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Abstract

Extant literature from within the fields of star studies and gender theory remind us that women have long been interested and indeed invested in the sartorial tastes, beauty regimes and diet programmes of film stars. Likewise, female celebrities have given us access to their homes, fridges and handbags in order to seek the attentions and possible approval of the woman in the traditional women's magazine and gossip sector. More recently a myriad of recognisable women from the entertainment sphere have shared their pregnancy fashions and mummy makeovers with an interested audience. Indeed, we have begun to witness these women discussing their most private, personal experiences by way of their childbirth stories. What is important here are the ways in which famous figures speak about differences between 'natural' and 'medicalised' experiences, and the issues of legitimacy, appropriateness and worth that stem from these narratives. In much the same way as we are asked to judge, rank and qualify these women for their fashion purchases, fitness choices and maternal practices in line with the 'mommy wars', so too, we are now being asked to value (or otherwise) their experiences of labour. This article will look at a range of celebrity birth stories and examine the ways in which they can be seen as evidence of the ways in which tensions between working and stay-at-home mothers have escalated so as to include new rivalry and resentments over maternal bodies.

Keywords: childbirth, 'good' mother, 'mommy wars', celebrity mother.

Natural 'v' Medical: The Hierarchy of Celebrity Childbirth Stories

Introduction

Extant literature from within the fields of star studies and gender theory remind us that women have long been interested and indeed invested in the sartorial tastes, beauty regimes and diet programmes of film stars. Likewise, female celebrities have given us access to their homes, fridges and handbags in order to seek the attentions and possible approval of the woman in the traditional women's magazine and gossip sector. More recently a myriad of recognisable women from the entertainment sphere have shared their pregnancy fashions and mummy makeovers with an interested audience. Indeed, we have begun to witness these women discussing their most private, personal experiences by way of their childbirth stories. What is important here are the ways in which famous figures speak about differences between 'natural' and 'medicalised' experiences, and the issues of legitimacy, appropriateness and worth that stem from these narratives. In much the same way as we are asked to judge, rank and qualify these women for their fashion purchases, fitness choices and maternal practices in line with the 'mommy wars', so too, we are now being asked to value (or otherwise) their experiences of labour. This article will look at a range of celebrity birth stories and examine the ways in which they can be seen as evidence of the ways in which tensions between working and stay-at-home mothers have escalated so as to include new rivalry and resentments over maternal bodies.

Childbirth body politics

In order to contextualise the contemporary hierarchy of celebrity childbirth stories, it is important to acknowledge feminist debates concerning what has in recent decades been understood as the medicalisation and masculinisation of birth. Although recent technological interventions have been proven to decrease perinatal and maternal mortality rates (Arnold 2003), some feminists argue that hospital births and medical intervention is merely an extension of 'patriarchy, male dominance and control over women's bodies' that is said to dominate the contemporary landscape (Miller 2005). Tess Cosslett makes this point when she tells us that the 'hospital birth provides a symbol of women's oppression ... it is a blatant physical enactment, a concentration and focusing, of forces that are better concealed in other social situations (Cosslett 1994). Adrienne Rich echoes this when she notes that the image of the drugged, sheeted, strapped down birthing woman lying on her back with her legs in stirrups as is routine in the medicalised version of childbirth is a scene of

ritualised humiliation that speaks for the wider patriarchal oppression and masculine coercion of women in society (Rich 1977). Moreover, we are informed that the practice of caesarean section is 'presented as evidence of the technology and skill of the surgeon in question' while offering complete male control of the passive and thus coercive female body (O'Reilly and Porter 2005, Morris and McInerney 2010). The medicalisation and hospitalisation of childbirth 'has been achieved at considerable emotional cost' (Dally 1982) because many mothers 'experience the "factory belt" system and the clinical and scientific atmosphere that accompanies it as dehumanizing' (ibid, Rapp 1994). The concern is that by adhering to what is deemed a safe, secure and controlled birthing experience, we are also being removed from, and thus alienated by, that selfsame process.

Although antenatal monitoring and hospitalised childbirth has reduced perinatal and maternal mortality rates, the medicalisation of maternal care in the contemporary period is in question. The number of inductions for non-medical reasons has increased dramatically since the 1970s (Cosslett 1994) and the numbers of caesarean sections is rising year on year with no evidence of improved outcomes for either the mother or baby (Beech 2004). Although less than 10 per cent of pregnant women need a caesarean section on medical grounds, be it for the health of mother or baby, the number of women choosing or receiving this procedure is far greater than that figure (ibid). During the mid 1980s, the number of caesarean sections was over 30 per cent and growing in the United States and approaching 18 per cent in Britain. Since that time, the number of women needing a caesarean section remains at 10 per cent, but the number having the operation continues to grow (ibid).

Although childbirth has become medicalised and thus masculinised in recent decades, a non-interventionist and more natural childbirth movement emerged in Britain through the 1930s, developed in America during the 1940s and is popular with a small but growing number of mothers in the present day¹ (Dick-Read 1942/2013, Cosslett 1994, Plant 2010, Feasey 2012). The *National Childbirth Trust*, originally titled *The Natural Childbirth Trust*, founded in 1956 was inspired by the work of Grantly Dick-Read and is now considered to be the leading charity offering information and support in pregnancy, childbirth and early parenthood (NCT 2016). La Leche League International, an international nonprofit advocacy group that promotes breastfeeding for all new mothers was established in the same year (La Leche League 2016), with the Association for Improvements in the Maternity Services emerging a few short years later, encouraging all women to work towards what it terms a 'normal birth experience (AIMS 2016)

With these competing childbirth discourses in mind, the National Institute for Health and Care Excellence makes it clear that 'midwife-led care during labour is safest for women with straightforward pregnancies' (NICE 2014) and confirms that 'home birth is equally as safe as a midwife-led unit and traditional labour ward for the babies of low risk pregnant women who have already had at least 1 child previously' (ibid). The Institute offers guidance rather than judgment regarding a woman's birth choices, and yet the news reporting of medical stories is rather more salacious. Finding that 'C-sections are taking place dangerously early' (Donnelly 2016), that 'infections after caesarean birth are higher than other operations' (Smith 2012), that 'babies born by caesarean are more likely to be obese as adults' (Devlin 2016) and that the 'incessant increase in caesarean births is putting first-time mothers' health at risk?' (Campbell and Duncan 2016), helps circulate tensions between what are deemed appropriate and unacceptable birthing practices. Such tensions are in evidence on video sharing websites. After all, a search for 'Live Childbirth' on YouTube alone brings up 1.3 million videos that include hospital and home births (Bounty 2016), with each one accompanied by remarks, notes and observations crucial to the ways in which childbirth practices are ranked and qualified in the contemporary period.

