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"I have a second heartbeat now": Using poetic inquiry to experience pregnancy as an embodied experiment/adventure

Abstract:
The tendency in the Western world is to over-medicalise the experience of pregnancy and to treat the experience like one might a temporary illness. The patriarchal systems that envelop the pregnant person are often criticised for the lack of agency they allow participants in their own experiences, as they habitually negate and diminish the capabilities of pregnant people to learn and advocate for themselves. Subscribing to a feminist phenomenological worldview and employing poetic inquiry (that is, poetry as-in-for research) throughout the period of gestation allowed me an experimental and forgiving vehicle for conceiving of my pregnancy as *mine* and not any institutional system's. This essay examines pregnancy as an embodied, phenomenological experience, drawing on the work of phenomenological and posthuman scholars, and using pieces of the poetry I wrote during my first pregnancy as evidence. It should be treated as an argument for an embodied understanding of the pregnancy experience, and a plea to treat birthing people as navigators and leaders of their own physical and emotional destinies.

Biographical note:
Lilian (Lily) Roberts (she/her) is a PhD candidate at the University of South Australia, working across phenomenology, poetic inquiry, and experimental textile practice to create patchwork quilts of sense and meaning. Lily is interested in experimental, interdisciplinary research methodologies that eschew positivist methods of analysis and instead privilege affect, entanglement and the mess of the world.

Keywords:
Pregnancy, phenomenology, poetic inquiry, poetry, embodiment

Introduction

Pregnancy has been a period of profound growth and transformation for me, pushing my body to its limits as my physical and emotional boundaries have been modified, tested and reshaped. The biological processes of pregnancy are often foregrounded in official medical and institutional gestation narratives, but it is equally important to consider the embodied phenomenological experience of pregnancy, one that is continually reconstituting itself as the baby grows and the body encounters pregnancy's innumerable changes. Each day of pregnancy facilitates a deeper becoming – I am no longer only myself; I contain myriad new processes and a whole *other* world of rapidly dividing cells. This drew me into a state of continuous vigilance to my own fluctuating symptoms, which facilitated an intense, intuitive relationship with my own body, a sense of deep embodiment that was often thrown into conflict with the social, cultural and medical factors that shape the pregnant body's experience. Pregnancy is often described as an "emotional rollercoaster" (Birtwell et al., 2013, p. 226), as feelings of joy, apprehension, discomfort, vulnerability, excitement and fear contest with one another alongside the somatic experiences of nausea, exhaustion, foetal movement and physical preparation for birth. These complicated, contradictory and even comforting sensations all require a site of expression for the childbearing subject to integrate and adapt to their new phenomenological reality. As a creative writer and researcher attempting to come to terms with the magnitude of this physical and emotional undertaking, I turned to poetic inquiry, a methodology that incorporates poetry as "a tool and method for presentation of research data, as a source of data, and as a source for data analysis" (Faulkner, 2019, p. 39).

My experience of pregnancy has been full of excitement, anxiety and surprises, from the apparition of the second pink line on the positive pregnancy test, to the shock and wonder in my partner's eyes when he first felt the baby give his hand an almighty kick from the inside. Living in the world as a pregnant body has emphasised for me that I am "an intercorporeal, environmentally situated and contingently becoming body … a body that emerges from various debts and connections to other bodies, whereby bodies are always chiasmically entwined with the world" (Neimanis, 2017, p. 43). The best format for me to express myself alongside/with/through my entwined body has always been free verse poetry, a private and safe space of embodied cognition, one which allows me to use pen, paper and word processor as tools to think with, or what Andy Clark (2003) calls "mind-expanding technologies" (p. 7). This article will embrace a phenomenological methodology of poetic inquiry in order to explore pregnancy as an embodied experience, one that transcends material boundaries and enrols the pregnant body as a multitudinous sensory agent in its own constitution. This is a conception that contests the increasing medicalisation of pregnancy by risk-averse modern neoliberal systems – another theme that emerges from the analysis of my pregnancy poems, several of which are woven throughout the article. While engaging with this research topic, I have been guided by the following questions:

1. How has my pregnancy led me to experience my own embodiment?

2. How has the experience of writing poetry about my pregnancy allowed me a more holistic understanding of what is overwhelmingly treated by society as a medical experience?
3. Drawing on feminist understandings of phenomenology, and in the face of the alienating experience of modern antenatal care, how does the experience of growing a foetus constitute an embodied experiment/adventure?

