

# Embodiment and Iconicity in Birth Narratives<sup>1</sup>

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## 1. Introduction

Looking at gesture and other embodied behaviors and their relationship to speaker performance can shed much needed light on understanding the full range of human communicative behavior. Haviland (2004) asserts that we often assume the gestures people routinely use in interactions are meaningful. While they certainly need not be, gestures are often iconic in nature. McNeill (1985) defines an iconic gesture as “one that in form and manner of execution exhibits a meaning relevant to the simultaneously expressed linguistic meaning” (p. 354). Furthermore, these iconic gestures can be an integral part of embodiment, which is generally expressed in the literature as the connection between mind, thought, and physical behavior.

Despite the relationship between gesture, embodied behaviors, and overall communication, “in most linguistic studies, the bodily movements that routinely accompany speech are usually dismissed as irrelevant or, more often, simply pass unremarked” (Haviland, 2004, p. 197). Gibbs (2003) further claims that while linguistic meaning is inherently embodied, most research ignores “the importance of people’s ordinary, kinesthetic experiences,” a neglect that “has seriously undermined scientific understanding of the relations between mind and body, and, more specifically, linguistic meaning and embodiment” (p. 2). Furthermore, Heath (2002) notes there is limited research on how “personal experience is revealed and managed, through visual and vocal conduct, within face-to-face interaction” (p. 598). Thus, this investigation is timely in its exploratory focus on how gesture, embodied behaviors, and kinesthetic experiences are related to linguistic meaning and communicative effectiveness in general.

The current study presents a discourse analysis of birth narratives, a genre chosen because of its potential for best capturing naturally occurring, spontaneous speech.

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Furthermore, by the very nature of the discussion and that fact that it inherently involves women's and babies' bodies, this genre encourages the use of iconic gestures and embodied behaviors. Therefore, this study will be grounded in the assertion that gesture is an important component of the utterances speakers produce in formulating explanations or descriptions and that it contributes to overall communication (McNeill, 1985; Kendon 1997, 2004). In my examination of the discursive practices employed by each participant, I will examine speaker performance in terms of spoken language as well as gesture (iconic and otherwise), embodied behaviors, and other non-verbal communication.

## 2. Methodology

I asked female participants to partake in a group discussion of "birthing stories." I explained that this topic was completely open-ended, and asked the women to describe giving birth to their own children (if applicable), witnessing someone else (i.e. a friend or family member) giving birth, hearing stories that had been told to them about their own or another's birth, etc. So while the women knew the general topic of my research pursuit, I did not, for obvious reasons, inform them that I would be examining their verbal and non-verbal communicative practices.

After obtaining oral and written consent from each participant, I established an informal setting in which they all could share their narratives. This group session was videotaped in a conference room on a public university campus. To begin the discussion, I reminded the participants of the topic and encouraged someone to start whatever narrative she felt comfortable with. Throughout the taping session, I did not further contribute to the discussion until it had come to a clear ending (evidenced by the lack of further discussion from any of the participants), at which point I thanked all of the women for their participation. Later I reviewed the tape, selected relevant clips best demonstrating discursive strategies employed by each participant, transcribed these selections, and performed a qualitative discourse analysis.

## 3. Data

The data for this investigation come from approximately 37 minutes of recorded speech from a narrative group discussion among 4 women. All of the data was in English, with the exception of a few vocabulary words, including *mole* (Jamaican) and *mollera* (Spanish) for fontanel, or the baby's "soft spot."

While the group in general was homogeneous in terms of gender, it is certainly worthwhile to note some of the similarities and differences among this group of women. Thus, the following table outlines self-reported demographic information for each participant:

Table 1: Participant demographics

Participant	Birthplace	Reported Ethnicity	Age	Marital Status	Number of Children
“Pilar”	Guatemala City, Guatemala	Guatemalan	31	Married	0
“Rory”	Weslaco, Texas	Hispanic	34	Married	3
“Elizabeth”	Changchun, China	Asian	51	Married	1
“Savannah”	Kingston, Jamaica	Black	32	Single	0

Three of the women are in their early 30’s, while Elizabeth is in her early 50’s. Also, three of the four women are married, with Savannah being the only single participant. Only Rory and Elizabeth have children (all biological), while Savannah and Pilar do not. Rory is the only participant born in the United States, while Pilar and Savannah moved to the states in their early childhood and Elizabeth moved in her early 30’s. Furthermore, although Rory self-identified as Hispanic and Pilar as Guatemalan, it became clear throughout the discussion that the women constructed a shared identity as native speakers of Spanish and as members of communities with similar beliefs about childbirth.

