

## **Reproduction, Women and the ‘Body Politic’ of Demographic Knowledge**

Susan A. McDaniel  
Department of Sociology  
University of Windsor  
Canada  
e-mail: [mcdaniel@uwindsor.ca](mailto:mcdaniel@uwindsor.ca)

### Abstract

Bodies, as socially created through societal dynamics, tell stories, life stories. They are more than passive bits of ectoplasm overlaid with social meanings. Recognizing women’s bodies as sites for knowledge where social and political scripts are enacted is vital for understanding both the demographic processes of reproduction and the politics of demographic knowledge.

This paper relies on three methodological approaches: 1) an examination of how demography sees women’s bodies in reproduction; 2) a qualitative study of older women looking back on their reproductive lives and reflecting on reproductive experiences in relation to their bodies; and 3) an examination of some key policies in Canada and the United States with respect to reproductive access and constraint, to see how policies differently create and control reproductive bodies. Findings from the parallel analyses are then brought together to shed new light on the processes of demographic knowledge construction.

That bodies and the bodily are inextricably connected with large-scale social changes, processes and structures has been known since the middle of the nineteenth century (Engels, 1974 (1845)). It may be no surprise then to examine the bodily as a terrain of socio-political change and control in the construction of demographic knowledge and practice. Building on the notions of Elstain (with Cloyd, 1995) and Turner (1992; 1996) as well as Foucault (1977) that good bodies are disciplined or controlled bodies, this paper examines how women's bodies, in particular bodily inequalities among women, are socially created as sites for demographic knowledge creation and practice. We further work with Gramsci's insight that the structures of a changing macro-world necessitate new bodily regimentation. This paper relies on three methodological approaches: 1) an examination of how demography sees women's bodies in reproduction; 2) a qualitative study of older women looking back on their reproductive lives and reflecting on reproductive experiences in relation to their bodies; and 3) an examination of key policies in the United States and Canada with respect to reproductive access and constraint, to see how policies differently create and control women's bodies. Findings from the parallel analyses are then brought together to shed new light on the processes of demographic knowledge construction as embodied in women.

The body is both central and invisible in demography. On the one hand, philosophical thought about the body that has infused much recent social science discourse (see Lorber and Moore, 2007 for examples) is historically deep but elusive in its impact on demography as a discipline. Descartes, in the 17<sup>th</sup> century, saw the body in mechanical terms, to be understood without reference to consciousness or what we would today call agency. This accorded well with

thinking at the time of the Industrial Revolution, which saw the human body as an extension of the machine. Of course, animal labour, and at certain historical moments, human labour as well, has been seen in this way for some time, and may still be seen this way in many quarters.

This attitude toward the body also resonates with the ways in which class differences have been conceptualised as natural, with inequalities in society thought to be rooted in bodily differences. For example, it has been argued that working class people can only think using simple and repetitive processes, unlike the middle and upper classes whose more complex thought processes are said to determine the kind of work of which they are capable (cited in Rose, Lewontin and Kumin, 1984:231). And in 2004, a book provocatively entitled *Testosterone Inc.* argues that male top executives are where they are because of greater degrees of male hormones than “lesser” men, hormones, of course, women, presumably have only in short supply (Byron, 2004). In popular culture, it is clear that there is at present, as the title of a *New York Times Magazine* article in 2004, “A Love Affair with the Genes” (2004: 69-73) and all the assumptions about the bodily that emanate therefrom.

Historically, working class women’s reproduction was seen very differently than reproduction in the middle and upper classes. In times of concern about birthrates, the “breeding” of working class women was seen as worrisome in light of the reality that middle and upper class, differentially white, women were having fewer children. This differential fertility by class and race (and their vital intersection) was the impetus for the birth control movement in Canada and the United States in the early 20<sup>th</sup> century (McLaren and McLaren, 1986). Focussed initially exclusively on the working class, particularly immigrants, it later broadened to include the heretofore unrecognized concept of women’s reproductive choice.

The advent of abortion as a medical procedure in the U.S. emerged out of concern about “naturally” occurring differential birthrates in the early 20<sup>th</sup> century among working class, immigrant and African-American women compared to higher class women differentially white non-immigrants. The medical profession, largely comprised of privileged white men at the time, took control of abortion access and redefined abortion as a medical intervention. It had previously been a women’s matter and rarely involved surgical intervention. The quaint reference was to herbal remedies to “bring down the menses.” The redefinition enabled medical practitioners to gain some measure of “discipline” over which women were seen to be “deserving” of abortions and which not. Abortion in the early days of medicalization of the procedure, as well as sterilization, became something that working class women could more readily obtain, but which were more often denied to higher class women. Thus, the bodily regimentation of women by class, race and immigration status, was secured by men of privilege in the interest of decreasing the birth rates among one group, working class women, while increasing births among higher class women. The perceived differences in reproduction levels among these two categories of women were controlled and women’s bodies in both classes “disciplined” by the power of the nascent medical profession (McLaren and McLaren, 1986).

When a rights discourse became politically dominant, women’s reproductive choice emerged as paramount. Then, it was, and remains, largely middle and upper class women who are thought to have the capacities/ agency to make reproductive choice, under the careful and ever-changing control of male-dominated professions of medicine, law and politics, of course. Working class women’s reproduction is much more sharply circumscribed by policy and public sanctions, now in the same ostensible public interest of reducing their fertility as in the early days of medicalized abortion

In demography, long extant, but seldom made explicit beliefs in differential mental and bodily capacities among women by class is manifest in knowledge production and practice in so-called less developed countries (LDCs). Women in LDCs have tended to be aggregated and abstracted such that their agency is eclipsed and their bodies seen almost exclusively as means to the end of population control (Greenhalgh, 1990; 1996; Hammel, 1990; McDaniel, 1996; Riley, 1997). LDC women have been conceptualized, if at all at the bodily level, as natural reproducers similar to the ways in which working class and immigrant women in North America have been in earlier times. Attempts to understand childbearing in deep social contexts from LDC women's standpoints are few indeed.

From the 1950s until the 1990s, fertility control was the prime motivation of international population policy efforts often tied directly to demographic research, although it was argued that health and economic benefits would accrue. Meanings, both cultural and social, of women's childbearing, were simply not much considered in either demographic research or practice. In 1974 at the Bucharest World Population Conference, new stirrings were apparent when it was argued that "development is the best contraceptive" (quoted in Riley, 1997:36). However, this was short-lived and not supported by the 1984 Mexico City Population Conference. Even if it was universally supported, however, development was not thought to be in the service of women's interests, or something in which women would play an active role except insofar as they reduced childbearing. In the 1990s, with the United Nations Conference on Women in Beijing, recognition emerged that both family planning and socio-economic development were necessary for LDCs. But, there remains little understanding of, or commitment to, the notion that lowering fertility levels at the aggregate level deeply connects with the interests and bodily needs of women as individuals.

## Bodies in Sociology

The body has been notably absent from much of sociology, with significant exceptions to be discussed in a moment. Seeing the body as a social fact, shaped by social processes both material and cultural, is relatively new for sociology (Turner, 1992) and opens the door for reconnecting with the fundamental theoretical insights of Engels and Weber, as well as with those of Bourdieu and Foucault about the body as shaped and disciplined by social processes and structures.

