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Buying into motherhood?

Problematic consumption and ambivalence in transitional phases

The VOICE Group[1]

[1] About the author group
This article is the result of collective, collaborative research undertaken by members of VOICE Group - VOicing International Consumption Experiences. The members of this group, in alphabetical order, are Andrea Davies (Leicester University), Susan Dobscha (Bentley University, USA), Susi Geiger (University College Dublin), Stephanie O’Donohoe (The University of Edinburgh), Lisa O’Malley (University of Limerick), Andrea Prothero (University College Dublin), Elin Brandi Sørensen (University of Southern Denmark), Thyra Uth Thomsen (Copenhagen Business School).

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Abstract

Current theory on transitional consumption seems to rest on the premises that 1) consumption facilitates role transitions, 2) consumers know how to consume their way through these transitions, 3) consumers are motivated to approach new roles, and 4) consumption solves liminality. This perspective offers an incomplete picture of consumption’s role in the management of major life transitions, however. This article explores the ways in which ambivalence is woven through consumption experiences in times of liminality. It reviews prior research on consumption, role transitions, and ambivalence in the context of women’s transition into motherhood. Findings are presented from an international interpretive study of women’s consumption experiences during their transition to motherhood. Our findings suggest that while consumption can indeed play a positive role during role transitions, it can also, at other times, make transition a complicated, complex and confusing process.

Keywords

Consumption; ambivalence; transition; identity; motherhood; uncertainty; resistance; responsibility; constraints; aspirations.
Introduction

Entering a new role in life is almost always accompanied by an interaction with the marketplace (Hogg et al. 2004). Accordingly, consumers’ role transitions have served as a window on several consumption-related phenomena, such as changes in brand preferences (Andreasen 1984; Mathur, Moschis, and Euehun 2003), changes in decision-making processes (Gentry et al. 1995), and changes in retail store patronage behavior (Lee, Moschis, and Mathur 1999).

Consumers in transition can also be said to provide a resource of great value for research on the relationship between symbolic consumption and identity construction (Hogg, Maclaren, and Curasi 2003), and several studies have sought to illuminate identity-related consumption among new mothers (Fischer and Gainer 1993; Jennings and O’Malley 2003; Prothero 2002; Carrigan and Sczmigin 2004; Thomsen and Sørensen 2006; Banister and Hogg 2006), empty nest mothers (Hogg, Maclaren, and Curasi 2003; Hogg et al. 2004; Curasi, Hogg, and Maclaren 2001; Olsen 1999) and consumers experiencing divorce (Bates and Gentry 1994; Burroughs and Rindfleisch 1997) or arranging funerals for family members (Bonsu and Belk 2003). Other works have focused more on specific transitional consumption acts or possessions, including how the consumption of plastic surgery paves the way into new life roles (Schouten 1991), how the acquisition of new possessions may contribute to the development of new identities (Noble and Walker 1997; Silver 1996; Solomon and Anand 1985; Thomsen and Sørensen 2006), and how the disposition of possessions may symbolize the ending of a particular life stage (Young 1991; Adelman 1992; Price, Arnould, and Curasi 2000). Reviewing this growing body of research, we find that consumption and the functions it may have for consumers facing transitional identities tend to be conceptualized in four different but related ways:
**Consuming to manage role uncertainty**

Changes in role status can be extremely challenging, with individual experiences of role changes shaped by factors such as the existential meanings invested in, and the stress associated with, roles left behind (Hogg et al. 2004). Since roles concern the rights and obligations surrounding a status position (Coser 1966), uncertainty about how to perform a new role is also likely to be a source of stress. The consumption of items supporting the role a transitional consumer seeks to play may reduce feelings of role uncertainty. Reliance on symbolic consumption is expected to be inversely proportional to the consumer’s degree of role knowledge (Solomon 1983) and proportional to the degree of role uncertainty (Solomon 1983; Schouten 1991). The less secure consumers feel about their key roles, the more likely they are to use stereotypical symbols to enhance role performance (Wicklund and Gollwitzer 1982; Solomon 1983; Wicks, Nairn, and Griffin 2007). This staging of self (Goffman 1959) and the use of consumption goods as props for identity construction has been widely explored in consumer research (Arnould and Thompson 2005). Solomon (1983, 324) suggests that role performance is dependent on the degree to which material symbols used by the role player parallel the symbolism associated with the role. These material symbols may serve not only to enhance impression management, but also to facilitate or inhibit certain desirable/undesirable role performances and self-definition; in this sense, a pair of high-heeled shoes may stimulate a feminine gait and a suit may encourage more formal comportment in a recent graduate attending a job interview. Maternity clothing may perform a similar function, making impending motherhood more real for a woman and those who gaze upon her.

**Consuming to achieve an ideal self**
If consumers are unhappy with their current self they may consume their way to close the gap between real and ideal self (Schouten 1991). This function of consumption taps into one of the prime aspects of symbolic consumption, that is the symbolic extension of self (Belk 1988). For instance, poor body image may motivate women to consume aesthetic plastic surgery in an act of symbolic self completion (Schouten 1991; Seebarsingh, Patterson, and O’Malley 2001). Distancing themselves from “childish” fashions and activities, and adopting new purchasing or shopping patterns, may help tweens feel their way to older and more sophisticated selves (Waerdahl 2005; Russell and Tyler 2005), and the consumer choices made by expectant or adopting women speak to their many possible selves (Banister and Hogg 2006; Houston 2004).

**Consuming to cope with liminality**

Consumption may also ease the discomforts related to role disruptions (Solomon 1983). Noble and Walker (1997, 32) define liminal transitions as “a change in a significant life role marked by a transitional or liminal period during which (a) personal identities are suspended, producing significant psychological consequences, and (b) symbolic consumption may be used to facilitate the transition to the new role.” The significant psychological consequences that Noble and Walker refer to are primarily role uncertainty and discrepancy between real and ideal self; as they acknowledge, certain transitions – like moving to a larger house in the same neighborhood – may not lead to liminality, since they bring limited psychological discomfort in their wake. Thus, implicitly, it is assumed that the more significant the transition is, the more likely it is that consumption will be used to facilitate the transition to the new role by reducing uncertainty (Solomon 1983) or by narrowing the gap between the real and the ideal self (Patrick, MacInnis, and Folkes 2002). In this context, Thompson et al.
(2008) suggest that the acquisition of baby goods in pregnancy helps women imagine their motherhood and anticipate the web of obligations associated with this new role.

**Consuming to bridge identities**

Sometimes the discomfort in unstable and transitional identity phases is due to a conflict between current identity ideals. Thus, on top of coping with a discrepancy between real and ideal selves, consumers may face the challenge of negotiating several conflicting ideal selves.

