

Hope as a Mechanism in Emotional Survival: Documenting Miscarriage

Chrissie Rogers*

School of Languages and Social Sciences, Aston University, Birmingham, UK

***Corresponding author:** Chrissie Rogers, Senior Lecturer in Sociology, Aston University, LSS, Aston Triangle, Birmingham, B4 7ET, C.rogers3@aston.ac.uk

Opinion

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It is well documented that one in five pregnancies end in miscarriage and yet it is often not discussed openly. Do people simply get over these troubling times, or is the female body, especially when it comes to gynecological issues, too taboo? Talk of blood clots, fetuses, physical and emotional pain might make for difficult conversations, but still a woman alone with her body and mind, has no choice, but to live through it. In documenting reality, my twin miscarriage at 12 weeks: it seemed hope was one way out of despair. In my personal narrative around dashed dreams, pain and grief, embedded in pockets of hope, I attempt to understand and come to terms with the immediate experiences of a miscarriage via disappointment, suffering and hope discourses. Are the immediate experiences too short to document or too painful to recount? In thinking through intangible dalliances with Tarot cards as hooks of hope and reciting the Lord's Prayer in the darkest moments; sociology of hope might be able to answer some questions in how the human being lives through tragedy.

On Friday 28th November 2008 I peed on a stick and in the second window was a pink line. I was pregnant. On Friday 30th January 2009, I was not. How can so much happen in such a short space of time and why does it feel like forever? What lessons can be learned and what hope is there when an acute trauma such as miscarriage occurs. I'm not actually sure there are any lessons to learn, it's not like I haven't learned a few life lessons" on the way so far. So I guess there's hope?

Over the past decade there has been a rise in research on non-motherhood and childlessness [1-3], conception [4] and miscarriage experiences, both sociological and medical [5-9]. This research spans the social and cultural

attitudes to having children and being a mother, the social, cultural and medical (scientific) aspects of childrearing from conception to giving birth and beyond, as well as everyday real life experiences of all of the above as narrated through women's stories. Why is it important in the 21st century to talk about these issues and should we continue to do so? There are many reasons as to why this is important. Medical and scientific advances have meant that In Vitro Fertilization (IVF) and other interventions can result in having a baby, where prior to this, it might have been impossible. It is suggested that women can have it all in the 21st century, which increases the pressure on women to have children, as well as continue in paid employment and look good (or at least let them believe there is a possibility!). There are plenty of narratives to suggest that if you do not want a child then you are in one way or another non-woman: unnatural, other (see also Douglas and Michaels) [10].

Importantly Moore [11] suggests, Mothering and motherhood are not, contrary to popular belief, the most natural things in the world. Furthermore, the motherhood myth, according to Forna [12] is that of perfection, as it suggests the mother must be devoted to her child and her role in every way. She must be all loving, giving and able to understand her child's every need. Forna's example of a woman who preferred to say she was infertile rather than to admit that she simply did not choose motherhood is indicative of the strength of social pressure to become a mother and indeed she is considered unnatural if she chooses not to. Forna also points out that some mothers regret their decision to become a mother, for example she tells of one woman who whilst cherishing her children, regretted her decision to have them generally. Baraitser [13] in her candid and philosophically sophisticated

research destabilizes cultural assumptions about mothering and motherhood by using everyday (almost seemingly insignificant) occurrences in mothering her children as a way to understand the enormity of how maternal encounters interrupts the female self in all aspects. And Coward [14] goes as far as to say motherhood demands changes in your life and it changes you, sometimes unleashing feelings that can quite easily drive you crazy. Women can find themselves up against unexpected emotions of anger and gnawing guilt, instead of living up to the idealized version of goodness poured out to good children

This could be amplified by what Beck and Beck Gernsheim [15] suggest, in that having children is increasingly connected with hopes of being rooted, of life becoming meaningful, and with a claim to happiness, based on the close relationship with the child.

Even though some women might have children who silently regret it and others tell different stories about their fertility status, one could ask the question, what has this got to do with documenting reality and the telling of a miscarriage story? To an extent it has everything to do with the telling of a miscarriage story and nothing at all. Everything because as the wounded storyteller [16], it is difficult to untangle the desire to become a mother and all that goes with it; with the miscarriage experience. But nothing, because this particular story whilst rooted in the loss of that motherhood, me; the storyteller has already successfully mothered an adult learning disabled daughter, and continues to do so. Having a daughter already however does not take away the dashed expectations and the acute suffering, the disappointment and thoughts about hope for the future.