Contemporary sociological attention to the body as socially shaped has opened opportunities for new ways to see the bodily and bodily inequalities as structured means by which people are rendered unequal by social systems and practices.

That said, insightful foundational insights can be cited on the ways in which the bodily interconnects with social structures and changes. Engels, for example, recognized what he termed the “physiological results of the factory system” (Engels 1974(1845): 168) in the determination of our physical afflictions and shaping of our bodies by social organization in society. He astutely noted that with factory work, feet flattened, legs became ulcerated and growth ceased (his terms). Among women, deformities of the pelvis and hipbones occurred, and spinal columns changed (Engels, 1974(1845):168-178). Most importantly for demography, life expectancies were significantly reduced by accidents and maiming in the early factories as well as by exposure to the cold, damp and polluted working environments. Weber was sensitive to the interrelations of social hierarchies and the bodily. Like Engels before him, he observed that industrial capitalism produces compliance of the bodies of workers as well as of their psyches (Gerth and Mills, 1948:254). Structures of the macro-world necessitate new bodily

regimentation, and new ways for social sciences to observe the phenomena that connect with the bodily.

Bourdieu (1984) sees bodies as inscribed with social and cultural relationships. We produce our bodies to present to others our image of who we are, he suggests. Bodies are repositories of culturally encoded class positions that become stable ways of enacting ourselves for the social world. The body is then a form of physical capital. The well-maintained, and of course, well-shaped body (however that is culturally and socially defined), reveals to others that we are disciplined, worthy and most vitally, in control of the bodily. The social system becomes part of the picture when symbolic forms of consumption demarcate hierarchies. Inequalities thus become bodily, and as such, bodies mirror social inequalities. That the masses are referred to by the descriptor, “stinking” is but one illustration of how bodies are marked socially by class.

Foucault, alternatively, argues that bodies are profoundly shaped and disciplined by specialist knowledge, particularly but not exclusively medical knowledge, that teaches us how to know ourselves, how to bring our bodies into conformity with the requirements of production and consumption in society. In capitalist society, Foucault (1977) suggests, most agencies of social control are aimed toward the production of docile, compliant bodies. Foucault says

When I think of the mechanics of power, I think of its capillary form of existence, of the extent to which power seeps into the very grain of the individuals, reaches right into their bodies, permeates their gestures, their posture, what they say, how they learn to live and work with people.

(Foucault as cited in Martin, 1989:6)

This cuts to the quick of what we are examining here, the degree to which the bodily is shaped by disciplinary discourse and practice, by shifting global

priorities and connections of power, and by power wielded to shape the bodily further in seeking solutions to problems, in this case demographic problems.



## Stratified Reproduction

“It is not the body object described by biologists that actually exists, but the body as lived in by the subject” that is the concern of social analyses (Beauvoir, 1953: 69). Indeed, scientific (including social science and policy knowledge) and medical knowledge are, in most ways, normative judgements dressed up as fact. This is evident in stratified reproduction where “those women,” differentially LDC women, who refuse or cannot control their fertile bodies that produce too many babies to support, “sell them off” for gain to couples in the developed world. The international adoption market is much the same as in the past in the west where babies born “out of wedlock” were “farmed out” to respectable couples, often leaving no traceable trail (see Dorow, 2006). Both of these images are normative judgements dressed up as fact, with consequences for how the bodies involved are shaped and defined.

Reproduction, once thought of a biological imperative, has long been seen differently in different social classes. Working class women were thought to be “natural” reproducers, suited to it like farm animals. Thought to be prone biologically to wide hips and ample breasts, working class or minority women were often depicted as walking fertility queens who could have a baby and be back at work in the fields or factories without so much as taking a breath. Middle and upper class women, however, were seen differently in terms of reproduction. They were to be pampered, ministered to, brought into early hospitals, and worried over for fear that they might not be fertile enough. This parallels almost directly the way in which women from LDCs are perceived relative to women in MDCs. Stratified reproduction (Colen, 1995) is a concept that sees social hierarchies as well as social, economic and political forces and factors as giving rise to systems of social inequality by which reproductive tasks are differentially assigned and

accomplished. These hierarchies are made manifest in the different construction of women's bodies in relation to reproduction and reproductive capacity. An historic example would be slaves and domestic servants who routinely breast-fed the babies of their masters/employers as 'wet nurses.' Of course, this system of allocating reproductive tasks through power and privilege necessitates bodily coordination, and the regimentation of bodies needed for the job of "wet nurse." In dairy farming, this is called "sweetening."

The domestic worker system in Canada and the United States is another form of stratified reproduction. Women, differentially from the Philippines and the Caribbean, are brought to North America to help raise the children of wealthy families. Often, they live in the home of the family and are ostensibly on call "24/7" as biological mothers typically would be in other circumstances. They nurture the children, feed them, take them on outings and clean up after them. They are engaged fully in social reproduction and childrearing. But, under law, they cannot bring their own children into the country as immigrants. So, the nannies are mothers in fact and in everyday life, but there is a disjuncture between their social and policy-approved mothering of other women's children and policy-sanctioned prohibitions against mothering their own children. They are mothers to others on condition that they deny being "real" biological mothers to their own children. Their bodies and social opportunities are shaped by their mothering in Canada and the United States. Their biological reproduction is frowned upon in these countries, with their immigration and employment status threatened if they become pregnant.

Social regimentation, power relations and global economic and social interconnections warrant stratified reproduction. This entails sharp and intensifying control of women's reproducing bodies, and a shaping of the bodily in the image of hierarchies. Reproduction

involves more, much more than sexuality, sexual union and gestation. It is interconnected with systems of intergenerational transmission of power, influence, wealth and the reproduction of social inequalities. When, for example, what is valued and inherited is land, then intergenerational transmission demands a certain smoothness of reproduction, ie. not too many children, and only children born in the context of sanctioned marriage where social changes are either non-existent or undistruptive of an inherited class system. Vestiges of this system remain today with the landed gentry in the United Kingdom and in various other places in the world. Status and titles are gained through women's bodies in reproduction. Those bodies are essential to discipline in the interests of the social system.

Stratified reproduction is increasingly, but not newly, becoming global. This works at a number of levels. There is, as mentioned, the importation of domestic servants or nannies to care for (or to surrogate "mother") the children of women in the developed world. There is the care with which immigrant women are selected in Canada to be 'ideal mothers' who will engender human capital in their children (McLaren and Dyck, 2004). There is the importing of compliant brides from regions of the world where women are socialized to be dutiful to husbands and boyfriends, their bodies shaped as sexually appealing to foreign men. And there is a growing international trade in sex workers, including more and more young girls and boys from LDCs who are coerced, kidnapped or sold into the work.

Stratified reproduction is also the trade in babies from some regions of the world, where for various reasons, they are seen as surplus, to other regions of the world where they are in demand. Aspects of stratified reproduction have been well known and understood for a long time. Young boys were imported from the streets of London to rural Canada to work on the farms and ranches, for example. Ostensibly, the interest of the importers of these lads was in their welfare,

but the girls left behind would, one might think, also be of concern, perhaps of bigger concern, and yet that did not warrant their passage to Canada. It was the boys as a source of farm labour that put them in demand. Were it possible in the 19<sup>th</sup> century, the production of boys relative to girls might have been increased to meet this demand. As it is, there has always been a practice of neglecting girls to a greater extent in times of scarcity or because of cultural preference for sons, leading in many cases to higher rates of mortality amongst baby girls, and sometimes to female infanticide. This is a profound effect on female bodies, in dispensing with them entirely.