"Life echoes inside the red cathedral": Sensing in/with/through an altered body

Phenomenology as a methodology and a discipline concerns itself not with theories of behaviour, but with describing the nature of subjective human experience (Finlay, 2011, p. 10), while poetic inquiry uses poetry as-in-for research to explore said subjective human experience in ways that more conventional research methods cannot. Carl Leggo (2005) describes poetry as "inviting alternative ways of knowing and being and becoming", or "a poem is inscribing circles in the air for jumping through … a poem is the way words wind through the blood … a poem is transmuting the lead of experience into gold" (pp. 93, 107–109). Poetic inquiry is generally understood to be an umbrella term that incorporates a number of different techniques, what Prendergast (2009a) refers to as a "heteroglossia" of instances of poetry used as, in and/or for research (p. 543). For the purposes of this article, poetic inquiry refers to my use of free verse poems written via *vox autobiographia*, which uses "reflective/creative/autobiographical/autoethnographical writing as the data source" (Prendergast, 2009b, p. xxii). In writing poetry to communicate and contextualise my own experience of pregnancy, I engage in a dialogic experience that "contains the seeds of responsiveness to itself" (Shidmehr, 2009, p. 103), or what Leggo (2005) describes as the poet working to "emphatically, empathetically, energetically evoke / experience in language like echolocation" (p. 100). My own relatedness (to myself, to my baby and to the medico-cultural discourses that enveloped me) was determined by the signals I sent out into the world and how they were returned, absorbed and then described on the page, while my ability to sense with/in/through my altered body fluctuated based on the level of responsiveness and deep embodiment I inhabited.

Pregnancy is a "condition rich with imaginative significance for mothers" (Stone, 2013, p. 149). From the first instant I thought I might be pregnant, I became a kind of detective of subjective embodiment, someone that was constantly probing and sensing her own malleable boundaries. Several days before my positive pregnancy test, I remember being struck suddenly by the pungent smell of ripe rockmelon from the other side of a crowded greengrocer's; it pierced my field of sensation dramatically, and I automatically crossed the floor to pick one up from the display, cupping its hard skin and gazing into the seeds of its soft tissue centre. My sense of smell seemed heightened – could it be? Was this it, was it happening? As Stacy Alaimo (2016) states, "the exposed subject is always already penetrated by substances and forces that can never be properly accounted for" (p. 5). Without a concrete sense of what was going on inside me, I enrolled myself in a speculative role, watching animated educational videos to try to imagine the contours of my insides, attempting to picture the emergence of a brand new, purpose-built organ – my first placenta – and writing free verse research poems in an attempt

to visualise the hidden world of my womb. I was experiencing what Jane Lymer (2016) refers to as "the imaginary relationship" of gravidity, during the period before "quickening", that is, before a pregnant person receives physical feedback from their baby in the form of kicks and movement (p. 20). The experience of what medical texts and pregnancy apps refer to as "the first trimester" means negotiating "a world created through a phenomenological engagement with cultural narratives, epistemologically supported by visual technologies, and narrated through medico-legal discourses which focus predominantly on foetal outcomes" (p. 20). It was, surprisingly, a period of intense loneliness, accompanied by a distinct and paradoxical feeling of being un-alone with my newly implanted embryo. My experience of un-alone-ness with a new developing organism (both somehow of me and not of me) is exemplified within what Astrida Neimanis (2017) calls the "co-worlding" of the body: "Rather than two separate entities interacting, they intra-act; they become what they are only in relation. Co-worlding is always a collaborative process, and always emergent" (p. 34).

In a separate (but similar) vein, Iris Marion Young (2005), in her essay *Pregnant Embodiment: Subjectivity and Alienation*, argues that the pregnant subject is "decentred, split, or doubled in several ways. She experiences her body as herself and not herself" (p. 46). This describes the way in which my existential experiential horizon was altered, almost from the beginning. I would count down the days before an appointment or ultrasound, desperate for some insight into what was happening in the places I could not see or feel. In early pregnancy, googling my symptoms became a way of reassuring myself that I really *was* pregnant, that this imaginary relationship between me and an unqualifiable presence in my body was real. My hands and fingers would probe my physical edges constantly, searching for corroborating sensations and experiences such as the growing and hardening of my stomach, the sudden (and marked) increase of wetness in my underpants, the increasing amounts of sensitive breast tissue, the thickening of my hair and hardening of my nails. Internally, I was experiencing another influx of sensations: from the first pinching/grabbing feelings of the embryo implanting in the walls of my uterus, to rolling feelings of nausea a few weeks in, accompanied by dramatic mood swings, and a bone-deep tiredness that saw me returning to bed during the day.