Maternal hierarchies and star ranking

Film star and celebrity studies have, since their emergence, been interested in both the media's ranking of recognisable women and the creation of their own hierarchies according to their age, acting credentials, public profiles and promotional efforts (Geraghty 2007, Gamson 1994, Gritten 2002, Church Gibson 2011, McCabe 2011, Fairclough 2012, Jermyn 2012a, Lusted 2012). Beyond the academy, professional and popular commentary has judged recognisable women on the lustre of their hair, the fashionability of their dress, the size and shape of their physiques and the success or otherwise of their relationships (Feasey 2012). More recently, we have seen such commentary turn its attention to their birthing stories, with natural, drug-free birth narratives being positioned in opposition to the 'too posh to push' phenomena, whereby, famous women are said to be requesting delivery by elective caesarean section.

Moreover, maternal theorists and feminist media scholars speak of the ways in which popular media culture in general, and the news media in particular incite the 'mommy wars' whereby stay-at-home mothers are pitted against working mothers, with both groups falling short of what they present as appropriate or acceptable mothering (Douglas and Michaels 2005, Feasey 2012, Akass 2013, Feasey 2016a). Indeed, the broader political, social and media environment constructs and

circulates a maternal ideal that women cannot hope to live up to. The maternal ideal or what I shall refer to as the 'good' mother is an unobtainable and unachievable figure who dedicates her entire life to the educational, cultural and creative needs of her children. Although one might suggest that it is a parental duty to offer such consideration to one's offspring, it must be noted that there is no paternal equivalent and that the standards of 'good' fathering in the media set the parental bar significantly lower. While a mother is asked to devote her entire physical, psychological, emotional, and intellectual being, 24/7, to her children' (Douglas and Michaels 2005, see also O'Reilly 2004), a man merely needs to be present in the home to qualify as a good father (Feasey 2008).

Although judgement and ranking are routine in star studies, celebrity popular culture and the news media, as they focus on professional credentials, promotional materials or maternal efforts, such ranking begins before these women have left the delivery room. The hierarchy of appropriate motherhood commences even before the *Hello!* photo-shoot or the exclusive *OK* christening, and before the woman in question has made a single sartorial choice for new mother or baby.

In a feature entitled 'Unbelievable Celebrity Birth Stories' what is most 'unbelievable' here is that few of the entries included actually comment on the birth. Rather, they speak of the cost of private hospital wards, exotic locations and sartorial choices, in keeping with popular features in the gendered gossip sector (The Bump 2012) and in line with the 'good' mother myth. Likewise, a somewhat less sensationally titled 'Celebrity Birth Stories' informs us that 'you've probably heard your share of wild birth stories, but these famous moms each have one for the baby books, too. After all, they're old pros at making headlines!' (What to Expect 2016). And yet again, there is little in the way of birth plans or labouring experiences, in favour of more routine tabloid sound bites and humorous anecdotes about waters breaking and the choice of soundtrack to the event. In this same way, in a feature entitled 'How Celebrities Choose to Give Birth' we find a short piece dedicated to the hospitals favoured by the rich and famous, making the point that 'for celebrities there is always an "in" bar or club so why should it be any different when it comes to a maternity ward?' (ivillage 2012). That said, there is much media coverage now dedicated to the birth plans of famous women, with lines being drawn between those that opted for or against intervention and with the women themselves being vocal about what might otherwise be a private matter between new parents and the medical professionals. Indeed, many new mothers from the entertainment arena are so outspoken about the maternal choices that they might be considered public health campaigners or celebrity advocates, if not actual activists. While there exists a desire to rank and

qualify female celebrity in the women's gossip sector, the celebrities themselves are now looking to hierarchise their birth experiences.

Natural childbirth advocates

While Taye Diggs boasts about his wife's 'warrior' strength and resolve during her natural labour (US Weekly 2009), Jessica Alba's husband, Cash Warren spoke of his respect for his wife's quiet strength (Singh 2008). Although these birth partners are not speaking directly about good or bad, acceptable or unacceptable birth choices, their language is very telling. Moreover, although one might suggest that it is a sign of millennial masculinity that these men are not only in the labour ward, but speaking with pride about their wife's labouring efforts, there is the sense that they are casting judgement on appropriate, and thus, inappropriate childbirth practices, but this sense of hierarchy is not reserved for male commentators.

Alba herself stated that 'I didn't scream, it was really Zen. It was amazing. The labor was more like meditation. I did yoga breathing. I was focused' (ibid). Mila Kunis lends further weight to the cultural bias concerning unmedicated childbirth practices when she tells us that 'I'm going to do it as natural as I can ... I did this to myself I might as well do it right' (D'Zurilla 2014). Moreover, Melissa Joan Hart informs us that although she had 'a lot of intervention' during the birth of her first baby, she wanted a natural experience when it came to her second, telling her birthing partner not to let her have drugs because she 'regrets' opting for pain relief the first time around (celebritybabyscoop 2012). When Joan-Hart speaks of her 'regret' it is clear that she is speaking of pain relief, intervention and elected caesareans as inappropriate and unacceptable birth options. When she tells us that 'it is unfortunate that people are opting to make birth a medical issue instead of a natural process' she is clear about the hierarchy of childbirth practices, and even though she goes on to say that the decision 'is a very private choice and you will never hear me lecture someone on the difference' (ibid) her opinions are already extremely clear.

Although Hart states that she does not want to lecture women about birthing choices, Kaitlyn Olson has no such qualms. After giving birth in the comfort of her own home she wants to encourage other women to follow her birth plan because:

your body knows what to do and does not need medical intervention ... I think the key to having a baby naturally is being able to completely relax and get out of the way of your body's ability to get the job done. Our friends have been very

supportive because they know us well enough to know that we are the kind of people who do our research and make informed decisions. The people who panic and think we are crazy are the ones who haven't done any research themselves (Schafer 2013).

So too, when Cindy Crawford's husband tells us that they 'went to visit a friend who had a baby in the hospital' and that their reaction was 'I'm so glad that we did it at home' (Scotch 2011) they are making calculated public statements about birth choices. Likewise, when Maria Bello tells us that she could not imagine 'giving birth in a sterile environment' it is obvious that she ranks natural home births above a hospital delivery, and when she informs us that she laboured for '22 hours with nothing more than an aspirin' (People 2008), it is evident that the mother equates natural delivery and home birthing with female strength, stamina and empowerment, positioning her own efforts as the pinnacle of an unspoken hegemonic hierarchy of both labour efforts and maternal practices. And while Bello is proud to tell us that she birthed with only an Aspirin, mother of two, Pamela Anderson reveals that she gave birth to both of her children 'in water ... with nothing. Not even Tylenol' (Walsh 2014).

