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Cisgender men's narratives about their desires to be pregnant: Re/Constructing reproduction, gender, and their entanglement

Abstract

Pregnancy capacity, and gestational desire are shared by people of different genders and sexes. Yet, gestational embodiment and subjectivity are feminised in the normative cisheteropatriarchal pregnancy imaginary where cisgender non-intersex women are constructed as essentialised pregnant subjects. An important part of this normative pregnancy imaginary is the preclusion of men's desires to be pregnant, and the medico-socio-cultural construction and enforcement of men as non-gestational and non-uterine subjects. This construction of masculinity and manhood is reflected in much pregnancy-related research conducted among cisgender men, but is subverted by research on trans men's and masculine people's pregnancy and birth experiences, and by *some* depictions of cis men's pregnancies in some novels, fanfiction and films. Set against this backdrop, in this article we report on the results of a qualitative study conducted in South Africa in which six cisgender men with diverse identities and geo-locations were asked about their desires to be pregnant. Using a narrative-discursive approach, we analyse micro-narratives constructed by participants in which they speak about their desires to be pregnant and/or gestational parents. We argue that their micro-narratives both challenge and reproduce normative discourses on masculinities and sex/gender more broadly, pregnancy, reproduction and parenthood, and their presumed entanglement.

Keywords: Cisgender men, pregnancy desires, gestational parenthood desires, narratives, discourses, masculine subjectivities

Introduction

Intersex and non-intersex people of many genders – including non-binary people, trans and cis men¹ and masculine people, and trans and cis women and femmes – desire to be pregnant (Moseson et al., 2020), to experience pregnancy itself, and/or to be gestational parents. Yet, this gender and sex diversity is often obscured by a normative pregnancy imaginary that conflates non-intersex cis womanhood and femininity with gestational capacity, gestational experiences, and gestational desire (Karaian, 2013; Moseson et al., 2020; Radi, 2020; Rioux et al., 2022). Such normative ideas about gestational subjectivity² (seek to) regulate who can and does become pregnant, and who can and does *desire* to be pregnant. For men, who are the focus of this article, Toze (2018) powerfully demonstrates that this normative discursive knowledge production on pregnancy and gender co-constructs and co-enforces masculinity and manhood as the *impossibility* of becoming pregnant. It also, and of particular interest here, co-constructs and co-enforces masculinity as an *absence* of the *desire* to be pregnant.

Scholarship on trans men and trans masculine people's pregnancy experiences has been vital to the construction of a counter (gender- and sex-inclusive) pregnancy imaginary. Firstly, in visibilising the various reproductive harms perpetrated against trans men and masculine people. Such reproductive harms are evident in, for example, their documented experiences of cisheteronormative and anti-trans pregnancy-related healthcare (including antenatal and abortion care) designed and implemented around the medico-socio-cultural imagining of pregnant people as cisgender non-intersex women (e.g., Falck et al. 2020;

Moseson et al., 2021; Riggs, Pfeffer, Pearce, Hines & White, 2020; Strangio, 2016). These harms are also evident in gender recognition policies and legislation that require, and medical practices that demonstrate a preference for, the sterilisation of trans people with uteri (e.g., Honkasalo, 2018; Toze, 2018). Secondly, this scholarship floodlights trans men and masculine people's experiences, including their joy, in being gestational parents and caring for their children (including chestfeeding) (e.g., MacDonald et al., 2016; White, Hines, Pfeffer, Pearce & Riggs 2022).

In contrast to trans masculinities studies' contributions to the field of men and masculinities, much of the work on cisgender men and pregnancy has tended to keep in-tact the normative idea of masculinity as non-gestational and non-uterine. Cisgender men's procreative desires tend to be implicitly but tightly circumscribed within these normative discourses around gender, sexuality, and (gestational) family-making. For example, in scholarship on reproductive bioethics where uterine transplants and the possibility they present for various people, *including* cisgender men, to carry a pregnancy are discussed, cis men's desires are implicitly constructed as 'trivial' or 'superficial', and/or 'abnormal' (e.g. Robertson, 2017; Sparrow, 2008), or as only intelligible for cisgender men who are gay and/or single (e.g. Alghrani, 2018; Robertson, 2017). And psychoanalytic scholarship on "womb envy" similarly understands men's procreative desires within a cisheteropatriarchal gender frame. Originally coined by Karen Horney, the term has been used by psychoanalysts to describe cisgender men's envy towards procreative abilities (e.g. menstruation, lactation, pregnancy, birthing) that are normatively constructed as tied to the reproductive capacities of wombs, vaginas, and breasts which have themselves been feminised (Bayne, 2011). The term originally emerged through Horney's psychoanalytic work with cisgender men, where their fantasies of embodied pregnancy, birth, and procreation were a prominent theme of therapy. Read within the psychoanalytic framework, the fantasies and desires of cisgender

men to menstruate, be pregnant, birth children and feed them via lactating breasts, have typically been problematised: interpreted as ‘symptoms of pathology’ and as the possible ‘root cause’ of men’s misogyny and domination (Bayne, 2011).

