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Call for multidisciplinary contributions on:

Impeded parenthoods

For the second 2023 issue of the RFAS

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Submitted articles must present empirical materials (both qualitative and quantitative) and may address a range of different fields: sociology, anthropology, political science, history, law, or economics.

Articles must be submitted before Thursday 10 November 2022.

Making “impeded parenthoods” a focus for the social sciences

With a special focus on “impeded parenthoods”, this issue of the *Revue française des affaires sociales* aims to understand, from the sidelines, how today’s boundaries of possible and legitimate parenthood are drawn. If we are to look at impeded parenthoods, we must question the processes of designation and the experiences of those who are either not able or not allowed or who do not feel allowed to be parents. By doing so, we must shed light on implicit and explicit, institutional and non-institutional, and formalised and internalised prohibitions that have an impact on certain reproductive, family and parental structures, to help to bring about a renewal of contemporary parenthood analysis.

The expression “*parentalités empêchées*” (“impeded parenthoods”) has so far mainly been seen in psychology research (Puyuelo, 2001; Lego, 2011). Used as a means to navigate social intervention or clinical management, it has replaced the concepts of “toxic” or “dysfunctional” parenthood. Although these studies sometimes take into consideration material and social constraints, analysis is carried out at an individual level and discusses the aspect of their parental bond considered to be partially pathological. The expression also appears alongside others, such as “*trouble dans la parentalité*” (“parental disorder”), “*mal de parentalité*” (“parental issues”), “*parentalité partielle*” (“partial parenthood”), and “*parents en quête de parentalité*” (“parents seeking parenthood”) (Euillet & Zaouche-Gaudron, 2008). Making impeded parenthood a focal point for the social sciences means changing our perspective and moving away from the “epistemological Yalta” (Darmon, 2008) that builds walls between fields of study and dictates that certain themes should be excluded from sociological analysis by default.

This issue therefore aims to take account of the different means of categorisation at play and the experiences of those who are “impeded” in their desire to be a parent and/or in their role as a parent. This “impediment” can be considered in a broad sense, referring to obstacles that may be legal and medico-social, organisational and economic, subjective and individual, but also biological – in terms of physical conditions (such as illness) that could negatively affect the child’s future and the parenting efforts. By doing so, we also borrow from social science research that uses this term to refer to the occasional and common constraints that hinder experience in various areas of social life, such as impediments to work, study or death in the case of incarceration, but also to kinship and family (such as “impediments to marriage”). In these studies, the term is not necessarily used for the purpose of analysis, which is in this case our exact intention.

Understanding family politics from the sidelines: illegitimate and disqualified parenthood

A focus on “impeded parenthoods” should therefore involve questioning, from the sidelines, new ways of regulating the family in order to understand the way in which “family politics” (Villac, Strobel, & Commaille, 2002) and accepted ideas of “family morality” (Darmon, 1999) lead us to designate certain parents as deviant, and therefore not allowed to be parents.

Following on from the work of Émile Durkheim and Georg Simmel, many studies in legal and family sociology have shown how modernity has been marked by the process of “privatisation of the family” (Commaille & de Singly, 1997). Family and conjugal relationships, tied thereafter to the “private sphere”, were separated from state regulations and became a matter of individual choice (Théry, 1993). According to Claude Martin and Jacques Commaille, law is therefore used less often to limit the choices of individuals on how they organise their private lives and more often to manage the possible social effects of these choices (2001, p.144). It could be argued that this process of privatisation brought about the end of “family morality” (Lenoir, 2003). However, to conclude that we have reached a sort of end to

State familism would be to neglect the fact that familism is renewed through policies and processes that closely regulate and surround practices and subjectivities within the family realm (Cardi, 2010). Their application to parenthood, a moral norm as well as a collective action norm (Chauvière, 2008), is particularly heuristic in this respect.

It is true that civil law has changed greatly. Moreover, the right to procreate or not procreate has been partly extended, for example by allowing single women or couples to access medically assisted reproduction. Recent political and legal arbitrations reveal a shift from the theological age to the bioethical age (Feuillet-Liger & Portier, 2011; Mathieu, 2020). By placing an emphasis on the parental role, the very term “parenthood” has come to encompass many different family structures (single parent, multi parent, same-sex parents) and the different ways of creating a family, beyond the heteronormative perspective. Finally, social policies and interventions now recognise the rights and capabilities of parents, who are seen to be “supported” rather than “controlled”. Although the signs of moving away from “family policing” (Donzelot, 1977) cannot be negated, contemporary means of regulation or self-regulation of procreative and parental efforts force us to take a more nuanced stance. Now built upon concerns for the interests and wellbeing of the child, the means of (self) regulation adopt forms that are institutional or non-institutional, shared or internalised, and contribute to the designation of certain types of parenthood as deviant or even impossible.