Gisele Bündchen is one of the 'most outspoken' celebrity mothers when it comes to the topic of natural home birth and her own 'empowered' experience: We hear that she:

wanted to be very aware and present during the birth... I didn't want to be drugged up. So I did a lot of preparation, I did yoga and meditation, so I managed to have a very tranquil birth at home. It didn't hurt in the slightest. The whole time my mind was focused in each contraction on the thought my baby is closer to coming out ... It was amazing to experience my body become free to do what it was made to do (celebritybabyscoop 2010).

I have written elsewhere on the hegemonic hierarchy of masculinity (Feasey 2008, Feasey 2016b) whereby men rank and qualify one another according to social, sexual, financial and, in the case of the new breed of MAMILS, athletic prowess. Although the women here are competing for audience interest and media investment, they are not boasting about their social, sexual or economic status, rather, they tend to flaunt their well-maintained post-pregnancy bodies (Fish Hatfield 2016) while making claims about their birth stories, in line with a hegemonic birthing hierarchy.

The fact that Bündchen was looking svelte on the cover of *Vogue* magazine just a few weeks after giving birth may irk some new mothers who are struggling with sleep deprivation and post-pregnancy bodies, however, it is her comments regarding careful planning and preparation and her body's abilities to birth without intervention that may cause emotional turmoil for those mothers who were unable to emulate her birth experience. The supermodel presents herself in line with the maternal ideal, and yet, there are many women who have not and cannot, which leads to emotional pain, guilt and shame for many new mothers (Oakley 1981).

Research, planning and preparation appear key to some of these maternal accounts, in this sense we are asked to accept that those women who have taken their birth plans seriously and shown commitment to a natural delivery are those who have successful, read natural, childbirth outcomes. One holistic approach to childbirth that has proved popular with celebrities is founded in the Viveka clinic, run by pseudo-celebrity Dr Gowri Motha. According to the 'Gentle Birth Method' website:

The first thing Dr Motha will tell a new patient is that if she wants a normal birth she has to make a commitment. A commitment to her body, to her baby and to her relationship with her partner. By a 'normal' birth, Dr Motha means a birth that is trauma-free and if possible drug-free. A gentle birth depends entirely upon the time and discipline that the mother and her partner are willing to put in. The most common worries that young women have today are whether they will be able to cope with the pain of labour, whether they will tear while giving birth, whether there will be vaginal trauma. The Jeyarani Way has been developed to minimise these occurrences, but on the whole it is a health promotion program with a specific emphasis on 'birth-fitness' which involves being physically supple, emotionally confident and prepared to face the demands of childbirth (Buxani 2005).

So far, so sensible, albeit difficult logistically on top of employment and other caring commitments, and perhaps self-selecting due to the cost of such services. However, it is the later pages of the website that make this gentle birth method seem difficult to attain for those outside of the privileged celebrity circuit who cannot call on personal nutritionists, shoppers and chefs (Jermyn 2012b, Feasey 2016a):

Mothers usually consider their pregnancies a time when they can give in to their cravings and not deny themselves anything. Dr Motha disagrees with this and her nutritional guidelines are not for the faint-hearted. No wheat or sugar, a limit on carbohydrate intake and only three pieces of fruit a day. Vegetarian women would find this particularly hard as bread and pasta are completely off the menu. For vegetarians, Dr Motha suggests eating more steamed vegetables and salads but avoiding foods such as lentils and other pulses as these can cause bloating. She also suggests adding ginger to aid digestion. The reason for this strict diet is to keep the baby small but healthy, so that the birth is easier on both the mother and her baby (ibid).

Women from the entertainment arena have access to a myriad of resources that could help to enable them to have a natural birth, whilst being assured of the safety of access to medical intervention should they need it. We are informed that the 'celebrity set have been arriving in their droves' at the Viveka clinic (ivillage 2012), perhaps because of the 'Reiki, Reflexology and Indian Ayurvedic detox herbs and homeopathic tissue salts' (ibid) or perhaps because of the promise of a small newborn that might help women in the public eye with their pregnancy weight gain and post-pregnancy weight-loss goals. Either way, planning, preparation and commitment appear key to a 'good' childbirth in general and these celebrity success stories in particular. Erykah Badu echoes this point when she tells us about her natural home births, plural:

Maybe to some it's scary, but preparation is the whole key. When a mother has found out she's going to have a baby, her whole life - her diet, her mood, her energy - should kind of prepare her. After she prepares herself, fear is never a part of it. I expected success and health, so I made sure I surrounded myself with it. By the time I had my third baby, childbirth seemed a very natural part of life to me (La Gorce 2009).

There is a judgement here then about those who have either not considered, or only briefly considered, or walked towards and then changed their mind about home birth or a drug-free labour. The sense is that they are not presenting themselves in line with appropriate or acceptable mothering, in opposition to those who have chosen, committed to and followed through with a natural birth.

Women in the UK and USA are encouraged to write a birth plan, and as such, they are all asked to make decisions about pain relief and intervention (NHS 2016). And although many first time future mothers initially speak of a natural labour, either complications or the reality of childbirth leave them asking for pain relief and intervention. In the first instance, the rise in 'geriatric pregnancy' for elderly primigravida's bring increased risks to mother and baby in labour, and with it, higher rates of medicalisation (NHS 2009, Gallagher 2016). In the second instance, many women who opt for pain relief suggest that it was because they were not appropriately informed about the reality of childbirth, and thus were not fully prepared for the different stages of labour, with fear, pain and in many cases, shame, leading to requests for medication (Arnold 2003). Susan Maushart makes the point that even though discourses on childbirth are anatomically explicit, they are less clear about the subject of pain in delivery. We are told that 'a woman could read all the definitive popular texts, conscientiously attend her prenatal classes and listen with minute attention to her obstetrician's every word, and still come away with the impression that having a baby won't hurt much, or at least not terribly much' (Maushart 1999). With this in mind, a number of women who were keen to have a more natural childbirth experience tend to go on to request pain relief in some form, or require further medical assistance when faced with the painful reality of childbirth. The point here is simply that 'normal childbirth is excruciatingly, outrageously painful' and yet women are being asked to prepare birth plans under the impression that it is anything but (ibid), and celebrities are playing a key role in the construction and continued circulation of that message.

