

Chapter 6

'I WANTED PEOPLE TO KNOW THAT THEY WERE MY BABIES'

KINSHIP AS AN ONTOLOGY OF RESISTANCE

In previous chapters, I have shown that women experiencing second trimester pregnancy loss are subject to obstetric violence which disciplines them as deviant bodies which will not produce a living child. They have encountered bureaucratic exclusion and incoherence about the status of the event they have experienced. Their motherhood may have been called into question, and any official personhood they may wish to claim in relation to their baby is likely to have been denied unless the baby was born alive. Second trimester pregnancy loss in England can call into question ontological security, resulting in serious disturbance in the nature of reality for those women who understand themselves to have had a pregnancy which resulted in a baby, now dead, who was nonetheless some form of person. This chapter shows how some women exercise agency in responding to this disruption. Finding themselves in conflict with the biomedical-legal teleological ontology of pregnancy, which broadly defines them as non-mothers and their babies as non-persons, some women engage in agential social thinking and action which takes the form of resistance.

Some of this resistance is built on their experiential knowledge of pregnancy and birth, which can be opposed to biomedical knowledge (Abel and Browner 1998), a conflict described in Chapter 5. However, resistance is given authority and weight through being explicitly and strategically connected to an alternative, authoritative, readily available ontological position: the English ontology

of kinship, as understood and practised by the participants in this study. Using this way of thinking as a strategy of resistance, women in my research were able to move themselves away from Giddens' (1991) state of ontological insecurity and to actively produce continuity in the face of reproductive disruption (Becker 1994). Faced with the minimisation and marginalisation of their pregnancies and losses, to varying degrees, using different strategies, and through different practices, women claimed their babies as human persons, situated in a kinship system in which they themselves were mothers to that person. This is 'kinship thinking', already noted in English ethnography (Edwards 2000, Strathern 1992), whereby social ties are modelled on concepts of pre-existing biology, and where new and complex situations can be actively understood through links and comparisons to already existing modes of thought. It is also an illustration of the creative potential of human engagement with ideas about kinship (Carsten 2004) and the agential potential of women in navigating reproductive mishaps (van der Sijpt 2020).

This resistance in second trimester pregnancy loss to the English biomedical-legal definitions of persons, mothers and pregnancy not only exists at a discursive level but also draws on embodiment and materiality as sources of reflexive and generative social action, knowledge and power (Shilling 2012, Foucault 1991). Women's knowledge of the foetal being and their own relation is partly derived from agential reflection on embodied experience, such as pregnancy, labour, birth and encounters with the foetal body, as described in Chapter 5. It also derives from practice, particularly kinship and motherhood practices, in which the basic ontological reality of the foetal being and its relationships are not just seen from a different perspective, but are actually made into a different ontological object by what is effectively a different belief system (Mol 2002, 1999). I argue here that women in my research were approaching the second trimester foetal being through a kinship ontology rather than the biomedical-legal ontology with which they were presented at the time of the event, and that for some this became a source of, and strategy of, resistance as they came to terms with what had happened to them.

English Kinship Ontology

All my participants in the South West were actively using the English kinship model, described over the last few decades by

anthropologists: Rachel, who had knowledge of her parents' Chinese kinship ontology, explicitly rejected this in favour of the English approach because her parents did not agree with her attribution of personhood to her dead daughter, or with her continued memorialisation of her daughter's death. I therefore briefly sketch out the key relevant features of English kinship here, as found in the ethnographic work of Strathern and Edwards in particular.

From Strathern, the main premise is that the English think of family as based in primordial natural ties between persons which exist prior to culture (Strathern 1992). Persons are thought of as separate individuals, located in bodies. This is highly relevant to second trimester loss, in which the foetal body is often visible and encountered by the pregnant woman. The human shaped body of the foetal being in the second trimester produces a strong claim to personhood in the English system. However, this is situated in an ontological position about personhood and kinship. As Strathern describes this thinking, there is a fundamental idea that people exist as entities outside their relationships, because they are pre-existing material beings. This means that the alternative, that relationships are the building blocks of kinship, is to some extent optional, and kin can be shed, ignored or excluded, or, conversely, can be privileged and prioritised (Edwards and Strathern 2000). Furthermore, this element of selection and choice can be naturalised (Strathern 1992). In relation to the second trimester, this means that in the same way as some persons can be ignored at the fringes of the kinship system, so can others be brought into the centre of it, including foetal beings and the dead, as I will detail below. The key to this choice, as Strathern states, is the degree of emotion felt about particular kin. This, in second trimester loss, accounts for different responses and degrees of kinship claim for different pregnancies and losses, some of which is described below. This echoes Strathern's assertion that the second 'fact' of English kinship, after the individuality of persons, is diversity (Strathern 1992).

The idea that one should have a choice about kin, and one can have the agency to define it, is particularly useful to women resisting alternative categorisations of their babies and themselves, such as that produced by the biomedical-legal teleological ontology of pregnancy. It echoes processes of 'kinning' described in the Norwegian context (Howell 2003). The processes by which the divesting and prioritising of particular kin relations can occur in the English system include some people having a particular role in mediating kinship links, especially in ambiguous situations such

as stepfamilies (Edwards 1999). Strathern says that in English kinship, identity is understood to flow from parent to child (Strathern 1992), and I argue here that this ontological position presents pregnant women with the possibility of defining their own babies as persons. In addition, children are understood in English kinship as creating parents (Edwards 1999). Relationality embedded in biology is therefore intrinsic to the understanding of what kinship and personhood are at an ontological level. In the second trimester, the pregnant woman, defining herself as mother, can seek to define her foetal being as person, often invoking the 'natural' body of the foetus and its 'natural' connection to her own body to justify this. This picks up on a theme in kinship and reproductive literature identified by Strathern and developed elsewhere: the role of procreative intent in the definition of parents, and how this is naturalised (Thompson 2005, 2001, Strathern 1992). It is highly relevant in situations where there is no living separately born child, as in much of second trimester pregnancy loss, but parenthood and kin relations are still claimed in relation to that being. It is also highly relevant to termination for foetal anomaly, in which foetal personhood can be attributed at the same time as the pregnancy is ended.