In media and the creative arts, which have emerged as prominent sites of discursive knowledge production on cis men’s pregnancies, cis men’s pregnancies have been depicted in entertainment films (Parker, 2014), creative literature such as novels and fanfiction (Åström, 2010; Parker, 2014), staged celebrity pregnancy photo shoots and videos on Instagram (for example musician Lil Nas X (see Sanders, 2021), and performative art and art installations (Ingram-Walters, 2016). A significant pattern in media representations of cis men’s pregnancies is a cisheteropatriarchal framing of cis men’s pregnancies as comic, fantastical, and/or monstrous and horrific (Åström, 2010; Parker, 2014). Discursive productions that construct cis men’s pregnancies as comic imply an unintelligibility/ridiculousness, while those that produce cis men’s pregnancies as monstrous and horrific construct them as emasculating and therefore threatening to men, as an appropriation and erasure of cis women’s experiences and therefore threatening to cis women, and ultimately as disruptive of the normative gendering of reproductive roles and therefore as threatening to society.

Thus, discursive productions of cisgender men’s gestational desires and experiences tend to be (implicitly) predicated on the taken-for-granted normative idea that cisgender men categorically do not, will not, cannot possibly, and perhaps ‘*should* not’ (want to) become pregnant and/or be gestational parents. Such harmful constructions of cis men’s pregnancies and gestational cis fatherhood are oppressive in reinforcing the patriarchal gender order; through abnormalisation, they constrict men’s reproductive (including their parental) lives, and confine their gendered and parental ways of being. They also contribute to the rigid and continued reproduction of birth, pregnancy and gestationality as feminised and maternalised realms.

Creative literature such as novels that depict cis men's pregnancies as arising through non-fantastical means (including sexual intercourse) (Parker, 2014), and fanfiction depictions of cis men's pregnancies as life-affirming and commonplace within fantastical sci-fi worlds (Åström, 2010) destabilise this pregnancy-as-cis-female-experience by disrupting the narrative that cis men's pregnancies are unusual, and have monstrous or horrific consequences. Yet, even within these representations, patriarchal normativities sometimes remain. For example, in science fiction fanfic in particular, depictions of cis men's pregnancies are usually bounded by normative rules for cis masculinity: non-caesarean births and breast-/chest-feeding by cis male characters are seen as 'un-manly' and therefore taboo among some writers (Ingram-Waters, 2015). Furthermore, science fiction as a prominent discursive site for cis men's pregnancies and gestational desires, particularly where fantastical explanations for cis men's pregnancies are deployed, may undermine this subversion with implicit framings of cis men's pregnancies and gestational desires as strictly fantastical and impossible. Indeed, some scholarly writing that analyses depictions of cis men's pregnancies frame cis men's pregnancies as unusual, whether by essentialising pregnancy as a 'female experience' and/or by describing cis men's pregnancies as 'experimental' (see for example Åström (2010), Ingram-Waters (2015), and Maher (2008)). In tandem with an absence of research that visibilises cis men's gestational desires and experiences, the effect is to obscure and erase the reality of cis men's desires and experiences. For example, when not subjected to forced sterilisation via intersex genital mutilation (Maquba & Schoole, 2019), some intersex cisgender men do become pregnant and gestational parents (Moseson et al., 2020; National LGBTQIA+ Health Education Centre, 2020). And current technologies (such as womb transplants) already mean that we live in a world where non-intersex cis men *could* experience pregnancy and gestational parenthood were this technology made gender- and sex-inclusive. Indeed, some of the trans criticism

against Lil Nas X for using his staged pregnancy to launch his 2021 album, point to how his launch's reliance on men's pregnancies as 'entertainment' and as 'shock-factor' undermines the actual historical and contemporary realities of men's pregnancies (Sanders, 2021).

Building on and inspired by scholarly and literary work that affirms and takes seriously men and masculine people's pregnancy desires and experiences, we aim to contribute to research on men and masculinities, pregnancy, and family-making, by reporting on our own study on some cisgender men's desires to be pregnant, experience pregnancy gestationally, and/or be gestational parents. By analysing six cisgender men's micro-narratives, we will show how their engagement in body-talk both re-produces and challenges normative discourses and canonical stories about pregnancy, reproduction and parenthood, gender and sex, and their entanglement. In doing so, we see this article as contributing to the necessary disruption of restrictive, cisheteropatriarchal ways of writing about and understanding gestational desires and gestational family-making efforts as innately (cis) feminine, (cis) female, or definitive of (cis) womanhood. By visibilising some cis men's gestational desires, we contribute by expanding understandings of, and possibilities for, gendered and gestational subjectivities, and gendered and gestational family-making.