My poem "I have a second heartbeat now" explores this time during the first trimester:

"I have a second heartbeat now"

I have a second heartbeat now
the size of a seed
I am the listening night for
all the sound in the world;
womb a black chamber
for night-blossoming flowers,
        unripe fruit

the day drags on
and I feel like I am

dancing through honey or hay or
something like that
(time has slowed to an inane crawl)

still, I am resplendent
performing the revolving couch ballet
rolling to stand
from a crouched position
snaking hands under pillows
for deflated chip packets, water, the TV remote

it looks like a tadpole, so far:
translucent skin and a tail

life echoes
inside the red cathedral
that second heartbeat—
        resounding bells

This poem, the first I wrote during my pregnancy, explores the novel experience of functioning alongside/-with a new, alien, half-imaginary companion, what Young (2005) refers to as “the doubling of the pregnant subject” (p. 50). It contrasts some of the physical changes I was experiencing, particularly exhaustion – “I feel like I am / dancing through honey or hay or / something like that” – with the broadening of my understanding of myself as a newly pregnant person; the line “I am the listening night for / all the sound in the world” is an attempt to capture the multitudes I was trying to sense within my own experience, an endeavour that tested the limits of my imagination. Likening the foetus to a “seed” and a “tadpole” shows that at this time, I had only a limited notion of what was growing inside me – at this point, I only had one, very blurry ultrasound image of what looked like a smudged grey jellybean. Additionally, describing the womb as a “black chamber” suggests the lack of clarity/illumination that people may experience in the early parts of pregnancy, when free or subsidised access to technologies such as ultrasounds and heartbeat monitors are infrequent. Yet the image of “night-blossoming flowers / unripe fruit” that immediately follows depicts the womb as a place of growth even in the dark, not dissimilar to Celeste Snowber’s (2016) assertion that while pregnant, she felt like “the moon was present in my body” (p. 43). The close of the poem illustrates the burgeoning sense of wonder I was experiencing while contemplating my body and its new capacities for growth and change. The use of “cathedral” inscribes the pregnancy as a possible spiritual experience, while likening the foetus’ heartbeat to the sound of church bells indicates I was perhaps already treating my new sensations as part of a call to some sublime new project.