In beginning this personal journey I would like to introduce the reader to a poem that I wrote within three months of experiencing my miscarriage. The meaning making that occurs in telling stories [17,18] and the potential resistance to suffering that has been talked about in illness narratives [16,19] and anthropological writings [20] are to my mind crucial in this narration. Therefore writing and then sharing the poem form part of the personal hopeful narrative in this paper. This is in addition to the more traditional autobiographical story telling that form the main body of work. In many ways the poem below synthesizes the whole paper, but is just told in a different way. Experimenting with form in order to tell stories is not new to me [21], but writing about something so emotionally painful is. Indeed I resist the

critical engagement with ethnographic work that suggests the other is the dominant (and only) narrative [20]. Personal narrative can form part of sociological research in very different ways [13,21-23]. It is clear that personal narrative, philosophical discussion and creativity can make for social understanding at a level that goes beyond the empirical.

Here I really begin documenting a miscarriage story.

Miscarriage and Hope

*Years and years went by, the failed IVF long time passed
Hope diminished, new horizons near, two seater sports
car and holidays afar*

No family friendly destinations here

Hope however reared with that clear pink line

*Only to be taken in a moment that lasted forever and a
day*

*The suffering that came enveloped in dark thoughts
crushed the heart*

Tears and pain overwhelmed

'Other worldly' positive thoughts brought slumber

Hope was resurrected

I survived!

On that winter morning I felt different. I hadn't peed on a stick for several months and after 5 and half years of trying to get pregnant - believe me - well I couldn't believe it. I turned the radio on and as cheesy as this seems Take That's song came out through the speakers. As the lyrics cut through the air,

Today this must be the greatest day of my life, stay close to me, stay close to me,

I smiled believing the song. A few weeks prior to that we had booked a holiday to The Gambia, I had taken all those pregnancy books to the charity shop and to top it all on the 21st November we picked up a brand new Mazda MX5; a convertible TWO seated sports car that just about took two adults never mind luggage. Very nice it was too, but completely impractical. Needless to say we had actually given up on becoming biological parents together. The Gambia holiday required jabs and tablets that were

simply not pregnancy or baby friendly and well, the toy car was just that. Hardly one that speaks family outing! I had even got a new job which meant no maternity pay for me. Pah! Who cares about money, the new car, the cancelled holiday? I was pregnant. We were going to have a baby.

It is well documented that one in five pregnancies end in miscarriage and yet it is often not discussed openly. Just because something is common does that make it less painful? Oakely et al. [8] note that it is such a common event, like flu, that many trivialise it. But something being common does not make it bearable, less tragic, without need for support and hope. Significantly, whether the tragic occurrence is common or not, hope seems crucial in finding ways through everyday life after an event [24]. In fact some women who experience miscarriage are severely depressed, with feelings of emptiness and even thoughts of suicide [5,7,8]. This emptiness can be meant literally as a woman has lost her actual foetus, but also thinking about suffering in relation to illness, Frank [19] says that suffering (whether present or anticipated) is another instance of nothing, an absence of what was missed and now is no longer recoverable and the absence of what we fear will never be [emphasis added].

After nine weeks of pregnancy, the midwife's visit, National Childbirth Trust (NCT) classes booked and the scan date firmly on the calendar, we dared to go to Mother care. We just wandered around looking at stuff: cots, prams, the other quite obviously nearly mums and dads. We left with a sense of satisfaction and joy, empty handed but assuming we would be back there on more than one occasion. We had the conversations about was it too soon to go there?, are we tempting fate?, but we had read the books. We thought we were past the most vulnerable time. After more than 5 years of waiting, waiting, for 3 whole weeks, (from week 9 onwards) we actually thought we were going to have a baby. That was taken away dramatically.

