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I lost my baby today: Embodied writing and learning in organizations.

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Abstract:	<p>This article focuses on miscarriage and the sharing of intimate experiences as an example of alternative writing that can be used to challenge and resist dominant masculine discourse in academia (Rhodes and Pullen, 2009). It steps back from patriarchal forms of writing organizations and contributes in three ways: in terms of methodology through the use of multi-voice autoethnography that embraces evocative language; with regards to the subject matter, by sharing a narrative that focuses on the bodily and dirty in day-to-day organizing; and in style, by going beyond traditional structures to foster personal, fragile and reflexive narratives that can enhance the understanding of lived experiences in organizations. More specifically, the first author's autoethnographic account of perinatal loss in the context of contemporary academia is used as an example of resistance to patriarchal norms of organizing.</p>

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8 **I lost my baby today: Embodied writing and learning in organizations.**
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11 **Abstract**
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13 This article focuses on miscarriage and the sharing of intimate experiences as an
14 example of alternative writing that can be used to challenge and resist dominant
15 masculine discourse in academia (Rhodes and Pullen, 2009). It steps back from
16 patriarchal forms of writing organizations and contributes in three ways: in terms of
17 methodology through the use of multi-voice autoethnography that embraces
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20 beyond traditional structures to foster personal, fragile and reflexive narratives that
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23 context of contemporary academia is used as an example of resistance to patriarchal
24 norms of organizing.
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41 **Keywords**
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43 Miscarriage, perinatal loss, writing differently, autoethnography, academia
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8 “And so this piece of writing attempts to undermine the extravagance of
9 masculine forms of writing; of writing to produce the codpiece, writing as
10 conceit; writing which is antagonistic to fragmented experience. It will not
11 satisfy some, it will irritate others. The article is unbalanced, unresolved: like life
12 itself. It is about stories, illustrations, asides, observations. It is also, with all its
13 attempts to sub-vert (with all its attempts to make it “dirty”), a piece of male
14 writing” (Höpfl, 2007: 619).
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26 Heather Höpfl’s words above have inspired our preceding paper’s aims, ethos,
27 unusual structure and challenging nature. Herein we present a personal account of
28 miscarriage within a professional context (written as “*I*” and “*We*” in the
29 autoethnographic sections below, as opposed to “we”, denoting both authors in the
30 main text of the article). While the paper contributes to the need to explore silenced
31 topics connected to the body, the senses and emotions in organizations, and more
32 particularly to the discussion on miscarriage (Porschitz and Siler, 2017; Weaver-
33 Hightower, 2012), its contribution also lies in presenting a different type of writing
34 as a form of resistance to traditional, masculine forms of organizing and
35 understanding. Thus, we advocate the need to *write differently* in and of
36 organizations on three levels: in terms of *method, content and style*, to explore
37 alternative, qualitative and personal methods of learning that are often rejected in
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8 mainstream platforms. This also applies to *content*, to tell bodily narratives of day-to-
9 day organizing that are not “moulded, manipulated and managed” (Kenny and Bell,
10 2015: 8) by traditional male patriarchal norms in a context where women are
11 “required to subject themselves to the imperatives of a culture that alienates their
12 female identity” (Bell and King, 2010: 437). Our argument is that honest, embodied,
13 fragile narratives can provide more kaleidoscopic and insightful understandings of
14 life in organizations. We embrace this in our method and style, and continue to
15 advocate the use of autoethnographic writing in organization studies (Author A,
16 2017) that is emotional, embodied, experiential and evocative. We argue that sharing
17 such experiences within and across organizations can be a powerful learning tool
18 individually and collectively as we learn about issues that cross over the personal and
19 affect the professional sphere, even though they may remain invisible to everyday
20 organizational narratives. It is through using autoethnography itself that critical
21 resistance can be performed against the nuanced discounting or blatant overlooking
22 of individual and sensorial experiences that do not fit with mainstream masculine
23 narratives of organizing, as writing differently through evocative and emotional
24 language can trigger personal responses and foster deeper empathic understandings.
25 Moreover, this paper offers a response to a call for research at a more micro level
26 regarding issues related to pregnancy within an organizational context (Buzzanell
27 and Liu, 2007), and extends the theoretical notion of “maternal body work” (Gatrell,
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8 2013). It does so by considering another type of (nearly) mothers within the
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10 academic context that, as discussed in more detail below, remains dominated by an
11
12 overall masculine narrative with little space for different forms of writing and
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14 learning in organizations.
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19 Our resistance to patriarchal norms is formulated and articulated throughout the
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21 paper in several ways. Specifically, these include the untraditional structure of the
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23 paper and the amount of space dedicated to the personal narrative; the use of
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25 autoethnography as a methodology and method for writing that steps back from
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27 established patriarchal forms of writing organizations, especially in its use of
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29 evocative language; and in the sharing of the subject matter that focuses on the
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31 bodily and dirty.
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34 35 36 **A story of pregnancy and loss in academia**

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38 *I lost my baby today.*

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41 *I never really wanted children, I was never a particularly motherly woman. Never*
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43 *felt that emptiness in my life, never had the need to fill a void with the sound of*
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45 *tiny clumsy steps, the mesmerizing smell of a baby's head, the cushy creases of an*
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47 *infant's chubbiness, the half-stuttered word mommy.*
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[...] The doctor had said I am fine, but tic toc, you'd better hurry up as you are almost forty and those fibroids might make things complicated. It will probably take up to six months [to get pregnant]. So, I thought six months... What about that international conference I am organizing next summer? And the three books coming out within the next year? And the papers in the pipeline? I can't let people down. I can't be unprofessional. Good thing I have worked out most of the details, article drafts, I have a call for papers, a bag design, quotes and bookings for the conference food. It pays to be a bit over-organized, after all. Could I go to the conference and stand there while delivering the welcome talk as a huge waddling pregnant woman? Will people only notice my invasively growing belly and think for God's sake woman, you could have waited a few months? But can I wait? What about a new born baby, can I really bring them along to a conference and feed in between sessions?