The characteristics of English persons, then, include that they exist in separate bodies. In second trimester loss, this is the first claim that must be made to resist the biomedical-legal ontology of pregnancy which says second trimester foetuses are not persons. I will argue below that besides their own experiential evidence of the foetal body described in the last chapter, women use evidence from biomedical technology in a reverse discourse (Foucault 1998) to prove their babies were persons. However, on a secondary level, persons also exist in relation to others in the English system: they are embedded in and embody kinship (Edwards 1999, 2000). In circumstances of second trimester pregnancy loss, I then show that in order to resist the definition of their babies as non-persons, women situate them within kinship networks, by aligning them with other babies and other persons within their family, including other dead persons. In English culture, death is not necessarily a barrier to continued personhood (Strathern 1992) or social identity (Hockey and Draper 2005), and this applies in second trimester pregnancy loss. This echoes findings from death studies about continuing bonds with the dead (Klass 1993, Klass, Silverman and Nickman 1996, Walter 1996, Mathijssen 2018, Murphy and Thomas 2013) and from anthropology about how the dead may continue to be persons for the living (Lambek 2019, Despret 2019). In this way, I set out

some of the kinship strategies which women in my research used to assert their resistance to the biomedical definition of their babies as non-persons and themselves as non-kin to them.

Biomedical Evidence of the Foetal Body as a Reverse Discourse of Personhood

The first problem which women need to solve in order to claim the foetal being as a person using an English kinship ontology is that of the separately embodied nature of persons. In Chapter 5, I described the presence 'in the room' of the born body of the foetal being and how this challenged the biomedical-legal ontology of non-personhood. This was an example of how the body can be 'pressed into service' in competing status claims (Hockey and Draper 2005: 47). Women also use traces and inscriptions from biomedicine itself to claim foetal personhood through evidence of the foetal body. The lay use of biomedically produced representations of the body of the foetal being within kinship and personhood discourses and practices has been described in other contexts (Roberts 2012, Han 2009, Middlemiss 2020, Taylor 1998, Kroløkke 2011, Keane 2009), including in the representation of the personhood of foetal beings in pregnancy loss (Keane 2009, Layne 2000). I develop these ideas here to argue that in the English context and in the second trimester, biomedical evidence is not simply a neutral 'proof' of personhood, but is used strategically and politically as a reverse discourse to claim personhood against the biomedical-legal ontology of no personhood before viability without separated life.

Reverse discourse was conceptualised by Foucault, who showed how in the nineteenth century discourse on homosexuality as a pathological category both made social control in this area stronger, but also provided a way for homosexuality to claim its own legitimacy and natural origins, 'often in the same vocabulary, using the same categories by which it was medically disqualified' (Foucault 1998: 101). Reverse discourse is a way in which power can be exercised in the form of resistance. In the case of second trimester loss, the power of biomedicine to define some babies as persons, and some women as mothers, makes space for those who are not included to deploy the same terms to argue that they should be included. When women construct pre-viable foetal beings as babies using the evidence of biomedicine in lay contexts they are

producing a reverse discourse which expresses an ontological position which resists that of biomedicine. This is an example of the reflexive capacities of social actors (Giddens 1984) and the way in which technologies can be subverted and redefined by different users (Pinch and Oudshoorn 2005, Akrich 1992). Whilst Layne has described how women use the authority of science to prove the existence of the 'baby' in pregnancy loss in the US (Layne 1997, 2003), this takes on the character of resistance in the case of second trimester loss in England because using the authority of science in this context is a reversal of what 'science', or biomedicine, is claiming about these particular pregnancies.

Experiences of the foetal being during pregnancy which are mediated through biomedical technology, particularly imaging, but also foetal Doppler listening, have been shown by feminist researchers to socially construct foetal personhoods whilst being presented as objective and neutral representations of scientific 'fact' (Duden 1993, Petchesky 1987, Hartouni 1997, Taylor 1998, Mitchell 2001, Howes-Mischel 2017, Middlemiss 2020). More recently, research in England has shown, however, that pregnant women are not passive in their responses to technologies which represent the foetus, and that these responses are not singular. Women planning abortions may decouple medical objectification from foetal personification, or use objectification through ultrasound as a moral resource to confirm their decision (Beynon-Jones 2015). This echoes work in other settings about the agency of pregnant women in relation to biomedical technologies (for example, Lupton 1999, Han 2009), women's pragmatic responses to medicalisation and technology (Lock and Kaufert 1998), and the use of biological facts as resistance by patients (Dumit 2006). Similarly, in second trimester pregnancy loss pregnant and post-pregnant women may actively respond to and employ biomedical technologies to support their own ontology of pregnancy. In the case of the women in my research, the outcome of the resistance – claiming foetal personhood – often aligned with the classic feminist analysis of biomedical technology constructing personhood. However, I argue this is in fact a case of the 'tactical polyvalence of discourses' (Foucault 1998: 100), in which the outcome of different discourses are the same but the assumptions behind them are different. Women in my research were not passively responding to technological representations of their foetus in their foetal personhood claims, but brought their own knowledge together with that produced by technology and actively responded to both, depending on the degree to which it provided evidence to

support their exact ontological position, in a pragmatic approach to medicalisation (Lock and Kaufert 1998).

In the pregnancies I describe in this research, all the women had had routine experiences of antenatal ultrasound as part of the English NHS antenatal care programme (NHS 2019a, 2018). Some, such as Joelle and Gemma, had experienced extensive further ultrasound investigations as part of prenatal diagnosis of foetal anomaly. Others had additional ultrasound to confirm foetal death. Most had had experience of midwife foetal Doppler heartbeat listening, and a few, including Heather, had used Dopplers at home to hear the representations of the foetal heart. Others, such as Stacey and Simone, had paid for additional private ultrasound scans, especially the more detailed 4D scans which produce still and video footage of the foetal being. The material traces of these experiences, including positive pregnancy tests, were often preserved and sometimes incorporated into family display practices. They also served the purpose of providing forms of proof and evidence for foetal personhood claims in those families where this was desired.

In particular, for those women in my research whose baby was not born alive, and was therefore not biomedically or legally classified as a person, their experiences of biomedical technology during pregnancy could be used as evidence that their particular baby did actually fit the classificatory requirements of human personhood, as they understood them. For many women ultrasound provided proof there had been a living foetal being present, and therefore that the pregnancy had been authentic. Simone's daughter was discovered to have died *in utero* at 17 weeks, but the week before she had paid for a private ultrasound to find out the foetal sex, at which her daughter had been alive. This had given her some certainty about the duration of foetal life and of the pregnancy. This was important in the context where much of her family did not acknowledge the loss or include the baby as part of the family, her husband chose not to see her when she was born, and Simone felt very isolated in her grief. For other women, different technologies, such as Dopplers, could also provide convincing biomedical evidence that there had been life in foetal beings who were subsequently born dead. In Chloe's first pregnancy, the use of foetal Dopplers to hear the foetal heartbeat sound was the ultimate proof of the reality of the foetal being living inside her own body:

When they do the heartbeat, and you hear a heartbeat from down here [she gestured low on her belly] and it was, that really was,

it really was the most incredible, more special, that was the best thing. . . .

And I think that, for both of us, that's when it really did get real. Because you can't – there's no *trickery* about those things – well, you probably could argue there is – but do you know what I mean? There's no *denying*.