So what can we say about these narratives of expectation and indeed hope. Maybe we should begin with disappointment. This is because a baby, the pregnancy, was something that was desired, wanted, but then taken away. Feeling disappointed though does not feel powerful enough, and yet Craib [25] talks about desire and disappointment in a way that does speak to this paper and suggests that desire carries connotations of needing urgently, yearning, to the point almost of trying to will something into existence. Sometimes we

desire something so completely that we revert to our infant selves and scream, metaphorically or in reality, in hope that our desire may be realized.

This is absolutely the case here when it comes to miscarriage stories. And actually if this tragedy happens once, willing something to exist, or even hoping that our desires may be realised, will never occur again. That is in one moment of suffering the miscarriage; future pregnancies will never be the same again. It seems that hope and disappointment are in some way intertwined. As hopes are dashed, disappointment appears like an unwanted acquaintance. However, although disappointment might feel familiar - something that many of us have experienced throughout life - it is not comfortable.

To then return to Craib [25], he discusses disappointment within a frame of psychoanalytic and social theory to describe the everyday experiences of difficulty. Moreover he suggests that it is normal to feel disappointment with contemporary life. Craib [25] does this by drawing on his own experiences and ideas as a psychotherapist and sociologist and suggests that living in late modern society, especially Britain and North America, what we might hope, desire or expect has become less clear. There are consistent unrealistic high expectations of what contemporary life should be like based on individualistic notions. However, we cannot help but be involved in social relations and it is within those relations that disappointment occurs.

Even though a miscarriage feels like a very individual experience, having a child and being in a relationship is not. Neither is the desire to become a mother an unrealistic expectation. Research suggests many young people have this expectation as Henderson et al. [26] found over a 10 year period where 100 young people were interviewed; from a disadvantaged estate to a leafy commuter belt area, Northern Ireland to inner city England, almost all the interviewed young imagined they would be married or in long term partnership with children by the time they were 35 years old. Of course their imagined life course and their actual biography did not always tally, but still those biographies show that having children is part of young people's imagined future.

Actually Craib [25] says that the human condition is such that people constantly feel disappointed with their lot and this disappointment is necessary in re-evaluating their existence within the social world. So much so that

we, rage against a world which will not be as we want it to be. The claim I have a right to control my own life, when made collectively by a subjugated people, has a very different meaning to that which it has when made by an individual. I spend my life surrounded by other people, who are more or less independent of me and constantly doing things on their own account. As a consequence, I have to adjust to them. If I am to control my own life, then I will first have to control the lives of those around me.

Being pregnant is a continual negotiation of psychosocial relations. Of course it is not possible to be in control of others lives as such, but there is a desire to be in control of one's own life and that means fertility and indeed childrearing. I do reflect upon desiring a baby and whether it is indeed a realistic expectation. Generally, maybe it is at a certain chronological age and under certain circumstances?

Not getting pregnant after 5 and half years of trying made me think that maybe my partner and I were biologically incompatible. Therefore, it was never going to happen. Experiencing pregnancy to 12 weeks, for me, suggests hope that you will have a baby. This was a first time experience, (I never experienced this before as my daughter was the result of an unexpected teenage pregnancy) and a natural occurrence (no intervention) that went beyond the text book most vulnerable time. Whatever happens in my life, I thought, I will never have that again during that period. I will never be without fear. In fact more knowledgeable now having read books and trawled internet sites, I don't believe I could let myself hope until the baby was able to survive independently! I believe I have experienced something that has fundamentally changed me. Of course it could be that these reflections are too raw to suggest anything else. After all it was only a few months ago when I started to write this paper and still a year on the memories are painful. But I have experienced other life changing events and survived. Nevertheless, this was the first time I have thought am I really depressed?

Under ordinary circumstances, for Craib [25] disappointment is a crucial part of personal human growth and development in late modern society. He suggests too many individuals shy away from relationships and social situations that become difficult, to the point of disappointment, hence the need for psychotherapy. Craib [25] points out that: if I put a hand in the fire and it is burnt, I will not do it again in a hurry; psychotherapy says, in one sense, put your hand in the

fire and keep it there. Psychological development depends on staying in the fire, to the point where we begin to understand the pain and find that it is bearable, and that it might even be used in some way. This is a process which perhaps other ages might simply have called life and it certainly has to do with being, not with doing.