Today, the familism of French public policy is focused on the interests of the child to be born, educated and protected (Messu, 2020). In the 2000s, a new rhetoric centred on the role of parents established responsible parenthood as a new category of public action (Martin, 2006; Bachmann *et al.*, 2016; Neyrand, 2016). Administrations, associations and professions (Serre, 2009; Garcia, 2011; Odier, 2018) became the gatekeepers of this “positive” parenting intended to give children the material, educational and emotional resources they need to grow. This call for positive parenting (Le Pape, 2012; Martin, 2014; Martin & Leloup, 2020; Neyrand, 2022) legitimises the introduction of parent support policies and a medical and administrative monitoring of childbirth and parenting skills.

In these spaces, we can observe a control exercised through speech (Memmi, 2006; Vrancken, 2011) resulting in a psychologisation of parenting difficulties. By concealing the material and socio-economic constraints faced by certain families and by drawing attention to the educational style of the dominant groups (Serre, 1998; Millet & Thin, 2007; Cardi, 2010; Vozari, 2015), professionals create deviant parental figures (Pothet, 2016), stigmatising mothers from working class/ethnic minority families in particular. Mothers and future mothers are always the main targets of family policies as they are considered to be the primary or even only custodians of the child’s future (Cardi, 2010; Vozari 2012; Blöss, 2016), sometimes even before the child is born. By referencing the neutral “parent” figure in discourse (Devreux, 2004), these policies contribute to erasing the social relations associated with gender that affect all levels of the procreative process (Thomé, 2016; Mathieu & Ruault, 2017; Clément *et al.*, 2019; Boulet, 2021).

Experiencing impeded parenthood

The power relations related to class, sex and race, as well as age (women deemed to be “too” old/young are suspected of being “bad mothers”), sexuality (ongoing questioning of the possibility for female same-sex couples to raise a child without a father figure) and disability (physical or mental disabilities of parents, often seen as prejudicial to a child’s wellbeing) are expressed not only through institutional discourse and practice that define the act of parenthood.

These good parenting norms are also spread in the media and various cultural institutions, from parent coaching services administering social rules for educational styles that “optimise” the well-being of children. They also circulate within families, highlighting the extent to which socialising family experiences, which can be challenging (Eideliman, 2009; Béliard *et al.*, 2019), play a decisive role in the “shunning” of certain forms of parenthood (Buisson, Le Pape & Viot, 2019). Furthermore, parenthood can be an intended plan impeded by obstacles or various types of restrictions.

This “background” incursion into impeded plans of parenthood highlights the complexities and ambiguities inherent in journeys to parenthood and the struggles of certain individuals who do not feel legitimised as future parents, while we have been taught that individuals can, quite naturally, reproduce without difficulty. The impeded parenthoods angle of approach helps to focus on the role of these uncertainties that constantly hover over the possibilities of procreating or being a parent. In addition to a detailed analysis of the emotional burden of becoming (or not becoming) a parent, we also want to highlight all the unseen efforts associated with parenthood, which often remains only a plan. In this vein, it is worth asking ourselves if and to what extent individuals and couples affected by this feel stigmatised by their procreative and parental potential being impeded. Moreover, how do they experience the disparity and contradictions between the norms upheld by institutions and those present in the family (in the broadest sense of the term), and more generally in society? Lastly, we will examine the ways in which questioning impeded parenthoods can help us to envisage other ways of “becoming parents”, by analysing individual or collective forms of “disimpediment”.

We propose three focus areas for analysis:

1: What can impede parenthood?

2: Self-impeded parenthood

3: Exercising parenthood in a situation of impediment

Focus area 1: What can impede parenthood?

Choosing not to have children is still considered a deviant act: when non-parenthood is identified or declared as a voluntary choice, it is often questioned, shunned, or merely suspected as a way of hiding or causing regrets (Debest, 2014); whenever non-parenthood seems to result from a combination of constraints, it implicitly becomes a problem to be resolved (Cahen, 2013). The call to procreate is co-created by a combination of social, economic and political reasoning (Debest & Hertzog, 2017), which can have the opposite effect and impede parenthood. The various institutions that regulate and support parenthood can mutate into agents that control or even prohibit access to parenthood. This focus point therefore examines the practical forms of this impediment, i.e. the various factors that can, in one way or another, hinder the desire to begin one's path to parenthood and to become a parent. How does this impediment operate? What forms does it take? We must determine the ways in which these rights and legitimacies to procreate or become a parent are constructed, diffused, applied and reconfigured, both synchronically and diachronically.

