PhD student early childhood develop-ment	White	Finn, 10 mos.	Less than 30,000	Graduate student	Married
Vera	33	Master's in Biology	White	Ziggy, 2 yrs.	60,000 – 80,000	Part-time librarian	Cohab-iting
Maya	28	B.A. in Anthropo-logy	White	Linus, 2.5 yrs.	30,000 - 45,000	Part-time as Doula/ musician/ artist	Married
Jessica	34	Master's in Physical Therapy	White	Tara, 5 yrs. Sienna, 3 yrs.	80,000 – 100,000	Part-time Physical Therapist	Married
Jackie	39	Master's in Biology	White	Erica, 3 yrs. Ben, 7 mos.	60,000 – 80,000	Works from home selling jewelry	Married
Olivia	34	PhD student in the social sciences	White	Catherine, 1 yr.	45,000 – 60,000	Part-time / graduate student	Married
Clara	31	PhD in Education	White	Ginger, 2 yrs. Jayden, 10 mos.	Over 100,000	Full-time University researcher	Married
Susan	29	Master's in Math Education	White	Sam, 5 yrs. Jenna, 3 yrs. Madison, 1 yr.	60,000 – 80,000	Part-time Math Instructor	Married
Katie	28	Bachelor's in Music Education	White	Peyton 1.5 yrs. Pregnant	45,000 – 60,000	Part-time piano teacher	Married
Isabella	43	Master's of Fine Art	White	Michael, 5 yrs. Patrick 1.5 yrs.	Less than 30,000	Part-time Math Instructor	Married
Kelly	33	Bachelor's	Asian	Lou, 2 yrs. Chloe, 7 mos.	45,000 – 60,000	Part-time hair stylist	Married

Name	Age	Education	Race-ethnicity	Children & their ages	Annual Family Income	Employ-ment	Marital Status
Kimberly	41	Some college	White	Leo, 2 yrs. Olive, 6 mos.	Over 100,000	None	Married
Grace	35	Bachelor's in Education	White	Connor, 7 yrs. Brayden, 3 yrs.	45,000 – 60,000	Provides childcare in her home	Married
Cecilia	31	Bachelor's in Anthropol-ogy	White	Tasha, 1.5 yrs.	30,000-45,000	Provides childcare in her home	Married
Tracy	33	Master's	White	Hank, 2 yrs.	60,000-80,000	Full-time	Married

INTERVIEW SCHEDULE - PARENTS

Hi. My name is Melissa Freiburger and I am a graduate student at the University of Kansas working on a research project for my degree. As a mother of a 6-year old and former participant of Ready to Learn, I am interested in others' experiences of the program.

A. Getting Involved in RTL
      1. How long have you been involved in Ready to Learn?
            How did you find out about the RTL program?
            (If applicable) Does your partner / any other caregiver participate in
             the program?
            Meet with the parent educator? Attend activities? If so, how often?
      2. How did you get involved in the program? Was anyone else involved in
        your decision to get involved?
      3. Why did you get involved? What did you hope to gain?
      4. Tell me about your parent educator.
            Does she share with you her own family experience?
            How would you describe your relationship with her?

B. Investment of Time in RTL
      1. How often do you meet with your parent educator? Do you always
        meet in your home?
      2. Who determines how often to meet?
      3. Who initiates the meetings?
      4. What do you do to prepare for your meeting?
            Does your partner/spouse usually participate in the meeting: If so,
            how often?
      5. Do your meetings interfere or conflict with other obligations?
      6. How long are your meetings?
            Can you describe a typical meeting?
      7. Are the meetings enjoyable for you and/or child?
            What do you like about the meetings?
            (If applicable) Does your child seem to enjoy the meetings?
      8. Do you attend another RTL activities? If so, what? How often? Why?

C. Demographics
      1. Age
      2. Education
      3. Employment status
      4. Marital status
      5. Number and ages of children

D. Use of RTL Written Information
1. How often do you receive written information from your parent educator?
2. What kind of information are you given?
3. Do you read it? Find it useful?
4. What do you do with the handouts / literature (file it, recycle, give away, throw away?)
5. How often do you refer back to the literature?
6. How often do you disagree with the literature?
7. Do you purchase any other RTL literature or literature recommended to you by your parent educator? If so, what? How much did it cost? Did you find it helpful?
8. Other than RTL, from what other sources have you learned about childrearing? (Firsthand experience, parents, relatives, spouse, etc.).
   Have you read other literature about parenting? If so, what?
   How does this information compare to what you learned from PAT?
   Is it any more or less useful than RTL literature? Does the literature reinforce RTL information or contradict it?

E. Perceived Benefits
1. What do you like most about being involved in this program?
2. What do you like least about being involved in this program?
3. Has any of your ideas about taking care of your child(ren) changed through your involvement in the program?
4. Do you take care of your child(ren) differently than your own parent(s)?
   Are their things that you do the same / different?
5. How long do you plan to remain in the program?

APPENDIX D
SAMPLE INTERVIEW SCHEDULE – PARENT EDUCATORS

Hi. My name is Melissa Freiburger. I am a graduate student at University of Kansas working on research to complete my degree. I am the mother of six-year old and former participant in Ready to Learn. I would like to see the other side of the program and am interested in your work as a parent educator.

1. How did you first learn about Ready to Learn?
   - How/why did you get involved in the program?
2. What are the educational and training requirements for parent educators?
   - How long have you been a parent educator?
3. Describe the basic philosophy of RTL.
4. Are you a parent yourself?
   - If so, do you ever share your personal parenting experiences with parents when helping them? Give me an example.
   - Do your own parenting practices ever deviate from RTL philosophy?
   - Have you learned anything through your work/training as a parent educator that you incorporate into your own parenting practices?
   - Is there anything you've learned from RTL that you disagree with?
5. How many families do you serve?
   - Do you meet primarily with mothers/fathers/both?
   - How are specific families assigned to you? Do you participate in the selection of your clients? (Do race, class, location, compatibility matter?)
6. How much of your time is spent:
   - Preparing for meetings?
   - Meeting with parents?
   - Involved in other RTL activities?
   - Paperwork?
7. Generally speaking how would you describe your interactions with mothers?
   - How do you translate/convey technical, scientific knowledge to parents?
8. Do you get much resistance from clients?
   - How do you handle conflict with parents?
9. Does your advice or help to parents always conform to RTL policies/philosophies?
10. Are there aspects of your job you would change if you could?
11. What is the biggest challenge of being a parent educator?
12. What is the greatest reward of your work?

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