Ahuvia (2005) illustrates how consumption can *demarcate* which of the conflicting identities is the preferred one. He also describes how objects – particularly those which are loved - can aid in *synthesizing* and thus combining conflicting aspects of the consumer's identity; allowing the consumer to enjoy the best of both identities. Finally, consumption may work to build a *compromise* between conflicting identities as it may facilitate the acceptance of a middle-ground identity, which requires the consumer to give up on possible attractive features of both identities (Ahuvia 2005). For instance, mothers’ everyday shopping may reflect both their role as a mother and personal preferences.

**Challenging the underpinning assumptions**

From the literature reviewed above, it seems that most research on consumption in transitional phases presents it as a solution to the discomforts of role uncertainty, liminality, and gaps in current and future identities. Noble and Walker (1997), for example, do not report on any negative or ambivalent feelings related to transitional consumption. Their stated purpose is to examine the facilitating aspects of consumption, and so they only investigate how consumption helps resolve identity issues in transitional phases. This is also true for Wærdahl
Ahuvia (2005) is critical of the postmodern project, which demands that people engage constantly in the difficult task of defining themselves. Despite this, he does not appear to question the helping hand of consumption; consumption still represents a positive solution to the consumer rather than a possible problem in itself. However, there are examples from other areas of consumer research, as for instance consumer resistance towards innovations (Sheth and Ram 1987) or anti-market events (Kozinets 2002) that illustrate reasons for non-consumption and generally point to a darker side to consumption processes. As Mick (2006, 1) notes, “[t]here are many riddles, many stresses, and much suffering in our world. And so many of these conditions are instigated or aggravated by consumer behaviors…” This suggests that there is value in undertaking – and reading – consumer research through a more critical lens (Denzin 2001; Saren et al. 2007). Indeed, a re-reading of prior studies of consumption in transition yields traces of less positive aspects of transitional consumption, although these rarely take center
Such traces have also been found in sociological studies of consumption practices. Russell and Tyler (2005) report on shame and fear among young girls seeking their way through consumption to adulthood; talking about making shopping mistakes is taboo and certain shopping environments appear to be fear-inducing – hence the young girls’ transition into full-blown consumers seem to be hindered by aspects of consumption itself.

Research within the consumer culture theory tradition has often foregrounded consumer agency (Arnould and Thompson 2005), with an emphasis on how consumption allows people to pursue their own agendas. Perhaps one of the surprises associated with the transition to motherhood is bound up with the radical shift in the lived experience of agency as they incorporate the mother role into their lives. Rather than connoting a sense of personal control, agency now refers to their responsibilities; they are after all their babies’ agents in the world, and “the presence, dependence and the needs of the other have to be taken seriously” (Sévon 2007, 12).

Some recent accounts of women’s transition to motherhood highlight negative aspects of consumption, challenging the four benign assumptions outlined above. First, while consumption may facilitate role transitions, it may also complicate it. Consuming the wrong items may considerably undermine consumers in establishing their desired identity. For example, Thomsen and Sørensen (2006) describe how a new mother found herself being misinterpreted because of the comparatively inexpensive pram she bought for her first child. This relates directly to the second premise, that consumers know how to consume their way through transitional phases. In fact, consumers do not always know how to do so. In transitional phases they typically face not only role uncertainty but also consumption uncertainty, since many role transitions are linked to fields of consumption that consumers have never navigated before and in which they are largely unaware of the symbolic or public meanings of different products and brands. Third, consumers may not be motivated to take on
the impending role and thus have difficulty relating to consumption objects that symbolically represent this role. For instance, Jennings and O’Malley (2003) found that consumption among first-time mothers depended in part on the degree to which they embraced their new role, particularly in relation to the dominant ideology of intensive mothering. Finally, Houston’s (2004) review of the ART (assisted reproductive technologies) marketplace and of ART consumers found that ‘other mothers’ (women whose fertility was impaired either biologically or socially) had to construct and produce reconstituted images and signs of what it meant to be a nuclear family because the strategies they employed to construct a family were outside the traditional routes that govern culture and in turn the marketplace. The fact that marketplace solutions in these circumstances may increase rather than reduce consumers’ felt liminality was also discussed by Geiger (2007).

**Ambivalence, motherhood and consumption**

Another field that has touched upon the negative aspects of consumption is the study of consumer ambivalence. Ambivalence has been characterized as “a fundamental existential dilemma in the human condition” (Smelser 1998, 13) and a response to the project of modernity. According to Bauman (1992, 15), “if modernity is about the production of order, then ambivalence is the waste of modernity.” While it is most readily understood at the level of conflicting emotions within an individual, Merton and Barber (1963, 5) distinguished between psychological ambivalence and its sociological counterpart, which examines “how ambivalence comes to be built into the structure of social statuses and roles.” For Connidis and McMullin (2002, 558-9), ambivalence is a powerful concept since it bridges individual action and social structure:
At the social structural level, sociological ambivalence has been viewed as contradictory normative expectations that occur in institutional resources and requirements (statuses, roles and norms). At the individual level, psychological ambivalence has been referred to as contradictions that are primarily subjective and evident in cognitions, emotions and motivation.

Thus, as social actors seeking to exercise agency in the negotiation of our relationships, we try to meet the conflicting demands and expectations placed on us by ourselves and all pertinent social structures (family, work, cultural background, etc.). According to Connidis and McMullin (2002), our attempts to deal with this are embedded in, and constrained by, a number of structured social relations such as class, age, race, ethnicity, gender – and through these relations opportunities, rights and privileges are differentially distributed and thus not equally accessible to all. Ambivalence often provokes anxiety and demands some response, even if that response is the decision to take no action. Freud’s list of defenses against ambivalence included reversing or repressing one side of an ambivalent feeling, or substituting a remote object or symbol for the real object of ambivalence (Smelser 1998). Given the continual interactions and negotiations of daily life, however, any resolution is likely to be temporary rather than permanent (Connidis and McMullin 2002).

The intertwining of psychological and sociological ambivalence has been explicitly explored in several studies of maternal ambivalence. Parker (1997), for example, argues that in order to understand why psychoanalytical theory tends to pathologize it, it is necessary to explore the treatment of this type of ambivalence within the interrelated fields of psychoanalysis, cultural representations of motherhood and the social management of mothering. Similarly, Brown (2007) suggests that maternal ambivalence is not always due to a mother’s relationship with her child, but has its basis in social and cultural pressures,
including beliefs that mothering comes naturally to women and pressures to be a good mother according to prevailing ideologies. A similar point is made by Banister and Hogg (2006) and Banister, Miah, and Hogg (2008) in their discussions of new mothers’ attempts to steer a course between their actual, ideal, and undesired selves, and the “ought” selves communicated by others and evident in wider social and cultural discourse. The ambivalence felt by many new mothers as they negotiate the duty of caring has also been explored in depth by Sévon (2007).

