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Beyond the Cradle: Motherhood, Embodied Exhaustion, and the Silent Erosion of Women's Selfhood

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ABSTRACT

The concept of being a mother has been touted as a holy thing, a blessed feature of life that is celebrated by many people around the world, being seen by many analysts of society to represent the ultimate epitome of feminine identity. There exists, however, a complex psychological phenomenon behind that concept that is seldom talked about, a phenomenon that is hereby researched, exploring the concept of how, within the context of a patriarchal, a collectivist, a gender-based structured society, the role of being a mother can lead to a diminishment of the individual's identity, utilizing various theories related to the concept of individual's identity, including theories of role conflict, affective work, ethical coding of the role of idealized being a mother, all of which create a means of causing a negative diminishment in one's individuality, emotions, and psyches, contending that it is not being a mother that causes an individual, a woman, to lose her individuality, but rather it is how being a societal structure of being a mother expects one to lose herself that leads her towards a diminishment of her individual identity.

Keywords: Self-Identity, Motherhood, Exhaustion, Silent Erosion

INTRODUCTION

Motherhood is said to be one of the most difficult, fulfilling, and responsible phases of life. The caregiving, affection, warmth, sacrifice, emotional attachment encompasses and make animals sit on the throne of kingdom animalia and humans belonging to this dominant class, show extra care by protecting the offsprings by the best utilization of environmental and situational resources. Since time immemorial, females as the predominant carriers of offsprings in the womb, culturally idealized motherhood as the most fulfilling and natural responsibility of females especially in collectivistic societies like India. However, beneath their romanticized ideologies, lie a complex psychological reality marked by the shift of rights, emotional vulnerability and gradual disregard of self. From early childhood, Indian women are moulded to internalize motherhood as their goal, purpose of life, sense of moral duty and the ultimate source of self-worth. Motherhood is a normative status that women achieve after childbirth (Kapoor,2021). Cultural narratives celebrate the women as ideal if she is patient, submissive, emotionally available and sacrificing her identity where men on the other hand are untouched with household chores (Jain,2025) and children as their primary duty. Traditionally though women cherished and embraced the motherhood, the scars as a result of endless giving are often psychologically unrevealed. As India being a patriarchal country, collectivistic, moral ideals of sacrifice dominate, identity loss in motherhood is often normalized rather than problematized (Rossen, Opie, Dea, 2023). The transition to motherhood is not merely additional responsibility, rather it replaces the self and gradually subordinate to the needs of children and family. In recent times, women are stepping out of the traditional boxes and equally competing on par with men for the equal rights in education, employment, politics, and so on yet, they are expected to play dual roles in the workplace and hold responsibilities by not compromising in losing their identity (Sukumaran, Chakkambath, 2024). This paper explores the view that motherhood as a psychological experience, can lead to emotional silencing identity, erosion and diminished self-concept among women. Working women are the most vulnerable sector facing several challenges related to employment.

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Embodied Exhaustion: Biological and Physical Dimensions of Motherhood Fatigue

Biologically, being a new mother is akin to the following: the human body has entered into a period of hormonal adaptation following an incident of birth. This, as a consequence of the human body witnessing the reduction of the 'dramatic' relation between the 'estrogen' and 'progesterone' hormone levels, influences the 'neuroendocrine' level of the human being substantially. This is a condition from which the human being is said to witness a list of consequences, including 'vulnerability to exhaustion, irritability, decreased tolerance to stress.' Lactation is also the main contributor to a heightened level of biological depletion. lactation is associated with levels of the hormone prolactin and oxytocin, which increase the need for the mother to take in extra calories to conserve energy. Together with the decrease in sleep quality, the mother is also in a heightened level of alertness, characterized by lighter dreamed sleep with frequent arousals (McEwen, 2007). Although the mother might have received optimal levels of sleep duration, the quality of the sleep is poor, owing to the presence of the infant. The stress response system also has an important role to play in maternal exhaustion. Being a mother is being vigilant at all times, paying attention to safety, emotions, and unpredictability. Vigilance, being an attentive and watchful act, triggers stress, resulting in Hypothalamic-Pituitary-Adrenal axis overactivity, producing hypercortisolism. Chronic hypercortisolism, on one hand, disables immune functions, increases inflammatory markers, and ultimately causes decreased body vigour and tiredness. "While being under chronic hypercortisolism is no picnic, being under chronic hypercortisolism superimposed on an already compromised immune system is an invitation for all manner of mischief" (Sapolsky, 2004). "In summary, hypercortisolism, both on an individual basis and when it is pervasive within society, undermines immune functions, increases markers of inflammation, and can lead to tiredness and reduced vigour," all while keeping mothers on edge. In addition, concurrent with all these pathological mechanisms, care-giving work also places immense strain. This is contrary to the standards present in any kind of labour, wherein the absence of breaks promotes the unavailability of the option to restore the health of the muscles, which invariably develops pain in the back, neck, and joints, especially the latter two (Gjerdingen & Chaloner, 1994). Deprivation of sleep is one of the worst forms of physical stress experienced by mothers. A study shows that lack of sleep negatively affects muscle rejuvenation, brain activity, and hormonal secretion. However, it invariably shows that it negatively impacts physical endurance, speed, reactions, and the immune system itself (Walker, 2017). However, for mothers, the lack of sleep is a persistent factor, i.e., it does not remain for weeks or months but for years, thereby rendering it a permanent state rather than a phase.