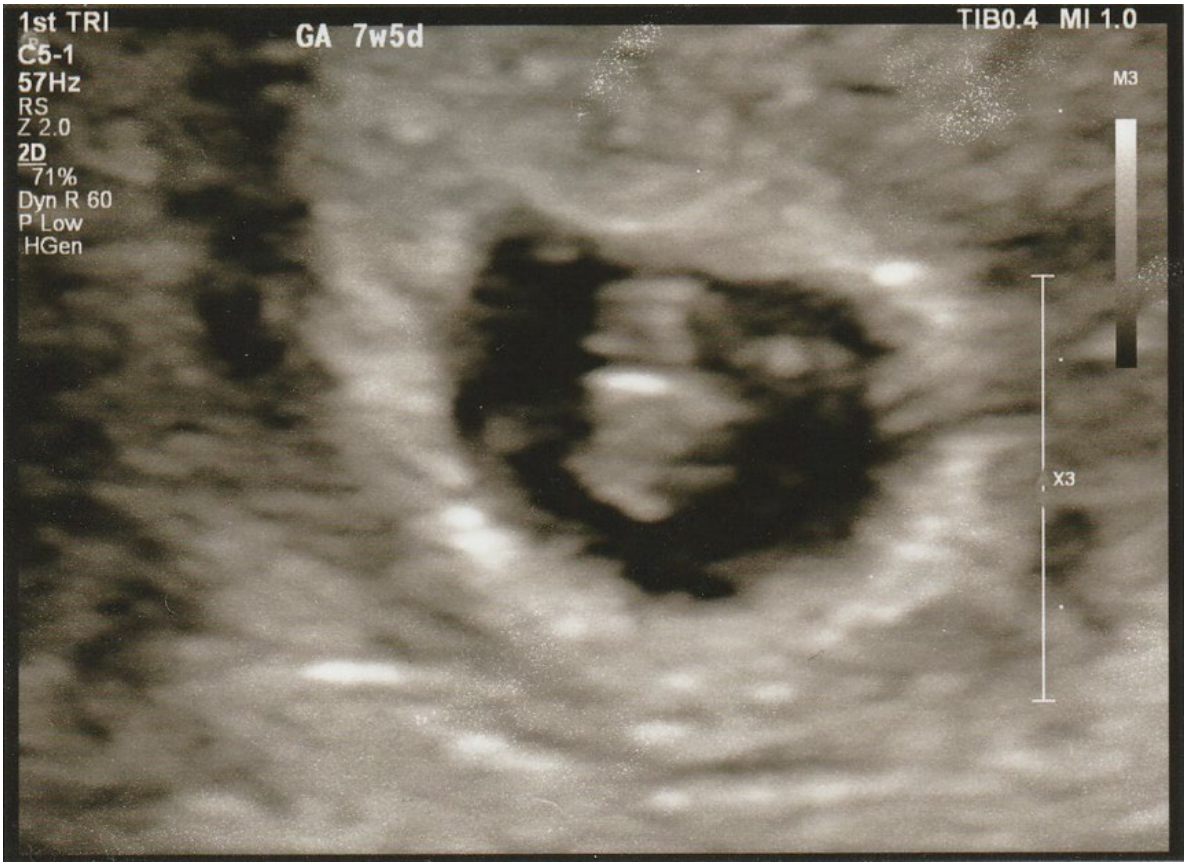

Figure 1: My first ultrasound image, a small, blurry, grey figure in the centre of a dark circle, surrounded by more white noise.

In her book *Embodied Inquiry*, Snowber (2016) describes a period of being placed on bed rest while pregnant with twins, during which she began to conceive of her uterus as "the womb-studio" (p. 42). The fluid edges of my sense of self (as well as my own deep need for rest) are also touched on in the way I describe my body performing the "revolving couch ballet" of the first trimester, when at times I felt the limits between my skin and my bedsheets blur into what felt like a warm and foggy sludge. This is similar to Young's (2005) statement that "pregnancy challenges the integration of my body experience by rendering fluid the boundary between what is within, myself, and what is outside, separate" (p. 49). Stone (2013) refers to this as "the realm of intimate mother-infant dependency" that encompasses "flows and exchanges of affect and bodily energ[ies]" (p. 1). This word "flow" is of some significance. In their seminal book *Bodies of Water: Posthuman Feminist Phenomenology*, Neimanis (2017) conceives of a relationship to/through/with water as a point of commonality between all living creatures, from the smallest cell to the largest body of land. They describe water's relationship to the subject as a *maternal* one, via their own intellectual lexicon that incorporates many pregnancy-affiliated terms: "amniotics", "hydrocommons", "planetary breastmilk", and "posthuman gestationality" (Timár, 2023, p. 128). In my poem "pregnant at a conference", I go deeper into the experience of sharing my body, of experiencing my internal realm as its own "hydrocommons":

"pregnant at a conference" (excerpt)

she’s talking about absence
nothingness
missing latitudes
but I have a distinct
absence of absence

I have insects crawling in my belly
a great fish thrashing
in slow motion
in flashes of glittering scales
tasting the water
developing fat and muscle

I have
a trillion new cells
tattooed inside my skin
on the deepest layer, under even the hypodermis
the red soft insides, love-soaked
and drenching

ink going deep to poison my edges,
and the body recognising: this isn’t normal
and I can’t — (I don’t know if I can);
but I *will*

My choice to describe my growing baby as a “great fish thrashing / in slow motion” is an attempt to describe sensations of foetal movement while occupying public spaces. My experience of pregnancy was that my body was an expanded, exposed and watery new realm; I was sweatier, tearier, needed to urinate more frequently and had underwear constantly stained with leukorrhea, or vaginal discharge. Bodily fluids such as these are indications of the porous boundaries of the human body; they imply a vulnerability and an open-ness to the flow of matter from the inside to the outside, and vice versa. Robyn Longhurst (2001) points out that “these fluids often provoke feelings of abjection” (p. 30). This meant that engaging with other people while in this permeable state could be challenging, perhaps also because the fluids of the body represent “sites of possible pollution or contamination … danger and vulnerability” (Douglas, cited in Grosz, 2020, p. 195). Indeed, inhabiting a body that was increasingly heavy with (and often leaking) fluid pushed me into “a borderline state, disruptive of the solidity of things, entities, and objects” (Grosz, 2020, p. 195). Because bodily fluids are analogous with maternity, emotionality, menstruation and the feminine body, the viscous and fluid is treated as unnerving and subjugated philosophically by “that which is concrete and solid” (Longhurst, 2001, p. 31).