Within consumer research, a few studies have focused on ambivalent consumer responses to women’s magazines (Stevens, Maclaren, and Brown 2003), advertising (O’Donohoe 2001; Williams and Aaker 2002), retail outlets (Hogg and Penz 2008), commodified celebrities (Wicks, Nairn, and Griffin 2007) and technology (Mick and Fournier 1998). Schouten (1991), for example, notes an informant’s ambivalence about cosmetic surgery on her nose: on the one hand this consumption act could pave the way for a desired transition, but on the other hand she is worried about being stigmatized by it and about the outcome of surgery. Although Schouten does not describe consumption in liminal phases as completely problem-free, he emphasizes its positive, more experimental and playful sides, and the theme of ambivalence does not find its way to the conclusions of the study.

The most detailed treatment of ambivalence in the consumer research literature is offered by Otnes, Lowrey, and Shrum (1997), who draw on social theory to explore psychological, sociological and cultural ambivalence in the context of consumption. They define consumer ambivalence as:

The simultaneous or sequential experience of multiple emotional states, as a result of the interaction between internal factors and external objects, people, institutions, and/or cultural phenomena in market-oriented contexts, that can have direct and/or indirect
ramifications on prepurchase, purchase or postpurchase attitudes and behavior (Otnes, Lowrey, and Shrum 1997, 82-3).

Their qualitative study of wedding planning identified four sources of consumer ambivalence among brides-to-be, each with a particular set of coping strategies. Thus ambivalence arose when expectations of products or retailers clashed with reality and led to brides returning merchandise, changing stores, “toughing it out”, or being assertive in dealing with retailers or service providers. Ambivalence linked to product or task overload tended to be dealt with by seeking assistance or information, or by a process of simplification. Role conflict with purchase influencers (such as parents) generally led to resignation or compromise, while conflicts of custom and value tended to be met with resignation, modification, or ‘defiant nonpurchase’.

Although brides-to-be may be seen as undergoing a significant role transition, the discussion of ambivalence presented by Otnes, Lowrey, and Shrum (1997) is framed in terms of consumption rituals rather than liminality. Similarly, the liminal status of bereaved consumers is not addressed in Dermody and Bonsu’s (2008) exploration of ambivalence in death ritual consumption, although their work is valuable in highlighting how the many roles played by other participants can create consumer ambivalence at this time.

Overall then, it seems that the various strands of research do not yet cover this ground sufficiently: sociological studies of ambivalence have not engaged with consumption; studies of consumer ambivalence have not engaged with liminality; and studies of consumer liminality have not engaged with ambivalence.
Method

In our efforts to explore the complicating aspects of consumption in transitional phases we draw on a multi-method qualitative study involving 25 new mothers across four countries – Denmark, Ireland, the UK and the US, as detailed in Table 1 below. The women were interviewed towards the end of their pregnancy and several months after the birth of their first child. They were asked about their experiences, thoughts and feelings about identities, relationships and consumption related to their transition into motherhood. In line with phenomenological interviewing practice (Thompson, Pollio, and Locander 1994), the focus was on eliciting accounts of particular experiences. All interviews were audio recorded and transcribed.

Participants kept acquisition diaries prior to the first interview, and these entries mapped how consumption punctuated their transition experience. They occurred daily or sometimes several days apart and included a record of purchases, notes or updates on information being gathered for larger purchases such as travel systems (prams), and some comments on associated thoughts and feelings. The diaries served as autoelicitation tools (Heisley and Levy 1991), shaping the topics of conversation for the first interview in particular. Participants were also asked to take photographs of goods that were either purchased or received through other means, such as gifts or loans. In some cases photographs had been taken prior to the interview.
and, in those cases, served as an additional autoelicitation tool. On other occasions, participants and researchers collaborated on the photography task at the end of the interview, providing opportunities for observing the material preparations and for further discussion.

Participants were obtained by snowballing methods (Miles and Huberman 1994). Similar participant acquisition strategies and outcomes have been reported in sociological studies of the transition to motherhood (Bailey 1999; Miller 2005). Our participants were mainly white, middle-class, aged in their mid-twenties to late-thirties. All were in stable, heterosexual relationships, and many had invested significant time and effort in developing successful careers. In this they were similar to, if in some cases older than, the CYMFAs (contemporary young mainstream female achievers) described by Caldwell, Kleppe and Henry (2007, 95) as having “the greatest opportunity to strongly determine their gender roles, lifestyles and consumption activities” and being able to “operate effectively in a wide variety of everyday gender role domains”. Presumably, then, our sample should be very well equipped with tools to negotiate the marketplace and may be less prone to experiencing consumer ambivalence than other, perhaps more marginalized consumer groups. Despite the participants’ demographic similarities, it should be noted that their paths to motherhood were varied. Some pregnancies were unplanned, others were assisted or came about following earlier miscarriages. Some occurred within long-term relationships, others to women with relatively new partners. Thus, as outlined in Table 1, our sample offers enough similarities to draw comparisons across participants, but also contrasting experiences in terms of the transition to motherhood and the context in which it was undertaken.

Emerging themes were gleaned using the ‘hermeneutic circle’ commonly employed by qualitative researchers (Thompson, Pollio, and Locander 1994). That is, we employed a tacking back and forth model for finding commonalities among research participants’ experiences and perspectives, while maintaining a close connection to the
individual participants’ social and cultural contexts and lifeworlds. The hermeneutic circle was applied both intratextually (i.e. within cases, pre- and post-birth) and intertextually (i.e. themes emerging from one set of interviews were compared with data from other transcripts, with the cross-cultural sample and research team aiding this process).

As eight researchers working in four countries we have been conscious of our own situatedness (not least as mothers ourselves) in relation to this research study and participants, and have sought to articulate and draw on this throughout the research process. At the beginning of the project, each researcher wrote a reflexive account of her own transition to motherhood. Circulating these within the group not only indicated the different social, cultural and medical or institutional contexts in which we operated, but also prepared us for the range and potential sensitivity of issues that might arise in the course of our interviews. Reflexive diaries in relation to our interviews and data as well as email exchanges between group members were used as further analytical levers. Working in a team introduced an additional layer of relationships to the theoretical exploration, field work, data analysis and writing up, enhancing but also complicating the process of knowledge creation (Mountz et al. 2003; Ribbens and Edwards 1998). Linguistic differences brought a need for clarity of expression and discussion about nuances adding to the quality of analysis. The diversity of motherhood-related terms and commercial baby products and services made explicit structural and cultural differences such as those around maternity leave entitlement or cultural perceptions of pregnancy that could have otherwise been overlooked. These are reported in a separate paper which examines how differences in our cultures, language, research interests, career and motherhood trajectories impacted on the on-going analysis (VOICE Group 2008).