Chloe and her husband had experienced through biomedical technology the sound which to them represented a living being and which proved that their daughter had lived, located within Chloe's body. They were able to call on this experience in asserting the reality of their daughter's existence after her death and birth, when they only felt able to look at her feet and legs. Similarly, Heather could say of her fourth pregnancy that she had witnessed the foetal heart-beat in the second trimester using a Doppler at home. Technology could be used to prove the living status of the foetal being.

Biomedical technology could also provide proof of human morphology prior to birth or death, which was an important factor in producing the personhood of the baby. It provided an individualised, historical, documented record of life, visually examined and normalised in the way Foucault describes as key in producing an individual (Foucault 1991). A formed human body was thus recorded before it was perhaps seen and touched after birth, effectively fleshing out the later brief encounter with the born body and producing the baby as a human person with a history stretching back into pregnancy. Joelle underwent amniocentesis as part of the diagnostic process which ended in the termination of her second pregnancy after her daughter was diagnosed with a chromosomal anomaly. During the diagnostic procedures, she had access to a higher resolution ultrasound and described herself as seeking as much biomedically mediated information about her daughter as she could despite knowing that she would not continue with the pregnancy. Stacey also knew before the birth of her daughter, also through termination for foetal anomaly, that she had a recognisably human shape and showed signs of being alive. She had biomedically produced proof of the appearance of her daughter on a DVD of the scan. She also had a recording of the heartbeat sound, which she played sparingly for fear the battery might run out. These things were displayed in a special cabinet in her living room as evidence of the baby's life and personhood. Again, like Simone, much of Stacey's family had not been supportive of her attribution of personhood to her daughter, with her dad telling her not to keep

photos because ‘you don’t want the memories’. In this context, the biomedical evidence was particularly powerful. This connects to Layne’s observations of the use of sonograms to ‘prove’ the reality of the baby through the use of images as supporting evidence (Layne 2003) but also emphasises the way in which it is the content of the image – a recognisably shaped body, or a recognisable heart-beat sound – which is important in acting as evidence of realness.

Biomedical evidence of the sex of the baby was often important in asserting its reality as a person. Chapter 2 described how the withholding of foetal sex information was a denial of personhood on behalf of medical staff; the converse – the evidenced stating of foetal sex – is therefore an assertion of a form of personhood through individualisation (Foucault 1991). Layne found in an American context that knowing the sex of the child in pregnancy loss ‘greatly increases the individuation and “realness” of the fetus as a person’ for the parents (Layne 2003: 83). Sexing the coming baby often happens during ultrasound in the second trimester (Han 2009), and this genders the foetal being and is part of its production as a person and as kin (Kroløkke 2011, Rothman 1993). It can also come from chromosome analysis as part of post-mortem investigations. In my research, it was certainly the case that technology which sexed the foetus could produce more personhood where that had only partially been attributed. For example, as described in Chapter 4, this was the case for Natalie, when her previously unsexed baby was sexed by post-mortem chromosome analysis and she began to see him as a dead son.

For other women, having biomedical evidence of the sex could eliminate uncertainty in presenting the existence of the baby as a person to others, especially where pronouns and gendered names could be used. Gemma, whose second baby was diagnosed with serious foetal anomalies in the second trimester, found out at the same ultrasound appointment that she was carrying a girl. She described how this knowledge changed her perception of the pregnancy she was now faced with terminating:

I suppose it made her more real. Like, even though I felt that anyway, I think maybe for my husband it made her a bit more real. Because obviously it’s a bit different isn’t it, when you’re carrying them, I think. He didn’t have quite the same bond, kind of thing, I suppose.

Could you describe how that bond was for you? By that point in pregnancy?

Yeah, I mean, I’d just started feeling her moving and stuff. Which is kind of – well, with all my pregnancies, has been when I’ve felt

more of a bond then. When I feel them. So I, I felt really connected to her already.

But did something about knowing girl or boy make that even more concrete?

Yeah, a bit more. And I think maybe because we already had a girl, so I kind of could imagine then that she looked like how [older daughter] looked when she was born, all that kind of thing, linking her with that more. Rather than being a sort of abstract baby, if you like.

And did you then start calling her 'her'?

Yeah.

Similarly, ultrasound was used to construct the foetal being as an individual person through observation of behaviour. Tamsin felt that her twins, who died *in utero* at 17 weeks, had different personalities which were perceptible through technology:

Because we'd been having scans every 2 weeks, we'd had a lot of scans, and I'd seen them a lot. And they, as far as I was concerned, they had little characters. Because [first twin] was always dancing when the scan was on, doing a funny thing with her feet, and [second twin] was always hiding as far back as she could get. So I felt they had personality, real personalities.

When the twins were born, Tamsin interpreted the physical differences between them as expressions of these characters and personalities seen prenatally on the ultrasound screen.

Thus, technologically mediated biomedical evidence of the foetal body can be used to claim its status as a 'real' person, alive, with human morphology, with a sex, with some level of individual agency and character, to whom the pregnant woman is in relation. It is produced as a being which exists with/in a human body, which in the English kinship system is the starting point for personhood and kinship. The means through which this happens is a redirecting of biomedical evidence towards another knowledge system, that of kinship. The conclusions that are drawn from this evidence are the direct opposite of those drawn by the biomedical-legal ontology of pregnancy in terms of foetal personhood. This is an example of the way in which biomedical knowledge and other knowledges are not necessarily opposed to one another but may interact (Ross 2016, Markens, Browner and Mabel Preloran 2010, Kroløkke 2011). Instead, they can crosscut, or reorient, one another, or be implicated in resistance practices through the agency of individuals. In the case of second trimester pregnancy loss, knowledge from

biomedicine can be used to support personhood claims, which form the basis of kinship in English kinship ontologies.

Second Trimester Babies as Persons Who Are Kin

Most of the foetal beings in this research were claimed as forms of person, fulfilling the requirement of Strathern's first fact of English kinship, that is it built on pre-existing embodied persons (Strathern 1992). Once personhood was attributed, the babies were embedded in kinship relations, as persons are in the English system. However, the variety of personhoods involved is important. There was a wide range of positions taken on the detail and extent of personhood. This is consistent with the second fact of English kinship, that of diversity and choice (Strathern 1992). Paula was the only person who did not claim personhood for her second trimester loss – she strictly defined the foetal being as a 'foetus' rather than a 'baby', though she also still imagined, years later, a ghostly child who might have been a companion to her living children. For the other women in the research, there was a range of emphasis on the foetal being as a 'real' person, as previous chapters have demonstrated. The diversity of detail in the construction of personhood was also found in the positioning of the person within kinship structures, using a range of strategies expressed through practices. The strategies were to situate the foetal being as a baby within this particular family alongside the other children; to align it with the other dead persons within the family; and to claim oneself as a mother to it and to construct other kin as its kin. For example, many women pointed out to me the physical resemblance of the dead baby to other family members as proof that it belonged in their kinship group. Amber said her daughter 'looked like one of us', with the same shaped nose as her older daughter, Kerry said the midwives noticed her son had his father's big hands, and Esther's mother had remarked that Esther's son had full lips like one of her uncles. Resemblance, and resemblance talk, has been noted in other contexts as constitutive of kinship (Mason 2008, Nordqvist 2017, Marre and Bestard 2009, Han 2009, Roberts, Griffiths and Verran 2017).