As the demand for child labourers diminished, and their utility value as objects of affection increased, the popularity of boys in the import trade lessened, and girls came to be in greater demand. This enhanced demand for girl babies almost perfectly coincided with the One-Child Policy in China. Here, an oversupply of girl babies exists where boys are the choice of parents if they can have just one child, and the demand is huge in North America for complacent, cute, baby girls, China dolls (Dorow, 2006).

One study of transnational migration of children adopted by American families (Dorow, 2006), finds that Chinese baby girls are constructed as *tabula rasa* on which their identities are written, but they carry on their skins their genealogies and bio-social histories even as they may know nothing about the culture into which they were born. As Dorow puts it, dislocation and kinship across cultural/national border force adopted children from China into “the alleged mutability and multiplicity of their subjectivity. They are backed into it” (Dorow, 2006: 212). With the popularity of Chinese baby girls for adoption by Americans and Canadians, the gendered, racialized script of shaping the bodies of the adoptees become complete with the baby as China doll, demure, sweet, loving and content – but not really Chinese.

Interestingly, denial of difference is apparent as one U.S. adoptive father of a China-born baby girl suggests that his daughter may not be Chinese after all because she does not seem to enjoy “Chinese” food (U.S. version of Chinese takeout food)! (Dorow, 2002). Another argues that his newly adopted daughter may indeed resemble his wife, even though the wife is not Chinese. The loops tangle in adoptive families as mimicry of the hegemonic biological family persists in shaping relations and assimilating belongingness, even bodily belongingness in adoptive families.

In stories from adoptive parents of Chinese baby girls, images of the contradictions of fraught bodily identifies come through. McClellan (2002:7) says of her daughter, “The only certain thing my daughter carries with her from her earliest months is her face and her sense that someone in China, where she was born, loved her and cared for her very much, enough to make sure that she would live.” The little girl’s face is socially reconstructed by her adoptive mother as a badge of connection to her transglobal origins but disconnects her from the culture of those origins. Dorow (2006: 198), in fact, argues that the appeal of Chinese adoption to Americans may be, in part, the ruptured connection with the birth mother and place of origin and the potential to recreate the adopted child and the adoptive mother, as well as their relationship, in the image the new parents wish. Another adoptive American mother took her daughter, LuLu back to the city on the Yangtze River where she had been found as a baby (Prager, 2001). The search was for some connections between the child’s early infancy and her life in Greenwich Village, New York. Mother has this to say of the experience, speaking for her daughter, LuLu: “It was as if a big black ball of confusion had been pushed out of LuLu’s head. She came back from China ... having reclaimed, I think, some essential part of herself ...” (Prager, 2001:236).

The self is reclaimed by the gift of return to what are thought to be one's essential roots (the source place for one's bodily connection with others).

Connections with a lost past can be forged in idealized images of a cultural past as well for adopted Chinese daughters. A growing children's literature written for adopted Chinese children helps tiny seekers of authentic selves over the sometimes rough terrain of being different – looking different, being different bodily than children in “other,” normatively American families. One of these with the evocative title, *I Love You Like Crazy Cakes* (Lewis with Dyer, 2000) aimed at ages 4-6 years, attempts to take the children to a fairytale-like Chinese orphanage in a landscape like that on a scroll painting. Tender stories accompany the illustrations explaining how and why babies come to the orphanage and how they get welcomed into loving adoptive families. One phrase jumps out of an account by an adoptive mother of a Chinese girl, Iona Xiaolu, that sums up the contradiction and emotional conflict of international adoptive relations: “... when she was entirely Chinese” (McClellan, 2002: 8). That none of the children written about have anglicised names suggests a partiality to their adopted identities as Americans, and another link to their bio-social and cultural pasts. Both become inscribed on and in their bodies.

In international adoption, there are conflicts and challenges posed to all, but particularly perhaps to the risk society. The adopted children are a gift, and parenting them is a gift, a circle broken by culture, political policies, distance and consumerism. There is solace from risk in adoption for both the children and the parents, but new risks are created, risks for identity, for acceptance, for family interaction and continuity. The quest and conflicts of the achievement of a reflexive self may be rendered even more precarious in post-September 11, 2001 America which seems to be more and more apprehensive about foreigners and foreignness. Susan Sontag

suggests that the potentiality for transformation is what she likes best about America, "... you're allowed to change your life and to reinvent yourself" (Sontag as quoted in Younge, 2002:R4).

For girls born in China brought to the United States as babies to be raised as American, the conflicts posed may be order-challenging to the society, and to the American self-image in bodily form. Adoption of children from China also transforms the ways in which reproduction and reproducing bodies and ideals are seen. It further makes distinct what is to be considered biological and what social in reproduction by demographic analyses.

In terms of stratified reproduction, Chinese biological mothers become reproducers, suppliers of baby girls for adoption in the West. Their reproduction is commodified – creative of a transnational trade – a new economy industry that connects adoptive parents to babies in orphanages in China, a travel industry, and a connecting of international relations between United States/Canada and China. Babies produced in China are raised in North America. The reproduction of adults or citizens, consumers, workers is not shared but decidedly stratified. North American mothers and parents are reshaped not as bodily parents but as symbolic in embodied form of the beneficence of the West. In Bourdieu's terms, families with adopted Chinese daughters present this image to the world: a normative embodied image of American/Canadian family as internationally connected, of North America's beneficence and goodwill to global unknowns. Yet, they are reproducing and fulfilling "proper motherhood" roles. The families they create are only possible in a globalised world where citizenship embodied yet portable.

Methods

Consistent with many contemporary studies, this paper takes a multi-method approach. First, in examining how demography sees women's bodies in reproduction, we undertake an updated meta-analytical thematic discourse analysis of demography's stance with respect to women. Second, we ask women in mid-life and older how they see their reproductive selves and bodies looking back on their lives. Drawing on the intuition of stratified reproduction, we focus attention in this part of the analysis on women who have lived at some point in their childrearing years as lone parents. Third, we examine policies with a critical analytic discourse analysis (Denzin and Lincoln, 1994; Morse, 1994), a methodological approach often utilized for analyzing media or cultural messages. Here, we see policy discourse as shaped by and also shaping of social structures and social relations that are instantiated in policies. Each methodological approach and the data used is discussed in more detail as they are introduced.

### Demography's Gaze on Women

Demography, as a discipline and a practice, is imbued with contradiction. On the one hand, it is preoccupied with reproduction and yet leaves women's lives and lived realities largely unexplored (Watkins, 1993; Riley, 1998; 1999; Riley and McCarthy, 2003; McDaniel, 2002; 2003). Expectations in demographic research are based more on presumed biological differences between men and women (Watkins, 1993) than on any understanding of how fertility and reproduction are inherently social activities, as well as deeply gendered in fundamental ways. Demography, unlike most other social sciences, has been, as Riley (1999: 369) argues, "...unable and unwilling to accept and use feminist theoretical approaches." The typical way demography approaches the inclusion of women is building women into existing demographic models, without deep understanding of gendered social embeddedness of women (Riley, 1999). Gender is thus seen by demography as a characteristic defining individuals rather than a social



process or stratifying structure. Women's bodies and the embodying of reproduction in a social sense, is simply missed in most existing demographic models.