Findings
Many of our participants’ accounts illustrated the ambivalent role that consumption can play when people are attempting to manage a transition into a new phase of their life cycle. In our reading of the interviews several themes emerged that address how ambivalence is woven through consumption experiences in times of liminality: consumption uncertainty, consumption resistance, consumption fear, and under-resourced consumption. In the following sections, we present these themes through exploring related instances from our data.

**Consumption uncertainty and role uncertainty**

As discussed earlier, consumption is believed to be able to help overcome role uncertainty (Noble and Walker 1997; Schouten 1991). Sometimes, however, consumers are uncertain about consumption *per se*, and in such cases its ability to solve or soothe role uncertainty can be rather limited. Several participants described how their pregnancy led them to enter consumer worlds that were alien to them:

*Because to begin with I had a hard time getting a grasp of it. [...] it’s a whole new world that you need to get familiar with [...] Well, I have never been interested in things like that. Those are completely different things. I have never thought about having a pram or a kombi-pram or a duo-pram or a stroller or whatever they are called. Never ever. Or baby alarms – it’s crazy – all the things they can do. Video surveillance and you name it.*

*(Nina, pre-birth interview, Denmark)*

This “whole new world” illustrates the feeling of uncertainty about baby products, resonating with the task and product overload discussed by Otnes, Lowrey, and Shrum (1997). Many
participants were taken by surprise by the range of items they needed to consider, and by the knowledge required to make their choices; as one expectant mother remarked, “even buying socks is something you have to learn about.” In some cases, participants simply did not know how particular products worked. Terry, for instance, was unsure about baby slings, and received little help from sales assistants:

…it was something that I thought I really wanted and I was like – I could never figure out how to get them on. They’re like, just watch the video. I’m not going to watch a video about how to put on a sling, you know.

(Terry, post-birth interview, USA)

Terry’s reluctance to watch the video suggests some frustration with her status as a novice in this market; she found it hard to accept that she could be defeated by this item. Several women noted how pregnancy also served to defamiliarize domains of consumption that had previously been unremarkable and unproblematic; some favorite foods were recast during pregnancy as potential risks to their unborn babies, for example, requiring aspects of their diet to be relearned or rethought. In other cases, participants found themselves confused by terminology. They described how they struggled to make sense of the shopping lists they came across in stores, books or magazines, because they were written in a language that they had yet to master:

You walk in there and there’s so many things it’s like, I don’t know, you don’t really know what you need at first. [...] they give you this list that’s like three pages long of everything you need and looking at the list I’m like, I don’t even know what these things are.

(Abigail, pre-birth interview, USA).
I had this famous list in my hand in Mothercare and it said ‘vests’, and I couldn’t find anything that were called vests, and I thought this is absolutely ridiculous that I actually don’t even know what baby vests are. And in the end, I think they call them sleeveless body suits or something. But it’s like, I didn’t know it, and I was afraid I would buy the wrong ones, and that particular experience completely freaked me out because I was going oh my God, I thought I was ok, because I’ve been surrounded by kids, with my family and friends and everything, but in fact if I don’t even know what a kid’s vest is what hope do we have? And that’s what really freaked me out.

(Ella, pre-birth interview, Ireland)

The way in which Ella allows her ignorance of baby clothing terminology to undermine the confidence gained from being “surrounded by kids” illustrates the materiality of contemporary motherhood, in that consumption is bound up with imagined maternal trajectories (Clarke 2004). For her and other participants, lack of product knowledge appeared to be bound up with insufficient knowledge of their new role, to a point where, in their more anxious moments, they translated their perceived failings as consumers into fears about their inadequacies as mothers.

Generally used to navigating the marketplace with confidence, our participants were acutely aware of their befuddlement in this new consumption arena. This appeared to be heightened in many cases by a sense that it was primarily their responsibility to navigate this unfamiliar terrain, particularly in those cases where women were tasked with shopping for the new baby. In some cases this reflected traditional gender roles within their relationship, in which case there was the weight of cultural expectations that they would be able to accumulate the right things in preparation for the birth of their babies. In other cases,
particular circumstances led to the women assuming greater responsibility for baby shopping. Several participants had recently moved house, for example, and their husbands or partners had taken responsibility for the more physically demanding work on the house while they focused on shopping for the baby (VOICE Group 2009). In other situations our participants had more time to shop as they began their maternity leave while their partners were still very busy in their own employment.

While the birth of their child and practicing the role of a mother did resolve several uncertainties (see also Thomsen and Sørensen 2006) consumption uncertainty did not necessarily disappear altogether. In the post-birth interviews many participants talked about having to learn what nappies worked best for their baby, why babies needed bibs before weaning, or not knowing which of many baby classes (such as baby massage, baby swimming or baby music) might be best for their child. Alongside these tales were some poignant accounts of complications, uncertainties and ambivalence during childbirth, corroborating consumer issues that were recently raised by Geiger and Prothero (2007). Several participants described feeling unprepared as they faced unpleasant realities. Aileen, for example, had planned for a home birth and skipped over the pages on Caesarian sections in her pregnancy guides. Some disappointments were attributed at least in part to the ‘natural’ ideological agenda underpinning the way in which health professionals prepared them for motherhood. Thus, regretting how she had refused drugs for most of a difficult delivery, Jenny noted that she had found her National Childbirth Trust antenatal classes empowering at the time, but “in a way, I’d been sort of led, I’d kind of got myself into a mindset where ‘I’ll take control and I don’t need an epidural.’”

Others described being at a loss when having to choose between brands of baby milk formula. Having read and been told about the benefits of breastfeeding for their baby, this was typically an unsought good for participants. Aileen, for example, eventually
supplemented her own milk with baby milk formula because she felt this was the only way to satisfy her baby’s hunger. Her difficulty in coming to this decision highlights the interplay of personal, social and institutional pressures contributing to felt ambivalence. As her baby was not putting on weight, her friends, sister and aunt had suggested mixed feeding, but she felt “seriously guilty…like my body really wasn’t working right.” She also felt unsupported by the medical professionals she encountered: “the NHS [National Health Service] really have a pretty kind of black and white view of it – you’re either breastfeeding or you’re giving formula…it took a while for everyone to come round to it.” Caroline was faced with bottle-feeding her baby shortly after the birth. The hospital only had two brands of formula milk, neither of which were her preference. She made do with one of those, even though she felt it was lacking in some way, and by the time she took her baby home, she was afraid to switch to the brand she thought would be better in case it upset her baby’s feeding patterns and made her ill.