Rituals which pertain to other kin were another practice through which the personhood of the dead baby was asserted in the context of kinship. Esther's first son was born alive after a premature labour and her husband acknowledged her Christianity by baptising their child as soon as he was born. Similarly, Holly accepted the

posthumous blessing the hospital chaplain offered for her second daughter and then decided to get her older daughter christened in church so that both daughters would have been treated the same. For other women, refusal of ritual was also part of marking the baby as 'one of us'. Danielle lost two sons in the second trimester, and the second time was offered a naming ritual:

[Chaplain] offered us a naming ceremony? Which we said we didn't want. We didn't have it with [first baby]. [Partner] wasn't christened, he said he wouldn't want his children christened anyway . . . I like keeping things the same as I can for them.

In other cases, including funerals, cremations and memorial services, ritual served to place the dead baby alongside the family's other dead. Earlier chapters have described some of these rituals and illustrated their meaning for bereaved parents and family. Georgia, whose son lived for a short while after being born prematurely, held a big funeral in the South West for him:

We just thought yeah, he's a baby, and he was very wanted and very loved, so, a private funeral for us wasn't an option. People came even from Liverpool. Friends from Liverpool, and like, Leeds and Sheffield. Yeah. People travelled a long way. It was really nice.

Treating babies born pre-viability as full persons deserving of a traditional funeral in this way uses established practices to 'confer authenticity upon death ritual' (Hockey 2011: 31) in a pregnancy loss context in which this might be challenged. The historical context of excluding dead foetal beings from cemeteries and ritual in the past, along with criminals and persons who died from suicide, means that including them today has political resonances of personhood recognition. Holly expressed this when she explained why she was pleased her son was buried in the municipal graveyard:

That's where you put *people*. So to say that he's there, is one of those kind of things in the validation as well. Because, yeah, he's buried at the *cemetery*. To have that burial, along with the whole validation thing, is that he had a funeral, he had a proper funeral.

As Layne has stated, acts of remembrance become acts of resistance in cases where there is social pressure not to remember or acknowledge (Layne 2003). Women in my research were able to agentially mobilise many such practices in order to support their ontological position, based in English kinship, that defined their babies as persons and themselves as mothers to them.

In the remainder of the chapter, I go into detail regarding two further practices through which the babies in this study were strategically situated as persons and kin in the English tradition. I focus on these because they were used by almost all my participants, and because they were particularly political strategies of inclusion and resistance, with resonances in other literature and settings. Furthermore, they illustrate the range and diversity of personhood and kinship positions adopted by my participants within an ontology of English kinship. These selected practices are naming, and the display of material culture in relation to images of the foetal body and cremation ashes.

Names and the Naming of Second Trimester Persons

Positioning the foetal being as a baby, and a baby in a family, was often initially expressed through the giving of personal and kin names. Names express and constitute social relations (Bodenhorn and vom Bruck 2006), often in the context of legal requirements for state registration (Pilcher 2015, Finch 2008, Bodenhorn and vom Bruck 2006). They are connected to personhood, in that the detachability of names from the individual person allows personhood to be recognised, withheld or removed, in political acts of validation or repression which can be enacted through speech or official records (Bodenhorn and vom Bruck 2006). In pregnancy loss, naming acts are therefore political acts using ‘the person-making power of naming’ (Layne 2006: 37). Legitimacy in conferring names rests on the socially recognised right of the namer to act in this way within wider institutions, and thus to define what they name (Bourdieu 1991). The giving of a name can be a responsibility and a source of power, but the right to do so may be contested or denied (Bodenhorn and vom Bruck 2006, Layne 2006). Consequences may befall both the namer, whose naming may not be recognised, and the named, who may therefore not be integrated into a social role.

In my research, the act of naming was usually carried out by women, often together with their partners, and occasionally with advice from their own mothers or other kin. For women who experience second trimester loss and do name, giving and using a name is a statement about their babies and their own motherhood. Though naming was sometimes suggested by hospital carers, especially in hospitals which focused on bereavement practices recommended by the National Bereavement Care Pathway, many

women had decided to name before it was proposed to them. They explained this with reference to personhood of the foetal being in a relational context. Tamsin named her twins in order to assert their personhood to other people:

It was important to me that they had a name.

Can you explain why?

Not really. I think it was just – it made them a real being. Because I found it really hard with the first miscarriage [a separate loss in the first trimester], a lot of the comments that you get from people are ‘well, at least it wasn’t a real baby yet’ or ‘at least it wasn’t further along.’ And I felt as though with that pregnancy, that nobody really saw it as a baby. And it was really important to me that [the twins] were seen as babies, almost on a similar level to my [living] daughter. I wanted people to know that they were my babies.

Tamsin’s comments are also notable for their acknowledgement of the diversity of English personhood, which reflects Strathern’s diversity in kinship. Her twins, whilst persons, were not quite the same level of person as her living daughter. But naming helped to express their proximity to that personhood to other people. Simone also explained that giving a name was giving a public identity which could be used when referring to the daughter who had died:

It just felt like, because you’re having the birth, you’re going through that, the person’s got to have some kind of identity. You’ve at least got to give them a name. I don’t know. And it makes it easier to talk about. You say about the name, instead of, you know, ‘that baby’, or whatever.

Naming claimed the dead baby as a person, equated them with other children, and prised open a space for this to be talked about with other people in the face of exclusion or denial.

All but three of the women in my research named the foetal being with a personal name. Strathern (1992) argues that offspring are individualised in the English kinship system through the allocation of personal names to children by parents, and their asymmetrical use in addressing children by parents, whereas children use kin terms to address parents. When parents name their dead babies in pregnancy loss, they are emphasising those babies’ individual unique identity and thus equating them with individual living persons. Furthermore, in English, names often have genders, and naming often genders a person, emphasising an individual identity. Chloe, whose first daughter died *in utero* and was born at

17 weeks' gestation, was desperate to get official confirmation of sex because she wanted to move from the non-gendered playful 'bump name' she had used in pregnancy:

It was annoying me that people were still using the bump name . . .
And at that point, she was no longer a bump, she was a person. Do you know what I mean?

So that name was no good any more?

No.