Nutritional depletion serves only to enhance and perpetuate embodied exhaustion in its turn. Pregnancy and nursing significantly drain iron, calcium, vitamin B12, and folate from the mother's body. In cases where replenishment attempts fail due to time constraints or other factors, cellular energy production will slow or fail altogether (Black et al., 2013). Physically, biological levels of under-stimulation will be felt as weakness in the body, dizzy bouts, increased levels of illness, and the inability to recover from rest easily. Most noteworthy in all this with reference to motherly exhaustion specifically, bodily pains, weakness, and tiredness are so socially constructed as an inevitable aspect of motherhood that such manifestations are hardly ever taken seriously as indicators or symptoms of it in the first place. Such "normalization" actually dissuades individuals from seeking help or assistance with their own exhaustion, leading them further into self-neglecting cycles of fatigue. Thus, maternal exhaustion becomes not only "biological and physical" but also "social." The interrelation of biological pressures and physical work is a cycle of exhaustion itself, where hormonal imbalance affects physical robustness, and physical exhaustion strains biological responses further. Indeed, without rest, recognition, or medical intervention, maternal exhaustion is an incessant production of effort with little maintenance or recovery or replication in mature children after years of such exhaustion itself.

Theoretical understanding of self

In psychological literature, the self is understood as a multidimensional construct encompassing self-worth, agency, continuity, identity, and meaning (Erikson, 1980). Identity comprises goals, values, and beliefs to which a person is committed. It is the awareness of the consistency in self over time, the recognition of this by others (Erikson, 1980). In his theory of 'Psychosocial Development', Erik Erikson suggested that how we interact with others is what affects our sense of self. During motherhood, the sense of self-concept is misaligned due to the identity. According to the **Self-concept** defined by Carl Rogers, psychological distress arises when there is

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incongruency between the lived self and ideal self. Motherhood comes with certain biological, physical and psychological changes which are in some ways deny their authentic experiences and these incongruency leads to psychological disturbance of self. This self-concept is not always aligned with reality. Congruent behaviours are those which matches the real self and ideal self, such as the mother realizing weight gain (real-self) which she had already prepared herself to gain weight (ideal- self) where the reality is aligned with the self-concept. Few mothers experience incongruence with their current self and the imagined self which leads to distress and the negative effect lessens their self-esteem (Rogers, 1995). Motherhood often disrupts this congruence as women are socialized to internalize caregiving as their primary purpose, which narrows identity formation, while relational identity can be enriching, its dominance becomes problematic when personal identity is sacrificed entirely. **Self-Determination Theory** emphasizes three basic psychological needs: autonomy, competence, and relatedness (Deci, Ryan 1985). Self-determination as part of personality during motherhood explains that individuals change believing that they can manage themselves properly with the newborn and mothers find motivation in whatever task they wish to carry out. If the mother's efforts are taken for granted or criticized, then chronic frustration of autonomy leads to controlled motivation, and this maternal distress emerges when motherhood becomes a duty imposed rather than a role freely integrated into the self. **Object Relations Theory** highlights how mothers are becoming the psychological 'containers' for their children's anxieties, needs, and emotions. Motherhood being revolved around the responsiveness to children while the mother's own emotional needs remain unmet (Etherington, 2004). Due to the lack of 'objects' not referred to inanimate entities but to significant others with whom an individual relates, usually one's self-referential awareness, leading to emotional depletion and weakened ego boundaries. (Klein, 1921). **Feminist Standpoint Theory** highlights how mothers occupy a marginalized position as knowers despite their lived expertise. Mothers develop embodied recognition and knowledge about children by being the primary caregivers meeting physical and emotional needs (Gurung, 2020). However, this emotional intelligence and knowledge is disregarded on grounds of 'instinct' rather than recognizing as legitimate expertise which resulted in constant invalidation of maternal knowledge that further leads to the contribution of self-erosion. The central concept of **Existential Theory** is authenticity, living in alignment with one's freely chosen values and identity (Churchill, 2023). When individuals are forced into roles that restrict choice or suppress the true self, they experience existential anxiety and existential guilt, the latter referring the feeling of having betrayed one's own potential or neglected one's authentic life path. Applying to motherhood, existential theory explains distress not as a rejection of the maternal role, but as the pain of identity foreclosure when motherhood is framed as destiny rather than choice. When women are unable to pursue personal aspirations, solitude or self-definition, they may experience existential guilt and loss of meaning in life, a feeling that life is being lived for others rather than authored by the self.