This is interesting in that he is saying in a late modern world many turn to help and support (or psychotherapy) too soon. Some might run away from a difficult relationship without working at it or tire of a job because it is simply too demanding or boring. Maybe this interpretation is suitable for complex societies in thinking about narratives around the intricate postmodern saturated self (the self that has many roles and many facets) who live in a Mc Donaldized society [27], but it does not fully answer the questions about actual difficult tragic circumstances that go beyond the everyday difficulties of living within a scientifically advanced society - of course recognizing that life, death and the maternal conjure up some very different narratives in different communities [20]. That is one where people are kept alive and in some cases cured of potentially terminal illness. In a society where we are led to believe that we can actually have almost anything we want, especially if we have the money to pay for it. It is here, within that society disappointment is rife.

With all this talk of disappointment it is obvious that disappointment may be associated with expectations that are dashed, taken away, not fulfilled. Something occurs in one's life that was negatively unexpected. Disappointment is more than this though and Craib [25] suggests it. Comes not only from having to restrict ourselves from having to share with other people and from having to make choices in our lives; it also comes from the recognition of what we are, and it is not a world shattering announcement that we are not always what we might like to think we are.

Sometimes things occur and the map that we might have thought about as true is no longer there. So what came before this horrific disappointment? The realisation that I might not be what I want to be: a mother again?

After two years of trying and considering that I was no spring chicken we went for tests in 2005. Nothing specific came from that. We were both okay, but apparently sub-fertile. What does that mean? Well it seems we were just another statistic where there were no medical reasons for not getting pregnant. I just couldn't get my head around how if sperm meets egg and all is well why no pregnancy

occurs. Still, after making love it was out of our hands so to speak. We had 6 months of Intrauterine Insemination (IUI), (basically turkey basting), which is a case of supplying the sperm and then the gynaecologist inserts the sperm into the vagina via a rather long syringe type contraption. We then had one round of In Vitro Fertilisation (IVF): a very invasive type of fertility treatment, where I became masochistically involved with my syringe. This was no diabetic pen; this was a proper self administered injection. I used to sit there on the armchair and inject in front of the television and my partner. I was not going to hide away. After reaching a self induced menopausal state (night sweats and tears) and then over stimulating my ovaries to produce lots of eggs (again emotionally problematic) that summer was wiped out. Never mind academic production and a free range mind I was a battery hen being farmed for eggs. September 2006 came and so did my period. The new term began.

Consequently, with a decision about never going through that again, two years down the line, and my fortieth birthday been and gone: it was over. (I have to say that, but for me it was never REALLY over. It's just what level not being over it impedes on one's life). So why oh why did Fate, God, Whatever, make me experience this pregnancy now. And then to top it all twins. Of course I know that the foetuses were probably not viable, twins were more problematic, its nature's way and all of that. But that does not help one iota. I might have been sad prior to this experience at not ever being a parent with my partner, not being a mum again. But not getting pregnant with and without help suggests there is no hope. You have to move on through that. We were.

So what of hope? Needing hope as a survival mechanism is an emotional experience and quite frankly, I would argue a necessity. It does not have to manifest in the same way for all, and for some it will take different forms throughout various times in life (see also Smith and Sparkes, 2005 for a vivid account of hope and spinal cord injury). Generally I have spent most of my disabled daughter's life hoping that she will be okay. Will she reach that next milestone? Will she find a loving partner for life? Will she live a long life? Will she have the baby she wants? Will she ever be independent? I can answer these questions with I hope so. Hope at times might seem futile and naive but I know that my daughter's hope that one day she will get married to the point of planning for it, for example, is clearly a crucial coping mechanism in her currently restricted life. She may never experience

married life. She may well do. But if many young people expect that they will experience partnership and children [26], why wouldn't she hope for this? She has seen me get married to her step dad and have a wonderful time. She sees marriage and related experiences as good. It seems that at an everyday level, hope is a good thing.