Because it wasn't a human name?

It wasn't a human name. It's not even a dog name! [Laughing]

And then also it's quite hard to talk about somebody without a name?

Exactly. Well, that's why you have your bump name, isn't it? You have your bump name so you're not saying 'it', you know. And it was just like, I remember it was only a few days ago [husband] actually referred to [baby girl] as [bump name], and I was like, 'No!' I think he did it automatically, kind of thing, because like, for me, as soon as I knew, as soon as the bereavement midwife said, 'you've got a little girl', I cried. But. She became who she is. If that makes sense.

Chloe linked knowledge of the developed baby's sex with personhood, and human personhood with a 'human' name. Though she referred to her much loved dog as her baby's 'fur brother', she distinguished between human and animal forms of personhood, signified to her by naming differences which she also preferred to be gendered. A person should not have the sort of joke name that she had given her unsexed 'bump', or her dog. This alignment of formal personal naming with live birth naming echoes research in France which found that babies registered after pregnancy loss were overwhelmingly given a name similar to that of born living children (Charrier and Clavandier 2019b).

Gemma and her husband never had a 'bump name', and had always planned to think about names once they knew the baby's sex. This was discovered in the process of investigating the serious congenital anomaly which resulted in the termination of the pregnancy. For Gemma, knowing the sex required action to acknowledge her daughter's personhood through naming before her death:

We didn't actually even decide her name until we actually went to have the injection – they do an injection, like to stop the heartbeat – so until we were actually going for that, and then I thought, I want to make sure she's got a name before we do this, kind of thing.

For Gemma, naming the baby was also connected to her imminent death, a significant moment in English culture in which personhood can be asserted and relationality expressed (Valentine 2007). It was an act of parental acknowledgement before the traumatic experiences of feticide, labour and the birth of the dead baby, and as with Chloe, the naming was a moment in which personhood was activated and acknowledged.

The use of names to gender persons, however, was sometimes avoided. For Louise, a name which did not gender was appropriate for the degree of personhood which she attributed to her baby who had a serious congenital anomaly:

The only reason we chose that name is we didn't find out the sex, whether it was male or female, and we just wanted a little name that was like a baby name? That would never have been used, if you like? So it wasn't an official name? . . .

Our whole point, our whole point was that [unisex name] was a baby or a foetus, whatever you like, that baby never had a chance of life, so it was never going to be a male or female. It was never going to have a gender. So that was our sort of reasoning above a name that could be either, just giving it a little baby name because it'll always be a baby. It was never going to be a human, it never was going to be a girl or boy and go somewhere.

For Louise, who knew her baby would never live outside the womb and who terminated her pregnancy, the baby's gender was not important, although it was definitely a human person who needed a name. This was connected to her Christian beliefs, in which she felt the gender of a human who has died and no longer inhabits a body is no longer relevant, because the sexed body on which gender is based is discarded at death in the Christian faith.

Beside potentially gendering persons, names may situate them within other social groups such as ethnicity, religion, geographic area, class and kinship (Bodenhorn and vom Bruck 2006). In English social life, naming actively makes connections between persons, including kinship connections (Edwards 2000, 1999). This can take place in situations of ambiguous family membership such as adoption (Pilcher, Hooley and Coffey 2020), or within new family-making practices such as post-divorce name changes (Finch 2008). Shared surnames may express family belonging and claims to place (Edwards and Strathern 2000) – working the same idea in reverse, in my fieldwork, means that claiming a surname and potentially a place, such as a gravesite, can constitute a claim

to personhood within a kinship relationship. It was common, for example, to give babies the surnames of their fathers where these were different to the mother's name, situating the baby as a person in a specific set of family relations. Charlie had split from the father of her first baby who had died in the third trimester. She then lost another baby conceived with her husband in the second trimester and she buried both babies in a joint grave marked with their first names and her new married name. She used naming to express the unity of her kinship group, and to establish kinship with and between the dead babies and the first baby's posthumous adoptive father, and publicly declared this by using the grave site and its inscription with the names of those buried there.

Those families who had been entitled to the official state registration of names and persons because of live birth felt that it validated the personhood of their baby and its position as their kin because of its endurance through time, as described in Chapter 3. On a more intimate level, the extension of the kinship system through time also comes from naming practices where children are given family names, or named after family members, perhaps those who have died (Finch 2008), entangling an individual into an intergenerational family history (Bodenhorn and vom Bruck 2006, Finch 2008). Georgia and her husband named their son after two of their grandads and with a name connected to their honeymoon location. Kerry named hers after her partner's grandad and with his surname. Both babies were registered, and these generational name links were therefore recorded by the state. Bethany named her son after her cousin who had died young and to whom she had been very close. She was not entitled to register this name, but her choice tied her baby into the family history and legitimised her claim to his inclusion in the family in this way. It is interesting to note that the cousin had died through suicide, and her linking of him and her son who was not officially a person made a double statement about inclusion and family history. For other women, names were selected because they had meaning in the context of the couple's reproduction – 'Hope', for example, was a name given by several families and situated the dead baby in the context of family history and future children. 'Saoirse', meaning 'freedom' in Irish, was selected to reflect Irish family origins and a sense of the spiritual destination of the dead baby. These names reached into the past and the future, locating the persons who bore them within specific family relationships.

Naming babies in pregnancy loss therefore can claim them as persons and as family members. But naming can also express some ambiguity about the person, with different degrees of personhood being possible in the English system. Helen didn't name her daughter at first, only deciding on a name after she became pregnant again and went for counselling:

Well interestingly at the beginning we didn't name her . . . We very much bought into this rhetoric that we were – that we'd got from the world around us – that she wasn't a real thing, it was still a miscarriage, it was medical waste. You know. She wasn't a real thing . . .

I fell pregnant again and I just found it incredibly difficult. And I said, 'I don't know how to cope. Particularly, what if it's another girl? I don't know how to kind of distinguish.' And [counsellor] said, 'do you think about, you know, giving her a name?' And now I can't believe we didn't! I can't believe we didn't! But like I say, we kind of, we felt the messages we were getting from all around us, because of the term 'miscarriage' was that after 24 weeks, you're allowed to be attached. You have a death certificate, you're allowed to. You hold them, you dress them, you get hand and foot prints, you have a funeral. And then they're allowed to have an identity, but before then? *Meh*. You know. Yes, you might see the formings of a baby, but the message you feel is it still wasn't real.

Even though Helen did subsequently name her daughter, she chose a second-best name, keeping her favourite girl's name in reserve, and she does not consider the baby to have a surname:

It's not our girl's name, we never used our girl's name. Just because. We might have had a girl in the future, and we didn't want to lose the girl's name that we loved . . . I still don't really call her [by a personal name and surname] like a child. Like my children.