Demography, in its quest for recognition as something more like a life science than a social science, has embraced positivism strongly. "...[I]t is particularly clear that demography sits solidly in the modernist mode. Demography stands alone among the social sciences in the ways there apparently has been no interest in using or even examining this [feminist] standing or perspective" (Riley and McCarthy, 2003:35). Demographers, it has been said, "are the inheritors of nineteenth century positivism" (Caldwell, 1996:311).

Demography's interest in being both a social science and a political, policy-oriented field (Riley and McCarthy, 2003: 1) has resulted in deep contradictions as well as dangerous social experiments. Eugenacists and birth control advocates have taken the so-called scientific stance of demography in directions of state control over fertility that are extreme. One example would be the forced eugenic sterilization of those presumed to be developmentally challenged in the Province of Alberta from 1928 until 1972 (see Wahlsten, 1997). Individuals who were institutionalized for a variety of reasons were routinely sterilized, even if their condition had been diagnosed not as genetic but as poverty or neglect. The legitimacy of demography which not long ago was developed in conjunction with much of the "science" of eugenics was gained, in part, at the expense of objectivity.

Population, like bodies, is seen by demography as in need of governance by some means, particularly in LDCs. This is a Foucauldian view. Population control is seen as beneficent in demography, for the most part. It is a good end toward which demographic analysis is the means in LDCs. There has been little imperative in demography to question itself or the categories it uses and constructs, particularly those related to women and women's bodies.

That gender as a relational construct or a process would be foreign in much of demography. Women's absence as agents and meaning-makers in both classical and contemporary social theory distorts our understandings of modernity, and the sociological story of modernity is necessarily lopsided as a result (Marshall, 1994). The same could be said of demography but perhaps with greater force.

In 1993, Watkins (1993) asked what we would know about women in all we knew we read in *Demography*. She reviewed the journal from its first issue in 1964 through 1992, focussing on those articles related to fertility and contraception, and those on marriage and family, for a total of 624 articles. She found, in a nutshell, that we would have a distorted view indeed of women's lives if all we read was *Demography*. She sees us learning a great deal about a limited range of women's activities and characteristics, for example that

...women are primarily producers of children and of child services; that they produce with little assistance from men; that they are socially isolated from family and friends; and that their commitment to the production of children and child services is expected to be rather fragile.

(Watkins, 1993: 553)

Even more importantly, however, Watkins finds that taken-for-granted assumptions about women, men and their relations permeate all aspects of research in *Demography*. These assumptions include tending to show men on top (in ratios that is), questioning of women's veracity about reporting their age, assuming that childbearing is more important in women's lives than work, the list goes on and on.

The analysis undertaken here does not purport to update that of Watkins. Instead, we examine in a limited update how demography sees women's bodies in reproduction relying on a meta-analytical thematic discourse analysis. We examine all issues of *Demography* from 2001 through the first issue of 2007, for a total of 25 issues. Using keyword searches first, we find that

of the approximately 275 articles appearing in this time period, only 71 have the word “women” in the title or abstract, just over one quarter. “Feminism” or “feminist” comes up zero. Searching for “gender” as a keyword is thought to be more theoretical and consistent with recent research in allied disciplines of sociology, anthropology and political science. Thirty-two articles in the 2001-07 time period contain the word gender. Most, however, use the term as a synonym for sex, as in “gender differences...”, “child gender and father involvement,” or as a descriptor of structures such as “gender stratification” or “gender segregation.” Gender is used as verb indicating something about process only twice of the 32 articles that use this term: “Gendering family composition” in May 2006 and “engendering migrant networks” (May 2003). “Theory” was thought to be a possible keyword indicator for articles that might be infused with more social context, but this keyword comes up only 15 times, and never appears in any article title. Reviewing all the abstracts for these 15 articles reveals that theory most often refers to statistical models or non-gender or body/agency theories such as “structural assimilation theory” or “human capital theory.” A full description of theory mentions appears in Table 1.

Table 1 about here

Lastly, we searched the articles in our sample from 2001- 07 for the keyword, “body” or “bodies.” Seven articles came up. Five of these made reference to either “body size” or “body mass/ mass index.” The remaining two referenced “body of evidence” or “body of research.” Bodies as lived experience have gone missing in demography and *Demography*! We had to ask how much has changed in demography/*Demography* since Watkins’ 1993 analysis.

## Older Women Looking Back on their Reproductive Lives

Here, we ask, consistent with calls for a reconceptualized/ reconstructed demographic endeavour (Greenhalgh, 1996; McDaniel, 1996; 2002; 2003; Mills, 2000; Riley, 1998; 1999; Riley and McCarthy, 2003), how theory and methodological approaches might be expanded to include reflections, identities, larger socio-economic contexts, values and non-numerical evidence such as meanings, moral boundary-making strategies, choice points/transitions and structural shifts. We focus on women's own reflections on their reproduction and their bodies, as they look back. In keeping with stratified reproduction, we focus particularly on women who have lived at some point in their childrearing years as lone parents. We rely first on a life course perspective, with acknowledgement that the essential focus of this perspective, on individual sequential stages may have both a male standpoint bias and a tendency to make family a "field dependent variable" that is primarily female (Kruger and Levy, 2001:149-150). At the same time, we see it as useful to ask whether there are cumulative long-term consequences of differing reproductive patterns and how those are socially contoured as women look back on their lives.

Second, we incorporate the reconceptualised theoretical concept of ambivalence (Connidis and McMullin, 2002), to detect ways by which individual action, in this case women's agency with respect to their bodies, is bridged to social structure. With women's retrospective looks at their reproductive lives, we particularly focus on two dimensions: how women as social actors in reproduction experience ambivalence when social structural arrangements constrain their attempts to negotiate relationships; and how ambivalence created by the interface between social structure and individual agency may be the basis for social action that either reproduces the social order of women as reproducers or changes it. And third, we work toward an empirical

exploration of a new demographic-feminist framework (McDaniel, 1996) which calls for unhobbling demographic explanations from traditional quantitative methodologies, reconciling agency (individual choices and self-direction) and structural constraints, and approaching research and analysis with a deeper reflection on the conceptual changes that have transpired recently in the social sciences.

Respondents for this study participated in the Alberta Survey administered by the Population Research Laboratory, University of Alberta (Kinzel, 1993), a random survey (N=1,274) of all households in the Province of Alberta in Canada, with the person interviewed by telephone being age 18 and over. The survey took place in the mid 1990s. All interviewers were professionally trained and experienced in survey interviewing. The response rate overall in the survey was 73%, what it has been since the survey's inception in the 1960s. Indexes of dissimilarity, calculated with comparison to the 1991 Census of Canada, reveal that the sample reflects well the populations (major cities and rural areas) from which it is drawn (Kinzel, 1993:14). For the purposes of this study, an over-sample of those aged 45-64 was interviewed, bringing the total number of completed interviews among those aged 45-64, to 600.