[...] Will I even be able to afford raising children? Our nursery costs over £1000 per month on a full-time basis. Shall I go part-time for a while even though a further change back to full-time employment cannot be guaranteed? Is that career suicide? I am a foreigner married to a foreigner, no granny help here. But they say the right moment to have children never comes, one has to take a leap of madness and then make do.

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11 *The University is not what it used to be, it's not a safe place anymore. The ivory*
12 *tower is crumbling down and the scaffoldings are held together by paper money*
13 *and academic stars that are hard to reach and almost impossible to catch in my*
14 *work. Maybe another conference, another paper, another committee, another*
15 *sacrificed weekend, and I could almost reach the safety net I need for my job, if I*
16 *stand on my tippy toes. But in thirty years' time I won't care about those*
17 *academic successes, I will only think about making crochet blankets for my*
18 *grandchildren, and perhaps perpetuating the annoying family habit of bragging*
19 *about one's children with friends and other pensioners. My beloved friend and*
20 *professor said her biggest regret was devoting all those years to work, waiting for*
21 *retirement to enjoy life, travel and family. But she never made it. Conferences and*
22 *academic Senate papers will long be forgotten. Grades, promotions, steps on the*
23 *career ladder and professional qualifications will fade away in the background to*
24 *lost teeth left for an elusive fairy, dirty hand prints on clean bedsheets, teary*
25 *scratches on bloody knees, and the comfort of a surprise chocolate message left in*
26 *secret for a milestone first day in school.*

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47 *[...] I knew I was pregnant right away, even though people said it was just my*
48 *body adjusting to no longer being constrained by contraceptive gimmicks. Just a*
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month after we started trying. But as I stood there, interrogating students on gender equality, as I walked holding my love's hand and resting my head on his shoulder at the movies, as I opted out of eating my favourite sashimi dish and avoided drinking a vodka, lime and lemonade on a girls' night out, I knew. And at first the thought was terrifying – I thought the doctor said I had six months! What about my life, my sleep, my career? Would I ever manage to climb my last step towards the professorial Olympus? The statistics blurring in front of my unusually sleepy tired pregnant eyes did not send reassuring messages. What about publishing more books, that nice writing workshop I wanted to attend, doing research, becoming a Dean?

The first test was negative. My pouting disappointment; his loving kiss on my nose; a promise of future opportunities. But I had been too eager to know, as usual. My mother always says that I am inevitably impatient as I was born twenty days ahead of my due date, and I have done things fast and my own way ever since. The feeling of a fleeting flutter of a new life was still in me notwithstanding the results, although, admittedly, that 'feeling' did not manifest itself as pleasantly as the romanticised, blissful and glowing experience I had envisaged. More of a cramping, moody, tiring experience suspended in a slow-motion succession of

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8 weeks and unsure expectations. I even downloaded two phone apps that told me
9 more than I wanted to know.

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12 I was preparing to go to a conference, I was packed and almost ready. I wondered
13 at my naked reflection in the large round bathroom mirror. This is a conference
14 after all – bad food and lots of wine. I'd better check before I shower, just in case.
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16 I tear up the blue foil, take the test and then try to keep busy while I wait for the
17 oracle. Do I have everything I need for the conference? I really need to take
18 advantage of these events to stay within a research culture while working in a
19 department where nobody does what I do... Oh my God, I am pregnant. I gasp out
20 loud. I can't believe the exhilarating joy I am feeling. We are having a baby! Oh,
21 my God, our lives will change. What am I going to do about the conference in
22 Italy next year? Oh stuff it, I will work something out, he can stay with the baby
23 for a few days. All of a sudden, my work, my identity of being an academic, my
24 career ambitions and my professional status have been demoted in my own mind.
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26 The top ten sources of baby happiness have greatly outweighed the Times Higher
27 Education ranking. It's like I have landed on the hot spot and got snaked
28 backwards to the middle of the board game, and I don't even care. Should I still
29 go to this conference today? Of course, of course. I am not disabled, I am just
30 pregnant. It happens to millions of women every day. Let's not make a big deal
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8 *out of this. I'll still need a postpartum life and income. Oh, my God, we are*
9 *having a baby!*