Of course, the phenomenological experience of pregnancy involves a welcoming of these new presences and sensations into the body, a body that is “collaboratively worlded” (Neimanis,

2017, p. 38) and operates in relation to all it contains and all it does not contain. But my unease at existing in the world with a leaking body-schema adds to the argument that "women diffuse themselves according to modalities scarcely compatible with the framework of the ruling symbolics" (Irigaray, 1977/1985, p. 106). Or, as Longhurst (2001, p. 60) points out:

> the body that threatens to vomit is not a body that can be easily trusted to occupy the respectable public realm, including the workplace. The pregnant woman who enters the public space risks 'soiling' herself and perhaps even others with matter produced by her body. Her body threatens to contaminate and to pollute.

This also recalls Stone's (2013, p. 10) argument that the maternal body is depicted and understood to be in stark opposition to a traditionally conceived notion of the self. To give another example, when the baby moved inside of me while I was in a public setting, I felt a strange tension between experiencing what felt like an intensely private sensation in the presence of others, whether they knew what I was experiencing or not. I often wanted to cry out in shock at a particularly big kick to my cervix, exclaim indignantly at a sudden spasm or cramp in my uterus, or sigh in frustration at having to leave an important meeting for the second or even third time to use the toilet. All the while, my heart was pumping approximately 50 per cent more blood around my body than normal, and my fluid-filled belly was expanding.

These discomforting (and paradoxically comforting) sensations symbolised moments of "full recognition of th[e] embodied magnitude" of gestation, which involves the birthing subject:

> recognising she embodies not just another life, but a wholly other life: a being who will want things she does not want; will do things she will not do; will believe in things she thinks are false; will hate things she loves; will love things she hates; will, in sum, be not-her. (Lintott, 2011, p. 242)

Indeed, pregnancy has been described as a kind of infection of the body, with the childbearing subject inscribed as a host which nurtures its new "parasitic body" via the phenomenon of "placental gifting" (Braidotti, 2022, p. 172). I describe the experience of this foreign body in "pregnant at a conference" with the imprecise metaphor of an internal tattoo's "ink going deep to poison my edges". This ominous imagery is contrasted against my claim that my "red soft insides" are also "love-soaked / and drenching". These lines existing in close proximity to one another work to encapsulate what Lintott (2011) refers to as the sublimity of pregnancy, whereby "negative and positive emotions merge in a precise combination to make one's own mental, emotional, and psychological strength particularly salient" (p. 238). I also acknowledge the way pregnancy felt paradoxically both natural and uncanny, as well as my determination to see it through to the end, with the line "and the body recognising: this isn't normal / and I can't — (I don't know if I can); / but I *will*".

"Being looked at like I have no insides": Contending with modern antenatal care

The "medicalisation of pregnancy" refers to the maternity system's increasing reliance on technologies and intervention in the management of antenatal care and childbirth. While

advances in obstetrics have resulted in generally safer pregnancies and a lower mortality rate for both birthing parents and infants, it has also led to the treatment of pregnancy as a health condition rather than a natural process, as well as the medical objectification of the embodied and embroiled pregnant body (Neiterman, 2013). An increasing reliance on medical data to measure the trajectory of a pregnancy often leads to a diminishing of the pregnant person as an authority stakeholder in their own experience. Yet an understanding of pregnancy from an existential phenomenological viewpoint would assist in conceiving of the subject not as a patient requiring medical treatment, but as an individual that has found their experience of their perceptual world altered (Quintero & De Jaegher, 2020).

Even after I made it through the first trimester, the fraught time in which a miscarriage is more likely to occur, anxiety about the pregnancy persisted, contending with "the objectifying and alienating tendencies of modern medicine" in the way it delivers antenatal care (Rentmeester & Hogan, 2020, p. 2). Since the first practical ultrasound machine was patented in 1965, doctors and medical practitioners have been granted access to a greater and more advanced array of technological tools with which to objectively measure and scrutinise the pregnant body (Rentmeester & Hogan, 2020). This has reduced pregnant people's own sense of agency and expertise while they attempt to operate within the confines of the risk-averse medical system, and the results are an increased rate of epidurals administered and caesarean sections scheduled (Miller et al., 2022, p. 1). As Young (2005) points out, "medicine's self-identification as the curing profession encourages others as well as the woman to think of her pregnancy as a condition that deviates from normal health". Moreover, the doctor-patient relationship is framed around a dynamic of authority-dependence, one that "devalues the privileged relationship [the mother] has to the foetus and her pregnant body" (p. 47).