Of course, these consumption uncertainties were dealt with and participants described a range of coping strategies. In some cases, they reported ‘flight’ as a short-term solution, with one expectant mother laughing as she described how she and her husband “ran away” after becoming overwhelmed by the range of baby supplies displayed in one of the first shops they visited. Other coping strategies in response to overload echoed those identified by Otnes, Lowrey, and Shrum (1997). Many participants relied on the advice of others, including family, friends, and sales personnel and devoured various books, magazines and motherhood internet sites to guide them through the labyrinth of consumption (O’Malley, Patterson, and Ni Bheachain 2006). At times, however, this solution compounded their problems, since conflicting advice left them unsure of how they could consume their way towards being a good mother.
Trial and error was another common coping strategy, one easily adopted for products such as nappies. Here the focus was often on finding the best fit, and participants generally tried different brands until they found one that worked well for their baby. Several participants talked very positively about buying trial packs of reusable nappies, since this gave them an easy way of comparing different kinds. Some participants sought to buy their way out of uncertainty, consuming heavily or expensively to reduce the risk of missing out on some important product, or because they perceive their new role as mother to include providing “the best of the best” for their first child. This strategy also had its limits, however; several participants described how they felt they were taken advantage of by sales assistants who tried to steer them towards the most expensive items:

...we were bombarded by shop assistants, the first thing they went to was the car seats, and they were saying like this is the safest, SAFEST car seat, and you’re made to feel like if you’re not buying this particular one you are a bad parent already and you haven’t even started.

(Sarah, pre-birth interview, Ireland)

However cynical they may have been about the sales assistants’ motives in such cases, they still feared that rejecting their advice could place their unborn baby at risk.

Taken together, these accounts illustrate how consumption does not always aid transitions, but can actually hinder it, through consumer unfamiliarity with the options and terminology. Furthermore, if role change entails a new consumption domain, difficulties in navigating consumption may undermine people’s confidence in their ability to prepare for a new phase in their lives.
Consumption resistance and role resistance

Women making the transition to motherhood may find themselves drawn into a consumption vortex that does not allow them to pursue their own identity goals. It makes sense then, that they might refrain from consuming products that are symbolically linked to feared or not-embraced selves (Kleine, Kleine, and Allen 1995). Furthermore, as Coser (1966) has pointed out, when we change from one status position to another, conforming to the requirements of one entails non-conformity to the other.

Consumers resisting certain identities have been explored in studies such as those of Patrick, MacInnis, and Folkes (2002) on avoidance of feared selves and Jennings and O’Malley (2003) and Banister and Hogg (2006) on undesired selves or aspects of the motherhood role. Role resistance is also suggested by the many In Memoriam notices placed in Irish newspapers by women describing themselves as the “wife” rather than “widow” of their late husbands (O’Donohoe and Turley 2006).

In this study, resistance was more commonly articulated in relation to the ideologies and discourses embedded in particular kinds of products, especially those related to identity projects. Participants did not express rejection of their mothering role per se, but rather resisted certain assumptions about what it entailed. Several participants expressed frustration at being patronized by retail assistants who could not see beyond their status as first-time mothers-to-be; as one legal professional recounted incredulously in her diary, when a sales assistant fitted her for a nursing bra, “she called me Toots!” Another participant recalled a senior colleague’s surprise at an innovative approach she had taken to a task during her maternity leave; her retort - thought but not actually uttered – was that she’d “had a baby, not a lobotomy.” So while they could be annoyed by peoples’ reactions to them as expectant
mothers, what our participants seemed to experience as most alarming was a sense of loss or erosion of their (former) identity as intelligent, capable and independent women.

It was not surprising, then, that some women sought to play down their approaching motherhood role at work in order to avoid being treated differently. Lotte, for example, dressed as she had before becoming pregnant, and expressed antipathy towards maternity clothes that cover women’s bodies with frills. Moreover, she did not attend antenatal classes:

*There is so much focus on the fact that you are going to have a child. People kind of forget that you still have a brain, and that you are actually interested in other things. And that’s been really annoying and I have very much felt that my worst fear is to be discriminated against at work. That interesting assignments would be taken from you. That’s been my biggest fear. That you are put in a pigeonhole, and that’s the only thing. This baby thing. And that’s really not enough. It hasn’t been enough for me, yet. Maybe in two weeks I will feel differently, but so far it is not the only thing in my life...It’s something that has been going on for as long as man has lived on earth. And I wonder what they did 200 years ago, ‘cause back then you didn’t attend antenatal classes.*

*(Lotte, pre-birth interview, Denmark)*

Lotte’s position resonates with the defiant non-consumption response to role conflict discussed by Otnes, Lowrey, and Shrum (1997). Others sought to avoid the “pink hell”, designer labels, Disney characters or “cute” slogans on baby clothes that they felt were at odds with their values as mothers. Nina explained why she objected to the dominance of pink in little girls’ clothing:
...it’s not about the color pink itself, but about becoming this princess – and look how lovely she is in her pink clothes all the time. And that makes me feel – of course I think that my baby is lovely but I don’t want her to be a little princess. She’s supposed to be able to learn a lot of things aside from lying there looking cute. In my opinion pink represents girls having to be lovely and not a whole lot other than that. Perhaps I read too much into it. But I don’t want it to be that way. I just really don’t want to raise her that way.

(Nina, post-birth interview, Denmark)

In some cases our findings show resistance towards the way in which the role of expectant mother was equated with and reduced to consumption. Several participants challenged the consumerist ethos surrounding pregnancy:

I resented people asking from really quite a really early stage, how, are you prepared...
Preparation can either be buying things or just acquiring things, but I think it is also about transition and how you feel your life is going to change...

(Mhairi, pre-birth interview, UK)

A common response to such disquiet about consumerism in general was to rely on second-hand goods circulating as part of the gift economy between friends or even strangers (some participants mentioned acquiring things online through sites such as Freecycle), or made available through “nearly new sales” organized by local groups, such as those discussed by Clarke (2000).

While certain purchases could be avoided, gifts were much more problematic. Mhairi, for example, responded politely when friends passed on vast quantities of second-hand baby items. While her response could be characterized as resignation, one of the coping
strategies discussed by Otnes, Lowrey, and Shrum (1997), privately she regretted accepting it all, concerned about how, or whether, it could fit into her home and life:

*We’ve been taken over, we’re trying to keep this house tidy, we’re trying to do lots of work in this house anyway and this is just a step backwards, uhhhh.*

*(Mhairi, pre-birth interview, UK)*

Other coping strategies involved a degree of subterfuge. Ella’s diary, for example, mentioned accepting gifts that she had no intention of using:

*To be honest this was a really generous present but I just did not like it - it reminded me of parker coats worn by 14 and 15 year olds when I was younger, and I couldn’t bear to think of my baby in something so grown up! I want to put him in cutesy and strong colors for the moment - so I changed it for a voucher as I knew I would never put it on him.*

*(Ella, post-birth diary excerpt, Ireland).*

In this case, Ella’s subterfuge served to reconcile her dislike of the gift with her desire not to offend. This particular coping strategy created further ambivalence, however, since she felt guilty about her deception. Some participants expressed no unease at exchanging unwanted items in stores without the gift-giver’s knowledge while others simply kept them without actually using them. One participant even had an excuse (“they must be in the wash”) ready for family members wondering why her baby was not wearing the clothes they had passed on to her.