These women knew one another prior to the discussion since they are coworkers employed in the same office. Elizabeth is the immediate supervisor of the other three women, yet Pilar and Savannah hold higher positions than Rory. All the women appear to have a positive professional relationship, and also engage in occasional social functions outside of the office setting, such as holiday parties and end-of-term celebrations. Pilar and Savannah also seem to have a personal relationship both in and out of the office, and often spend time with one another outside of work-related activities. It may be of further interest to mention that the majority of the verbal data comes from Rory, who contributes the most to the interaction, while the least amount of verbal data comes from Elizabeth, who rarely contributes to the conversation.

#### 4. Analysis

Haviland (2004) states it is most appropriate to take a “non-subtractive view” of gesture that “integrates attitudes and movements of the body, first, into the full repertoire of interactive human communicative resources and, second, into the expressive inflection of language itself” (pp. 198-99). Furthermore, it is important to note that gesture is not just limited to hand movements, but can also entail other body movements like waving or raising of the arms, nodding of the head, moving the torso or shoulders, making facial expressions, gazing and making eye contact, and much more (cf. Haviland, 2004). Thus, my analysis will be based on the assumption that these types of gestures and embodied behaviors are in some way potentially meaningful to the discussion and serve as an additional resource to the spoken language the participants are using. I will focus my analysis on describing the types of non-verbal communication used by each participant and how these actions may have contributed to the overall meaning of the discussion.

Many gestures used by the women during the birth narratives may be understood to be iconic representations of different parts of and/or changes in the woman's and/or baby's body during pregnancy and childbirth. The following examples show a few instances of this type of embodied behavior. In each example, a relevant portion of the discussion has been transcribed with embodied behaviors noted in italics inside parentheses. For clarity, several still frames have also been included (also noted in italics as figures to be consulted). Each example is then followed by an analysis of the most pertinent embodied behaviors and iconic gestures.

(1) Natural delivery of the baby

- 1     Pilar:   . . . she doesn't know what it's like to deliver (*slides hands and*  
2               *arms forward; see Figures 1 and 2*) a child the "natural way."  
3               (*makes quotation gesture; see Figure 3*)  
4     Rory:   Yeah, the natural way, yeah.  
5     P:       All six . . .  
6     Eliz.:   All six?  
7     P:       All six, uh, yeah. In Guatemala she had three C-sections . . .



*Figure 2: Slides hands and leans body forward*



As she discusses her mother's unfamiliarity with natural childbirth, Pilar's hands, arms, and upper body appear to contribute significant meaning to what she says. She begins with her elbows at her side, hands in front of her on the table with palms facing one

another. As she says the word “deliver” (line 1), she begins to spread her hands and arms apart as she slides them forward along the table surface in front of her, all while leaning her upper body forward to extend her arms fully in front of her (see Figures 1 and 2). Pilar uses her own body likely as an iconic representation and/or demonstration of the mother’s parted legs and the baby exiting the birth canal during the birthing process. Furthermore, in line 3 Pilar’s use of “air quotes” (see Figure 3)—a common iconic gesture in American society—helps indicate the significant difference between a vaginal birth (in her words the “natural way”) versus a birth via C-section.

Later in the discussion, the women discuss various difficulties with giving birth. In the following example, Pilar tells a story about a friend of hers whose cervix did not open wide enough for an easy delivery. Rory then contributes general information to the discussion stating that this is a common problem among a number of women.

(2) Opening of the cervix

- 8 Pilar: . . . just couldn’t deliver, the cervix (*raises hands in slightly*  
 9 *rounded position*) wouldn’t open.  
 10 Rory: Yeah, yeah (*shaking head up and down*), that happens in a lot of  
 11 women, the cervix is not, you know, it won’t open as as much as it’s  
 12 supposed to (*raises hands in rounded position; see Figure 4*), as  
 13 wide as it’s supposed to (*makes opening larger; see figure 5*)  
 14 because of their bones, shape of their— (*hands move from rounded*  
 15 *position to downward curving motion; see Figure 6*)  
 16 P: Right.  
 17 R: —their cervix.  
 18 P: Well, she’s tiny too.  
 19 R: Yeah?  
 20 P: You know, kinda short, you know. (*places hand above tabletop,*  
 21 *then moves them downward closer to tabletop*)



Figure 4: Hands raised in rounded position



Figure 5: Hands in open, rounded position



Figure 6: Hands moved in downward curving movement

In example 2, Pilar and Rory both use embodied behaviors during their narratives. Based on the accompanying verbal data, when both women raise their hands in front of them in a rounded position (Pilar in lines 8-9, Rory in line 12-15) it is likely indicative of the shape of woman's cervix. In Figures 4 and 5, Rory first creates the iconic shape of the cervix and then enlarges the shape she has created, demonstrating the cervix opening wider as delivery progresses. Finally, in Figure 6 she changes her hand position, holding both hands shoulder width apart and then making a curving, downward movement (lines 14-15). Since this gesture co-occurs with her noting of a woman's shape, it is a further indication of the rounded cervix and the curvature of a woman's hips.