Materials and Methods

Our study sought to both visibilise and analyse non-trans men's narratives about their desires or wishes to be pregnant/experience pregnancy gestationally, and/or be a gestational parent. Of course, some cis men who are intersex do get pregnant (Moseson et al., 2020; National LGBTQIA+ Health Education Centre, 2020). Our specific interest lay in the ways that cis men without the reproductive capacity to gestate, construct and experience their desires or wishes. To do so, we were guided by the following research questions: (1) what discourses and narratives are constructed? What positionings are taken up and/or resisted? What subjectivities are described and constructed? (2) In what ways do these discourses and

narratives challenge and/or reproduce patriarchal and repro-normative understandings of and expectations around gender(s) and sexualities, reproductive desire(s) and reproduction/pregnancy, and parenthood? And (3) in what ways, if at all, do participants speak about their bodies in their talk?

Upon receiving ethical approval, the first author successfully recruited participants in two ways. In the first strategy, the first author asked friends and close family to share the research flyer with non-trans men that they knew. The second strategy entailed sending the research flyer to three email networks that the first author is a part of: two are local to South Africa (one academic, and one activist; the work of both coalesce around sexualities and reproduction) and the third has international membership and is an academic network. The final strategy, posting a call for participants on the first author's personal Instagram, LinkedIn, Twitter, and Facebook accounts, generated some interest but proved unsuccessful.

Participants were recruited if they were non-trans men who had ever wanted to or wished that they could be pregnant/experience pregnancy, were 18 years or older (for consent reasons), and would be comfortable being interviewed in English. Initially, the recruitment strategy focused on cis men who were living in South Africa at the time (but did not have to be South African), which yielded a total of five participants. However, in an effort to recruit more participants, this was broadened to anywhere in the world. Thus, the research flyer was subsequently shared with an international academic list server, resulting in an additional participant being recruited.

A small but diverse group of six cisgender men were recruited for the study. In terms of geographic location, five men were living in South Africa at the time of data collection, and one in the United Kingdom. Racially, three of the men are black and three are white. The relationship status of the men varied, with five of the participants expressing during

interviews that they were in a romantic relationship: one was in a relationship with a man and four were in relationships with women. Of those men who were in a relationship, one was married, and another was divorced and seeing someone new, and both were fathers (one to young children, and the other to adult children). Finally, three participants provided their ages, with the youngest of these being 27, and the oldest being 55. Thus, there was some generational diversity, too.

With consent from the participants, data was collected via semi-structured individual interviews which took place telephonically or online (without video). All interviews were conducted by the first author who is a black, queer, trans-nonbinary South African. Interviews proceeded with a narrative-inducing question: ‘Please tell me about your desire or your wish that you could be pregnant or experience pregnancy yourself’. Subsequent questions asked participants about the first time they ever wanted or wished that they could be pregnant, what being pregnant would mean for them, whether they had ever thought about what being pregnant would be like and whether they had ever imagined themselves pregnant, among other topics. The interviews ranged in duration from 18 mins to 48mins in length. Interviews were audio recorded with permission, and transcribed verbatim, using pseudonyms that were chosen by participants. Transcription conventions are used in the extracts (underlined: participant emphasis; *italics*: word not in English; – : self-interruption; *words between asterisk* : said with laughter in voice; [words in square brackets] : contextual information).

We use a narrative-discursive approach (author, date; Taylor & Littleton, 2006) to analyse the data. Narratives, identified here as stories constructed around causality and/or temporality, are both a resource to be drawn on, and a construction made up of other discursive resources. We refer to two types of narratives: (1) micro-narratives, which are small, localised, individualised stories (Blommaert, 2006), and (2) canonical narratives,

which are normative socially established and widely available stories that impart expectations for how things are and should be (Reynolds & Taylor, 2005). Described as socially accumulated ideas, images, associations, metaphors, and interpretive repertoires (Taylor & Littleton, 2006), discursive resources are socially available and socially accumulated commonalities in talk that pre-exist any single telling (Reynolds & Taylor, 2005). In our own analysis, which is itself a story, discourses and canonical narratives are discursive resources drawn upon by participants to construct micro-narratives. Importantly, following De Fina and Georgakopoulou (2015, p. 3), our analysis is informed by an understanding of “how the telling of stories shapes and is shaped by ideologies, social relations, and social agendas...[how] narratives are shaped by contexts... [and] also create new contexts by mobilizing and articulating fresh understandings of the world, by altering power relations between peoples, by constituting new practices”.