Temporal Displacement and the Loss of Future-Oriented Self in Motherhood:

Another psychological effect of motherhood that is commonly overlooked is its impact upon women's relation with time in general, particularly with regard to an eroded future-oriented self. Much of the existing literature has pointed to physical exhaustion or identity stretch, but little attention is afforded its relation with temporal understanding, with women's understanding of past, present, and future being irrationally tilted towards perpetual presentness. There is temporal displacement that affects maternal self-continuity with regard to temporal self-authorship. There is constant present-oriented maternal functioning driven by an understanding of daily life in relation with present-oriented needs such as meal times, school times, and emotional regulation. Even though being "attentive to what is present" in caregiving is beneficial, dwelling in temporal immediacy will, in time, prevent psychological access to one's future self. Hopes, plans, and personal futures will constantly be put off, not in terms of conscious giving up but indefinitely. Eventually, a psychological distinction will be made between who she has conceived of becoming and who she is allowed to become. What psychological studies on "possible selves" locate as motivating, coherent, and cognizably meaningful factors in individual lives, in one sense, is one's ability to imagine one's own future self. They are the internal anchors to decision-making and the bases of resiliency in the face of adversity. If future-oriented thinking is severely disrupted in an individual, it may result in stagnation, diminishing personal agency, and a lack of purpose. In the case of the mother, the self in the future tends to merge with the self in the child's future, in the sense of substitution rather than complementarity. The child becomes the main focus of meaning production, whereas the mother as an individual in the future is not fully formed. In fact, the story of motherhood becomes the final chapter in the story of women, as opposed to a chapter within the story. The implication within the discourse is often clear:

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self-discovery, aspiration, and striving occur prior to motherhood, placing any post-maternal ambitions or desires firmly outside the realm of proper indulgence. In this way, a woman is restricted psychologically to conceive herself outside a caregiving role. It is, therefore, perhaps unsurprising to see the maternal self-defined by a present and a future to be maintained as opposed to a self to grow and adapt towards. Indeed, the removal of a future also affects how a woman interacts and conceives of her own past. The self-prior to motherhood: student, successful woman, artist, thinker, is reduced to a temporary measure rather than an intrinsic part of self as a result of her post-maternal status; this minimization or reduction is a rupture to a key feature of psychological well-being: the story continuum. Without such an integrated story of life in terms of connecting identities of the past to roles in the present and possibilities of the future, personal identity collapses into fragmentation instead of smooth evolution. Perhaps most profoundly, temporal alienation has not necessarily been one of overt, acknowledged, or even experienced distress. Mothers have found themselves to be competent, emotionally committed, and dedicated in caregiving roles, even as they have largely experienced feelings of unfulfilled emptiness, or "paused living." These feelings are commonly interpreted as ungrateful or even selfish, discouraging expressions of them. The psychic cost does not stem from discontentment with motherhood as such but rather from the lack of temporal space for self-renewal and for constructing a future self. The restitution of maternal selfhood requires more, then, than physical rest or emotional support; it requires restoring women's right to futurity. Motherhood should be reframed as a dynamic identity that coexists with emerging aspirations, rather than one which arrests personal development. Recognizing women as temporal agents-capable of imagining, planning, and becoming-repositions motherhood not as an endpoint, but as one chapter within a continuing life narrative. It is such a shift that allows meaning, autonomy, and psychological continuity to be sustained across the maternal lifespan.

CONCLUSION

The present analysis has demonstrated that the attrition of maternal selfhood constitutes a socially constructed phenomenon that manifests across biological, psychological, and sociocultural dimensions. It is essential to emphasize that this study does not characterize motherhood as inherently detrimental or pathological. Instead, the research posits that maternal psychological distress originates from asymmetrical gender expectations, the moral of self-sacrifice, and the absence of equitable distribution of caregiving responsibilities within familial and social structures. The evidence examined throughout this paper indicates that when maternal labour is acknowledged through institutional frameworks, when caregiving duties are collectively shared, and when cultural discourse validates women's multidimensional identities beyond the maternal role, the experience of motherhood need not culminate in the dissolution of personal identity. The erosion of self-documented in this investigation emerges not from the intrinsic nature of maternal practice, but from the convergence of systemic inequities and ideological constructions that position mothers as perpetually self-abnegating subjects. This investigation has revealed that maternal distress operates simultaneously as an embodied reality shaped by physiological demands, a psychological experience characterized by identity fragmentation, and a culturally reinforced condition sustained through normative discourse. Consequently, meaningful intervention in maternal well-being necessitates a paradigm shift beyond individualized resilience strategies toward comprehensive structural and ideological transformation. Such transformation requires the reconfiguration of institutional policies, the redistribution of domestic and emotional labour, and the critical examination of cultural narratives that equate maternal devotion with self-erasure. The reconceptualization of motherhood as compatible with autonomy, intellectual complexity, and sustained selfhood represents not merely an improvement in women's psychological health outcomes, but a fundamental requirement for establishing more equitable and humane frameworks of care. Future research and policy development must prioritize the creation of conditions under which maternal identity can coexist with rather than supersede other dimensions of women's personhood, thereby affirming the legitimacy of maternal subjectivity within broader structures of social justice and human flourishing.

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