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15 *I have to tell him, but he is not here. He's teaching a class. I'm off to a conference*
16 *miles away, and my husband doesn't know we are having a baby. I can't wait for*
17 *the end of the week, but he'll be gone to his sister's by the time I come back home*
18 *from the conference. I can't possibly hold this exploding feeling within me alone, I*
19 *might get an excitement-induced stroke or something. I want to make it more*
20 *memorable for him than a phone call. So, I leave a small and meaningful artistic*
21 *arrangement on our bed, and a handwritten note on an aqua flowery Liberty sheet*
22 *of paper. I imagine him coming back home, cuddling the cat on the doorstep,*
23 *trying to get to the staircase to no avail and cuddling the purring cat a bit more.*
24 *He'll be holding a pile of marking, entering the bedroom slightly deflated by the*
25 *prospect of a long night of corrections, frustrations and feedback sheets. Then*
26 *he'll see this. He won't believe it at first, then he'll call me, ecstatic and*
27 *incredulous as I know he will be. Bam! We got a baby in the first attempt. He*
28 *might even do a little air-punch to congratulate his super-sperm. Well done us,*
29 *maybe baby number two in a couple of years? We have already discussed names,*
30 *but if it's a girl I would like to add my Auntie's name to her first one.*
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The journey to the conference is one of discovery – who knew that so much is happening already to me and my baby in the first few weeks! The humming time and the rocking movement of the train are filled with baby related readings – a lady looks at my book and gifts me with a little knowing smile. Planning of maternity leave, due date calculations, reorganization of summer activities and travel, checking on University policy, window shopping for baby things to buy online... I touch my belly, not a part of my body I have ever been particularly fond of; I cup my hands around the rotundities that really have nothing to do with my baby yet, but it feels different now. I should read up on this pregnancy stuff, do some fact-finding, become better informed. Am I approaching this too much like a piece of academic research? Am I already a mom? Will I ever have time to do research again? I do it in my free time already, I guess I won't have much of that left once Baby is here. Better work on it this summer, before I become enormous and before Baby's arrival. What will they look like? Will they have his lips?

The first day of the conference is tiring but inspiring. It's like being with 400 people who speak your inner language; I am sure I will come back to this one. I am very impressed with myself as I opt for healthy choices at the buffet lunch and even skip dessert and coffee, trying to focus on food that will be good for Baby. Throughout the day, as I transition from room to room, from theory to data, from

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8 *post-qualitative and gender identity work to hugs with old friends and*
9 *introductions with new colleagues, my mind is in my stomach. It's like I have this*
10 *beautiful secret that gives my heart giggles. I am covertly whispering tales of love*
11 *and care to my tiny almost-but-not-quite-yet baby. I drink more water, avoid*
12 *carrying extra weight, wear the most comfortable clothes I have packed. As I lay*
13 *in the minimalist run down student dorm bed that I was assigned, I stroke the area*
14 *where – I think – the uterus is. I came to bed early after dinner, skipped the wine*
15 *reception. That's not very networking-friendly or career-wise, but I feel it's*
16 *definitely more appropriate. Look at me, already on mommy mode! I dream of my*
17 *baby at night time, and of my warm husband interlacing his fingers through mine*
18 *in a familiar way while looking at this wonderful miracle we have made, and of an*
19 *idealised picket-fenced life by the sea.*
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36 *I wake up feeling unwell. Maybe I'll go to the conference a bit late, although I*
37 *don't want to miss it. Something could be wrong, and I am here alone in a*
38 *University dorm with the carpet of a colour designed to hide stains. Or maybe*
39 *what I am experiencing is normal, just the implantation stage I read about on the*
40 *train. Everything will be fine. I'll text him now and go back to sleep, and when I*
41 *wake up it will all be fine. And I'll go hang out with my friends at the conference*
42 *and listen to motivating presentations, and it will all be fine.*
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11 *A practice fire alarm rudely awakes my cramping limbs. I don't remember where*
12 *I am. My body is leaking. He is not next to me in bed. I stumble without glasses*
13 *into the unfamiliar bathroom with its annoyingly cold yellow led lights. My baby*
14 *is gone. I have never experienced this before but I know with absolute and*
15 *unmistakable certainty that I have lost my baby today. I feel... despair. And shock.*
16 *Shock at my despair. Why do I feel like this? It's not even a baby yet – my stupid*
17 *phone app says it's the size of a cute poppy seed. I had only known for sure for*
18 *two days, after weeks of speculation. My academic logic mind comes to rescue me*
19 *as my emotions echo against the squalid thin walls, and my pain flows through my*
20 *body. Useless body. Failing body. Old body. Empty body.*
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34 *I can't stay in this room alone. I can't stay alone with my broken flesh. I get*
35 *dressed, decide to go to the conference to listen to other stories, other lives. Work,*
36 *it's good to focus on work now. I'll get those articles done by Christmas; and my*
37 *books. Books don't die. I message my mom, who knows how to read but not how*
38 *to reply to text messages. I hope she doesn't worry too much. I talk to my husband*
39 *on the phone, sitting in front of a ham and cheese toastie and a double espresso*
40 *coffee that perhaps I wouldn't have ordered had my baby still been with me. I try*
41 *to comfort him with meaningless statements – it was not a baby yet, we can*
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8 *always try again, it happens to a third of pregnancies, I am fine. He always knows*
9 *what to say, even now. I wish I was home with him, but the conference*
10 *presentations will distract me. I can't find the strength in me to get on a train and*
11 *travel for hours.*
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19 *I sneak into the beautiful period hall unnoticed. I don't want to talk to anyone.*
20 *Today I also have a secret in me, but oh, such a different one from yesterday. My*
21 *pain feels at the same time numb and loud as my academic body waltzes around*
22 *corridors, little groups of people, strangers' smiles. Maybe it shows on my face,*
23 *as two colleagues I bump into ask me if I am ok. I am not feeling great.*
24 *Headache? Something like that. Take care of yourself. I slide away. After all a*
25 *miscarriage is not really appropriate conference corridor chit-chat material, even*
26 *at this conference. Why am I here? Should I be making my way back home?*
27 *Should I go to a hospital? I don't know. I am an academic and yet I don't seem to*
28 *be able to think right now. I feel like I am a distant participating member of a*
29 *work pantomime. But being here is easier, less action, less movement, less*
30 *thinking. Less loneliness even though I am mostly surrounded by strangers,*
31 *dashing from presentations to breaks, running across the creaking old staircases,*
32 *queuing up for the toilets, flapping torn schedules out of their conference bags.*
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I skip lunch, I hide away in a room upstairs. I check my work emails in a corner to keep busy. Should I tell my dad and my sisters? Maybe later. I would really love to speak to two colleagues who are organizing the stream I am attending, even just to introduce myself. I love their work, and they seem really nice, they both have kind smiles that start in their eyes. But I can't. All I can master as I re-enter the room allocated to my stream is half a forced smile while I help reposition chairs, before I go back to my busy-looking shell. I can see that my friend and another lovely colleague have arrived, they smile at me from the other side of the room. I want to tell my friend I lost my baby today, and I need a hug, not discuss some methodological issues right now. The next presentation is up, a colleague sits in front of us in a calm yet emotion-drenched manner and starts reading. I haven't read the paper beforehand so I don't know what she is about to discuss. The writing is just so beautiful, moving, emotional – about being 37 years old like me, and a foreign ethnographer with language insecurities like me, and not being able to get pregnant; it's about mothers, babies, bodies, a woman's life. Suddenly, without even realizing it, I start crying. My eyes don't even pre-warn me with some welling up – tears just stream out and I try to catch them, furtively, before they roll down my face, uncontrollably. I wish I could help it. I don't want to interrupt this enchanted reading, I don't want to make noise. I can see that writing this piece has been a labour of love and pain for her; it's an embodied