And yet hope can be considered unfathomable, unknowable, faith based. Hoping for something suggests that one does not know that it will occur, but that it might do. I might get pregnant, I might never experience that horrid experience again, and I might become a mother again. No one can say these will happen. I might hope these things will happen. I can have faith that they will happen. There is however no rational system that I can tap into to suggest that I can say absolutely this will or will not occur. Unless of course I take precautions, get sterilised or such like. Interestingly bringing together philosophical reflection in this way with actual experience draws upon Ricoeurs, [28,29] notion of hope and the passion for the possible (see also Vanhoozer) in engaging with existence and thinking. That is existence precedes thinking, not the other way round as in Cartesian philosophy [30]. Actually, for human beings the passion to exist as a basic desire is far more significant in Ricoeurs work, (not the nothingness commonly associated with Sartre [30]). I would like the reader to ponder the passion for the possible while reading the following narratives. Furthermore I would like the reader to take on board the 8 irrationality of hope, but that freedom of the passion for the possible can exist and therefore we can all hope in order to understand [29].

On Friday 23rd January 2009 I woke up. I was a day away from the milestone 12 weeks pregnant and days away from our first scan. With a cup of tea in bed I leaned over to my partner and said I feel so lucky and so excited. I have a great career and was going to have a baby!" Saturday 24th January 2009 I woke up in hospital. I lost a huge clot of blood and was told that it was likely this was the beginning of the end of the pregnancy. At half past 4 that morning I was in the hospital toilet holding a clot the size of a large piece of liver in my hands. The two nurses came running. Is this my baby I screamed? No, it's a clot one of them said softly. They took me back to bed. I rang my partner at about 7am and said that I was okay (that is, I hadn't bled to death, I was indeed still alive). He told me when he came to get me later that morning, after that call, was the first time he slept since taking me in the night before and leaving the hospital at 3am. The doctors discharged me that day. I went home to lose my twins.

That evening we watched Saturday night television. I can't remember what it was but as the evening wore on the cramping pain became contractions. They progressed and the memory of 23 years ago came flooding back. The toe curling pain occurred more frequently and my partner sat there knowing this as he could feel my body tense up while we were cuddled on the sofa. I waited for the inevitable. Soon I went to the toilet just before going to bed and passed the foetus; the one and only I assumed. I picked it up out of the toilet and washed it. This was no clot. This looked like all those pictures you seen in the books. My guess was that the foetus was a little over 10 weeks old. It must have been at that time when I felt so ill a couple of weeks previously that this potential baby had lost the survival fight. I flushed it away. What else was I supposed to do? I went to bed. That bit is still a blur. Sunday 25th January 2009 I woke up and lost what I can only surmise, was the placenta after some cramping. It was not a clot. For a moment I thought it was another foetus, but really I knew this must be the placenta. On the Monday I went and had acupuncture. I thought this would help. I hoped it would help. This form of alternative or complementary therapy was probably the only thing I had control over while my body did what it had to do.

On the Tuesday 26th January at 9am we went for the scan. Too many tears in the corridor, too many anxious couples I observed. We were another couple waiting, waiting. We eventually saw the trainee sonographer and I had a scan. She was lovely, the fully qualified one didn't come near me, but they did ask my permission and I agreed to be scanned by the trainee. She told me that it had pretty much gone. Just a bit left she said to me with pity in her eyes. I rang National Childbirth Trust (NCT) and told them to cancel my classes. I was empty in every way. Or so I assumed. I wondered if I could go to work on Thursday as I didn't want to let my students down. By Wednesday I didn't think I could. Flowers over the coming days filled up my dining room, as did cards with kind words. I was in a trance.

Wednesday 27th I was unwell. I spent the day milling at home in another world, in shock really. But in-between the blur-like state I organized work. I sent in my Power Point lectures for the following day. That evening after dinner and watching television I had more pain. Not as severe as Saturday but still some cramping. I went to the bathroom. It all happened again! This was another foetus, albeit smaller and less developed. At a guess it went at about 8 or 9 weeks but stayed around because I was still producing enough hormones for the other one. I called my

partner. Look at this; I held it out in the palm of my hands. He turned and walked away. Mind you he didn't even like watching ER! I sat by his side once more, on the sofa. Before we went to bed I passed the remainder, which was at a guess, the placenta. I sobbed and sobbed. My heart was so broken I didn't think I would survive: the emotional pain so sharp, so deep. It was twins and I had no idea. This seemed even worse.

Whilst this narrative is vivid, if I reduce this to an eschatological event for a moment, (perhaps extreme, but this was life and death after all) and draw on Ricoeur [29], who proposes.