We use the concept of “body talk” as it featured in participants’ constructions of their imagined and desired pregnant body and bodily experiences. We understand body talk as socio-culturally-bounded interpretations of the body (Suen, 2017) that encompass what it does (Latour, 2004 as cited in Oleschuk & Vallianatos, 2019), expectations about what it should do and how, as well as what it means to live in/with a body (de Ruiters, 2021). Body talk also includes constructions of the body as a “site of relationality...a locus of relation-making” (Wierzchowska, 2021, pp. 92-3), enabling and shaping relations between self and others, as well as with the self. Finally, body talk “provides insights into popular imaginaries of gender” (de Ruiter, 2021, p.121), drawing from and re-constructing/-shaping understandings of genders, gendered bodies, and embodied genders.

To analyse the data presented here, we followed a two-stage iterative process. In the first stage we read and re-read individual accounts, working *within* each interview to identify discursive resources and micro-narratives. We read each participant’s responses to individual

questions, paying attention to whether a micro-narrative was constructed in the response. In this first stage we titled each micro-narrative (many were generated) using participants' own words that we felt captured the 'essence' of each micro-narrative. During the second stage, we worked *across* participants' interviews to identify similarities and differences in the micro-narratives. This stage involved making decisions to collapse some micro-narratives together (based on their over-arching similarities), and to separate out others (based on differences that were, in the end, significant). It is important to note that even when micro-narratives were similar enough to be collapsed, there were sometimes differences in the discursive resources used by participants to construct the micro-narrative. Furthermore, micro-narratives were sometimes constructed by one participant only, although most were constructed by more than one participant.

Findings

In the analysis that follows, we focus on micro-narratives in which participants *explained* their desires to experience pregnancy gestationally for the sake of the gestational experience itself and/or gestational parenthood. In doing so, we call attention to the discourses, and canonical narratives drawn on by the cisgender men in our study, as well as their body talk. We present and analyse our data in the following micro-narratives: (1) 'To raise those children like a mother', (2) 'I wanted to see myself change/ 'I would like to see my body changing', (3) 'All the highs and lows'/ 'From start to finish, warts and all', (4) 'You know, there's a special bond between a mother and a child', (5), and 'So that we feel what women feel'/ 'How would I have coped?'

'To raise those children like a mother'

For one participant, the desire to be pregnant and experience pregnancy was described, in part, as a desire to mother children.

Ja [Afrikaans: yes], it's because I like children. I wish was like— I wish I was a woman (like I was the one making) children, you understand? Because I can [raise] those

children like a mother or like a woman because normally I like to live with children and I [would] like to be as if I were a woman like to have big breasts so that I can breastfeed those children *myself*. No, not a woman, like as if I was the one who was breastfeeding them, I was the one who was maybe putting them on my back when they're crying. Or even if when I do maybe something like if maybe I'm not breastfeeding that I can do maybe a bottle for them [give them] the milk to feed them. That's what I wanted to do as a man. (Mambane, black, 42, married to a woman, father of two, South Africa)

At first framing his desire to be pregnant as a desire to be a woman, Mambane clarifies that what he wants is to be “the one making children”, to “raise those children like a mother or woman” but “as a man”. In this micro-narrative, Mambane describes his identities, as a man and parent who loves being around and caring for (his) children, as an important context for his desire to mother. Motherhood here is not constructed as an identity, but as a set of practices, a way of *caring* for children (Wierzchowska, 2021): (“breast”-)feeding them, and consoling them when they cry. In constructing this micro-narrative, Mambane is initially caught up in, constrained by, and reproduces discourses that essentialise, gender, and sex these caring activities as practices that (cis) women do, and that (cis) men do not do. Within these discourses, only cisgender women are capable of pregnancy and have breasts/a chest that produce(s) milk. And wanting to be pregnant, and to *nurture* children (both physically and emotionally) is essentialised and gendered as feminine, intelligible only as a desire to *be* a woman.

At the same time, however, Mambane's micro-narrative challenges the normative gendering of parenting/caring for children, particularly in a way that seems to differ from the re-framing of fatherhood around caring masculinities where men who are parents take on emotional care (Hunter et al., 2017; Hunter et al., 2020; Ratele et al., 2012). In his micro-narrative, mothering is a set of caring and nurturing practices that can be desired and taken up by people who are *not* women, including men (Brydon, 2009). Mothering is constructed as a

transgenerational relationality of care (Wierzchowska, 2021) and nurturance that begins during pregnancy and extends beyond that to encompass child-rearing: while he desires a very particular embodied transgenerational relationality of care that is socio-culturally feminised as mothering, it is ultimately described as ungendered by decoupling mothering from womanhood, although this care is described as facilitated by having a body that is capable of breast/chest-feeding. In doing so, Mambane's micro-narrative echoes the socio-cultural prioritisation of breast/chest-feeding over bottle-feeding, and the special significance given to it in the child-rearing imaginary (Williams, Kurz, Summer & Crabb, 2012).

