

<BOOK REVIEWS>Writing Pregnancy in  
Low-Fertility Japan By Amanda C. Seaman

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journal or publication title	Japan review : Journal of the International Research Center for Japanese Studies
volume	32
page range	218-220
year	2019
URL	<a href="http://doi.org/10.15055/00007216">http://doi.org/10.15055/00007216</a>

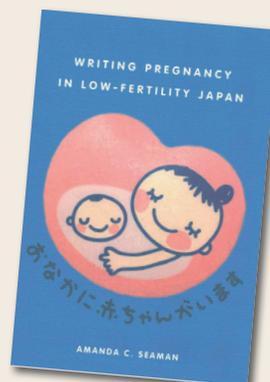
## BOOK REVIEW

*Writing Pregnancy  
in Low-Fertility Japan*

By Amanda C. Seaman

University of Hawai'i Press, 2016  
ix + 230 pages.

Reviewed by Bill MIHALOPOULOS



Amanda Seaman offers us an intriguing introduction to “pregnancy literature” in postwar Japan. Her book spotlights the wildly imaginative and provocative genre that deals with the experience of pregnant mothers-to-be in Japan that has hitherto gone unnoticed. An added bonus is that *Writing Pregnancy in Low-Fertility Japan* is a delightful read. Seaman’s prose is crisp, lively, and agreeably jargon-free. Her feel for the intricacies of language and ability to find appropriate phrasing in translating from the Japanese vernacular to English adds to the reading experience. The journey Seaman takes us on—through horror and fantasy writing, short stories, novels, memoir, and manga—will enthrall and delight undergraduate students.

In her first book, Seaman took the work of five contemporary authors to engage with a variety of social issues and concerns. *Writing Pregnancy* follows the same template. The key issue of the book is the abhorrence that cannot be named: namely that not all mothers feel joy and affection toward their baby before or after it is born. *Writing Pregnancy* is at its best when it represents the experience of the visceral metamorphoses of the female body and the accompanying psychological changes. During pregnancy, the mother’s body changes rapidly. The experience of having one’s body turn into something beyond one’s control, a change that often is beyond full comprehension, is both terrifying and estranging for some expectant mothers. During the metamorphoses, the pregnant body also becomes host to an intruder that is both alien and intimate, as the foetus grows in and is attached to the body. This genre of writing represents pregnancy as a form of invasion. This field of literature deals with a horror that is strikingly subjective in nature: the fear of being pregnant and the anxiety about the uncertainty of the foetus’ development. Seaman traces how the boundaries between self and other unravel in representations of pregnancy, due to the haziness of the outcome and the “maternal impression” that a “mother’s behaviour, even her thoughts” influence the “unborn child’s formation” and character (p. 48).

It is also easy to foresee the final chapter of *Writing Pregnancy* on the flamboyant and unconventional artist and author Uchida Shungiku becoming standard fare for any Japanese studies undergraduate reading list. The chapter deals with the overlap between Uchida’s public persona and the manga serialization of the intimate details of her pregnancies and family life. What makes Uchida unique is that, while outspoken about gender injustice in Japan, she shuns the anti-natalist prescriptions of the early generation of Japanese feminists.

She does not see the untangling of reproduction from sex as leading to personal freedom. Instead, Uchida's quest for personal satisfaction is driven by the need to procreate. She is all for having babies—the more the merrier—but only if she can raise them on her own terms. In her case, this means having children with several different fathers and being a fully functioning and active sexual being in the process. By choosing to procreate with multiple partners, taking ownership of the childbirth process, and by introducing a view of the pregnant self that does not reduce the mother to a vessel for the expected baby, Uchida literally “takes on the man” by living in a liminal social space that is both subversive and resistive to the patriarchal norms that saturate Japanese society.

Despite the charms of *Writing Pregnancy in Low-Fertility Japan*, the book does not live up to its claim to bring to the fore new critical insights into Japanese women's history, gender studies, feminism, popular culture and beyond. A primary reason for this is the tacit “anti-medical” critique that grounds this book. Following the trend in sociological writing in North America, the United Kingdom, and Australia, Seaman places her work within the broader critique of “doctor-centered medicine.” This kind of medicine is said to be reductive, objectifying, and dehumanizing. The doctor's monopoly of medical knowledge gives him (the holder of this power is represented by Seaman as being predominately male) the authority to dictate normative prescriptions on how the expectant mother should carry out her duties to the unborn child. In the process, the doctor summarily excludes the expectant mother from having a say in the management of her body. The sum result is that the experience of pregnancy in Japan as elsewhere is reduced to the vital signature of the foetus in the closed space of the mother's womb through the mediation of all kinds of instruments and dehumanizing forms of technology that alienate the expectant mother from the lived bodily-emotional experience of birth giving. Putting aside the thorny question of whether the medical model of power acts in the way Seaman purports (the issue is not as evident as Seaman would like us to believe), it is not clear that the power formations described are a universal feature of modernity, or the product of a sociocultural constellation specific to Japan.<sup>1</sup> Seaman further compounds this problem by conflating patriarchal power with the authority of the doctors that originates from their monopoly of medical knowledge. Seaman identifies doctor-centered medicine as the purview of older men. In her account, patriarchal power and the authority of the doctor blend into “He” who knows what is best for the unborn baby. While it is not unthinkable that doctors may embody outmoded forms of patriarchal Japanese tradition, the authority and power relations mobilized by patriarchy do not work or use the same power grid as modern forms of instrumental knowledge that Seaman identifies as constituting modern medicine. A clearer and more nuanced analysis of this issue would have greatly benefited Seaman's over-all argument.

Another unforeseen shortcoming of *Writing Pregnancy* is its historical reductionism. Seaman subscribes to the view that the “ideology of *ryōsai kenbō*” has determined gender relations since the Meiji period (pp. 163, 169). To argue that modern Japanese womanhood was obtained by a singular route, constructed on the basis of a general doctrine such as “good wife and wise mother” effectively silences the multiplicity of experiences born out of class, age, and place. Moreover, the author's overemphasis on women as docile transmitters of culture tends to give the impression that Japanese women did not have the ability to resist

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1 Osborne 1992.

this form of ideology, and inadvertently airbrushes from history the numerous and diverse twentieth-century Japanese feminist struggles on the issue of motherhood and childbirth.

Despite these reservations, *Writing Pregnancy in Low-Fertility Japan* is a delightful read, and will invigorate many to explore further the themes raised by Seaman about this thought-provoking genre of literature.

#### REFERENCE

Osborne 1992

Thomas Osborne. "Medicine and Epistemology: Michel Foucault and the Liberality of Clinical Reason." *History of the Human Sciences* 5:2 (1992), pp. 63–93.