The poem "being looked at like I have no insides" explores this concept:

"being looked at like I have no insides"

she tells me to take my shoes off and stand on the scale
the request hangs between us like a rock
heavy and awkward
(like I feel, like I've always felt)
when being looked at like I have no insides

the black tablet blinks, retrieving
ominous numbers from beneath my feet

beautiful body that is working arcane magic
in our presence, that is, right now—
taken to be weighed like a quantity of fruit
or meat, for purchase. for quality control

and she clicks tongue against teeth,

fast and sharp, says:
“it’s higher than I’d expect”
and all my skin bristles
at her overkind tone, her concern
for my welfare

she tells me to walk more…
ten to fifteen minutes, after every meal
I’ve already mentioned how hungry, and
tired
I feel
how stranded amidst
my own bones
I’ve become

Carl Leggo (2007), in his work on poetic inquiry, states that poetry is an effective method for research because it instructs the writer and reader both to engage with “the semiotics of figurative language, sound effects, texture, voice, rhythm, shape on the page, line breaks, and stanzaic structure” in the exploration of a concept or experience. According to Leggo, “in a poem, everything signifies” (p. 169). This poem uses these techniques to delve into the clinical, alienating experience of modern medical care that many embodied birthing subjects experience while pregnant, one which feels incongruous with the deep, primal and engaging physical sensations of pregnancy. The “arcane magic” being worked by my body in growing a new human felt like it was of little consequence when measured against objective clinical markers like my weight and fundal height (a measurement in centimetres that estimates the size of the foetus). Describing myself as a “quantity of fruit / or meat, for purchase” emphasises the objectification I felt while being weighed, and hints at the commodification of women and other birthing parents’ life-giving bodies in the service of a patriarchal, capitalistic system. My doctor’s fears that I would present with gestational diabetes at 28 weeks because of my weight gain were unfounded; my glucose tolerance test returned blood sugar levels within the ‘normal’ range. As the poem reaches its final stanza, it begins to break down, with the use of negative space symbolising the distance I felt from my doctor – and from myself – during this encounter.

My experience in contending with the alienating experience of medical care during pregnancy is not unusual. Sonya Charles (2013) juxtaposes the medical/obstetrical model of antenatal care, which views technological and medical interventions as “the safest way to deliver a baby” (p. 217), with the midwifery model of care, which places trust in the birthing subject’s body and intuition and conceives of labour as something to be experienced rather than endured. These two models represent an essential expression of the Cartesian dualisms that dictate modern society, and separate culture and nature, reason and passion, technology and “old wives’ tales” by elevating one and denigrating the other (p. 225). While the midwifery model of care is arguably an improvement on the medical model in terms of allowing birthing subjects access to their own power and agency, to be accepted into a midwifery group care program is exceedingly rare in Australia (Pelak et al., 2023, p. 23). There exists “overwhelming evidence”

of the benefits of continued midwifery care, which sees the pregnant person access the same midwife continuously throughout pregnancy, during birth and postpartum (Baird et al., 2022, p. 20). Childbearing people that access continued midwifery care overwhelmingly experience better outcomes, including "fewer intrapartum interventions (epidural, episiotomy, and operative vaginal birth); increased spontaneous vaginal birth; maternal satisfaction [and] fetal and neonatal benefits, in particular for First Nations babies" (Hewitt et al., 2024, p. 1).