Consequently, during their transition, while consumption for a new baby could obviously not be avoided, there are many illustrations of how our participants resisted both
consumption *per se* or particular consumption acts and practices that they felt were expected of them. Such actions did however at times add to their consumer ambivalence and therefore further complicated rather than eased the transition period. While defiant non-consumption or reliance on informal economies were among the coping strategies identified in this context, it was also interesting to note how often resistance appeared to be a private, internal matter, with participants not articulating their objections to particular consumption expectations or ideologies at the time. Perhaps doing so would have broken the conventions of politeness and caused offence, or perhaps participants felt that little would be gained by making a stand against prevailing attitudes.

*Consumption fears and role responsibility*

Ethics of responsibility alongside narratives of ‘good mothering’ place a mother as crucial to the normal and healthy development of her children (Hays 1996; Murphy 2000). Maternal responsibility as a duty of care directs women’s attention to (an)other rather than herself (Sévon 2005); her sense of self is ‘refracted’ (Bailey 1999), bending in focus and density toward another. The selflessness located in maternal care encourages women to monitor the moral quality of their mothering (Sévon 2007) and the duty of care in pregnancy, childbirth and beyond contributes to a sense of fear and vulnerability among expectant and new mothers that can be exacerbated by marketers (Baker, Gentry, and Rittenburg 2005; Prothero 2006).

As Merton and Barber (1963) and Ottes, Lowrey, and Shrum (1997) have noted, conflicting customs and values are a source of ambivalence. Pregnancy-related fears, of jeopardizing the pregnancy and causing harm to the unborn child, feed into cultural beliefs and superstition about consumption before giving birth, which clash with cultural norms of
“being prepared.” This was evident in Lotte’s comparison of Danish and Anglo-Saxon pre-birth consumption traditions:

*In England and the US they have these baby showers, where you get presents before giving birth. And I think that’s sensible. But in Denmark, and I think there are a lot like me, I never bought gifts before the baby is born because that would mean bad luck.[...] Nothing in this world is a sure thing. You can’t be sure that everything goes the way you expect, and then you would have to give it all back. So it wasn’t until late July that we started receiving things.*

*(Lotte, pre-birth interview, Denmark)*

Such reluctance to tempt fate (perhaps more prevalent in the UK than recognized by Lotte) relates to fears that the pregnancy will not lead to a living or healthy baby, and this limits the ability of consumption to aid women’s transition to motherhood. This cultural reticence was highlighted by Aileen, an American living in Britain, who contrasted the American tradition of giving the expectant mother presents at the baby shower with the British practice of giving baby gifts after the birth:

*I suppose the (U.S.) idea is that you get everything in advance and then at the end of the pregnancy when you’re going out and you’re buying all your stuff, you know what you still need to get... of course it’s quite reasonable here, because you just don’t know, like anything could happen, it’s almost superstitious the way that you don’t want to jinx it by buying all the baby stuff and then something goes wrong.*

*(Aileen, pre-birth interview, UK)*

In some cases cultural reticence was heightened by personal history. Ella, for example, had required medical assistance in conceiving and felt very superstitious about buying products
and having them in her house before her baby was born; indeed the pram was kept in her husband’s office until after the baby’s arrival. In her post-birth interview, Ella commented on her surprise at just how “paranoid” she had been about “buying stuff” before the birth of her baby. Having suffered a miscarriage before, Jenny’s first baby purchase was cotton wool, which she described as a “fairly safe” thing to start with. Sarah, who had also experienced a miscarriage, kept many baby things at her parent’s house, and even found it difficult to cut the labels off baby clothes before the birth. Instead, she kept the clothes hidden away, still inside the shopping bag from the store. Similarly, after four miscarriages, both Sadie and her partner worried about tempting fate through consumption. They found their own way of reconciling their fears with the requirement to be prepared:

Yeah, I think just from a superstition point of view, I suppose because I’d had a miscarriage I was a bit nervous about buying anything at all [...I]t was really strange seeing the buggy there; it was like it wasn’t ours, or it wasn’t anything to do with us, so it was a bit frightening really. Plus, Ed would also be a bit superstitious, and he was thinking he didn’t want to get all excited and then what if something goes wrong, so he said it was better to get it out of sight for now [it was placed in a cupboard under the stairs].

(Sadie, pre-birth interview, Ireland)

In other interviews, there was some discussion of stores which supported, or even formalized, such “superstitions” around buying baby things before the birth. Mhairi, for example, talked about her surprise that the store had not contacted her to tell her that her pram was available for delivery. On being told that it had been in the shop for a while:
...I thought, why didn’t you phone me and tell me? And she said, oh well we’ve got you down for the 8th February, that’s your due date and I said, well yes that’s right, the baby’s not actually here yet but it would really suit us to pick it up today...it was quite clear that the expectation was that you wouldn’t pick it up until the baby was there.

(Mhairi, pre-birth interview, UK)

She had heard about it being thought bad luck to have the pram in the house before the baby was born, and the “tradition” of buying a pram but leaving it in a neighbor’s house. While she referred to this as “pure superstition”, she also appreciated that if something went wrong it would be extremely distressing for parents to be confronted with a houseful of baby items in anticipation of a joyful outcome.

Food emerged as another arena for the playing out consumption fears, with many participants talking about how they limited their diet to avoid causing harm to their unborn baby. Whilst such harm would certainly challenge their identity as mothers, their discussion of food risks concerned how they managed their duty of care in this context. Several women talked about receiving conflicting advice about particular foods. Jenny, for example, explained her concerns about eating peanuts during pregnancy, illustrating how consumer ambivalence at the individual psychological level is embedded in wider social relationships and discourses:

*If you’ve got people in the family who’ve got allergies, they say don’t eat peanuts. And of course I didn’t read that until after I’d been eating peanuts for ages, and also you read it and think ‘that’s a bit weird’. And I spoke to friends and they said ‘oh I ate peanuts all the way through and I was fine’ kind of thing. But I guess once you’ve read it, you think ‘oh I don’t really want to risk whatever it is, giving the baby an allergy or whatever’. It then*
starts, it’s more of an anxiety, not an anxiety but it’s more of a kind of, you know, ‘should I, shouldn’t I?’ and that’s slightly sort of, you know, there’s a big voice going ‘no it’s fine to eat it’ and the other bit who’s going ‘oh but if you eat it and something goes wrong…’. (Jenny, pre-birth interview, UK)

In this instance, Jenny’s ambivalence and concerns about something going wrong were heightened by her experience of miscarriage; as she reflected in her post-birth interview, the fear of losing her son was still at the back of her mind, and she was unsure about the balance between being over-anxious and fulfilling her role “as a mum…to make sure they’re healthy and well.”