At the same time that the population survey was conducted, the researcher was engaged in a related study of employees in selected large and small companies, and of unemployed people, both aged 45-64, in the City of Edmonton, a city of approximately 700,000, the capital of the Province of Alberta. This phase of the research is known as the Employment/ Unemployment Survey. A total of 291 interviews took place with employed mid-life people and 57 with unemployed persons in the same age group (McDaniel, 2001b; 2002).

At the end of each interview on the Alberta Survey, and on both the Employment and the Unemployment Surveys, mid-life and older respondents who had children and had lived as lone

parents at some point in their lives were asked if they might be willing to be contacted for an additional in-depth interview. Among the respondents aged of 45-74 who had been lone parents and agreed to be recontacted for a second interview, 36 were geographically accessible for a second interview. The 27 interviews were completed out of 36 eligibles, a 75% response rate. Among the 9 who did not complete the second interview, reasons stated included lack of time, and lack of success in setting a time suitable for the interview. Three of those who initially did not want to participate were "turned around" by the interviewer's follow-up call and explanations about the nature and importance of the research. Of the 27 respondents, 9 were men. They were born from 1920-1950 and spent varying lengths of time as lone parents. For this analysis, we concentrate on the 18 women respondents, with brief mention of some comparisons with the men. All respondents are identified only by a code number for the protection of confidentiality.

Interviews were conducted by professionally trained and experienced interviewers who work each year on the Alberta survey and other surveys undertaken by the Population Research Laboratory at the University of Alberta. The minimum years of prior experience in professional interviewing among the interviewers in this study was 12. All interviews took place in the respondent's home, following a prepared and pre-tested interview schedule with open-ended questions. Interviewers were encouraged to probe for more information from the respondent and asked to engage them in a conversation about their lives and experiences with reproduction. All interviews were taped, with the consent of the respondent, and subsequently transcribed.

A qualitative analytical approach, consistent with the theoretical framing outlined above is utilised. The transcribed interviews are combed for recurrent themes and then combed again and again to sort the themes into "thick descriptions" which become analytical frames. The approach is consistent with the grounded theory method of Glaser and Strauss (1967), and of Strauss and

Corbin (1990). This approach has been widely used and varied immensely (see Denzin & Lincoln, 1994; Morse, 1994 for examples). Although not exclusive to feminist enquiry, this approach has been effectively used by feminist analysis as discussed by Reinharz (1992) and Oleson (1994), and has been used successfully in research in aging (see Gubrium, 1995 for example, as well as Neysmith, 1995).

Interviewing older lone parents looking back on their lives has perils, most notably selective memory. There can be, on one hand, a self-congratulatory tone in some recollections, i.e. "I survived and look how wonderfully things worked out." On the other hand, a "woe is me" attitude can prevail in other memories. Recognition of this possible bias in the study is important, although it likely cannot be controlled. The analysis is sensitive to the problem, however. The hope is that the two tendencies might cancel each other out, at least to some extent.

The initial comb through the transcribed interviews, capturing recurrent themes and concerns, reveals powerful gender differences in how reproduction is embodied differently in the life experiences of men and women in the sample. Men, on average, have higher incomes as lone parents, less stress and face fewer challenges in balancing work and family, than women. Their essential role set as workers rather than reproducers remains intact in face of the lone parent experience.. Nearly all the men in the sample reported "usually having enough money to get by" or "usually having more money than I need", while the overwhelming majority of women reported being chronically short of money. Some of the men readily acknowledge the greater stresses women feel: '[F]rom what I can see, there are a lot more single parents that are women and I think a lot of them are experiencing more hardships than a single parent who is male'

[09M]. Both the men and women, but particularly the women, noted that their bodies were marked by the stresses and they were seen by others as mothers only, not women any longer.

Women's stresses are greater, incomes less and stigmatising labels from society greater. One woman sums this up: 'The biggest thing I felt was that I was on the other side of society' [08F].

Another woman says, 'I was always rather on pins and needles and a little high strung. If it wasn't one thing it was another. It was a battle and I got to thinking can I really count on me?'

[21F]. Women see how reproduction sculpts them, both socially and bodily:

'I think I faced more stress because he, the man I knew, he had two sons about my children's age, he had a very good paying job so he had his own home, he had a new car, he could afford a house, somebody to come in to clean his house. He had his parents near him which helped him, but he had housekeepers come in. I mean he had it all compared to me.

He was always neat and well-dressed and his children were too. I, on the other hand, never had any money for new clothes or a good haircut or even lipstick.' [24F]

Another woman cuts into the gist of gender differences in reproduction as embodied:

'Oh they thought he was a god. They treated him like he was something special because it was so unusual that a man... think how wonderful person he was, how appealing to women; a mother is just expected to do that, but a man, he was just, oh, he was wonderful because in those days and age a man didn't even push their kids down the street in a buggy, you know, it was always the woman that did it. But him, he was just fantastic.

And me, I'm a drudge (and I look like one!) [23F]

Women see social assistance with ambivalence, but the older lone parent fathers were at times openly hostile to women receiving assistance:

'...when I hear of the unemployment insurance that they are getting.. the financial assistance, the welfare and everything and then I read in the paper that they are smoking, they are drinking, they are leaving the children at home, they got beautiful expensive furniture that went up in flames and gosh they didn't get insurance for it...Well, hey lady,



and what is happening, why, why do they have lighters around, the children are playing with it. I mean come, get a life, you know...but I am sitting on the outside.' [25M]

Women's bodies are seen as enscribed by their negative habits – smoking, drinking, lounging about on the lovely furniture – while men are judging these habits and lifestyles, with a sense of entitlement. The point could be argued that women are being condemned for 'having a life' apart from their roles as mothers. Women's identities and self-presentation are no longer seen as separate from their reproductive identities but fully eclipsed by the latter, so they no longer exist except as reproducers. This could also be said of LDC women as seen by much demographic research.

The clear image that emerges in this qualitative study is that women's status and respect is premised on their reproductive status which is seen negatively, as are their bodies. This matters more than work credentials or performance. The socio-moral boundaries of inclusion for women are premised on family status. One woman [27F] noted, 'You, as a single mother, you couldn't afford to leave that position (so they thought they had you over a barrel.) I told her, I said, you think I would have hesitated, my pride was at stake....And lots of managers took advantage of that. They thought, a ha, they are stuck, we can and it's a lot of the same symptoms now....' She continues later on in the interview, "Because I didn't want to be pitied or uh, uh, how would you say, a sub-human kind, because it's true, every time you moved around as a single parent, uh, you either had this 'poor you' or you know, come on, 'what did you do?' I don't feel as if I'm seen as a person." Another woman had her entire childrearing practices and religion questioned by her employer, "Alright, you still had all those weird questions, so uh, you had to answer them. And uh, yes, that's true I was questioned, why are you divorced? What is your son doing? Is he in French school? Do you go to church? All these things you know. But, I didn't, let's put it that

way. I, I was not obsessed by the fact of being a single parent and because I didn't know much about what the married parents were experiencing..." [27F] The veil over these women's identities is of reproduction which shapes the way they meet the world, and the way they hide and shape their bodies as mothers.