Pilar also uses embodied behaviors when she explicates the body type of her friend. After making verbal reference to her friend's tiny stature (line 18) and height (line 20), she holds her hand a certain distance from the tabletop. She then moves her hand downward, shortening the distance between it and the tabletop (lines 20-21). This iconic gesture indicates a measurement of the height of her friend.

In line 10, Rory shakes her head in an up and down motion, a type of head movement commonly understood in American society to be a sign of agreement. Head shaking may also be indicative of attention being paid to Pilar's narrative, or even as a sign of confirmation/validation of what she is saying. Overall, the shaking of her head in addition to her positive verbal response allows the other participants to understand Rory is in agreement with Pilar's statements through both verbal and non-verbal behaviors.

In the following interaction, the women discuss the fontanel—or what is commonly known in American English as the “soft spot”—a small place on the back of the baby's head that is to be carefully protected until it fully develops and hardens like the rest of the skull. In lines 25-32, however, there is discussion of other names for the “soft spot,” such as *mole* in some Jamaican dialects and *mollera* in Spanish. As in the previous example, Rory and Savannah's embodied behavior (affirmatively shaking their heads in lines 24-25) displays agreement with what is being discussed and confirmation of the information communicated. Furthermore, in lines 26-27 and 31, Savannah and Rory both look to others in the group, which could indicate their seeking confirmation of their narratives.

### (3) The baby's “soft spot”

- |    |       |   |
|----|-------|---|
| 22 | Sav.: | ... they have like a soft spot ( <i>points to the back of her own head</i> )    |
| 23 |       | on the baby's head.   |
| 24 | Rory: | Yes. ( <i>shakes head up and down</i> )   |
| 25 | S:    | ( <i>also shaking head up and down</i> ) They call it the mole ( <i>again</i> ) |

- 26 *pointing to her own head*). Do you call it that? (*looking around to*  
 27 *others*)
- 28 Pilar: Um, no but we have a soft—
- 29 R: Yeah. We call it, yeah.
- 30 Eliz.: There is?
- 31 R: Mollera. Well, in Spanish that's what it's called (*looks to Pilar*),  
 32 but in English it's just a soft spot.
- 33 S: And it's like, "Always cover! Cover the baby's mole! Cover the  
 34 baby's mole!" (*extends clenched hands in front of her and moves*  
 35 *them repeatedly from side to side*) when the baby's going (*laughing,*  
 36 *but with a furrowed brow*)
- 37 R: They also, um, would say that if, you know, if, uh, the baby sucks  
 38 on the pacifier or the bottle too hard (*raises clenched hand with*  
 39 *extended thumb to her mouth*) that it would fall. (*tilts her head down*  
 40 *and makes downward hand gesture; see Figure 7*) Like, I don't  
 41 know what, you know, it would, uh, you could feel like a deep—
- 42 S: Ooohh . . .
- 43 R: —you know (*makes dipping hand gesture near top of head; see*  
 44 *Figure 8*)
- 45 S: Crevice?
- 46 R: Yeah.
- 47 S: Huh.
- 48 R: So that you would have to take the baby to, um, these "ladies"  
 49 (*makes "quotation mark" gesture*) who do the curing and stuff and  
 50 have to turn the baby upside-down (*arms outstretched in front of*  
 51 *her, hands slightly curved in, then twists wrists in toward her; see*  
 52 *Figure 9*), you know, on his head, and kinda just pat his feet (*one*  
 53 *arm outstretched in front of her, hand in cupped position, moving*  
 54 *other hand up and down above it; see Figure 10*) and try to get it  
 55 back up again. (*waves hands around her head; see Figure 11*) So. . .  
 56 there's a whole bunch of stuff.



Figure 7: Identifying the fontanel



Figure 8: Fontanel falling gesture



Figure 9: Turning the baby



Figure 10: Patting the baby's feet



Figure 11: Raising of the fontanel

Unlike the previous examples where gesture and embodiment were indicative of the woman's body during childbirth, the embodied behaviors in example 3 illustrate the baby's body. Savannah and Rory point to places on their own heads (see Figures 7 and 8) to represent the various places on and physical changes to the baby's head. This type of iconic gesturing can be noted in lines 22, 25-26, 39-40, 43-44, and 55 above. Furthermore, Savannah prefaces her gestures demonstrating the baby's facial expressions by saying, "when the baby's going" (line 35), a syntactic construction used to set up a retelling and/or description of some event. This syntax and her own following laughter and facial expression with a furrowed brow (lines 35-36) may be indicative of fright and/or confusion seen on the baby's face after being covered as Savannah has described. In her explanation of how Jamaican culture handles the baby's soft spot (lines 33-36), her hand movements indicate covering an imaginary baby in front of her, specifically covering the "mole" to protect the baby's head.