Thus, despite expressing the desire to be “ready for the baby” and acknowledging external pressure to be “prepared” or “organized”, several participants feared tempting fate or even harming their babies through the goods they bought or used. Coping strategies to deal with superstition ranged from postponing to hiding purchases, while fears of harming through consumption were met by seeking advice or self-denial. Again, this illustrates how consumption can complicate rather than aid role transitions during a period of liminality, and also highlights how fears can be linked to goods as people enter a new phase of their lives.

Consumption constraints and consumption aspirations

In order for consumption to facilitate transitions, consumers must have access to goods and services and the resources – for instance: time, energy, space and money – to consume. Where resources are absent or limited, consumers’ ability to construct their desired identity – or even just to cope with the practical demands of their changing circumstances – is frustrated and/or
disappointed, leading them to view their transition as under-resourced. For pregnant women and new mothers the resources necessary to engage in consumption are not always easily or readily available and consumption could thus be experienced as problematic. Some participants talked about financial constraints, often linked to the expense of having moved house in anticipation of starting a family, but in other cases linked to unexpected pregnancy. Aileen, for example, had found herself pregnant while she and her husband were just starting out on their careers following postgraduate studies. Most of what she acquired came from second-hand sources, including online services like Freecycle and Gumtree; this resonated with their antipathy towards overconsumption, but also “felt like a real necessity because we are just are still kind of pretty broke”:

“If you can kind of get over the mental hurdle of wanting to go buy everything new, which, and I’m sure there’s some sort of halo-effect of recycling or something in there too which we can all feel really good about…I don’t know, I can’t even imagine what it would have been like for us to have waited now for the sort of two years that we were talking about and some magical moment when we felt like “actually we’re on our feet and we could throw money at it if we wanted to.” But it’s just not what happened.

(Aileen, pre-birth interview, UK).

In this case, Aileen’s environmental and anti-consumerist principles chimed with her financial constraints, but even then she faced getting over “the mental hurdle of wanting to go buy everything new” for her baby. Relying on second-hand goods also meant accepting things that were not necessarily what they would have chosen, and this in itself was a source of ambivalence.
Several participants described how energy was in short supply as they sought to complete their shopping before their baby’s arrival. Megan, for example, described the energy-sapping challenges of buying nursing bras during pregnancy. These are difficult to purchase pre-birth as women do not know what size they require, but traveling to a shop to purchase such a product shortly after giving birth could also be impractical. This left a frustratingly narrow window of opportunity prior to the birth, when women were usually at their most uncomfortable and least mobile.

*Basically 38 weeks is when they recommend you go looking for nursing bras, because obviously you are still growing and whatever so... at 38 weeks, I thought here it goes, into Marks and Spencer, sure no problem, and we try on a couple of bras, so anyway in I went. I didn’t find them particularly helpful in there, actually they were telling me that they had them in different sizes, but then they didn’t have them in different sizes, so I ordered them in that size to be told that they didn’t have, they didn’t even make them in that size. So I was in and out of town a few times trying to locate bras.*

*(Megan, pre-birth interview, Ireland)*

For Karen, poor health during pregnancy frustrated her attempts to construct an ideal pregnant self through consumption:

*I just couldn’t live up those ideals that are associated with being pregnant and being dressed up in Noa-Noa [romantic and casual] clothes. I have hated that about myself; that I couldn’t be the bubbling happy Karen who was pregnant. For example, I have not been doing any sports, because I just didn’t have the energy for that. [...] And those magazines, I tend to associate them with this Noa-Noa lifestyle. Then you can just bake a cake, and*
then you can just do this and that. And you cannot just do that when you are in the
bathroom with your head down the toilet. Then you cannot just bake a cake right before
your girlfriends arrive in your maternity leave. It has just not been like that.

(Karen, pre-birth interview, Denmark)

For Karen, consumer ambivalence arose from the clash between the cultural values she had
internalized and her own limited resources. Similarly, Angela also found she was ‘house
bound’ following the birth of her baby; after an emergency Caesarian section, she had been ill
and more or less unable to leave the house for six weeks. On top of facing difficulties
consuming pre-birth, several participants reported feeling cut off from the marketplace after
having given birth. Heidi gave this heartfelt account of feeling secluded:

This thing about being the only one who can feed her and Niels being the one going
shopping – I get completely jealous of him, that he can go shopping. It’s so terrible. Also
because, you’re used to taking trips into the city to look at stores. Now everything is on her
terms and I have to get used to that. A lot. I think that it’s really hard. And sometimes I get
really annoyed at her without being annoyed with her – ‘cause it’s not her fault but I think
that it’s hard. It’s hard on me. [...] You cannot explain to people what it’s like. If anybody
had told me that: remember this and that, I would have told them that it wouldn’t be like
that for me. I think. You cannot explain it to people before you have a little one like that.

(Heidi, post-birth interview, Denmark)

Heidi’s experience illustrates how ambivalence can be the link between individual agency and
social structure (Connidis and McMullin 2002), not least as women adapt to their new ‘duty
of care’ role (Sévon 2007). In such cases, consumption inflects experiences of ambivalence
and liminality in particular ways. Just as pregnant women may find lack of consumption knowledge feeding into role uncertainty, for new mothers a sense of sequestration from shopping in general could highlight their lack of autonomy and also remove one resource available to them as they navigate this uncharted territory.

Shopping with a baby was also a whole new experience, leading participants to look at shopping environments in a new light.

*For me, I think it’s such a hassle to get all his stuff together, to go into town, park somewhere and then … so I think I’ll either leave it till the weekend till Gareth is there or I’ll just leave it altogether. So, our outlook has changed. You know whereas before you’re on your own, you don’t really think about all these things, you just go and do everything whereas now it’s “well where’s the lift, where’s the nearest car park, what lifts are in the shop, where are the lifts in the car park” things like that, that you never really thought about.*

*(Angela, post-birth interview, UK)*

Caroline described choosing to go to a particular supermarket because it had Mother and Baby parking. On finding that these spaces were all full when she arrived, she was tempted to park in the disabled parking section

*…because they have loads of them but I thought “no I can’t because I don’t have a sticker and I would just feel too guilty” so I parked in a normal bay that had a space next to it, but I was miles away then from the trolleys with the baby seats in them so we had to walk, which you think, you drive round and you think “oh, there’s not enough spaces, they’re*
“full”, whereas before I would have thought “wow, they’ve got so many.” …..we thought “God, that’s so convenient.” Now you see it yourself, that’s different. I was surprised that it was full [the mother and baby spaces].