With respect to life course, outcomes of lone mothers in later life, regardless of the other elements of support and work while a lone parent, are much more likely to be below average financially in later years than men in this sample. They are also much more likely to have weight problems, dental and eye problems, problems with mobility, and overall poorer health than men with similar reproductive histories. The absence or presence of work and of public support matters less than the embodied and embedded dimensions of gender and gendered bodies. Least important to later life outcomes is the support of family and friends, a finding which seem to counter not only much previous research, but also much contemporary thinking about the value of "community support," and civil society. With ambivalence as revealed and reproduced in interpersonal relations and their negotiation, it seems that for women, negotiation of the contradictions of reproduction is greater than for men – they want help and support, yet that comes at the cost of accentuating their “deviant” status as reproducers who were not madonnas, not perfect and at times, without self-images as women who see themselves capable of constructing themselves and their bodies as socially/sexually attractive. “Caring, instead of being defined as productive work in the new economies has come to be seen as a personality attribute of femininity, comprising ‘the good woman’” (McDaniel, 2001a:199). And the good woman is not bodily but almost ethereal.

Shifting Policies, Shifting Bodies

If it is the case as Foucault (as cited in Held *et al.*, 1983:312-313) argues that “the state consists in the codification of a whole number of power relations,” then neo-liberalism has recoded those relations pivoting on gender and gendered embodiment. Social citizenship is not only being eclipsed by market citizenship (Brodie, 1997:223), with strong implications for women as familial and for caring relations, but women’s bodies have become important sites for socio-political rewriting.

The state and state policies are far from free-standing, coherent entities. The state is mutually created with societies and social change. Cooperative creation and re-creation is premised, at least to a degree, on presumed shared understandings of what is natural, neutral or universal. Periodic rewritings of the narrative story of modernity or progress is part of the picture of state practice.

The welfare debate in the United States (see Bianchi and Spain, 1996:34-37) provides a revelatory illustration. This debate has been largely about women and women’s bodies. Some have even described it as a “war over women.” Essentially, welfare precepts shifted away from the previously accepted shared understanding that poor women with children should be supported, something put in policy the United States as part of the Social Security Act of 1935 when most lone mothers were widows. That acceptance has shifted to scepticism about the naturalness, the morality of such support, particularly when most lone mothers now are never-married, separated or divorced rather than widowed.

Morality and the state’s involvement in disciplining women’s bodies is a crucial part of the contemporary script. “Deserving women” (married, differentially middle class or higher, more often white) have access to a greater array of reproductive services than do poor, minority, unmarried women. Policy is being used as a blunt instrument to discipline bodies, with

reproduction the terrain on which that discipline occurs. Surrendering embodied reproductive agency is the price many women must pay to have access to the social assistance they need in order to live. Their agency is taken away by greater powers in the interest of some greater goal, ie, fiscal restraint or population control of those who are perceived as less deserving of reproduction.

The changing macro-world of globalized trade that has reshaped the bodily so profoundly, sees solutions to world problems of poverty, inequality and disease in the further control of women's bodies. Similar to the beginning of the industrial revolution in the MDCs, bodies of those, most often women, working in the outsourced sweatshops of multinational manufacturing corporations are shaped by the regimes of work. They are often required to be on contraception as a condition of work, and are at times subject to male violence when they leave the factories because they are "outstepping" the traditional female roles and often have more money than the men in their lives. "...markets operate without recognizing that the unpaid work of reproduction and maintenance of human resources contributes to the realization of formal market relations," (Bakker, 1996:2). "Caring is seen, at best, as troublesome for the global economy because it is seen as a drag on so called economic progress; it is seen as "soft," unproductive, or minimally extra-economic" (McDaniel, 2001a). Gender structures are shifting in response to globalized trade.

In a similar way to stratified reproduction, globalisation's politics of inequality re reflected in and exacerbated by the bodily dimensions of the HIV/AIDS pandemic. HIV/AIDS is inherently or unequal disease – despite its prevalence throughout the world. More than 95% of all HIV-infected people live in the developing world (UN, 2001:25), and this proportion is growing. Ninety-five percent of all AIDS deaths occur in LDCs too – mostly young adults who would be

at the peak productive and reproductive years. There is an increasing toll of women. In Africa, the majority infected with HIV/AIDS are girls and women. Girls' bodies are shaped by lack of agency, in particular reproductive agency. To say no is not possible in the entrenched systems of gender inequality. Women are burdened with caregiving for relatives with AIDS, responsible for subsistence of families decimated by AIDS. Women cannot, without severe social sanctions, resist the advances of men and as a result get infected themselves, many times by partners who work in a wage-labour system that requires them to be away much of the time. They then bring back home HIV from encounters they have had while away working.

In the early 1980s when AIDS was discovered and named, Ronald Reagan was in the White House and Margaret Thatcher on Downing Street. There were no funds for AIDS research or programs. The epidemic then seen in medical terms – proliferation of biomedical research (van Meter, 2001). AIDS was on the fringes of society (Mose & Appleton, 2001). There was a tendency to redefine problems such as HIV/AIDS as unworthy of public attention. Bodies afflicted with HIV/AIDS were thought to be disposable.

There was then a shift to individual risk issues, e.g. safer sex, safer drug injection, safer health care practices. The idea was to change individual attitudes and sexual practices, particularly those of women, as a way toward addressing the HIV/AIDS challenge. Foucault's focus on disciplining bodies is apparent here. One was to be disciplined against sexual virginity testing, prevalent in many parts of the world, against rape and violence of young girls and babies thought to be a cure for HIV/AIDS in some parts of the world where the pandemic was growing most seriously. The solution was seen in women taking greater individual responsibility, exerting greater agency. Solutions were seen in peer education and female condoms. Says one researcher of the spirit of that era, "I see an epidemic being addressed one body at a time ... the

kind of health promotion that is rooted in the traditions of Kellogg ... that calls on individuals to change their personal behaviours.” (Maticka-Tyndale, 2001:19).

There has been a reshaping of individual bodies and gendered cultural practices with those bodily reconstructions seen as the solution to HIV/AIDS. “[The] currents guiding the course of HIV/AIDS are the inequalities between nations” (Maticka-Tyndale, 2001:19). In attempting to reshape individual bodies in response to the forces of inequalities that sustain HIV/AIDS and let those inequalities remain and even thrive, increased poverty, inequalities and more disease are inevitable outcomes.

### Pulling the Analytical Pieces Together

We began by asking how demography sees women’s bodies, how women’s bodies may be sites where socio-political scripts are enacted. We suggest that understanding the processes by which demographic knowledge and politics are played out as embodied in women and embedded in gender relations is vital to the creation and use of sound demographic knowledge. Our exploration proceeds in three steps. First, we looked at how demography sees, or does not see, women and women’s bodies in reproduction. Second, we asked how women in mid-life who have been lone mothers look back on their reproductive lives and how their bodies were shaped by the experience, how they see themselves as gendered and embodied. And thirdly, we examined the shifting domestic and global policy regimes which have, we argue, reconfigured women’s gendered agency as reproducers as well as women’s bodies themselves. We found in numerous ways and at very different levels that women’s bodies are indeed sites where meso and macro social changes are enacted, and that knowledge production and practice in demography has not fully grappled with this issue. Bodies are missing in action in demography.