Despite this, midwifery group care in Australia is very difficult for childbearing people to access. My own experience of trying to get accepted into my local midwifery group program involved being placed on a long waitlist, with no follow up from the hospital; the administrative staff replied to my email only after my husband prodded them for a response. At 28 weeks, they got back to me to let me know I was still on the waitlist and that they currently had no midwife to assign to me. Being able to access a continuity of care model in the modern antenatal system is also made difficult by virtue of what the hospital system deems to be 'risk factors' likely to affect a pregnancy. These include things like a BMI (body mass index) that falls into the 'overweight' or 'obese' range, a diagnosis of gestational diabetes mellitus, prior history of mental health issues, pre-existing medical conditions such as epilepsy, autoimmune disorders, kidney or heart disease, and the consumption of alcohol, drugs, or nicotine during pregnancy. These risk factors disproportionately affect marginal populations, including First Nations groups, migrants and LGBTQ+ individuals. Yet midwifery group practice overwhelmingly prioritises low-risk pregnancies, despite being capable of improving health and social outcomes for vulnerable birthing parents and their new babies (Pelak et al., 2023, p. 18). There are proven benefits to continued midwifery care (also known as caseload midwifery) for at-risk individuals, including lower rates of child protection intervention, improved mental health outcomes, and better levels of sensitive information disclosure by pregnant and birthing subjects to midwives they have a rapport with (Smith et al., 2022, p. 2).

For pregnant people who are unable to access a continual model of care, the standard model tends to fall short. Occasionally, the patient will experience what Pelak et al. (2023) calls "striking it lucky", by having midwives that go beyond their own work requirements in order to provide a semblance of continuity amidst generally fragmented antenatal care (p. 4). The Birth Experience Study (BESt), which was conducted in Australia in 2021, found that a significant number of respondents expressed frustration with the fragmented and inconsistent nature of their standard or shared models of care (Pelak et al., 2023). Participants found inconsistent messaging from different care providers confusing, felt they constantly had to repeat themselves to different people, and expressed feeling "as if they were on a production line" (p. 7). For those who, like me, went through a GP shared care model out of necessity, in which the patient's general practitioner conducts the majority of antenatal appointments, there was a general feeling of disparity between the care they received in the community and the care they received in the hospital, with communication breaking down regularly. When I felt overwhelmed in the face of the system and fearful of what might eventuate when it came to my birth and postpartum experiences, I turned back to poetry.

"I am the mountain that I climb": Poetry to speak the unspeakable

All throughout pregnancy, I contended with contradictory sensations, beliefs and understandings, ones I felt acutely, but struggled to express. As frustrating as medical markers of health and progress felt to me, they simultaneously indicated that things were as they should be and that the pregnancy was progressing satisfactorily, something I craved knowing. As much as I wanted to be treated as capable and independent and not suffering from the 'condition' of pregnancy, during the third trimester I found myself bumping up against the weight of my own exhaustion, and guiltily wished for special attention to be paid to me by my partner and colleagues. And as excited as I was to be pregnant with my first child, I was also downright terrified of how my life would change, and worried whether this fear constituted a betrayal of my baby. Lintott (2011) points out that "during gestation a woman might fear an impending loss of self, freedom, and identity. She might feel threatened by the possibility that her unborn child will eventually, perhaps repeatedly, annihilate her" (p. 241). This kind of impossible knowledge, a cognitive dissonance that held itself so presently in my consciousness – and in my body – made turning to poetry a necessary and vital step for survival. Poetry about and towards motherhood allows for "the rejection of mother as totalising role and identity" and allows for the writer to "integrate roles and identities in a process that does not necessarily entail choosing either/or and switching back and forth" (Faulkner & Nicole, 2016, p. 85).

Free verse poetry is also a vessel for engaging with our own complicated feelings without fear of judgement or censure. The poem offers shelter and safety for the childbearing subject by not asking them to limit themselves to any conventional mode of narrativisation, while the poetic technique of metaphor offers the opportunity for the writer to integrate their new reality cognitively and phenomenologically, in their own time. The lack of any fixed form in free verse poetry also offers the possibility of communicating "that which resists ordinary processes of remembering and narrating … verbalising the unspeakable" (Schönfelder, 2013, p. 30). Rather than forcing me to express my contradictory feelings and sensations in properly articulated language, or even in any discernible order, free verse poetry allowed for contrary affective sites like joy and terror to exist simultaneously within me, and with one another on the page. As Aitken, cited in Faulkner (2019), states:

> Poetry … illuminates, touches down, and continues along filaments and in bright spots, or curves around us, or comes in the back door. Poetry is the way to describe and distil, but remain porous, oxygenated. Poetry lets the light in. (p. 38)

Free verse poetry therefore represents a dynamic vessel for poetic inquiry that allows for the expression of "a spectrum of experiences considered pre-narrative or pre-verbal" (Gildea, 2020, p. 111). My poem "contemplating the birth" explores these pre-verbal contradictions:

"contemplating the birth" (excerpt)