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8 *human, female and academic struggle. How insensitive and unprofessional it*
9 *would be to interrupt. But, really, I want to run out of the room and cry, and for*
10 *maybe the second time in my life I want to cry by screaming my raw animal*
11 *emotions out loud. Instead I stay still, hoping nobody will notice me; trying not to*
12 *make noise, trying to control my breathing, trying to keep myself together and*
13 *professional, away from the unravelling and unleashing of my personal mourning*
14 *in the middle of a conference presentation. The woman sitting next to me gives me*
15 *a sweet look and extends a caring open hand in the small space between us, such*
16 *a kind gesture. We met before but we hardly know each other, and yet her simple*
17 *gesture is saving me at this moment. I take her open hand and squeeze it for some*
18 *time, an anchor to focus my feelings on while the words I lost my baby today keep*
19 *resonating in my head, intertwined with those of the presenter who is projecting*
20 *photos of cute black babies. Maybe my baby would have looked like that, perhaps*
21 *the skin colour a little lighter, like when you mix milk and coffee in the morning,*
22 *as I explained to my inquisitive nine-year-old nephew before. When the presenter*
23 *falls silent at the end of her reading, the room is filled with the stunned silence*
24 *one gets from an audience who has just been given the privilege of witnessing,*
25 *hearing and feeling something special: autoethnographic words that are moving,*
26 *touching, real, honest, enchanting. I wish I could speak now; I wish I could say*
27 *thank you for sharing your life experience with me. Your words touched my soul*
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8 *today and made the storming motion in the black hole inhabiting my stomach less*
9 *overwhelming. But, instead, I wait for the comments to end - sorry we are running*
10 *out of the allocated time - and I quickly, apologetically, make my way out of the*
11 *room.*

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19 *I find a quiet space at the top of a staircase and cry my tears of love and lost*
20 *motherhood. I open the gates of my loss and fragility. I am half aware of the*
21 *possibility of being seen, half unbothered about the experiential conflict between*
22 *my personal and work lives, which are never separate, never manageable in*
23 *organized compartments, never really balanced. I can see from the display that he*
24 *has called me, left me loving messages which I know will comfort me. I will call*
25 *him later, and I will go home early tomorrow. Today I don't have the strength to*
26 *embark on a five-hour train trip. I don't trust my body today. I will have to go*
27 *back home to pressured exam marking, meetings, academic policy discussions,*
28 *contracts, a dying department. But not now. Conferences are my safe intellectual*
29 *harbour – but will I ever be able to enjoy another one without carrying the deep*
30 *sadness of this one with me? This baby never existed in my work world, although*
31 *it was born in our consciousness, lived and died in the space of a conference.*
32 *There is no work place for mourning a life that never was in today's female*
33 *academic lives. My own mother's life suspended in the Intensive Care Unit*
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timeless space was only worth ten days of my work life – that’s all one can take off from a job that owns your soul, your time, your marriage, your children. One simply must get on with it, contribute, and always be excellent. Nobody speaks of miscarriages in academia, they are painful secrets locked behind self-reporting sick leave forms and shut office doors; masked as flu, research leave, personal development time. But not as easy to recover from, I fear. The only way of dealing with the screaming in my head now, as a woman, an academic, and a temporary mother, is to sit down on this patterned carpet bolted into ancient wood and write. Write all of this till the stream of my words dries up my thoughts, soothes my tears, and I can breathe again. And now I’m going to the next presentation.