Without attempting to compile an exhaustive list of these impediments, they mainly stem from two main areas of expertise and action: medicine and child protection. The former deals with requests for treatment when procreative activity is prevented by biological factors: repeated miscarriages and infertility; cancer diagnosis at an age socially associated with procreation; chronic diseases that could be aggravated by pregnancy or that affect fertility (multiple sclerosis, diabetes, endometriosis). Additionally, close medical supervision of fertility tends to target certain populations (contraception, even sterilisation of women with mental disabilities). However, this level of impediment is often accompanied by the intervention of other institutions, revealed by the inseparably medical, legal and bioethical management of medically assisted procreation (Memmi, 2003; Mehl, 2021), which can lead to the exclusion of undeclared migrants (Schuller, 2021), people receiving free state medical aid in France (Sauvegrain, 2021) and members of the LGBTQIA+ community.

The area of child and infant protection encompasses a range of systems that impede parenthood, responding to the State's need to regulate families. As such, following a natalist reasoning, primarily that of France, which has historically adhered to a "familist" model, the importance is placed on "bringing children into the world", but also of not allowing them to be raised by just anyone or in any way. The revoking of parental authority, psycho-medical-social interventions by child and infant protection services (Gojard, 2010; Vozari, 2012), legal regulation of parental activity during separation (Biland & Schütz, 2014), paths to accessing adoption services (Ramos, Kertudo & Brunet, 2015) and the increase in parenting support since the 2000s are all at the heart of these social control mechanisms established by public institutions. Parenthood, and consequently family itself, should therefore be perceived as "institutional work".

Identifying such obstacles must be accompanied by examining the institutions authorised to assign the rights to parenthood. Impeded procreation or exercising of parental authority are strongly underpinned by categories of thought and action shared by a certain number

of officials and the institutions they operate in: bioethics laws, healthcare professionals, psychologists, social work and child services, youth courts, etc., all give form to these obstacles, constantly renewing them on a daily basis. Lastly, public control of parenthood is accompanied by pervasive social regulation that permeates all relational networks. From this perspective, family and peer groups take on a major socialising role. Although the many structures of social control at play do not allow everyone who wishes to become a parent to do so, they do not necessarily overlap. They often stem from different, even conflicting, reasoning methods and do not act as one. We must therefore ask ourselves how the value systems that drive these institutions compete, express themselves and come together when defining the rights and legitimacy to engage in parenthood. Conversely, by asking ourselves what norms these structures share, we can better understand the levels on which these prescribers intersect and, as a result, the conditions for creating this policy of monitoring (aspiring future) parents despite how difficult it is to put into practice. In sum, it is a question of analysing how these structures that attempt to regulate supposedly “private” issues – from parentage and domestic arrangements to bodily conditions – determine profound social inequalities in procreation and parenthood.

Focus area 2: Self-impeded parenthood

Given the various forms of socialisation, the weight of the “cultures of parenthood”, and the socially prescribed limitations – and sometimes forms of social distinction (Landour, 2016) – they produce, access to procreation and parenthood is very unevenly distributed. Using this as a starting point, the second focus point of the issue's theme focuses on experiences of impeded procreation; starting from the perspective of the “impeded” does not mean that we are able to necessarily define the exact nature of this impediment, but instead to reach a broader understanding by identifying situations experienced as potential impediments. It is a question of examining how these “impeded” individuals experience the dominant norms of procreation and parenthood; they can internalise them, and either conform to the expected image of parenthood or remain blocked by the obstacles, but they can also gradually deal with these expectations, appropriate them, or even bypass them completely.

This angle of approach aims to re-examine the internalisation of procreation norms (Bajos & Ferrand, 2006). Most of the available literature that assesses socially legitimate conditions for starting a family follow approaches focused on methods of fertility control: abortion (Bajos & Ferrand, 2002; Mathieu 2016), contraception and sterilisation (Thomé, 2019; Tillich, 2019), neonaticide (Ancian, 2022), infertility (Tain, 2009; Mathieu, 2013); or (refusal of) embarking on parenthood (Ensellem, 2004; Régnier-Loilier, 2007). They give precious findings on the determining processes at hand and women’s autonomy over sexuality and procreation. However, probably due to the fear of downplaying the element of choice, the sociological literature has paid little attention to all the factors that impede the future plans of individuals and, as a result, to the struggles and conflicts that accompany the process of (non-)procreation over time. In this respect, individuals often feel torn between the

the responsibility of adhering to the current standard and the temptation to flout it. In this way, placing the emphasis on the feeling of impediment leads to analyzing the emotional labour involved with rejecting or renouncing procreation. By dealing with the subjective experience of impeded parenthood, this analysis will explore what some people experience as a stifled power to give life and how this challenge presents itself according to social position and available resources, without neglecting to address the suffering caused by these situations of “forced non-procreation”.