I walk in dark corridors, full, full,
full to the brim
with liquid and songs and the pips of split cherries
with the webs of spiders and the dew of morning grass

with horsehair and blossom and death threats

I am the embodiment of flattened worlds and words
words and worlds that are churned through
definition-machines / clogged and rising with the fumes
of the latest evidence
and the smell of hospital

but I am not flat:
I am a plump piece of fruit
ripening slowly to be split open
an exploding bird of paradise
flushed with blood and colour

This poem flows, unstructured, through the currents of my uncertainty and chokes them with a torrent of vivid images. I use the image of "dark corridors" to return to the recurring theme of the unknowns of gestation, despite the pieces of information I gleaned from my pregnancy care. I felt like I was simultaneously balancing the rich, full image I had of myself: a bold, fleshy being incorporating multiple worlds, with the image that the medical model held of me via my pregnancy record: a hospital I.D. number accompanied by a printed list of measures, levels and risk factors. The depths of my embodiment and the way it escaped explanation is demonstrated through the repetition of the word "full, full, / full" and the flood of rich images that are joined together in a kind of short, torrential list: "with liquid and songs and the pips of split cherries / with the webs of spiders and the dew of morning grass". I was trying to capture how I was "the embodiment" of the technical experience of pregnancy and juxtapose how it looked on paper with how it felt in practice. This resulted in a contrast between the "flattened" images of "the latest evidence" which is polluted by "rising … fumes" and "the smell of hospital", with descriptions of myself that are replete with texture, colour and movement: "a plump piece of fruit … to be split open", "an exploding bird of paradise / flushed with blood". The colour red recurs throughout this excerpt, simultaneously the colour of death and of life. All this was in an effort to uncover the vibrant promise inherent within my circumstances – that my baby was coming, and that one way or another, I would meet them soon. The poem continues, drawing on the image of the regenerative phoenix:

"contemplating the birth" (contd.)

will it be like the phoenix, then?
will I rise from the watery ashes
and envelop myself in a new mantle?
a fresh growth of feathers — brighter, wiser
thicker and flush with the knowledge of my own bounty?

or will my hair fall out
once I have birthed the smaller me?

will I die there in that pool;
will my baby drown me and be born
from my leavings?

he said that I scared him, when
I used to talk like that, like things
might not work out

but I do know, I promise,
that I am the mountain that I climb
to prove it can be climbed
I will rise out of the soft valleys
of my own skin and graze the base of the sky
with my fingers and my toes
I will fly back to the nest, un-alone:
ashes and feathers trailing in
my motherly wake

The second half of this poem goes back and forth between images of hope and desolation, as I ask the reader rhetorical questions about my own fate during childbirth. The fiery image of the phoenix is set against the “watery” realm of the birth pool, where I speculate about drowning in order to bring my baby into the world. These lines call back to the first stanza of the poem, where I confess that I am “full” of “death threats” … I am acknowledging that to give birth is to ask for a kind of death; at the very least, the death of an old or outgrown identity. When I refer to my baby being “born / from my leavings” I re-evoke the imagery of the phoenix, who is born from its own ashes. In the closing stanza, images of hope, transcendence and the natural world contend with one another as I deliver a final message to myself: that the process of birth need not destroy me.

Conclusion

As I wait for the birth of my first child, I have written this paper in an effort to come to terms with the profound and deeply altering experience that pregnancy has been thus far. Poetic inquiry has provided a vessel for experiences I have struggled to communicate even to myself, let alone others, while phenomenological perspectives have allowed me to foreground the nature of my subjective experiences and treat them with the weight and respect they deserve, even in the face of alienating (and sometimes frightening) antenatal care. Pregnancy has made me deeply aware of my own embodiment, and poetry opens up a figurative space for me to process my contradictory feelings about the experience. In this way, I am able to conceive of pregnancy as an emergent process of becoming and a deeply embodied adventure in change and acceptance. My research poems about pregnancy are rich with symbols of growth and abundance, signifying my ultimate love and passion for my own experience, even through adversity. Reading back through my own writing, I am reminded of my favourite poem as a child: Judith Wright’s (1949) “Woman to Child”, which describes “multitudinous stars, / and

coloured birds and fishes", even "sliding continents" moving within her. My repeated references to darkness, blood and "night-blossoming fruit" were perhaps an unconscious homage to Wright, who closes her famous poem with lines that could have been written about me, here, today:

> I am the earth, I am the root
> I am the stem that fed the fruit,
> The link that joins you to the night.

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