Why writing differently through autoethnography

I wrote these words just over a year ago on the back of a piece of paper outlining the schedule for presentations, hiding in what felt like a safe space at the top of a beautiful staircase at the *Gender, Work and Organization* conference venue, while my body was going through a miscarriage. I started writing my narrative to extricate my thoughts from my mind as I hoped it would avoid my emotional implosion. That act, perhaps uncommon and resisting of standard conferenced procedures and protocol, was a response to a psychological and emotional need for me. Resistance is then enacted in

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8 the performance of such embodied events against a masculine professional backdrop –
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10 for instance, in the account above there are several recognizable nodes of resistance.
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12 The pregnancy itself was not necessarily worrying or sought as a *situ* of conscious
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14 initiated detachment from the academic profession, but rather lived as an unavoidable
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16 form of resistance in its seemingly incompatible nature with the perception of the
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18 academic system as competitive and inflexible. Suddenly, academia became no longer
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20 blended with life but distanced from it, whereby the life outside of work had become a
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22 priority for the first time. The initial psychological resistance to change, to potential
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24 barriers to success and career development, to the shifting of necessities and priorities
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26 alluded to in the autoethnographic narrative, were not ignited by resentment or feelings
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28 of inadequacy as a future mother, but rather by the knowledge that for most of the
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30 female academic mothers observed over the years in the workplace these dynamics had
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32 not be understood or accommodated. Instinctively there seemed to be no space for a
33
34 healthy work life balance in academia that could lead to professorship and at the same
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36 time include childcare facilities at conferences, early nights (or very long sleepless
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38 nights), slow physical recovery, leaky bodies, potentially fewer research outputs and
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40 reduced availability for networking. The unconscious act of resistance starts here by
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42 imagining the possibility of challenging those patriarchal masculine parameters, pushed
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44 to even envisaging having more than one child.
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However, my conscious resistance started a few days later when I decided to type up those notes, with no editing to avoid the process whereby “we tidy up our embodied writing which leaks – we edit, cleanse, correct and say what other people want us to say” (Pullen, 2018: 125), and sent them to one of the organizers of the writing differently conference stream I had been attending. I felt that I *had* to share my story, and refrain from making it sound “neat and academic”. It was also an urge to resist the silencing of that experience in favour of what may be considered a “proper” academic experience that is more objective, less evocative and emotive. To me this was a prime example of those stories that remain untold but leave profound scars in one’s personal and work lives. I did not want my story to be another silenced or censored experience that would reinforce masculine and patriarchal norms of what is acceptable or allowed to be said within academia. I wrote the first submission of this article (again, done with minimal editing of the autoethnographic account, but eventually with the exclusion of non-essential sections due to the average amount of words available in a journal article submission) in collaboration with the second author whilst I was on maternity leave, holding my beautiful daughter who demanded my attention away from work through dribbly smiles and hungry looks.

Autoethnography can in itself be considered a critical *situ* of various types of resistance (Alexander et al., 2012) and clearly a way to challenge the marginalization of particular

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8 voices and bodies within scholastic environments as “my words are an extension of my
9 flesh. My theory is an extension of my life” (Martinez, 2013: 381). In multi-voice
10 autoethnographic writing, often all authors contribute to the empirical base of the paper
11 by sharing the method and interweaving their own personal accounts. This article is an
12 example of writing differently also in this respect, as the autoethnographic narrative
13 here only belongs to the first author. Looking for a second author was a very conscious
14 choice. From a methodological perspective, the first author’s contribution was of the
15 evocative type (Ellis, 2004) rather than in the analytic style of autoethnography
16 (Anderson, 2006), hoping to be read somewhat as performative writing that “depends on
17 its ability to create experiences... and often evokes identification and empathetic
18 responses. It creates a space where others might see themselves” (Pelias, 2005: 418).
19 However, the paper needed a better analytical/evocative balance, brought by the second
20 author, as we wanted to use the methodology of autoethnography not just to expose but
21 also to problematize experiences (Porschitz and Siler, 2017: 569) and this was made
22 easier with having someone else involved in the writing process. Secondly, being so
23 close to the subject matter, it was difficult for the first author alone to critically
24 recognize instances of unconscious resistance to systemic and professional norms within
25 her experience (discussed more below) and a secondary perspective therefore also
26 helped identify critical nodes of resistance. This dialogic process of critical learning of
27 the self in both personal and work-related narratives is important as “critical reflection
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8 is a process of bringing unquestioned assumptions to the fore for critique, through
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10 paying attention to dissatisfactions, discrepancies, tensions and contradictions in
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12 experience” (Rigg, 2017: 1). In choosing the second author, striking the balance
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14 between distance and closeness, the personal and the professional became crucial – like
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16 Porschitz and Siler, who also wrote on miscarriage (2017), we (as the authors) are
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18 colleagues in the academic profession who have known each other as friends from the
19
20 time of our doctoral study. The second author was instrumental in the maintenance of an
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22 authentic performative narrative as a case of writing how we see ourselves, rather than
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24 how we expect others to see us, which is also where we think resistance lies in writing
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26 differently. The choice of a second author who does not share the experience narrated in
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28 the autoethnographic account may seem at odds with the methodology. However, their
29
30 being both a colleague and a friend allowed the creation of a mirror projecting who the
31
32 first author is in their professional persona and not who they are required to be through
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34 the lens of their professional hegemonic masculine norms as “we write against a system
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36 that affects us in terms of what and how we write” (Pullen, 2018: 124). Wanting to tell a
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38 painful story of loss, the first author found support in the second author’s presence,
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40 expertise and resonance both as a form of critical learning about her experience and in
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42 the sense making of nodes of resistance.
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49 **Challenging silenced content: perinatal loss**