For those women in the public eye who had a medicalised birth, their birth narratives tend to focus on their desired birth plan and their herculean drug-free efforts prior to an induction or caesarean. For example, Matthew McConaughey recounts his now wife's first delivery:

Contractions started kicking in. We had a 14-hour session. I sat there with her, right between her legs. We got tribal on it, we danced to it! ... We were jamming! She was sweating. No painkiller, let's go. She just clicked into that gear that only a woman has at a time like this. We'd been up for 40-something hours, and we went from dead tired to a really steadfast, 'Let's handle this... let's stay in the rhythm. Don't let the contraction be more than you.' The doctor wanted to give her an epidural, and we said, 'Give us a few more hours to keep rocking with this.' I wasn't speaking for Camila. She had the option of saying, 'Give me an epidural, right now,' whenever she wanted. This is where I learned – and no one tells you this – but having a baby is a bloody, pukey, sweaty, primeval thing! And I mean

that as a beautiful thing. It is wild. But the vacuum didn't work, and the doctor said, C-section (Hazlett 2008).

Bloody, pukey, sweaty. But not painful. Rather than talk about the reality of an emergency C-section, we are reminded that Camila Alves wanted, and spent several hours working towards a natural birth in keeping with her non-interventionalist birth plan, in this way the new mother is presented as 'good enough' in her maternal efforts, if not in the final outcome. Likewise, after her third C-section Tori Spelling was said to be 'sad' that she didn't get to experience a natural birth. She tells us that 'I hate when people say, C-section is so Hollywood. If I could have, I would have chosen a natural birth. That's what I wanted to do' (allParenting 2012).

Kate Winslet told fans and reporters alike that her daughter was delivered naturally back in 2000. It is only more recently however that she has admitted that it was not a natural birth, but an emergency C-section. The actress states that she went to 'great pains to cover it up' because the experience left her feeling 'like a complete failure' (Olin and Rawley 2015):

I just said that I had a natural birth because I was so completely traumatized by the fact that I hadn't given birth. I felt like a complete failure. My whole life, I'd been told I had great childbearing hips. There's this thing amongst women in the world that if you can handle childbirth, you can handle anything. I had never handled childbirth, and I felt like, in some way that I couldn't join that powerful women's club (ibid).

Winslet's child birthing confession is telling because not only does it remind us that society's notion of appropriate motherhood begins with a natural labour, but that the weight of shame carried by those women who plan for, but do not have a natural birth, is carried into new motherhood and beyond (Oakley 1981, Wolf 2003). Although it is tempting to praise Winslet for her candid childbirth account and applaud her for helping to break the stigma associated with a medicalised delivery, the timing of her announcement makes this difficult.

In much the same way as those celebrity couples who have struggled with infertility only tend to reveal their conception difficulties when holding their healthy happy new arrival (Feasey 2014), so too, Winslet only speaks of her emergency C-section after what she calls a 'triumphant' natural birth with her second child. She tells us that 'it was an amazing feeling having [her second child]

naturally, vaginally. Fourteen hours with no drugs at all. It was an incredible birth. It laid all the ghosts to rest' (Reynolds 2004). Triumphant for Winslet herself, but painful reading perhaps for those women who never had another child or for those whose later deliveries also deviated from the romanticised drug-free ideal.

Beyoncé and husband Jay-Z appeared so concerned about rumours relating to the use of medical intervention that they felt the need to put out a media statement in order to 'shatter rumors that the little girl was delivered via C-section' (celebritybabyscoop 2012). The press were informed that the performers were:

happy to announce the arrival of our beautiful daughter, Blue Ivy Carter, born on Saturday, January 7, 2012. Her birth was emotional and extremely peaceful, we are in heaven. She was delivered naturally at a healthy 7 lbs and it was the best experience of both of our lives' (Markman 2012).

For those celebrities who have had medicalised birth experiences but who have chosen to keep details private, the women's gossip sector casts aspersions on their birth plans in general, and their maternal credentials in particular. For example, we find that Victoria Beckham, the very woman who inspired the phrase 'too posh to push' has had four scheduled C-sections and that while she has 'publicly stated that they were medically necessary, others have speculated that Vickie is not only too posh to push, but she desperately wanted to avoid abdominal stretching and the pain of natural childbirth' (celebritybabyscoop 2010). The feature asks, rather loadedly 'Was it worth it Posh?' (ibid). Not only are women such as Beckham judged and found wanting for their interventionalist deliveries, but they are critiqued for encouraging women from beyond the entertainment sphere to follow their medicalised lead. We are informed that '80% of American women get some form of medical pain relief during childbirth' and that a 'growing number of women are requesting delivery by elective caesarean section ... due ... to celebrities such as Victoria Beckham' (celebritybabyscoop 2012). The feature goes as far as to say that the elective C-section is the 'it' activity of the decade (ibid).

What is interesting here is that when the celebrities themselves remain quiet on the topic, women in the audience feel the need to speak, either to defend or dismiss the efforts of these recognisable women. For example, from the celebritybabyscoop comments section:

Victoria is not 'too posh to push'! She said the babies were breech and therefore couldn't be born naturally. I'm pretty sure Romeo was also an emergency C-section as she tried to give birth naturally but the doctors decided that wasn't possible (ibid).

Since when does breech = C-section? (ibid).

Breech DOES often contraindicate vaginal birth ... every baby should be born healthy, not in distress. Suggestions such as yours suggest that you have NO real medical ... background. If you do not know what could happen, you shouldn't be deciding what should (ibid).

Complete breech presentations can be delivered vaginally ... Breech presentations are less likely to be delivered vaginally largely due to lack of experience on the part of the ... healthcare provider. This is unfortunate since vaginal delivery is less risky, with fewer complications and a shorter recovery time (ibid).

Just because a baby is breech does not mean you need a C-section ... medical training does not include witnessing or understanding natural birth so OB's don't know how to do it. This is a fact as I am both an OB and have midwifery training. Midwives know more about natural birth than doctors, bottom line (ibid).

My baby was breech and born by C-section ... it was not an excuse to get out of having a natural birth, which I very much had wanted. When a doctor tells you that if you try to have a breech birth your baby could be seriously injured or even die what choice is there? Believe me it is not an easy option ... I still find it upsetting now and people with your views don't help (ibid).

I had the same experience as you ... the only option at the hospital was C-section for me and my baby's safety. I wanted a 'natural' birth and felt very disappointed ... I am thankful that everything went well. Most people do not choose C-section and it is not an easier option ... I just wish that people understood that and were more supportive (ibid).

What is evident in these comments is how quickly a dialogue moves from the celebrity in question to a woman's own experience. A conversation about Beckham moves to a more general dialogue about breech births, firstly from expert and then from a more personal account. This is an extremely long thread, and comments are at times derisive, divisive and dismissive, they are also supporting and informative. But what they are, overwhelmingly, is personal, and perhaps that is only possible because they remain anonymous. Childbirth plans and practices are emotive due to the rhetoric used to approve of one birth plan over another, and as such, women may struggle to relay their triumphs, fears or frustrations to those closest to them for fear of reprisal, leaving such threads to offer a safe space for such sensitive confessional and conflict.