Several other women, including Kerry, said they would not have picked the name they did for a child who was going to live. Kerry said she was more 'flippant' about the name she chose because her son would not live. Eva's young daughters picked the name for her son, which she asked them to do because she was worried that picking a name herself would be too upsetting at a time in her loss when she was trying to suppress her emotional reaction to what had happened. Personhood and kinship were claimed through naming in these cases, but this was sometimes limited or attenuated, as expressed through the form of naming decisions.

For others, not naming was a way of positioning dead babies as special and distinct within the family. For Alice, whose third

and fourth babies both died during separate terminations for foetal anomaly, recognition of inclusion in the family was important, whereas naming was not. She felt the babies were not ready for names:

I know most people do name them. But in a way that felt quite symbolic in itself, the fact that they just are 'our babies.' They weren't anyone else's, they didn't have an identity, they didn't have a label, they were just our private little people, that had only ever been with us, because they never were out in the world with other people. Is that making sense?

So, they didn't need something for anyone else to refer them as, because they weren't – the very fact that they *didn't* have a label was symbolic. They didn't have a chance to be living humans in the world. Like, I suppose what I am trying to say is we didn't not name them because we couldn't be bothered, we didn't *want* to. It was like a real conscious decision. Partly because giving them a name would have felt odd because we didn't have one [prepared], but also because the fact that they didn't have a name kept them as ours, and private, and special to us. Because that's all they were, they were just our little babies. They weren't X or Y, or whoever. People out in the world.

Though a name can make a person, Alice's experience, and that of Natalie who had a similar experience with not naming her son, show that forms of personhood and kinship relationships can also exist without naming in the context of pregnancy loss. Decisions about naming or not naming therefore express the diversity of possibility within the English systems of personhood and kinship.

Material Culture and Family Display in the Making of Second Trimester Persons

Layne (2000) has enumerated the ways in which material culture can enact personhood claims for foetal beings in the US context. Many of the practices she describes are relevant in UK pregnancy loss and in the second trimester. Women in my research, for example, bought goods for the dead baby which extended their personhood posthumously. Georgia decorated a Christmas tree with baubles bought by friends and family for her son. Heather bought gifts for her daughters to lay on their sisters' graves at Halloween and Christmas. Amanda bought her son a birthday card each year to put in his box of possessions. In deaths which are not pregnancy losses,

the use of material culture in memorialising the dead, as individual persons, is well documented in England (Hallam and Hockey 2020, Miller and Parrott 2009) and other European countries (Mathijssen 2018). It is also documented in the death of children in the UK (Riches and Dawson 1998), neonatal death in Ireland (Garattini 2007) and in pregnancy loss in the USA and UK (Layne 2003, 2000, Reed, Whitby and Ellis 2018, Godel 2007, Murphy and Thomas 2013). In the case of pregnancy or neonatal loss, the keeping and use of images such as photographs and ultrasound scan images also relate to personhood claims (Keane 2009), as does the giving of posthumous gifts (Garattini 2007, Layne 2000).

In my research, material culture and consumption were often used to equate the baby who had died with other, still living, children in the family, as part of a personhood and kinship claim. The organisation of this, particularly by mothers, was sometimes conceptualised as treating the children equitably, a practice which both claimed the dead baby as a child and also the woman as a mother to that child. Kinship and personhood were thus linked and invoked by material culture. Rachel, for example, was involved in organising annual pregnancy support group events which took a great deal of time and effort, baking cakes and preparing decorations and invitations. She described these as a form of birthday party for her first daughter who had died and who would not have birthday parties like her other children. Megan's living children with her ex-husband had Christmas tree baubles with their names on, so she bought one with the name of her dead son, conceived in a new relationship, to go on the tree alongside them. Much of the activity around material objects and their meaning, however, whilst making political claims about personhood and kinship in the context of death, was relatively private and intimate and also did not differ in the second trimester from practices in other types of pregnancy loss in other settings (see in particular Layne 2003, 2000). In line with my interest in the body politics of second trimester loss, I select two practices around material culture amongst my participants which are more public in character and which draw on the materiality of the second trimester body as a resource: the display of images of the foetal or baby's body, and bodily remains in the form of cremation ashes, in the home and on the body of mourners.

*Claiming Personhood and Kinship through Family Display of
Images and Ashes*

Kin relations in England can be created and sustained through family display of material culture (Finch 2007, Bouquet 2001), observed in relation to photographs in particular in the case of post-viability stillbirth (Murphy and Thomas 2013, Godel 2007). In English culture, photographs of family members, including babies and dead relatives, are widely displayed in homes, and in the case of photographs of the dead, the body that once existed ‘resources social identity’ (Hockey and Draper 2005: 50). In my research, photos of second trimester babies, many of which had been taken posthumously, were used both online on social media networks such as Facebook, and in family display in the home. It is significant that in present-day English culture photographs of dead bodies are understood as shocking, but that taking and sharing photographs of new babies is expected and encouraged. Using posthumous photographs of second trimester babies to memorialise, such as on funeral orders of service, or on social media, or in the home, aligns the person represented more closely with other babies rather than other dead people, even if the photos may have been selected because that is all that was available (Layne 2000). When I visited her home only three weeks after her daughter’s death, Chloe had placed a photo of the baby and a copy of an ultrasound image next to the large, framed photograph of herself and her husband at their wedding, on the side near the TV. She explained her plans for the space:

We’re gonna get a nicer frame, because the scan photo, that was just a cheap frame that we found at the time. And of course, we were expecting actual baby photos . . .

Are you going to get one so you can keep it with your wedding picture?

Yeah. And I’ve seen them online, you can get ones that are specifically for angel babies. They’ve got the wings and everything. So I’m going to get like a nice.

And then you can keep it out?

Yeah, and make like a little shrine to her. Because she’s, she doesn’t, well she might do, but I don’t think she knows how much she is loved. And she’s missed.

Chloe’s placing of the images of her daughter’s body beside the wedding photograph was part of a claim to both her individual personhood and her kinship position in the family. She described the loss of her daughter as particularly poignant because it was her first

pregnancy and so she and her husband were 'forming as a family'. Such display also happened in wider kinship groups. Heather's third and fourth pregnancies ended with foetal death in the second trimester. She was strongly committed to these babies being persons, siblings for her living daughters, and grandchildren for her mother. These relationships were expressed through her display of scan images alongside framed photos of her living children, a display in which her mother participated:

My mum's got a scan picture. I've got their scan pictures up there [she gestured to her living room bookshelf]. [First baby who died]'s on the right and [second baby]'s on the left, but Mum's got a picture of [first baby] actually in her house, and she's got it displayed. And it's in a wooden frame. And I gave one to the in-laws as well, but they don't display it. I think they're a little bit more reserved about it.

Where does your mum put it?