Demography and the demographic stance has, to a very large extent, taken for granted women as reproductive beings with agency, operating within social structures and processes.. Women themselves have had little to no voice as demographic agents, yet their bodies have been sites where demographic research and policies have been played out. Women's bodies have been both central to, and invisible in, the practice of demography as a discipline.

Women looking back on their reproductive lives and bodies, when asked in detail, express in very clear terms how their bodies and life opportunities were shaped by reproduction and the way their roles as reproducers eclipsed all else they were or could be. In focussing on lone mothers, we can see with particular acuity how this process works.

The same is said for policy shifts where women's reproductive bodies are where welfare and global work policies hit the ground. Work, for example, is increasingly central to women's lives and opportunities, whether that work is for no pay, for subsistence or for careers. A global labour market transformation has increasingly drawn women into the labour force providing opportunities but, at the same time, posing deep challenges to reproduction, to caring and to the social configuration of women's bodies as reproductive (Heymann, 2006). Bianchi and Spain (1996:1) argue that women in the United States, as one example of an advanced economy, are "center stage as America approaches the 21<sup>st</sup> century. More women than ever are in the labor force, more are having children outside of marriage, and women and their children are more likely to be living in poverty..." Inequalities among women have deepened, partly on the terrain of reproduction in most MDCs, and have certainly widened between women in MDCs and women in LDCs

With respect to women in MDCs, two big interlocking factors that work against women and accumulate in mid-life and later, resulting in women having less income than men, with

attendant bodily challenges. First is the reality that women in MDCs work most often in supportive, rather than executive, capacities (secretarial, retail sales, nursing, public school teaching), and those jobs tend to pay less. It is most often the reality, the perception or the self-definition of women as reproducers first and foremost that creates and perpetuates this gender segmented labour market. The bottom line, however, is reduced earnings among women which has health implications, both indirectly and directly in terms of women's capacity to buy healthy food, go to a gym, and otherwise pursue healthy lifestyles and bodies.

In many of the work situations women experience both in MDCs and even more so in LDCs, they have limited power. Research has consistently shown that stress peaks when one has limited power. Being low in a hierarchy at work matters even more. In fact, it is related to higher levels of stress regardless of income. This is called the **health gradient** and is one of the most significant population health findings in recent years. This, in addition, to the embodied demands of family and work, creates greater stresses for women, and these stresses are known to be correlated with health problems and body issues. Depression and mental health problems related to stress are more prevalent among women.

The second big factor with respect to women's lower income as a vital bodily determinant is family, particularly when marriages fail. Lone mothers have 43 per cent of the income of two-parent families with children. And women who did not re-enter the labour market after the birth of their children are much less likely to find good jobs when marriages end. The legacies of divorce for women linger and have bodily and health implications. Women with limited incomes suffer more disability, more mobility problems, and are more often obese and prone to diabetes. Women's bodies clearly are sites where social and economic scripts are enacted, and yet women's bodies hardly exist in the discourses of demography.



Table 1

Mentions of keyword “theory” in articles in *Demography* 2001 – 2007 (1<sup>st</sup> issue)

Theory of factor payments
Replacement theory, community influence theory
Structural assimilation theory
Theories of the effect of divorce
Modernization theory
Theory and evidence
Need for theory development
Theories of the impact of decreasing mortality rates
Life course theory
Importance of theory in determining cause and effect
Theory that the closeness of biological ties governs altruistic behaviors
Human capital theory
Theory of race
Spatial assimilation theory

References:

- Albanese, Patrizia. 2006. *Mothers of the Nation: Women, Families and Nationalism in Twentieth-Century Europe*. Toronto: University of Toronto Press.
- Bakker, Isabella (Ed.). 1996. "Introduction," *Rethinking Restructuring: Gender and Change in Canada*. Toronto: University of Toronto Press.
- Basu, Alaka Malwade. 2000. « Gender in Population Research : Confusing Implications for Health Policy,» *Population Studies* 54(1):19-28.
- Beauvoir, Simone de. 1953. *The Second Sex*. London: Cape.
- Bernard, Paul. "La cohésion sociale: critique dialectique d'un quasi concept." *Lien social et politique*, 41, Printemps, 1999: 47-59. (Also published as a Canadian Policy Research Network discussion paper, under the title, "Social Cohesion: A Critique".)
- Bianchi, Suzanne M. and Daphne Spain. 1996. "Women, Work, and Family in America," *Population Bulletin* 51(3): 1-48.
- Bourdieu, Pierre. 1984. *Distinction: A Social Critique on the Judgement of Taste*. Cambridge, MA: Harvard University Press.
- Brodie, Janine. 1997. "Meso-Discourse, State Forms and the Gendering of Liberal-Democratic Citizenship," *Citizenship Studies* 1(2):223-242.
- Byron, Christopher. 2004. *Testosterone, Inc.* New York: John Wiley
- Colen, Shellee. 1995. "'Like a Mother to Them: ' Stratified Reproduction and West Indian Workers and Employers in New York," Pp. 78-102 in Ginsburg, Faye D. and Rayna Rapp (Eds.), *Conceiving the New World Order: The Global Politics of Reproduction*. Berkeley and Los Angeles: University of California Press.
- Coltrane, Scott. 1998. *Gender and Families*. Thousand Oaks, California: Pine Forge Press.
- Connidis, Ingrid Arnet and Julie Ann McMullin. 2002. "Sociological Ambivalence and Family Ties: A Critical Perspective," *Journal of Marriage and Family* 64(August):558-567.
- Denzin, Norman K. & Yvonna S. Lincoln (Eds.). 1994. *Handbook of Qualitative Research*. Thousand Oaks, CA: Sage.
- Elshtain, J. and J. Cloyd. 1995. *Politics and the Human Body*. Nashville: Vanderbilt University Press.
- Engels, Frederick. 1974(1845). *The Condition of the Working Class in England*. Moscow: Progress Publishers.

Foucault, Michel. 1977. *Discipline and Punish: The Birth of the Prison*. Harmondsworth, UK: Penguin.

Gerth, H. and C. W. Mills. 1948. *From Max Weber*. London: Routledge and Kegan Paul.

Ginsberg, Faye D. and Rayna Rapp (Eds.). 1995. *Conceiving the New World Order: The Global Politics of Reproduction*. Berkeley: University of California Press.

Glaser, B.G. and A.L. Strauss. 1967. *The Discovery of Grounded Theory: Strategies for Qualitative Research*. Chicago: Aldine.

Greenhalgh, Susan. 1990. "Towards a Political Economy of Fertility: Anthropological Contributions," *Population and Development Review* 16:85-106.

Greenhalgh, Susan. 1996. "The Social Construction of Population Science: An Intellectual, Institutional, and Political History of Twentieth Century Demography," *Comparative Studies in Society and History* 38(1): 26-66.

Gubrium, Jaber F. "Voice, Context and Narrative in Aging Research," *Canadian Journal on Aging* 14(Supplement 1):68-81.