One new mother posted:

A mother is a lifetime experience, not just the birthing process. I think women get a little too critical of each other. Whichever way you decide to have your baby is totally a personal choice and should be supported. You are a mother for the rest of your life, why get hung up on a short segment. Leave each other alone and start supporting your fellow mothers (ibid).

However, even though the desire for women as mothers to support rather than critique one another is to be commended, even a cursory glance at the popular media environment makes it clear that after women have offered their critiques of one another's birthing choices, they go on to judge and rank their feeding efforts (Wolf 2013, Gordon 2014), sleeping patterns (Frizzell Fuller 2016) and working practices (Akass 2012, Lock 2015) in line with the idealisation of intensive mothering. Patriarchal society remains the chief beneficiary of the 'mommy wars', after all, having women condemn rather than champion one another's motherwork efforts leaves little space for maternal solidarity and thus little opportunity for shared demands on the system regarding pregnancy discrimination in the workplace, maternity leave or childcare provision.

A small number of women from the entertainment arena have sought to negotiate the 'mommy wars' by way of maternal health campaigning. Ricki Lake produced *The Business of Being Born* (2008), a documentary that looks to critique the American health care system for its approach to childbirth, outlining the differences between the traditional medicalised birth in the US with those in other developed countries where they lean more heavily on midwives and natural birthing practices (Lake 2007, Feasey 2016a). On the back of the film's critical success, Lake and her team produced a follow-up four-part series with shorts looking at pioneering mid-

wives and celebrity birth stories, all in the name of open communication, information and education for pregnant women. Although *The Business of Being Born* positioned natural childbirth as acceptable and appropriate in opposition to its medicalised counterpart, the later *Special Deliveries: Celebrity Mothers Talk Straight on Birth* (2012) introduces us to women who had experienced home births, hospital births, caesareans, inductions, doulas, hypnobirthing and epidurals. Rather than qualify or rank these delivery efforts, this film looked to 'speak to the power and transformative aspects of the birth experience' (Lake 2012) in all of its guises, removed from judgement. A number of female performers have since shared their childbirth stories in a series of webisodes on *MyBestBirth.com*, a new social networking site launched by Lake and her long-term collaborators (People 2009). In the same way that Lake used her experiences of labour to help inform future mothers about their childbirth choices, Christy Turlington used her public standing to promote maternal health after suffering from a postpartum haemorrhage. Turlington developed a 'life-threatening complication that affects one in 20 British women' (Estridge 2010). The placenta had become embedded into her uterus wall, causing her to bleed heavily, and although Turlington survived due to immediate emergency medical intervention, she realised that many women in the developing world are not so fortunate, and that in different circumstances, she too could have been just another maternal mortality statistic. According to the World Health Organization, '303,000 women die from preventable complications of pregnancy and childbirth every year (WHO 2015, Stern 2016), with postpartum haemorrhaging contributing 'to the majority of maternal deaths around the developing world' (Estridge 2010). Since her own experience of postpartum haemorrhaging, Turlington has directed *No Woman, No Cry* (2010), bringing birth stories from Tanzania, Bangladesh and Guatemala to the developed world. The model has 'immersed herself in humanitarian issues, campaigning to get the best care for pregnant women in poverty-stricken circumstances who do not have the quality of care she received' (ibid). She has launched Every Mother Counts, a non-profit organisation dedicated to making pregnancy and childbirth safe for every mother. The organisation raises funds to support maternal health programs around the world, with programs currently in Haiti, Uganda, Malawi, Indonesia, and the United States (Hartney 2015). Turlington is not just talking about her childbirth trauma in order to negotiate the 'mommy wars', but rather, she is using her experiences to make pregnancy and childbirth safer for all women.

Conclusion

There is a myriad of celebrity mothers who exploit their pregnancy, post-pregnancy figures, maternal status and children's milestones to boost their own careers (Cross 2011). Indeed, while those from beyond the entertainment arena routinely hide their pregnancy from employers for fear of work-place discrimination (Quart 2012, Dougherty 2015), and later struggle to return to work several months or years after the birth of a new baby, celebrities can thrive on media interest in the conception, pregnancy, childbirth and new maternal role³. However, although it is easy to dismiss these women for being vocal about not only their pregnancy and mothering role, but also their childbirth experience, for the sake of media attention and thus economic investment, there is a sense that they are opening up a dialogue about childbirth perhaps lacking in the broader media environment (Maushart 1999, Feasey 2016a). That said, these birth stories remain firmly rooted in the 'mommy wars' as they feel the need to champion natural births and the natural birthing mother over and above her medicalised counter-part. Where the 'mommy wars' were originally seen to divide maternal practices, they have now expanded so as to include the bodily autonomy of the women themselves. The ways in which these celebrity mothers relay their childbirth stories adds to the unconscious weight of a society that judges and ranks the childbirth experience, but future research must look to the role of agents, managers and publicists to discover how far these women are sharing their stories as autonomous and enthusiastic commentators and how far they are sharing due to the career advice of talent management services.

Bibliography

AIMS., 2016. For a Better Birth, Association for Improvements in the Maternity Services, AIMS, accessed 3 November 2016. Available from: <http://www.aims.org.uk>

Akass, K., 2013. Motherhood and the Media under the Microscope: The Backlash Against Feminism and the Mommy Wars. *Imaginations* 4:2, accessed 13 July 2016. Available from: <http://imagination.csj.ualberta.ca/?p=4788>.

Akass, K., 2012. Motherhood and Myth-Making: Despatches From the Frontline of the US Mommy Wars' *Feminist Media Studies*, 12:1, 137-141.

AllParenting., 2012. Celebrity Moms: Who Had Natural Vs. C-Section Births. *AllParenting*, accessed 13 July 2016. Available from: <http://www.allparenting.com/my-pregnancy/articles/965693/celebrity-moms-who-had-natural-versus-c-section-births>

Arnold, A., 2003. The Rhetoric of Motherhood. *The Mothers Movement*, accessed 13 July 2016. Available from: http://www.mothersmovement.org/features/rhetoric_motherhood/rhetoric_motherhood4.htm.

BabyBump., 2012. Unbelievably Celebrity Birth Stories *BabyBump*, accessed 13 July 2016. Available from: <http://mom.me/entertainment/4267-unbelievable-celebrity-birth-stories/>.

Babycentre., 2015. What is a natural birth? *babycentre*, accessed 13 July 2016. Available from: <http://www.babycentre.co.uk/x25016321/what-is-a-natural-birth>.