Importantly, by desiring to mother "as a man", however, Mambane explodes the maternalisation of child-rearing and the *desire* to nurture children, precisely by situating them within (cis) manhood, and masculinity. Nevertheless, fatherhood and non-economic nurturing as are implicitly *reinforced* as mutually-exclusive (Hunter et al., 2020).

'I wanted to see myself change/ 'I would like to see my body changing'

For two of the cis men in our study, desires to be pregnant were in part grounded in a desire to experience the physical changes that are socio-culturally constructed as normative to pregnancy. In their micro-narratives, both Paul and Mambane draw on a canonical narrative about pregnancy that conveys expectations for its trajectory.

Yes, I've imagined that. I mean you know sometimes from being skinny like if I had to put it that way or slender, you know when you are pregnant your body changes and eh although ladies don't react the same when it comes to [the] body and eh *ja*, the— now you have to buy new clothing because now you can't fit in certain clothes. *Ja* like the change in the body of being, like, now your body has to increase with the big tummy of course. *Ja*, or— and — even, you know, I don't know whether I'm right, but I think I heard that even when the body starts to change, sometimes it can be it doesn't stay constantly. Even after getting better, sometimes the body doesn't go back [to] the way you were. *Ja*, so, even that as well I've imagined *ukuthi* [isiZulu: that], *eish* [South African: exclamation], now I have to— there will be a before and after of *me, you know, that kind of, you were like this, now, you know you are like this because of* {chuckling/laughing} this young one you've just given birth [to]. So, *ja*. *Ja*, I've

imagined that, all those kinds of things. And again my body can go back like where it was and it might never go back. So, *ja*, with all the extra expenses I must have now, *ja* because of that, so, *ja*. (Paul, black, relationship status undisclosed, no children, South Africa)

I wanted to see myself change, you get my point? [...] like my face becoming big a little bit, breast becoming eh a little bit bigger because you know when you're pregnant then you start to have— your breasts are starting to develop milk. *Ja*, starting to develop milk inside and then you become a little bit fat sometimes. I don't know about those who are *skraal* [Afrikaans: slim]. But every time when you're pregnant your body changes, everything changes, unless if sometimes you become sick and things like that, because sometimes some of them they become sick. So, I wouldn't like to be sick myself. So, I would like to see myself maybe, see my body changing, becoming fat, things like that. (Mambane, black, 42, married to a woman, father of two young children, South Africa)

In the first of these extracts, the changes described centre on weight gain/loss. Initially, Paul's pregnant subject is a cisgender woman, thus reproducing a cispatriarchal sex/gender discourse that has cisgender women as its normative subject. And, using a medical discourse of pregnancy-as-illness, Paul constructs pregnancy fatness as a normal and almost inevitable "reaction" to pregnancy. This normalisation goes against patriarchal, anti-fat, and post-feminist discourses which increasingly pathologise fatness during pregnancy (Nash, 2011; Parker & Pausé, 2019). Importantly, Paul describes a 'return' to a *not-fat, pre-pregnancy* body as something that is not guaranteed and that is *outside* of pregnant people's control ("sometimes the body doesn't go back [to] the way you were"): fatness, which is normatively constructed as *temporary* during pregnancy, may persist post-pregnancy. Notably absent is the normative injunction to *work* on the body to *shed* pregnancy fatness (Chatman, 2015). This normalisation of pregnancy fatness is extremely limited, however, as anti-fat discourse is nevertheless reproduced. In the canonical pregnancy narrative Paul draws on, the normative trajectory of pregnancy is such that non-fatness is idealised both before and after pregnancy, and post-pregnancy bodies *usually* 'return' to a not-fat pre-pregnancy state, thus re-inscribing fatness as necessarily temporary (Underwood, 2021). And although the

tenderness and joy that Paul shows towards his imagined, fat, recently-pregnant body is important for the ways it contradicts the self-hatred required by anti-fat systems (including discursive ones), this tenderness and joy seems to be bounded by the fact that his fatness is caused by the pregnancy/child he gives birth to. Thus, fatness is constructed as desirable only when it ‘has purpose’.

For Mambane, pregnancy fatness is very clearly desired as an important part of experiencing pregnancy, experiencing himself as a pregnant man, and as an expanding, changing body. Again, this normalisation of fatness is bounded, not only by pregnancy itself but also through the use of qualifiers (“big a little bit”; “a little bit fat sometimes”).