It's in the living room with the picture of the grandchildren as well, so it's there. So that it's on display, which is lovely. It's acknowledging.

Framed photos in English homes are usually of kin, and when displayed they form a moral commitment to remember the relationship (Drazin and Frohlich 2007). The placing of framed images of the second trimester baby, besides asserting equivalence with other children or highlighting the relational context of marriage, could also align the baby with family who are dead and within a family history. Chloe, whose daughter's photo was displayed next to her own wedding photo, also displayed a framed photo of her grandmother. She had been very close to this woman, who had died a few years earlier, and who had had a stillborn son. Chloe felt herself to be copying her Nan's example when she planned to keep her daughter's memory alive, and her Christian beliefs meant that she thought of her grandmother and daughter as being together in the afterlife. The images of the dead in Chloe's living space were part of this connection across time and across the boundary of death.

Ultrasound scan images or footprints were sometimes used in the family display practices of my participants because they were felt to be less shocking for viewers or visitors than a photo. Charlie selected hand and footprints for the front of the order of service of her second trimester daughter's funeral for the same reason. However, the prints were still representations of a human body and were making a point about personhood and kinship. Human feet metaphorically represent personhood (Han 2009, Layne 2003, Keane 2009) and footprints carry a suggestion of both individual journeys and the

leaving of a mark on the world which are associated with personhood (Layne 2000). Similarly, albums or collections of photographs tell a biographical story about an individual (Drazin and Frohlich 2007). Many families in my research kept albums or ordered groups of photographs narrating the pregnancy and birth of the baby who had died, producing them as a person with a history in the family. Amanda, for example, made an album of photographs of her son's funeral, at which all the extended family and friends were present, to keep beside the albums she made for his siblings as they grew up. In such cases, the narrative devices of family photographs were used for 'making sense of situations that might otherwise remain alien' (Bouquet 2001: 95). Babies were also historically situated within kinship groups by the display of photos, scan images, or footprints on social media at important family times such as Christmas or anniversaries of birth or death. This was a practice common to many of the women in my research who were in their twenties and particularly active on Facebook and Instagram, such as Georgia and Charlie. The semi-public nature of such posts was a political statement demanding inclusion and recognition of personhood, kinship and loss.

Besides images, ashes from cremation were enlisted in forms of family display. As discussed in earlier chapters, cremation and retrieval of ash is often possible in the second trimester because of the size of the foetal being. In Britain, cremation is not always the point of separation from the material remains of the dead because ashes can be reclaimed (Kellaher, Prendergast and Hockey 2005, Prendergast, Hockey and Kellaher 2006). They can then be used in novel ways to situate the deceased in identity and biography rather than traditional or communal memorialisation, perhaps continuing a relationship after death (Prendergast, Hockey and Kellaher 2006). Instead of the dead being located in a public place, they can be kept nearby, for example at home, in a potentially transgressive and also intimate act (Kellaher, Prendergast and Hockey 2005). Angela, whose first son died after premature labour, kept his ashes in her living room on a dresser, alongside photos of herself and her husband holding him, and some memorial items given by friends:

People ask, and I say, 'he's on our Welsh dresser.' And it's kind of like a thing now! But he's here with us, if it makes any sense. And he'll always come with us now, whether we move house, or what have you . . .

We don't want to make a shrine, but it's there. It's present, it's there, it's not a big deal, you wouldn't necessarily walk in and notice

it. So it's discreet. It's not a shrine. We keep his scan pictures because that's the only picture we've got of him other than the snaps we took when he'd died . . .

It just feels like he's with us. And then we will tell [newborn second son] about him, and he'll ask, and we'll say 'he's there, on our Welsh dresser!'

Amanda, whose son died through termination for foetal anomaly, kept his ashes on the mantelpiece in a living room which contained many reminders of his existence, including photos and a box of items understood as belonging to the baby. She also kept the ashes of the family's many pet Dobermanns, but had put these away in a cupboard because the size of the dogs' urns was greater than her son's and she wanted to avoid visitors making comparisons. Ashes are a 'tangible substance' which for many people are the bodies of the dead (Prendergast, Hockey and Kellaheer 2006: 884), and in second trimester loss, when the ontological status of the material substance of the foetal body is in question, they take on a particular importance in family display. Post-cremation ritualisation is a form of resistance to modernist rationality (Prendergast, Hockey and Kellaheer 2006) which in the context of second trimester pregnancy loss counters the biomedical-legal teleological ontology of pregnancy which says this foetal being was not a person and never really existed.

Foetal Bodies and Relational Bodily Display

Family display incorporating the foetal being into kinship groups was also practised on the body, as well as in the domestic space of the home and the related space of social media. Material culture displayed on the body, such as jewellery or tattoos, can be a memorial act but is one which takes place in a space which is both public and private, mediating between the wearer and other people (Layne 2003, Fuller and Kuberska 2020). McNiven (2016) has described the intentional visibility of pregnancy loss memorial tattoos and memorial jewellery as agential narrations of loss and creating opportunities to talk to others. In my research, whilst women used symbolic representations of the foetal being in jewellery, such as Simone's butterfly necklace or Amber's charm bracelet with symbols for each of her children, they also used evidence of the particular foetal body of their own baby on their own bodies. There is a significant difference in terms of claiming personhood in drawing attention to the embodiment of the specific foetal being rather than a generic symbol. Phoebe had her son's tiny footprints

replicated in a silver pendant which she wore on a necklace, and her husband had the same footprints tattooed on his chest. Charlie, who very strongly asserted the personhood of her pre-viability daughter alongside that of her post-viability stillborn girl and her living children, had memorial tattoos for both babies. However, the tattoos for the daughter who died at 23 weeks were much bigger and included that baby's life-sized footprints to demonstrate her size, in an assertion of her personhood which was perhaps more necessary than that of the other, stillborn and registered baby.

The material body of the baby was sometimes incorporated in the use of ashes in jewellery. Ashes jewellery is common in the UK, with portability being an important element (Prendergast, Hockey and Kellaher 2006). However, it takes on a new meaning when the jewellery is worn by the woman whose body contained the foetal being, and when that foetal being's personhood is generally called into question. For Alice, the display aspect of this to other people was less important than the presence on her body of the remains of her two unnamed babies who died through termination for foetal anomaly. Her ring was not obviously an ashes ring:

I just felt that on a daily basis I wanted something that would be a constant reminder of their presence but that wouldn't be flashy so that everyone would be like, 'oo, what's that?' And I'd be like, 'oh these are ashes,' you know? They are in there – that star is our little baby girl, and that heart is the little baby boy, there is a tiny bit of them, I don't know what he's done to make the hole in it and put some in. So I've got them in there, and I know they're there . . .

I think it's really interesting that it's on you as well – because you can't set your motherhood aside?