Beech, B.L., 2004. NICE Guidelines for Caesarean Section, *AIMS (Association for Improvements in the Maternity Services) Journal*, 2004, 16:2, Available at: <http://www.aims.org.uk/Journal/Vol16No2/csGuidelines.htm> (accessed 10/08/2011).

Bounty., 2016. Childbirth Craze That's Taking the Internet by Storm ... Lights, Camera, Action. Bounty, accessed 8 September 2016. Available from: <http://www.bounty.com/family/news/childbirth-craze-thats-taking-the-internet-by-storm>

Buxani, A., 2005. Birth of a Revolution. The Gentle Birth Method, accessed 13 July 2016. Available from: <http://www.gentlebirthmethod.com/press/press-cuttings-general/birth-of-a-revolution/>.

Campbell, D and Duncan, P., 2016. Is 'Incessant Increase' in Caesarean Births Putting First-Time Mothers' Health at Risk?. *The Observer*, accessed 8 September 2016. Available from: <https://www.theguardian.com/society/2016/jan/31/caesarean-health-risks-c-section-first-time-mothers>

Celebritybabyscoop., 2012. Celebrity Moms: Who Had Natural Vs. C-Section Births? accessed 13 July 2016. *Celebritybabyscoop*, Available from: <http://www.celebritybabyscoop.com/2012/01/26/celebrity-moms-who-had-natural-vs-c-section-births>.

Celebritybabyscoop., 2010. Gisele Bündchen: I Am A Very Happy & Proud Mother. *Celebritybabyscoop*, accessed 13 July 2016. Available from: <http://www.celebritybabyscoop.com/2010/03/08/gisele-b-ndchen-i-am-a-very-happy-proud-mother>.

Church Gibson, P., 2011. New Patterns of Emulation: Kate, Pippa and Cheryl' *Celebrity Studies*, 2:3, 358-360.

Cosslett, T., 1994. *Women Writing Childbirth: Modern Discourses of Motherhood*, Manchester: Manchester University Press.

Cross, L., 2011. D-List Celebrities: The Only Women Who Get A Career Boost From Their Baby Bump. *Mommyish*, accessed 13 July 2016. Available from: <http://www.mommyish.com/2011/09/12/d-list-celebrities-the-only-women-who-get-a-career-boost-from-their-baby-bump-132/>.

Dally, A., 1982. *Inventing Motherhood: The Consequences of an Ideal*, London: Burnett Books.

Devlin, H., 2016. Babies Born by Caesarean More Likely to be Obese as Adults, Study Suggests, accessed 8 September 2016. Available from:

<https://www.theguardian.com/society/2016/sep/06/babies-born-by-caesarean-more-likely-to-be-obese-as-adults-study-suggests>

Dick-Read, G., 1942/2013. *Childbirth without Fear: The Principles and Practice of Natural Childbirth*. London: Pinter & Martin Ltd.

Donnelly, L., 2016. C-sections Taking Place Dangerously Early, Experts Warn, The Telegraph, accessed 8 September 2016. Available from: <http://www.telegraph.co.uk/news/2016/03/23/c-sections-taking-place-dangerously-early-experts-warn/>

Dougherty, S., 2015. One in Ten Pregnant and New Mothers 'Forced out of Work'. MailOnline, accessed 8 September. Available from: <http://www.dailymail.co.uk/news/article-3172799/Job-hunters-not-hide-pregnancy-says-three-four-bosses.html>

Douglas, S and Michaels, M., 2005. *The Mommy Myth: The Idealization of Motherhood and How it Has Undermined All Women*, London: Free Press.

D'Zurilla, C., 2014. Mila Kunis on Childbirth Plans and her Oddly Secret Engagement, Los Angeles Times, accessed 8 September 2016. Available from: <http://www.latimes.com/entertainment/gossip/la-et-mg-mila-kunis-pregnant-childbirth-ellen-degeneres-ashton-kutcher-20140509-story.html>

Estridge, B., 2010. I Would Have Died Giving Birth if I Wasn't a Rich Western Model, says Christy Turlington. *MailOnline*, accessed 13 July 2016. Available from: <http://www.dailymail.co.uk/health/article-1331367/Christy-Turlington-I-died-giving-birth-I-wasnt-rich-Western-model.html>.

Fairclough, K., 2012. Nothing Less than Perfect: Female Celebrity, Ageing and Hyper-Scrutiny in the Gossip Industry. *Celebrity Studies*, 3:1, 90-103.

Feasey, R., 2016a. *Mothers on Mothers: Maternal Readings of Popular Television*. London: Peter Lang.

Feasey, R., 2016b. The New Hegemonic Hierarchy: Tracking (Men's) Athletic Activity' *Antenna*, accessed 13 July 2016. Available from: <http://blog.comarts.wisc.edu/2016/01/29/tracking-athletic-activity/>.

Feasey, R., 2014. From Heartache to Happiness: the Codes, Conventions and Clichés of the 40-something Celebrity Infertility Story. *MaMSIE*, accessed 13 July 2016. Available from: <http://mamsie.org/mamsieblog/2014/11/from-heartache-to-happiness-the-codes-conventions-and-cliches-of-the-40-something-celebrity-infertility-story/>.

Feasey, R., 2012. *From Happy Homemaker to Desperate Housewives: Motherhood and Popular Television*. Anthem: London.

Feasey, R., 2012. The Blurring Of Fame And Talent: Female Celebrity And The Glossy Gossip Sector. *FlowTV*, accessed 13 July 2016. Available from: <http://www.flowjournal.org/2012/02/blurring-fame-and-talent/> (accessed 11/07/2016).

Feasey, R., 2008. *Masculinity and Popular Television*. Edinburgh University Press: Edinburgh.

Fish-Hatfield, E., 2016. Celebrity Influence on Audience's Consumption Practices as Parents in Jackie Raphael et als (eds) *Building Bridges in Celebrity Studies*: Toronto: WaterHill, 8-19.

Frizzell Fuller, J., 2016. Sleep-Shaming: The New Front Of The Mommy-Wars. *slumberbaby*, accessed 13 July 2016. Available from: <http://www.slumber-baby.com/sleep-shaming/> (accessed 11/07/2016).

Gallagher, J., 2016. Over 40s Have More Babies Than Under 20s. *BBC News*, accessed 14/07/2016. Available from: <http://www.bbc.co.uk/news/health-36782323>

Gamson, J., 1994. *Claims to Fame: Celebrity in Contemporary America*, London: University of California Press.

Geraghty, C., 2007. Re-Examining Stardom: Questions of Texts, Bodies and Performance in Sean Redmond and Su Holmes (eds) *Stardom and Celebrity: A Reader*, London: Sage, 98-110.