Reiterating his desire to experience himself as a giving, nurturing body through the experience of breast-feeding, Mambane once again challenges patriarchal gender discourses that construct nurturance as an essential feature/quality of (cis) femininity and womanhood and that construct its absence as definitive of (cis) masculinity, and manhood. However, the biological/physiological account Mambane gives is also reflective of a canonical narrative of pregnancy where breast(/chest)-feeding is taken-for-granted as something that people who have given birth *can* (always) do (Marshall & Woollett, 2000). Mambane’s acknowledgment that people sometimes experience illness due to pregnancy, disrupts the canonical narrative which normatively constructs pregnancy as a happy, pleasant time (Millar, 2017; Staneva & Wigginton, 2018). Furthermore, within his narrative, *not* gaining weight during pregnancy is partly due to illness (or being “skinny” pre-pregnancy). However, this disruption is limited: in his micro-narrative, most people do not become sick as a result of pregnancy, thus pregnancy remains idealised as a happy time.

‘All the highs and lows’/ ‘From start to finish, warts and all’

In this micro-narrative, three of the cis men wanted to experience pregnancy in its entirety, both the good and challenging aspects of being pregnant. Although they constructed

pregnancy as challenging in some respects, it is notably framed as desirable overall as the challenging aspects of pregnancy do not detract from its desirability. Furthermore, pregnancy is constructed as something that *should* be experienced in its entirety; the good cannot be separated from the bad, and the bad is to some extent desirable too.

Ja, when my sister was pregnant. *Ja*, all the {chuckles} all the attention she was getting and all the highs and lows during that pregnancy. *Ja*, so, I just asked myself if that can be me, you know? I wish I was in that [...] the way now that even the clothing changes. In that period of time, she can't wear what she normally wears. Another low would be she can just snap out of the blue like you'll be happy now and all of sudden after a few minutes the person has changed. *Ja*, the moodiness. That's something that happened to my sister, *neh* [Afrikaans: right]? {chuckles} *Ja*, is there any low which I've left out? *Ja*, another thing would be the way she wants something to be done like if she wants you to do something, she wants that thing to be done like immediately. *Ja*, well, the highs would be where she was being taken, like for example, like an egg, like she'd be taken care of and *ja*, all that like she'd be, like, people would be offering things to her, to pamper her, like, people wouldn't want her to do heavy things while they are there. Like, she will—generally, she was taken care of {laughs} *ja*, she was taken care of in every angle, you know? *Ja*. So, she didn't have to struggle in getting other things done or in getting things that she wanted, you know? *Ja*. She was being taken care of (Paul black, relationship status undisclosed, no children, employed, South Africa)

Above, Paul explains how watching his sister go through “all the highs and lows” of pregnancy, made him want to experience it directly, first-hand. Interestingly, one of the lows Paul mentions is restrictions in the kinds of clothing that his sister could wear while pregnant. Here, Paul may simply be referring to the necessity of buying bigger-sized clothing. At the same time, pregnancy wear is often incredibly gendered around feminine respectability, and is itself shaped by an anti-fat clothing industry that constructs womanhood (and indeed fashion) as non-fat, and fatness as needing to be hidden from view. That such clothing restrictions are taken-for-granted in Paul's micro-narrative, implicitly echoes and reinforces such discourses. The other lows he describes, moodiness and being impatient/demanding, tend to feature in the pregnancy imaginary where they are expected during pregnancy, and

constructed as caused by hormonal changes. Whilst pregnancy discourses problematise these affective changes as needing to be controlled and managed during pregnancy (Staneva & Wigginton, 2018), Paul constructs pregnancy as a time where moodiness and impatience are allowable and understandable, a kind of freedom and license to the kind of subjectivity that would otherwise be problematised for women (who would normatively be positioned as ‘irrational’ and ‘crazy’, and ‘out of control’) and men (who are normatively positioned as ‘in control’ of their emotions and ‘rational’).

Paul’s highs of pregnancy – being taken care of, pampered, treated as highly valued, precious, and fragile (“being taken as an egg”) – are in some ways normative patriarchal constructions of femininity. They are also constructions of pregnancy that feminist discourse problematises, that is, the framing of pregnancy as illness and disability, the prioritisation of the foetus/child’s well-being over the pregnant person, and the various socio-cultural restrictions that are advanced on this basis. Importantly, such a relationality of care is not normative for patriarchal masculinity. Thus, Paul’s desire for such a relationality of care, that is, being nurtured and treated as vulnerable and precious, contradicts patriarchal discourses on gender and expands the kinds of gendered relationalities and subjectivities that are normatively expected of men.