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8 Studying perinatal loss in organizations can advance knowledge of learning and
9 understanding of the self as embodied professionals, but also as individuals in
10 institutions that function within masculine cultures and contexts. Losses, and the related
11 grief period, are critical moments in people's lives and careers. Death is increasingly
12 discussed in organization studies (e.g. Han, 2012; Reedy and Laermoth, 2011; Smith,
13 2016), and recent publications have explored the experience of perinatal loss in various
14 fields (Weaver-Hightower, 2012; Hardy and Kukla, 2015; Porschitz and Siler, 2017).
15 By exploring themes and topics that often remain private as deemed uncomfortable
16 and/or "unprofessional", researchers can resist the widespread homologation of
17 masculine and patriarchal professional rules (Höpfl, 2000; Phillips et al., 2014) that
18 dictate how to be an academic and the form, style and content of writing. The exposure
19 of individuals' fragility in the workplace is still taboo, especially when related to bodily
20 substance, dirtiness and blood within a culture that belittles or rejects the feminine, the
21 emotional and the sensuous. If pregnancy and maternity leave demonstrate the taboo
22 issues of sex and the body (Buzzanell and Liu, 2007), the invisible, bodily, dirty, death-
23 related aspects of miscarriage contribute even more to the silencing of this topic in
24 organizations as the maternal body remains unwelcome or rejected in professional and
25 organizational contexts (Gatrell, 2013; Haynes, 2008a and 2008b). From an
26 organizational point of view, research shows that women on maternity leave (and to a
27 certain extent also fathers-to-be) are likely to experience role negotiations (Miller et al.,
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8 1996) and different types of discrimination related to competence, confidence, their
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10 changing bodies (see Ashcraft, 1999; Jamieson, 1995; Upton and Han, 2003) and
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12 promotion (Mock and Bruno, 1994). This may be more pertinent in the case of “failed
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14 maternity” as, in line with understandings of perinatal loss as both a psychological and
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16 physical experience, “maternal body work” seems particularly relevant in relation to
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18 miscarriages and the wounded body left behind, emptied of its maternal meaning
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20 (Gatrell, 2013). One of the reasons for the silencing of perinatal loss and other bodily
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22 aspects of work is that such may be considered subversive and unacceptable as “leaky”
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24 (Höpfl and Hornby Atkinson, 2000; Sayers and Jones, 2015) or “dirty” (Gatrell, 2007)
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26 which marks a strong contamination of the professional with the personal. As suggested
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28 by Gatenby and Humphries (1999: 290) it is “the physicality, the sexuality, and the
29
30 emotionality of these topics which is taboo”.
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36 Miscarriages are surprisingly common in everyday life; as such, at a fundamental level,
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38 they can be considered a workplace event owing to the large number of working women
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40 affected (Porschitz and Siler, 2017: 566). In the specific context of academic work, this
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42 is particularly relevant as its labour cuts across “many, if not all, life spheres as its
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44 activities are not anchored to time and space” (Valtonen et al., 2017: 524). Data both
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46 minimize the exceptionality of these deaths and highlight the unacceptable silencing of
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48 such a large occurring human phenomenon within organizations. The *National Health*
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8 *Services* (NHS) website in the UK has a section on miscarriages which reports how
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10 widespread this issue is: “Miscarriages are much more common than most people
11
12 realise. Among women who know they’re pregnant, it’s estimated one in six of these
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14 pregnancies will end in miscarriage. Many more miscarriages occur before a woman is
15
16 even aware she has become pregnant” (NHS, 2016). Ultimately, of the recorded
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18 697,852 live births in England and Wales in 2015 (Office for National Statistics, 2016),
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20 there were approximately 116,300 miscarriages. However, although numerical data can
21
22 help establish the scope of this phenomenon, it cannot shed light on the complex
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24 emotional, physical and psychological distress associated with losing an unborn child.
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26 Our contribution then, highlights the value of writing alternative narratives of fragility
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28 within organizational settings that shed light on the too often silenced feminine
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30 discourse of loss, embodiment and emotions; and in particular, it extends personal
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32 notions and accounts of perinatal loss in its exploration of the blending between work
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34 and life spheres in the patriarchal UK academic system.
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41 The legal system in England allows for workers’ protection during pregnancy and for
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43 bereavements, as well as compassionate leave, as pregnancy and maternity rights fall
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45 under the *Equality Act* (2010). However, not all pre-natal deaths are considered the
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47 same, as loss of an unborn child on or before the twenty-third week is considered a
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49 miscarriage, while it becomes a stillbirth after twenty-four weeks. This differentiation is
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8 crucial for organizations and workers as legally those who suffer a miscarriage before
9 that time are not entitled to maternity leave or pay, only sick leave. Therefore, even
10 though the pregnant body has usually shown signs of life well before six months of
11 gestation and the parents have been able to meet their baby in at least two growth scans
12 by the twenty-fourth gestational week, the death of their child is reported as general
13 sickness until then. On the other hand, in the case of still birth, the parents are entitled to
14 full maternity and paternity rights. This discrimination does not consider the
15 psychological, physical and work-related impact perinatal loss has at *all* stages of
16 pregnancy.
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30 These losses are invisible at both an individual and organizational level. At the
31 individual level, parents often keep their perinatal loss silenced due to guilt and shame
32 (Kennell and Klaus, 1976), to avoid looking “unprofessional” or because of a lack of
33 organizational support. Many women struggle to make sense of their loss (Miller,
34 2015), and hide the physical and/or emotional trauma stemming from the experience of
35 miscarriage from their co-workers (Porschitz and Siler, 2017: 565). In the face of a
36 miscarriage, women can lose the ability to make sense of what they are experiencing
37 and how it fits in with their larger life story, professional plans, social identity, and
38 embodied sense of self (Hardy and Kukla, 2015). Women often interpret their loss as a
39 lack of inadequate “caregiving capacity” (Kaplan, 1995: 125) or hide their loss to
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8 maintain the illusion of the male body norms in the workplace where their bodies and
9 ability to reproduce are frequently used to define their worth (Acker, 1990). Those who
10 have experienced these circumstances may also fear being considered incapable of
11 controlling situations, or even incompetent, something they may also perceive as
12 clashing with their professional identity even though in reality they only have limited
13 control over the success of their pregnancy.
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23 The individual and collective silencing of perinatal loss in professional spheres, together
24 with a paucity of organizational and peer support for those who experience it creates a
25 specific type of grief that can deeply affect individuals. Disenfranchised grief is defined
26 as “grief that persons experience when they incur a loss that is not or cannot be openly
27 acknowledged, publicly mourned, or socially supported” (Doka, 1989: 4). It is therefore
28 the silencing of the grief or the grieving person that makes it disenfranchised and leads
29 to the social and professional silencing of their loss. Research shows that attachment
30 and the development of a relationship with the unborn child begins before birth
31 (Robinson et al., 1999). Miscarriage abruptly breaks this relationship and the
32 development of normal dynamics between the parents and the child. Psychologically,
33 the mother (and the father, although perhaps in a different manner due to the lack of
34 physical partaking in the pregnancy) grieves the death of her unborn child for a period.
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Väisänen (2001: 98) explains how this loss and the related grief and pain become not