(Caroline, post-birth interview, UK)

Thus, lacking the resources of energy, health or money could make consumption part of the problem rather than part of the solution in negotiating role transitions. In cases of financial constraints, a common coping strategy was to rely on the gift economy and “nearly new” sales, but this solution could lead to ambivalence as participants sometimes struggled to accept something that was good enough to use but not to their taste. Where participants lacked health or energy, the coping strategies appeared to be withdrawal or endurance. These responses were also evident in relation to shopping logistics, but participants also talked about acquiring new skills or knowledge to help navigate the shopping environment.

**Discussion**

Prior research has indicated how consumers can experience mixed emotions in their dealings with the marketplace, due to the interplay of internal and external factors (Otnes, Lowrey, and Shrum 1997), and how our social structural environment, coupled with individual ambivalence, can affect a person’s behavior (Connidis and McMullin 2002). This article has explored the link between consumption, role transition and liminality; this exploration demonstrates the problematic and ambivalent role that consumption can play in transitional phases and thus addresses a significant gap in our existing knowledge, as highlighted in our earlier literature review.
Our research illustrates how the combination of individual and social structural factors can affect role transition and lead to both positive and negative consumption experiences. As such, ambivalent consumption experiences are ubiquitous during periods of liminality. Previous research into transition phases, as discussed earlier, has tended to show how consumption can aid consumers during liminal phases of their lives; our study however illustrates that this is not always the full story. While in many respects consumption did play a positive role for the mothers in our study and facilitated the positive experiences discussed by others, it also, at other times, made transition a complicated, complex and confusing process.

Our analysis focuses on some of these problematic and ambivalent aspects of transitional consumption. While the symbolic dimensions of consumer products may well be important building blocks for the transition to motherhood, we also show these symbolic dimensions of products are not always straightforward in their meanings and positive cultural connotations. Lacking the competence to decode the meanings attached to certain products or accessories, resisting consumption, fearing consumption, and not having the resources to consume, all served to complicate this role transition. Moreover, some participants clearly resisted consumption and the ideologies associated with various baby-related products. It was not motherhood that they resisted, but certain contemporary interpretations of what mothering is about and how women become a good mother - for instance equating good mothering with expensive and extensive consumption. The cognition, emotions and motivation of our participants, combined with the social structural environment in which they found themselves (Connidis and McMullin 2002) contributed to our participants sometimes feeling ambivalent about both their transition to motherhood and their consumption practices during this liminal phase of their lives. Similarly, the multiple emotional states, often associated with consumer ambivalence (Otnes Lowrey, and Shrum 1997), can play a contributing role in consumption not always being an entirely positive experience for those in transition.
Consequently, we suggest that it is important not only to focus on the positive role consumption can play in times of transition, but also to further study how it may make life more problematic for those entering and experiencing transition. While our focus has not primarily been on coping strategies, our exploration of consumer ambivalence in transitional phases has also indicated some of the coping strategies consumers employ to deal with these contradictory feelings and cognitions. This builds on the work of Otnes, Lowrey, and Shrum (1997) by identifying additional coping strategies that can be employed in response to consumer ambivalence and provides one explanation as to why consumption practices during a time of transition are not always wholly positive experiences.

In sum, this article shows how the consumer ambivalence expressed by women in the transition to motherhood can be attributed to the interplay between their lived experience and social structures and how psychological, sociological and cultural forms of ambivalence are intertwined in their consumption experiences. It thus documents how consumption can be both problem and solution on the bumpy road to motherhood and, by extension, during liminal life phases more generally.

**Conclusions and Directions for Future Research**

Findings from this research feed into a number of different theoretical fields beyond the context of motherhood transitions and the role of consumption during these transitions. First, the theme of *consumption uncertainty* appears to add to the field of consumer socialization, where focus is on consumers’ learning of consumption skills and symbols. While the consumer socialization literature has traditionally focused on consumer socialization of children (John 1999) research on life-long consumer socialization is needed (Ekström 2006). Our results highlight that life-long consumer socialization is indeed an important research
area with implications for people’s well-being in times of transition. Further studies examining the contexts, agents and outcomes of adult consumer socialization, coupled with further exploration of the role of ambivalence during these liminal stages, would add to knowledge in this field.

Second, the theme of consumption resistance adds to research on the link between consumption and role resistance (Patrick, MacInnis, and Folkes 2002) since consumption resistance may act as one of several mechanisms to engage actively in role resistance. However, several other consumption strategies are conceivable; for instance, consumers in defiance of the expectations associated with approaching new roles may defer some consumption activities, continue and even increase consumption activities expected to be abandoned, quit activities expected to be continued, or pursue consumption that does not conform to norms concerning the approaching role. Further research on transitional consumers may offer evidence of such strategies and new insight into different role resistance strategies beyond those based on (non)consumption.

Third, the theme of fearing consumption adds to the vast body of research on consumption meanings (Arnould and Thompson 2005). Our findings highlight the prevalence of meanings known by the consumers themselves and commonly accepted or shared labeled ‘superstition’. However, as stated by McCracken (1986, 80), “what looks like simple superstition is, in fact, an implicit acknowledgement of the moveable quality of the meaning with which goods are invested.” Thus future research into consumer superstitions may provide vital insights into marginalized but nonetheless powerful consumption meanings.

Fourth, the theme of under-resourced consumption complements research focusing on marginalized and vulnerable consumers (Baker, Gentry, and Rittenburg 2005). Further research in the area of transitional research, which considers how consumption can lead to stress and anxiety and potential consumer vulnerability during a period of liminality, is
warranted. The role of the market space the consumer enters during this phase of transition, coupled with the impact of both the sociological and cultural factors and the individual feelings and emotions felt by consumers, can also help us better understand the various and diverse experiences that consumption provides during transition.

While this article provides evidence of how consumption for all our participants can be both problematic and ambivalent as well as enriching during role transitions, it is important to stress that there were differences within and across cultures which space constraints do not allow us to elaborate on here. Cross-cultural differences in the experience of and coping mechanisms toward consumer ambivalence appears to be a rich area deserving further research attention.

To conclude, this article, utilizing a study of first time mothers-to-be, has provided evidence demonstrating how consumption can complicate role transitions and may indeed sometimes contribute to liminality among consumers. It also highlights how problematic experiences and ambivalent feelings can contribute to negative consumption experiences during transition. This work therefore adds to the existing body of knowledge on role transitions, which currently portrays consumption during periods of transition in a more positive light than is perhaps always the case.

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