Well, no, there’s nothing in particular rather than— because it’s an experience— well, as far as I understand it, it’s an experience as a whole, you know? People often say, ‘I loved every moment of it’ you know, from the morning sickness to, you know, the pain of contractions, and you know, the less traditionally desirable things, I imagine, the traditionally harder things about being pregnant and having a child. But, no, I wouldn’t say there’s any one thing in particular that, you know, draws me to it. It’s just watching— I suppose where it really stems from is seeing— because this is as much as I can actually relate to at this point, seeing the joy of someone else explaining and talking about what it’s like. There’s such a joy that radiates, I feel, when— especially, well, this person in particular, when she was talking about what it was like to feel this child growing [...] And I suppose that’s {inhales} for the most part, where, you know, where the desire comes from. It’s not necessarily for one particular aspect or area but rather just the journey as a whole, start to finish, warts and all (Martin James, white, 27, gay, in a relationship, without children, employed and studying, South Africa)

[...] when you put it to me I did a lot of thinking back to those periods, sort of 20— what is it, 25 years ago? And yes, I think it would be an amazing experience. Not that it's all sort of roses and chocolates and glamour, there's obviously a lot that happens within the female body as well and the changes. But just to have another human developing into you and being part of the process of bringing that child into the world, I think must be one of the most amazing experiences that anyone can ever experience (Ted, white, 55, divorced and in a new relationship with a woman, father of two adult children, employed, South Africa)

Above, Martin James was asked to elaborate on whether there are particular aspects of pregnancy he would like to experience. In his response, Martin James acknowledges that there are “less traditionally desirable things...traditionally harder things about being pregnant”, such as morning sickness and painful contractions during childbirth. However, in describing these as challenging yet still enjoyable for many pregnant people (“people often say, ‘I loved every minute of it’”), Martin James draws on and reproduces a romanticisation of pregnancy discourse which ultimately constructs pregnancy as a desirable and essentially happy time by downplaying not only the aspects of pregnancy that may be entirely unpleasant, but also their significance in shaping a pregnant person's *overall* experience of pregnancy. Similarly, Ted also reproduces a romanticisation of pregnancy discourse, constructing pregnancy as a special and blissful time, despite its challenges (“Not that it's all sort of roses and chocolates and glamour”).

For both Ted and Martin James, an important part of their desire to experience pregnancy is the experience of having “another human developing into you”, what it would be “like to feel this child growing”, and “being part of the process of bringing that child into the world”. Their narratives speak to a desire for what could be termed a gestational-transgenerational relationality of being (as well as care); a desire to emotionally and physically experience themselves as a body-in-relation, a body whose boundaries expand to encompass a developing/growing child/foetus. In describing their desire, they also, however,

construct this experience as essentially distinctive and special at its essence, thus reproducing normative discourses on pregnancy.

'You know, there's a special bond between a mother and a child'

This micro-narrative was another relatively significant one, constructed by three of the six participants. Within it, participants spoke of a unique parental bond that exists between a gestational parent (sometimes described specifically as a “mother”) and their child. This bond is described as one that begins in pregnancy and persists throughout the parent-child relationship.

In particular with the amazing bond that I do have with my girls currently. We've been divorced for about 10 or 11 years but my relationship with my girls has just improved over the years. And I think the— you know there's always a special bond between a mother and a child. The bond between the father and the child can be fantastic and if you work at it, it can really be amazing as well. But, you never gonna have the connection that a mother will have with a child (Ted, white, 55, divorced and in a new relationship with a woman, father of two adult children, employed, South Africa)

I have definitely thought about the difference in terms of the relationship between a parent and a child, a parent who's carried a child and a parent who hasn't carried a child. And just, what that would feel like as a parent to {chuckles} that specific thing of, like, I'm trying to think of a non- kind of cliché way to say it but just that thing of actually, like, growing a life inside of you. And then after the pregnancy you're, like, interacting with this person, you've got a relationship with this now separate person but it was {chuckles} I feel like I would look at them and be, like, amazed at the fact that I, {laughs} you know, grew that, I kind of cultivated that inside me. And, so, I would say that that's an aspect, just this feeling of, like, that kind of connection, I guess, with another person that you can get from *you know* {chuckling} carrying a pregnancy is— yeah, I mean that I would say that is actually something I would desire. Of course, like, it's tempered, that desire, by the kind of knowledge that, like, there's lots of ways to have children that don't involve carrying a child that people— you would love that child like the same unequivocally, you know, whether it be, like, you know adoption or surrogates or having a, you know, blended family or something. So, I don't want to sort of reduce the parental-child relationship just to that (Richard, white, heteroromantic asexual, in a relationship with a woman, without children, employed, UK)

Both Ted and Richard draw on a maternal bond discourse, albeit in different ways, to construct the emotional bond between a gestational parent and a child as special, unparalleled, and even superior to that which exists between a non-gestational parent and a

child. And for both of them, the desire to experience this kind of parental relationship is part of their desire to experience pregnancy and be gestational parents.