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8 only emotional, but also physical, and the parents “may find themselves in a subliminal
9 space between life and death [...] losses involve feelings of distress, restlessness, pain
10 and anxiety [...] although there is no baby, the mother’s psychophysiological need to
11 care tends to persist. She is still symbiotically dependent on her baby, who no longer
12 exists as a living being”. Fitzpatrick (2007: 85) also highlights the physical, affective
13 and psychological character of bereavement and stresses how “while these symptoms
14 are not unique to a university setting, they represent the potential for health
15 complications *if* the process of grief and mourning is not recognized” (emphasis in
16 italics). In a touching account of perinatal loss from a father’s perspective, Weaver-
17 Hightower (2012) reflects on how becoming a parent is a long process of falling in love
18 and discovery, almost like a nine-month old distance dating exercise, and maintains that
19 grief derived from the loss of that relationship is natural and personal but also
20 dominated by social and organizational rules. This article builds on that stance by
21 highlighting the imposition and experiences of both *social and organizational* rules on
22 perinatal loss. Therefore, if the dominant structures that revolve around masculine
23 norms negate death and bodily functions as unacceptable in professional working life,
24 then grief is also negated. The widespread adoption of more appropriate ways of writing
25 and understanding in and of organizations is paramount for capturing these mental,
26 bodily and emotional events combined with the related institutional policies and
27 processes that should be put in place to support individuals in organizations who
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8 experience such losses. Mainstream masculine, objective, quantifiable neatly ordered
9 narratives would simply be deficient in relation to the sense-making process. We
10 advocate the writing of narratives centred around the body, in its voluptuous beauty but
11 also in its dirty, messy and leaky forms, to explore the “bodiliness” of our academic
12 work and writing (Essén and Värlander, 2012). The miscarrying body can be a
13 testimony of failure and fragility that goes against both masculine representations of the
14 female body as either sexualized or “motherly”, and the problematized female ones
15 articulating challenges between the personal and the professional. This body then
16 becomes a feminist representational *situ* where the individual merges with the political
17 and the organizational in the body’s negation of itself.
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32 **Challenging method and style: bodily writing as a feminist project**