Gordon, B., 2014. Breastfeeding Wars: is Breast Really Best? *The Telegraph*, accessed 13 July 2016. Available from: <http://www.telegraph.co.uk/women/mother-tongue/10911177/Breastfeeding-wars-is-breast-really-best.html> (accessed 11/07/2016).

Gritten, D., 2002. *Fame: Stripping Celebrity Bare*, London: Penguin.

Hartney, M., 2015. Every Mother Counts: Donate. *Michelle Hartney*, accessed 13 July 2016. Available from: <http://www.michellehartney.com/every-mother-counts/>.

Hazlett, C., 2008. Matthew McConaughey's Dance Through Labor. *Today*, accessed 13 July 2016. Available from: http://www.today.com/id/25803140/ns/today-today_entertainment/t/matthew-mcconaugheys-dance-through-labor/#.V4T6w1fcoll.

Ivillage., 2012. How Celebrities Choose to Give Birth. Ivillage, accessed 8 December 2012. Available from: <http://www.ivillage.co.uk/how-celebrities-choose-give-birth/82056>

Jermyn, D., 2012a. Get a Life Ladies. Your Old One is Not Coming Back: Ageing, Ageism and the Lifespan of Female Celebrity. *Celebrity Studies*, 3:1, 1-12.

Jermyn, D., 2012b. We Know How Sarah Jessica Parker Does it: The Travails of Working Motherhood and Celebrity Privilege. *Celebrity Studies*, 3:2, 250-252.

Kluger, Jeffrey., 2009. Doctors Versus Midwives: The Birth Wars Rage On. *Time*, accessed 3 November 2016. Available from: <http://content.time.com/time/health/article/0,8599,1898316,00.html>

La Gorce, T., 2009. Erykah Badu Tweets About Her Home Birth. *Babble*, accessed 13 July 2016. Available from: <https://www.babble.com/celebrity/erykah-badu-new-amerykah-and-tweeting-during-pregnancy/>.

Lake, R., 2012. Special Deliveries: Celebrity Moms Share Birth Stories. *The Huffington Post Blog*, accessed 13 July 2016. Available from: http://www.huffingtonpost.com/ricki-lake/ricki-lake-celebrity-moms_b_1320672.html.

Lake, R., 2007. Ricki Lake On The Business Of Being Born. *The Huffington Post Blog*, accessed 13 July 2016. Available from: http://www.huffingtonpost.com/ricki-lake/ricki-lake-on-the-busines_b_46002.html.

La Leche League GB., 2016. Friendly Breastfeeding Support from Pregnancy Onwards, La Leche League, accessed 3 November 2016, available from: <https://www.laleche.org.uk>

Lock, K., 2015. The 'Mommy Wars' are the Patriarchy's Latest Attempt to Control Women. *theguardian*, accessed 13 July 2016. Available from: <https://www.theguardian.com/commentisfree/2015/oct/28/the-mummy-wars-are-the-patriarchys-latest-attempt-to-control-women>.

Lusted, David., 2012. Age Spots and Spotlights: Ageing and Performance. *Celebrity Studies*, 3:3, 362-365.

MAMA., 2011. Secretary of State Hillary Rodham Clinton launches the Mobile Alliance for Maternal Action, MAMA, accessed 13 July 2016. Available from: <http://www.mobilemamaalliance.org/news-and-media?page=7>.

Markman, R., 2012. Beyonce And Jay-Z Release Official Birth Announcement. *MTV News*, accessed 13 July 2016. Available from: <http://www.mtv.com/news/1676970/beyonce-jay-z-birth-announcement-blue-ivy/>.

Maushart, S., 1999. *The Mask of Motherhood: How Becoming a Mother Changes Everything and Why We Pretend it Doesn't*, London: Pandora.

McCabe, J., 2011. And Brining up the Rear: Pippa Middleton, her Derriere and Celebrity as Feminine Ideal' *Celebrity Studies*, 2:3, 355-357.

Miller, T., 2005. *Making Sense of Motherhood: A Narrative Approach*, Cambridge: Cambridge University Press.

Morris, T. and McInerney, K., 2010. Media Representations of Pregnancy and Childbirth: An Analysis of Reality Television Programs in the United States, *Birth: Issues in Perinatal Care*, 37:2, 134-140.

NCT., 2016. NCT: Vision, Mission and Goal, NCT, accessed 3 November 2016, available from: <https://www.nct.org.uk/about-nct/vision-and-strategy>

NHS., 2016. NHS Choices: Why Making a Birth Plan is Important. NHS, accessed 8 September 2016. Available from <http://www.nhs.uk/conditions/pregnancy-and-baby/pages/birth-plan.aspx>

NHS., 2009. NHS Choices. *NHS*, accessed 13 July 2016. Available from: <http://www.nhs.uk/news/2009/06June/Pages/WarningToOlderMothers.aspx>.

NICE., 2014. NICE Confirms Midwife-led Care During Labour is Safest for Women with Straightforward Pregnancies, accessed 8 September 2016. Available from: <https://www.nice.org.uk/news/press-and-media/midwife-care-during-labour-safest-women-straightforward-pregnancies>

Oakley, A., 1981. *From Here to Maternity*, Middlesex: Pelican Books.

Olin, D and Rawley, L., 2015. 28 Celeb Moms Get Real About Giving Birth: Kate Winslet. *Elle*, accessed 13 July 2016. Available from: <http://www.elle.com/culture/celebrities/news/g26110/celebrities-on-labor-giving-birth/?slide=10>.

O'Reilly, A. and Porter, M., 2005. Introduction, in *Motherhood: Power and Oppression*, eds. Marie Porter *et al.*, Toronto: Women's Press, 1-24.

O'Reilly, A., 2004. Introduction in *Mother Outlaws: Theories and Practices of Empowered Mothering*, ed. Andrea O'Reilly, Toronto: Women's Press, 1-30.

People., 2009. Celebrity Moms to Share Birth Stories On MyBestBirth.com' *PeopleBabies*, accessed 13 July 2016. Available from: <http://celebritybabies.people.com/2009/07/08/celebrity-moms-to-share-birth-stories-on-mybestbirth-com/>

People., 2008. Maria Bello 'Can't Imagine' Giving Birth in a Hospital. *People*, accessed 13 July 2016. Available from: <http://celebritybabies.people.com/2008/07/28/maria-bello-tal/>.

Plant, R., 2010. *Mom: The Transformation of Motherhood in Modern America*, Chicago: The University of Chicago Press.