In particular, by following a process-based approach, the aim is to understand how this impediment mutates into a self-impediment, taking into account the conflict between differing grounds for impediment. The aim is to study the paths that lead individuals and couples to resign themselves to giving up due to a lack of authorisation (from institutions and from their social circle) and the required skills. We know how much people can feel unfit to raise children or doubtful and fearful of not being “good parents”. But do some individuals impede themselves from starting a family because they internalise the idea that they are not “suitable” to become parents? This question touches on the performative effects of good parenting norms, particularly those based on good intentions, which can make certain parents experience permanent feelings of doubt (Mazet, 2019, p. 18). Faced with what can seem like a “parental baccalaureate” (Milano, 2019), potential parents require a wide variety of resources to conform with these expectations. Feeling unsuitable for the responsibilities of parenthood therefore varies according to the social position and properties of individuals, which will be examined in this issue.

Calls to be good parents, conveyed in an individualising manner, have a greater impact on women and often determine their desire to develop parenting skills. In parallel with the demands for maternal availability, there is always a lingering suspicion of incomplete or failing motherhood, one that encompasses differing representations and practices according to ethno-racial categorisation, class, as well as age (Löwy, 2009; Vialle, 2018), disability (Eideliman, 2010; Doé, 2019), sexuality (Frémont, 2018; Meslay, 2021) and (either mildly or severely) troubled childhoods (Ganne, Dietrich-Ragon & Frechon, 2019). Focusing on impeded parenthoods allows us to examine the scope of the deep-seated ambiguities that set the perimeters for an individual’s maternal future or lack thereof. We can put forward the theory that the interplay of social pressures and disqualification of maternal commitment can produce what appears to be *impeded attitudes* of procreation and parenthood. To what extent do socialising messages, particularly the exclusionary models of so-called “harmful” motherhood, influence an individual’s plans of parenthood? How does this gendered reasoning of parental empowerment affect maternal identity and the mother’s practices after the child is born?

Beyond the impression of being too “inept” to engage in parenthood, some individuals and couples believe the option to be too dangerous – for their health, their career, or their social circle. The expected contributions could also address a broad range of impediment patterns, for example individuals who resign themselves to not bringing a child into the world, despite their desire to do so, for political reasons (particularly due to feminist or environmentalist beliefs).

Focus area 3: Exercising parenthood in a situation of impediment

Lastly, beyond impediment itself, how are these forms of parenthood put into life, despite being “disqualified”, carried out part-time or remotely, or in confinement or mourning? This final focus point aims to grasp the concrete ways in which parenthood is practised in a situation of impediment, and how some members of this category manage to “dis-impede” themselves. The literature on the subject remains scarce given that the voice of “impeded parents” has so often been silenced, apart from when expressed collectively on public platforms. This issue of the *Revue française des affaires sociales* aims to fill this gap and document realities that offer us alternative visions of parenthood.

An initial approach to documenting this matter is to look at regulatory institutions, to analyse the way in which “impeded” individuals experience this impediment or stigma, while carrying out their parental efforts despite being subject to various processes of parental “disqualification” (Paugam, 2014). How do they experience this deviant act? Under whose gaze do they have to pursue parenthood and under what conditions? What de-stigmatising strategies do they eventually adopt? What practices do they develop to fight these forms of impediment and enjoy the full experience of parenthood on a daily basis? Working from the perspective of “impeded” parents, who break the “rules of parenthood” (Stettinger, 2019), the aim will be to understand the way in which these individuals implement parenting practices “under surveillance” (Gruson, 2003), sometimes bypassing norms and stigma (Pothelet, 2016). We might also question whether some of them may take alternative routes when there is an “impossibility” to procreate or when they are perceived as “incapable”. Answering these questions naturally gives rise to questions of methodology. They can be explored through a reflexive approach to the background processes involved in this issue and their political dimensions (Fassin & Bensa, 2008; Naudier & Simonet, 2015).

Impediment may also take on other forms, such as separation, bereavement, migration, war or ill health. As others have done regarding the case of maritime workers (Guichard-Claudic, 1999) or incarcerated individuals (Touraut, 2012; Cardi & Latte-Abdallah, 2014; Quennehen, 2019), we examine how “remote shared parenthood” is organised (Touraut, 2014). These forms of “parental distancing” can reinforce the gender divide of parental work. They can also give rise to a revision of parental roles and contribute to new, innovative ways of creating a family. For example, keeping distance from men can be a means of emancipation from male domination and the subaltern roles women have been assigned (Guichard Claudic, 2004; Touraut, 2014).

Lastly, the articles of this final focus area could discuss the way in which some individuals claim their right to parenthood. This will involve a more targeted analysis of collective action and legal developments to show how some impeded parenthoods try to become possible and legitimate ones.

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Recommendations
and key dates

- The **first versions of the articles** must be submitted before **10 November 2022**.

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(Also see the RFAS's "advice to authors" (in French) [website:
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