Hammel, E. 1990. "A Theory of Culture for Demography," *Population and Development Review* 16:455-485.

Held, David et al. (Eds.) 1983. *States and Societies*. Oxford: Open University Press.

Heymann, Jody. 2006. *Forgotten Families: Ending the Growing Crisis Confronting Children and Working Parents in the Global Economy*. Oxford: Oxford University Press.

Kalekin-Fishman, Devorah. 2000. "Studying Alienation: From Decline to Regression," Paper presented at the ISA Conference, *Social Transformations at the Turn of the Millennium*, Montreal, July.

Kinzel, Cliff. 1993. *The Alberta Survey 1993 Sampling Report*. Alberta/Edmonton Series Report No. 78, Population Research Laboratory, Department of Sociology, University of Alberta.

Kruger, Helga and Rene Levy. 2001. "Linking Life Courses, Work and Family: Theorizing a Not So Visible Nexus between Women and Men," *The Canadian Journal of Sociology* 26(2):145-166.

"A Love Affair with the Genes," *New York Times Magazine* 2 May 2004: 68-73.

Lorber, Judith and Lisa Jean Moore (Eds). 2007. *Gendered Bodies: Feminist Perspectives*. Los Angeles: Roxbury.

- Mane, Purnima and Peter Aggleton. 2001. "Gender and HIV/AIDS: What Do Men Have to Do with It?" *Current Sociology* 49(6): 23-33 .
- Marshall, Barbara. 1994. *Engendering Modernity: Feminism, Social Theory and Social Change*. Boston: Northeastern University Press.
- Martin, E. 1989. *The Woman in the Body: A Cultural Analysis of Reproduction*. Milton Keynes: Open University Press.
- Maticka-Tyndale, Eleanor. 2001. "Twenty Years in the AIDS Pandemic: A Place for Sociology," *Current Sociology* 49(6): 13-22.
- Mason, Karen Oppenheim. 1995. *Gender and Demographic Change: What Do We Know?* Liege, Belgium: IUSSP.
- McDaniel, Susan A. 1996. "Towards a Synthesis of Feminist and Demographic Perspectives on Fertility", *The Sociological Quarterly* 37(1):601-622.
- McDaniel, Susan A. 1998. "Cuidar y compartir: las mujeres, el cambio demografico y las politicas estatales cambiantes," Pp. 233-251 in Monica Vereza (Ed.), *Women in North America at the End of the Millennium*. Mexico City: Universidad Nacional Autonomo de Mexico.
- McDaniel, Susan A. 2001a. "Born at the Right Time? Gendered Generations and Webs of Entitlement and Responsibility," *Canadian Journal of Sociology* 26(2):193-214.
- McDaniel, Susan A. 2001b. "The Family Lives of the Middle-Aged and Elderly," Pp. 187-204 in Maureen Baker (Ed.), *Families: Changing Trends in Canada (4<sup>th</sup> edition)*. Toronto: McGraw-Hill Ryerson.
- McDaniel, Susan A. 2001c. "Intergenerational Interlinkages: Public, Family and Work," in *Aging and Demographic Change in Canadian Context*. Toronto and Montreal: University of Toronto and Universite de Montreal Press.
- McDaniel, Susan A. 2002. "Women's Changing Relations to the State and Citizenship: The Case of Globalizing Western Democracies," *Canadian Review of Sociology and Anthropology* 39(2):1-26.
- McDaniel, Susan A. 2003. "The Demographic Category as Leaky Gender Boundary: Implications for Women's Reproductive Health," *Women's Health and Urban Life: An International and Interdisciplinary Journal* 2(1):4-21.
- McLaren, Arlene Tigar and Isabel Dyck. 2004. "Mothering, Human Capital and the 'Ideal Immigrant,'" *Women's Studies International Forum* 27: 41-53.

- McLaren, Angus and Arlene Tigar McLaren. 1986. *The Bedroom and the State: The Changing Practices and Politics of Contraception and Abortion in Canada, 1880-1980* Toronto: McClelland and Stewart.
- Mills, Melinda. 2000. *The Transformation of Partnerships: Canada, the Netherlands, and the Russian Federation in the Age of Modernity*. Amsterdam: Thela.
- Morse, Jan M. (Ed.). 1994. *Critical Issues in Qualitative Research Methods*. Newbury Park, CA: Sage.
- Neysmith, Sheila M. 1995. "Feminist Methodologies: A Consideration of Principles and Practice for Research in Gerontology," *Canadian Journal on Aging* 14(Supplement 1):100-118.
- Oleson, Virginia. 1994. "Feminisms and Models of Qualitative Research," Pp. 158-174 in Norman K. Denzin & Yvonna S. Lincoln (Eds.), *Handbook of Qualitative Research*. Thousand Oaks, California: Sage.
- Pringle, Dorothy. 1997. "Feminist Theory and the World of the Social," *Current Sociology* 45(2): 75-89.
- Reinharz, Shulamit. 1992. *Feminist Methods in Social Research*. New York: Oxford University Press.
- Richmond, Anthony H. 2001. "Global Apartheid: A Postscript," *Refuge* 19(4): 8-13.
- Riedmann, Agnes. 1993. *Science that Colonizes: A Critique of Fertility Studies in Africa*. Philadelphia, PA: Temple University Press.
- Riley, Nancy E. 1997. "Gender, Power and Population Change," *Population Bulletin* 52(1): 1-48.
- Riley, Nancy E. 1998. "Research on Demography: Limitations and Constraints," *Population Research and Policy Review* 17(6):521-538.
- Riley, Nancy E. 1999. "Challenging Demography: Contributions from Feminist Theory," *Sociological Forum* 14(3):369-397.
- Riley, Nancy E. and James McCarthy. 2003. *Demography in the Age of the Post-Modern*. Cambridge: Cambridge University Press.
- Rose, R., R. Lewontin, and L. Kamin. 1984. *Not in Our Genes: Biology, Ideology and Human Nature*. London: Penguin.
- Shaplen, Robert. 1964. *Toward the Well-Being of Mankind: Fifty Years of the Rockefeller Foundation*. Garden City, New York: Doubleday.

Smith, A. M. 2001. "Mass-Market Portrayals of Working Mothers and Related Issues," *Journal of Children and Poverty* 7(2): 101-119

Strauss, A. L. and J. Corbin. 1990. *Basics of Qualitative Research: Grounded Theory Procedures and Techniques*. Newbury Park, CA: Sage.

Turner, Bryan S. 1992. *Regulating Bodies: Essays in Medical Sociology*. London: Routledge.

Turner, Bryan S. 1996. *The Body and Society (2<sup>nd</sup> edition)*. London: Sage.

United Nations. 2001. *Population, Gender and Development*. New York: UN Department of Economic and Social Affairs, Population Division.

Van Meter, Karl M. 2001. "Managing A Plague: Channelling the Spread of AIDS Research," *Current Sociology* 49(6): 34-44.

Wahlsten, Douglas. 1997. "Leilani Muir versus the Philosopher King: Eugenics on Trial in Alberta," *Genetica* 99: 185-198.

Watkins, Susan Cotts. 1993. "If All We Knew About Women Was What We Read in Demography, What Would We Know?" *Demography* 30:551-577.