Many ways: personal and collective, ethical and political. All these ways are irreducible to a mere wisdom of the eternal present: they bear the mark of the future – of the not yet" and of the much more"; in terms of Kierkegaard, hope makes of freedom the passion for the possible against the sad meditation on the irrevocable' (emphasis added).

It was bleak and a long moment that took me outside of any rational thoughts per se. I needed freedom from that. It was black Thursday for me. The 28th January was the darkest day I could ever remember. I lay in bed. Nothing but despair. Actually nothing at all. But this was interspersed with sobbing. Not a little weep, but proper sobbing. I did wonder if I would ever stop. The day seemed long and so did the next. Time just seemed to have stopped. I know other people's lives would seem like another week had passed by, but for me these few days were eternal. For the first time ever I wondered what it would be like to die: to end this life. I guess not in any real sense, I am still here, but in the sense of ending the emotional pain. I wanted that to end.

I can only say that this is suffering. Similar to Craib [25] who devoted a whole thesis to Disappointment, Wilkinson [31] does so with Suffering. According to Wilkinson [31], suffering is not accepted as a normal and inevitable part of our human condition. This is because suffering hurts too much. The problem with suffering is that it involves us in far too much pain. Suffering destroys our bodies, ruins our minds, and smashes our spirit [emphasis in original].

Although within sociological discussion suffering is often discussed in terms of social suffering and frequently in conjunction with mass atrocities [31,32], it is not exclusively the case, as suffering is a deeply personal experience (Wilkinson) [31], and so it can be difficult to

understand socially. It also has the potential to damage every aspect of personhood. In miscarrying I can certainly say without a doubt that I suffered acute emotional pain and as Wilkinson suggests suffering is always against us. I remember feeling empty, nothing, and had no desire to mix with people: contrary to my usual self. These are not different feelings and experiences told in other miscarriage narratives from research [5-8].

Importantly in thinking about suffering, Wilkinson [31] says that sociological research often ignores what the actual experience of suffering does to people [emphasis in original] and what's more, the lived experience is rarely the direct focus. However, he also points out that sociological research is more often than not about suffering anyway. Interestingly Frank [16] (who Wilkinson also refers to) discusses suffering as he draws on Cassell's three conditions of suffering. In short, the conditions of suffering involve the whole person, it takes place within a state of severe distress and it can occur in relation to any aspect of the person [16]. Frank adds to Cassell's conditions a fourth and fifth, which are resistance and its social nature. His fourth condition is crucial here as he proposes telling stories are a form of resistance. I would include here the writing of stories via other mediums too, so poetry and letter writing could also act as a form of resistance to suffering and indeed meaning making processes that involve hopeful narratives.

I wrote a letter to The Twins after the event and close to the expected date of delivery. It could be argued this is a form of resistance to suffering and indeed a hopeful narrative. But this resistance also had connotations of the spiritual, or at least other, in that it assumed that the foetuses were elsewhere: in another place. This is highlighted here in an excerpt from the letter.

It is coming up to the expected date of your delivery now, actually days away. I guess had things turned out differently I would be cursing the warm muggy temperature and wishing you were here already as I would have eyed my ever expanding waistline and found discomfort in every position. As it is I'm writing a letter to you both as our departure and our 'relationship' over the past nine months comes to an end. All I do know is that as I say goodbye to our future together I am no longer full of emptiness. It has taken some time to make peace, but we are getting there, wherever there is. I do know that whatever happens in the future, wherever the path of life takes us, you will always be a part of that. Your tiny tiny bodies might have gone, but your spirits live on. Not in any

real sense but in the fact that your short lives where you grew inside of me will live with me and impact on my life forever. I do believe in a passion for the possible, the possibility to live on and through suffering in hope. Not desperate hope that we will replace you, not hope that we will eventually ease that desperation, for I am not desperate. I am alive (Excerpt from The Letter, 08/09).