Rory goes on in this particular narrative to discuss Hispanic beliefs about the "mollera" (lines 37-56). She begins by explaining the belief that if the baby sucks too hard on a pacifier or bottle, the *mollera* will fall in. In lines 38-39, she puts her own thumb to her mouth as a demonstration of the baby's sucking action. She also explains attempts to cure this problem. In lines 50-55, she, like Savannah, extends her arms in front of her and exercises a number of gestures and embodied behaviors to indicate various actions being taken upon an imaginary baby in front of her. Thus, Rory is embodying the actions of the healing "ladies," including turning the baby upside-down (see Figure 9) and patting the baby's feet (see Figure 10). She concludes her story by demonstrating the raising of the fontanel (See Figure 11) as a result of the actions performed on the baby.

Even though all the women are in agreement that a fontanel does in fact exist, there is still potential for confusion because of the different terms used by each woman to describe such a place. Furthermore, not only do the women hold varying beliefs in general about the baby's "soft spot," but they also have differing ideas of how to protect it, things that can go wrong with it, and ways to solve any problems with it. Therefore, embodied



behaviors aid in their effective communication of this information in their narratives. Their verbal expressions in conjunction with the iconic gestures each woman uses enhance their narratives and add clarity to the topics being discussed.

In example (4), it is again evident that embodiment and iconicity are being used to enhance and clarify the narrative. Here, Pilar further describes the process her friend went through during labor and delivery:

(4) Stages of the birthing process

- 57 Pilar: The doula was there, the midwife was there, but by the time the  
 58 paramedics got there—  
 59 Rory: (unintelligible)  
 60 P: —the baby (*opens arms in front of her; see Figure 12*) was pretty  
 61 much halfway, you know, out (*repeatedly slides arms forward*  
 62 *along table top*) and they just kinda had to pull it (*clenches fists,*  
 63 *placing one on top of the other and pulls arms back along the table*  
 64 *top toward her; see Figures 13-14*)  
 65 All: Oooohhhhh! (*eyes wide and nodding heads up and down*)



Figure 12: Open arms



Figure 13: Grabbing the baby's feet



Figure 14: Pulling the baby out

In line 60, Pilar begins with her arms spread apart in front of her on the table (see Figure 12), an iconic gesture somewhat symbolizing the parted legs of the woman giving birth. Then in lines 61-62, she repeatedly slides her arms forward to demonstrate the baby completing the birthing process. Finally, in lines 62-64, Pilar's gesture of pulling her hands back toward her (Figures 13 and 14) embodies the paramedics' actions as they help the delivery by pulling the baby the rest of the way out. The verbal response, facial expressions, and the nodding of others' heads (line 65) clearly demonstrate that Pilar's

precise embodied behaviors have effectively enhanced her narrative and assisted the other participants' understanding of the situation being described.

In addition to the examples discussed above, there were numerous other occurrences of embodied behaviors and iconic gestures used during the narratives. Other examples of embodiment include demonstrations of inducing labor, showing the parted legs and exposure of the woman during delivery, representing a full and/or breaking water sac, crowning of the baby's head, and more.

## 5. Conclusion

The gestures analyzed in this data are often iconic in nature, and the significant use of embodied behavior to enhance and clearly organize details of the narratives was as an integral part of the effective communicative practices of each participant. Each woman shared her narratives in a number of ways, including personal experience, formal evidence, and anecdotal information, although Rory seemed to use these tools most effectively. Her personal experience in giving birth three times, as well as her retelling of a number of accounts from others, appears to be a significant factor in helping her control the genre and be most communicatively effective in her narratives.

Despite my best efforts, it was extremely difficult to obtain completely natural discourse, as participants were obviously aware of my presence (cf. Labov's (1972) "observer's paradox"). Many of the narratives began a bit contrived, as the participants were unsure of whether or not they should continue talking. However, due to the personal nature of the topic, I was able to acquire a significant amount of realistic data. While diversity among the four participants was useful, some homogeneity in the group could have had a positive effect on the data. Future pursuits in this area of research could include a more in-depth analysis of embodiment, power and stance, control, turn-taking, agreement/disagreement, assessment, and the like. It could also be very fruitful to explore the relationship between age and authority, as well as examining men's use embodied behaviors.

Even with a small number of participants creating just over one-half hour of data, these birth narratives provided an extremely rich data set with which to conduct this qualitative discourse analysis. I have shown how participants employ verbal and non-verbal communicative acts as resources for obtaining information and gaining clarification of the narratives. Overall, I have shown how speech and embodied behavior are used together, or as Haviland (2004) states, how "word and gesture exhibit complementary meaningfulness" (p.218). Thus, the current study succeeded in analyzing the relationship between embodiment, iconicity, and communication, as well as the role these discursive practices have in establishing linguistic meaning.

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