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34 The status quo of the current neoliberal university in the UK and in many other
35 countries leaves very little space for feminine narratives, stories of fragility and what is
36 perceived as lesser performances arising from valid reasons such as pregnancy or
37 perinatal loss. Female academics tend to have children later in their lives due to the time
38 dedicated to their studies and building a professional profile (Cervia and Biancheri,
39 2017; Joecks et al. 2014), which naturally puts them at an age where the risk of
40 miscarriage is higher. And yet the discourse of the failing body and perinatal loss is
41 ignored in a profession where career advancement is still largely dictated by masculine
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8 criteria (Knights and Richards, 2003) that ignore the body and the sensuous, and where
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10 top level mainstream journals have specific requirements (Parker, 2014). Such outlets
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12 often discard articles for being too personal, too qualitative or too feminine, yet we
13
14 argue those different narratives need to be shared to unveil, address and challenge the
15
16 relevant issues in organizations.
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21 The writing of the professional body is a feminist challenge to the mainstream
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23 professional criteria that dominate the academic profession. As highlighted by Bell and
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25 King (2010: 429):
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28 Academics may be seen as a professional organizational group that is particularly
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30 reluctant to acknowledge or reflect upon the embodied aspects of their collective
31
32 identity practices. The dichotomous and hierarchical opposition that exists
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34 between mind and body, intellect and emotion within academia presents the
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36 character of the ideal academic in a way which suppresses and subordinates the
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38 concept of the body through defining it negatively as unnecessary, intrusive or
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40 incidental.
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45 The medium, style, vocabulary and genre of one's writing is gendered, and as Pullen
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47 and Rhodes (2015: 88) state "there has been a widespread assumption in conventional
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49 organization theorizing that patriarchal academic language and writing (although largely
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8 un-named) is entirely appropriate as the *de facto* standard and, more than this, it is the
9 superior medium of written communication”. This status quo can be contested via the
10 use and sharing of autoethnographic, reflexive and personal writing that can enhance
11 learning of people’s experiences and sense-making in organizational settings (e.g. Essén
12 and Värlander, 2012). Writing differently, especially if permeated with emotions that
13 illuminate rather than obfuscate the bodily experiences which are increasingly present
14 and salient in organization studies (Author A, 2013; Dutton and Morhart, 2010), is a
15 form of resistance uncovering ways of living a professional feminist life. Embodied
16 autoethnographic forms of writing can help learn about, challenge, and perhaps change,
17 dominant masculine discourses in academia. In agreement with Bell and King
18 (2010:437) who advocate the sharing of the “embodied experience of the culture”,
19 Essén and Värlander (2012) also promote a better integration of the body and emotions
20 in academic writing.
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39 **Conclusions**

40 There are no conclusions yet. There is clearly still a long way to go both in
41 organizations and in Organization Studies to embrace practices and studies that want to
42 break away from patriarchal conventions and to reach more profound understandings of
43 the lived experience. In this paper, we have shown how writing differently in and on
44 organizations can be pursued in terms of content, method and style. We hope to have
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8 done justice to our aim expressed in the words of Heather Höpfl (2007) at the beginning
9 of this article, and that through the sharing of the first author's intimate experience of
10 loss we have been able to reach – and perhaps touch – a place within our readers where
11 organizational experiences resonates with raw sentiment, life beyond the workplace,
12 memory and the messy, the emotional, the dirty.
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21 Writing differently is scary. First, like in all autoethnographic writing, the baring of
22 emotions and fragility in presenting narratives may be mistaken for weakness and a lack
23 of knowledge or professionalism in standard academic writing. Different organizational
24 narratives created through autoethnography can be cathartic to write and to read, but
25 may also be painful to unmask and disclose. Also, by subverting established rules, even
26 simple ones pertaining the conventional structure of an academic article, there is an
27 escalated risk of authors exposing themselves to misunderstanding and/or rejection.
28 This is perhaps because autoethnographic narratives are evocative, personal and
29 generally require more description and elaboration than mainstream ones (Ellis, 2004).
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43 In the current neoliberal University, performance management, career progression and
44 even job survival still revolve around more traditional masculine norms, which might
45 require a strategic balancing between writing – and working – differently and playing
46 accordingly with the rules of the academic game. If we deem the systemic patriarchal
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8 and dogmatic use of impersonal narratives insufficient to learn about the multifaceted,
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10 emotional and bodily experiential life in organizations, then the scarcity of different
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12 narratives will necessarily perpetuate the unfortunate lack of insight into the sensual,
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14 sensorial and sentimental aspects of organizational lives. The impact of perinatal loss is
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16 emotional and psychological, physiological, personal and professional as it reflects in
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18 the ability to continue one's physical duties, to concentrate at work, and in the
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20 management of priorities and career choices that do not conform to masculine norms.
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22 Porschitz and Siler (2017) highlight the secrecy and grief in the experience of
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24 miscarriage. We have aimed to respond to this and at the same time have joined them in
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26 their call for more investigations on this topic.
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32 As explored above, this study thus makes three main contributions to the call for writing
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34 differently in terms of methodology, style and structure. In agreement with Höpfl
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36 (2007), it interlaces the voice and material presence of the author by using a feminist
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38 narrative in an autoethnographic account exposing the embodied experience of a female
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40 academic in resistance to masculine structures through method and style. Moreover, it
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42 contributes to the exploration of the personal and professional accounts of perinatal loss,
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44 which is a generally silenced topic in the field of organization studies.
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