Friday 29th January, it was the evening and I had got up for a little while, but now I was back in bed. I sat up and thought about God. My partner was reading next to me. I hadn't really done the why me, but I had still thought why now? Why did I not get pregnant and then after 5 and half years, get pregnant and lose them at 12 weeks? Why? My eyes looked up at the shelves and I spotted a silver book box. It had my Tarot cards in. I say my Tarot cards as if they mean something, but actually given I can be a bit alternative, my partner bought them for me in the early days of our relationship as a joke type thing. I think I had played with them on just a few occasions. Now I wanted to get them out and ask that question. Will I ever have a baby? I knew this was completely irrational, but still I didn't care. My partner looked at me and smiled as I lay out the cards on the quilt in front of me. I thought if the cards say No, then I will be relieved never to have to go through this again and move on with my life. (That's what I said to myself). If the cards say Yes, then indeed we will have a baby, one day, just not now. Either way I thought there was hope. Hope to move on, even if it was for just one night. I read and interpreted the cards and they came out with a Yes! I curled up in the quilt, said The Lord's Prayer (not my usual bedtime ritual) and slept peacefully the whole night through for the first time in what seemed like an age. I woke with new found optimism. It wasn't like this was the end of the suffering, the end of any tears, but it was certainly the beginning of the end.

So what is in the human condition that makes one come back from such suffering. Of course we could answer this with simple survival instinct, but as a sociologist it seems that not all have this ability to move away from things that hurt us so, voluntarily or not, as in the case of domestic or sexual violence [33] and spinal cord injury [24] for example. I would argue that using (or turning to) God or alternative ways of moving through difficult times is not unusual. At times it is the inexplicable that can be understood via narratives of hope. Therefore it is hardly surprising that sociologists who discuss aging, death and bereavement often hear of stories that involve an attempt to understand some kind of afterlife [34]. Hope and hopeful narratives also signify a good future, something to

aspire to and something to live for, and within most societies this manifests in different ways. Many different cultures and communities use hopeful ceremonies as a ritualistic are passing. In addition weddings, funerals and naming ceremonies are often rich in religious narrative. Often all of the above include a gathering, big or small, in celebration of hopeful futures whether that is in this life in the case of a wedding, or in an afterlife as in the case of a funeral.

In thinking then about miscarriage and hope, not all pregnancies result in a baby. Not all babies survive childbirth [20]. Rites of passage ceremonies such as couples union ceremonies, birth and death celebrations and such like, look to the future with hope because actually the future is unknown. If in the face of death, loss or tragedy, certain cultures, families or individuals turn to irrational means as a way to make peace, even for a short while, then surely this means that hope lives on in a way that keeps the human condition alive. Actually it has been suggested that hopeful narratives, whether they are realistic or not are important in maintaining a good enough life expectation.

Smith and Sparkes [24] in their research on spinal cord injury found restitution, transcendental and chaotic narratives of hope. In reading their work around the restitution narratives, strange as it may seem I am prompted to think about the spiritual. Simply because like with their participants, the permanently injured men designated as having a restitution narrative believed yesterday I was able-bodied, today I'm disabled, but tomorrow I'll be able-bodied again. Within my narrative I could say, yesterday I was pregnant, today I'm not, but tomorrow I will be pregnant again. Of course this is unlikely, but within the realms of believing or hoping that this will be the case allows a person to move through difficult moments, tragedy or illness, even temporarily. To engage with and believe in a hopeful future: for example in Smith and Sparkes, research [24], My hope ever since being in rehabilitation is that a cure will be found and I'll walk again, is what Richard narrated 20 years after his injury, is important to my mind. Belief is crucial for survival. I believed that night that I would have a baby one day, and whilst I can't say that my hope is the same as any others with life changing disability, what I can say is that hope brings unfathomable resolution.

Importantly it is within a Kantian interpretation of thinking about hope that three questions are posed. What can we know? What must we do? What may we hope?"

[29]. In my interpretation of Ricoeur it is crucial that the interplay between knowing, doing and hoping is respected as Knowledge is what we can, doing is what we must, hoping is what we may, or are allowed to [29]. Scientific advances might give hope when there are rational answers and of course it can be argued that we suffer less due to cures and medical practice. Sometimes however there are no answers and to be left with a void without hope is too dark to cope with. Hope gives life, in whatever form that takes. Significantly, taking Wilkinsons [31] study on suffering,

I maintain that writing so as to involve readers in the great difficulty of understanding what suffering does to a person's humanity is an appropriate sociological response to these phenomena.

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