Yes! Yes, yes, yes, yes! It's present, all the time. It's part of my identity.

And you've chosen something durable?

Yep. Yeah, exactly. I was sort of looking at different options and there are lots of things you can do that are sort of in the house or, I don't know. I just wanted something I could have with me all the time that would be a little part of them . . .

This will always be on my finger, until I'm dead and gone. This is always going to be on my finger.

As described in Chapter 5, Alice had not told other people the circumstances of her second loss, and kept much of her mourning private. For her, the ashes ring acted as a record of emotion and relationship, and was transformed by its connection with her own embodiment into an expression of her self as mother. Objects can

thus be 'repositories of memory' (Lupton 1998: 148) which create the self. By contrast, Kerry had a ring made containing some of her son's ashes displayed under a clear stone, which she wore to work, and which became an opportunity to talk to others about her loss:

One of my [customers] did say to me, she said 'oh, that's a really nice ring!'

And I did say, 'that's my son's ashes in it.'

And she went [gasp], 'I'm really sorry!'

So that's why I was off – cos clearly [customers] didn't know. There's only a couple that knew that I was pregnant anyway. I said, 'that's the reason that I was off.'

She went 'oh, I'm really sorry.'

Kerry was one of the women described in Chapter 5 as avoiding other people in supermarkets in the months after her loss. Her prominent ashes ring was an agential refusal of this alienation from society. Gemma, in the same chapter, talked about how she found it hard to talk to people about having apparently chosen to terminate the pregnancy with her daughter. However, Gemma also wore an ashes ring every day alongside her wedding ring, and used questions about it as opportunities to talk about her daughter:

People have just said they like it, and then I've said – it's not obvious, it's like a flat ring, so it's not got a gem or anything, the ashes are just in the ring. So people have said 'I like your ring' and I've said what it is then.

Gemma sometimes also wore a pendant with her daughter's footprint on it. Her own mother, who felt strongly that she had lost a granddaughter, wore an ashes ring. In second trimester pregnancy loss, representations of foetal embodiment such as these act as forms of memorialisation, but also as public and agential statements about inclusion in relation to personhood and kinship, especially where they can prompt a response from other interlocutors who see the images or the ashes. Displayed on the body, particularly the parental or mother's body, the representation of foetal embodiment expresses commitment to a kin relationship which is asserted against the norm, in a form of resistance. These practices of making visible can be used agentially by women to counter the shame and hiding described in Chapter 5, when the bodies of the dead baby and its mother disappeared in the ontological disruption of pregnancy loss.

Conclusion: Agency and Resistance in Ontological Politics

I have sought to show in this chapter that the narrow biomedical and legal definitions of what a baby, person, or mother is or is not at the level of ontology were not duplicated in the reality of people's lives in circumstances of second trimester pregnancy loss in England. Instead, women in this research used a range of strategies and practices to assert their own ontological positions, drawing on English kinship as a framework, in which second trimester foetal beings could be understood as persons, in kinship relations to themselves as mothers, to other living persons such as fathers, siblings and grandparents, and to family dead. Often, in the second trimester, these practices are distinguished by their reference to the material body of the foetal being, a theme which permeates all claims to the 'reality' of the foetal being in the accounts of my participants. The material body of the foetal being, with human morphology including sex, with some biomedically confirmed life in the uterus or after birth, with a documented biography in pregnancy and after death, is central to the personhood claims which women may make, and is also part of the kinship practices through which it is made visible. This is consistent with other findings in the area of English kinship which find personhood in embodied beings, and also with findings in the field of posthumous relationality in English social life.

The strategies I have explained in this chapter are forms of resistance. The use of biomedicine in a reverse discourse, a known strategy of resistance described by Foucault (Foucault 1998), expresses this particularly clearly. Kinship practices, such as naming and display, become resistance because of the context in which they take place, that of the English biomedical-legal denial of personhood and kinship without separate life before viability. It is true to say that much of this resistance is very local and small-scale, and may only take place in a domestic context, such as Simone quietly asserting her daughter's personhood against the wishes of her family. The relatively low prevalence of second trimester pregnancy loss, and the isolation of the experience, particularly in South West England, contribute to the small scale of this resistance. This type of action may not be conceptualised as a political form of resistance by the women involved. For other women, the resistance is on a larger scale, though still domestically based. Rachel persistently used her daughter's name to her Chinese parents despite their discomfort,

and she understood this as a form of assertion of her own ontological position against theirs. She and her husband are active in the local pregnancy loss support group, organising events that celebrate personhood and kinship in the context of pregnancy loss, which they understand as necessary in the context of these losses being ignored by others. Other women, such as Charlie, are active on local social media, making themselves available to support other women going through pregnancy loss. Georgia and her husband fundraise for pregnancy support charities using assertions of their son's personhood on social media. And LeighAnne Wright has drawn on her experience of the second trimester loss of her son to build a career in funeral directing and set up a now closed charity in Plymouth which supported local families experiencing any loss. LeighAnne's activism and resistance was particularly public, and she asked me to use her real name in this research. In 2017 she stood outside the Houses of Parliament in London and read out a long list of the names of babies who she knew to have died in pregnancy or neonatally in the Plymouth area, asserting their personhood at the heart of the UK political system and making them visible through an act of speech recorded on video and uploaded to the internet. Some of the names she read were those of babies whose mothers took part in this research, and they expressed to me their approval of this public naming as a symbolic act claiming the personhood of their babies. Yet even these public forms of resistance have not yet been able to challenge the legal and bureaucratic recognition of second trimester pregnancy loss.

Furthermore, as this chapter has shown, resistance is neither uniform nor homogenous in content and meaning. Attributions of foetal personhood and of kinship in the English kinship system have substantial elements of diversity and choice, and these are replicated at the level of second trimester loss. Not all women attributed the same type or extent of personhood and kinship in the second trimester, and Paula, for example, did not attribute personhood at all, whilst having some sense of lost kinship. Nor were personhoods expressed in the same way or by the same practices by all the women. As previously discussed, there was also variety in attributions of foetal personhood in other pregnancies and other pregnancy losses amongst the participants in this study. Layne and others have pointed to the existence of person-making before birth (Layne 2003, 2006, Han 2017, 2009, Howes-Mischel 2016) but my research emphasises the non-dichotomous nature of foetal personhood and kinship in the English system. This is different to Layne's

insight that personhood can be revoked in pregnancy loss (Layne 2006). From the English kinship ontological position, there is not just a person and a non-person. It is possible to have a partial person, or a partly built person, or a type of person. This person or part person can also be situated in kinship relations which are diverse and agentially defined, and which continue to exist after death. Such multiplicities of ontological positions on personhood and kinship can be traced in the diverse kinship practices through which they are produced and which have been described in this chapter.