Quart, A., 2012. Why Women Hide Their Pregnancies, accessed 8 September 2016. Available from: http://www.nytimes.com/2012/10/07/opinion/sunday/why-women-hide-their-pregnancies.html?_r=0

Rapp, R., 1994. The Power of "Positive" Diagnosis: Medical and Maternal Discourses on Amniocentesis, in *Representations of Motherhood*, ed. Donna Bassin, London: Yale University Press, 204-219.

Rich, A., 1977. *Of Woman Born: Motherhood as Experience and Institution*, London: Virago.

Reynolds, M., 2004. Why Kate Lied About Mia's Birth. *DailyMail*, accessed 13 July 2016. Available from: <http://www.dailymail.co.uk/tvshowbiz/article-300032/Why-Kate-lied-Mias-birth.html>.

Schafer, J., 2013. Celebrity Moms: Who Had Natural vs. C-section Births? *herscoop*, accessed 13 July 2016. Available from: <http://herscoop.com/posts/celebrity-moms-who-had-natural-vs-c-section-births/>.

Scotch, A., 2011. Celebrity Moms: Cindy Crawford: Business of Being Born: Celeb Mom Birth Stories. *sheknows*, accessed 13 July 2016. Available from: <http://www.sheknows.com/parenting/articles/847083/celebrity-moms-cindy-crawford>.

Shute, N., 2014. Doctors Say Don't Give Birth To Baby In A Tub, But Midwives Disagree. *NPR*, accessed 3 November 2016. Available from: <http://www.npr.org/sections/health-shots/2014/03/21/292381478/dont-birth-that-baby-in-a-tub-doctors-say-but-midwives-disagree>

Singh, A., 2008. Jessica Alba: Childbirth is Just Like Meditation. *The Telegraph*, accessed 13 July 2016. Available at: <http://www.telegraph.co.uk/news/celebritynews/2421267/Jessica-Alba-childbirth-is-just-like-meditation.html>.

Smith, R., 2012 Infections After Caesarean Birth 'Higher' than Other Operations. *The Telegraph*, accessed 8 September 2016. Available from: <http://www.telegraph.co.uk/news/health/news/9440620/Infections-after-caesarean-birth-higher-than-other-operations.html>

Stern, C., 2016. Supermodel Christy Turlington Reveals How Nearly Dying During Childbirth Motivated her to Sign up for her FIFTH Marathon to Raise Funds for Maternity Care in Poor Countries. *MailOnline*, accessed 13 July 2016. Available from: <http://www.dailymail.co.uk/femail/article-3540153/Supermodel-Christy-Turlington-reveals-nearly-dying-childbirth-motivated-sign-FIFTH-marathon-raise-funds-maternity-care-poor-countries.html>

Street, J., 2004. Celebrity Politicians: Popular Culture and Political Representation. *British Journal of Politics and International Relations*, 6:4, 435-452.

US Weekly., 2009. Wife Was a 'Warrior' During Natural Childbirth. *US Weekly*, accessed 13 July 2016. Available from: <http://www.usmagazine.com/celebrity-moms/news/taye-diggs-on-ellen-20091510>.

Walsh, C., 2014. Delivery Room Divas: The Famous Mums-to-be who Prepare for Birth in Style! *Mirror*, Available from: <http://www.mirror.co.uk/3am/celebrity-news/delivery-room-divas-famous-mums-to-be-3827237>.

What to Expect., 2016. Celebrity Birth Stories' *What to Expect*, Available from: <http://www.whattoexpect.com/celebrity/photo-gallery/celebrity-birth-stories.aspx#/slide-1>.

WHO., 2015. Why Do So Many Women Still Die in Pregnancy or Childbirth? *World Health Organisation*, Available from: <http://www.who.int/features/qa/12/en/>.

Wolf, J., 2013. *Is Breast Best?: Taking on the Breastfeeding Experts and the New High Stakes of Motherhood*, NY: NYU Press.

Wolf, N., 2003. *Misconceptions: Truth, Lies, and the Unexpected on the Journey to Motherhood*.
London: Vintage.

¹ A natural birth can mean different things to different people within and beyond the celebrity circuit. Some women believe that they have ‘had a natural birth if they gave birth vaginally, no matter what happened during the lead up. Whereas for others, having a natural birth is part of a much broader labour and birth experience. Natural birth to some women means a labour without any medical pain relief, leading to a vaginal birth, and possibly third stage, without any interventions at all’ (babycentre 2015). Moreover, ‘midwives and obstetricians have their own working definition of natural birth, which sits somewhere in between these different viewpoints. They tend to talk about “normal birth”, rather than “natural birth”, although they may use either term’ (ibid). We are told that the NCT, the Royal College of Midwives and the Royal College of Obstetricians and Gynaecologists have agreed a definition for normal birth. According to this definition, a normal birth is one in which ‘labour starts spontaneously, labour progresses without certain drugs or assistance and that forceps or ventouse are not used’ (ibid). With this in mind then, a ‘normal birth doesn't mean there are no interventions at all’ (ibid). Indeed, the statistics for normal births include births where women had one or more of the following: ‘labour speeded up with a syntocinon drip, their waters broken ... once labour has started, electronic fetal monitoring, a managed third stage of labour, gas and air and/or opioids (such as diamorphine or pethidine) for pain relief’ (ibid). In order to offer further clarification we are told that it can be easier to understand what a normal birth is if you look at what the term does not include, such as ‘induction of labour, epidural or spinal episiotomy, forceps or ventouse, caesarean section or general anaesthetic’ (ibid). According to health care practitioners, the ‘definition of normal or natural labour isn't meant to be used to judge women by what sort of labour or birth they had, or what they use to help them cope while in labour. It's more to do with keeping a check on types of pain relief and interventions that can affect the normal course of labour’ (ibid). However, although terms such as ‘natural and ‘normal’ are not meant to be used to judge and rank birthing mothers, it is clear that this is precisely how such terms are being used within and beyond the celebrity sector in line with a hegemonic hierarchy of childbirth. Value judgements are being made about appropriate and inappropriate birth narratives, with a natural delivery being heralded as the correct and preferred outcome for mother and baby. However, even within the natural childbirth movement and the medicalised paradigm, there are competing discourses about appropriate childbirth, with debates focusing on the role of the midwife and the importance of expert knowledge (Kluger 2009, Shute 2014).

³ After all, 'these women don't have actual careers to be interrupted by nine months of pregnancy. And if they do have a career, it's largely centered around how much people talk about you in the press. Therefore, protruding abdomens provide a whole new world of opportunity for falling stars. Those baby bumps give them something new to talk about and market. It gives them a blog on People or Us Babies. It gets them mentioned on *Celeb Baby Laundry*. It helps them relate to the public in a new manor' (Cross 2011).