As Ted explains, while the quality of his relationship with his daughters has improved over the years, the relationship between a “mother and a child” is unparalleled: a father-child relationship takes “work” to be “fantastic” (beginning as it does *post*-birth) but the ‘maternal bond’ is effortless and ‘natural’ (beginning as it does *during* pregnancy) and is a deeper level of connection. In doing so, Ted draws on patriarchal discourses on gender, constructing women-mothers around the capacity to be pregnant and men-fathers around the incapacity to be pregnant. He also constructs men-fathers as not naturally caring, nurturing and emotional, thus precluding a paternal bond *unless* it is fostered by pregnancy. Importantly, Ted seems to simultaneously frame the “maternal bond” as facilitated by pregnancy, rather than qualities ‘essentially inherent’ to women. Yet, Ted nevertheless essentialises the relationship between pregnant people and their fetuses/children as an inherently loving, deep emotional bond.

Unlike Ted, Richard re-works and expands a maternal bond discourse in a way that un-genders and un-sexes this bond. Richard more fully frames the experience of pregnancy itself, which is an experience that is not exclusive to cisgender women, rather than essentialised gendered qualities as engendering a special parental relationship and emotional connection. For him, the basis of this unique bond between gestational parents and their children is a relationality of care. Thus, Richard describes gestational parents’ agentic nurturing role in their child’s development during pregnancy (“growing a life inside of you”; “grew that, I kind of cultivated that inside me”). In doing so, he departs from the pregnant person-as-vessel discourse that tends to construct pregnancy (Haaker, 2021). Such a gender- and sex-inclusive gestational parental bond discourse importantly disrupts the normative gendering of pregnancy as feminine. Yet, as it is used here by Richard, it still to an extent reproduces repronormative discourses that construct gestational or bio-genetic parenthood as

the *ideal* way to reproduce and the *ideal* family formation (Mamo & Alston-Stepnitz, 2015), and as a superior parent-child relationship. It does so by essentialising pregnancy as a special experience that hinges on and engenders an unparalleled parent-child relationship. This, we argue, is the ultimate effect despite Richard's own awareness of the problem of reproducing this discourse and his attempts to mitigate doing so. Thus, Richard's simultaneous critique and use of this discourse perhaps suggests its dominance.

'So that we feel what women feel' / 'How would I have coped?'

In the final micro-narrative presented here, constructed by all but one participant, the cis men spoke about their desire to experience pregnancy first-hand. Pregnancy was constructed as an experience unique to cis women, that cis men are outside of, and that can only truly be understood by being pregnant. This was intertwined with a desire to see how they would cope with pregnancy, or an aspect of it, in terms of the challenges of being pregnant. In this sense, this micro-narrative departed from the romanticisation of pregnancy discussed earlier.

we always— they always say you can't compare I think the pain of, like, a woman goes through, through labour and things like that. They say it's so so so painful, you can't— they can't even describe it. *Ja*. So, like *ja*, so. Much respect to that and I wanna, like, put myself in— in their shoes (Stephen, black, single, without children, employed, South Africa)

So, there's a scenario that has now been posed and then you sort of put yourself into that scenario and then taking that back to the memories that you had from 25 years ago and thinking, 'Oh my word, what if the roles had been reversed? How would I have coped? Would I've enjoyed it? Would I've had'— if it was an option, for instance, if at that stage the doctor had come to us and said, 'Ok, you can decide who wants to be pregnant, you or your wife', would I have stepped forward and said, 'yes'?' And I think that is just absolutely amazing as well. I mean, how many people would actually say or how many males would say, 'Yes, I'm going to give this a go and see how it goes?' Because it's not something that you can decide after two minutes and say, 'Well, I'm not enjoying this anymore. Please take it away'. It's a commitment you're making for probably nine months and then for at least a year after that until your body starts coming back to what it was, similar to what it was before. So, yes, very interesting scenario (Ted, white, 55, divorced and seeing someone new, father of two adult children, employed, South Africa)

Both Stephen and Ted focus on the physical challenges of being pregnant. For Stephen, it is the pain of childbirth that “women go through”, constructed as a unique, unparalleled, and indescribable kind of pain. His desire to put himself “in their shoes” is framed within a language of progressive manhood and masculinities where pregnancy is not denigrated and instead “women’s” strength/ability to bear the pain of childbirth, and to have children gestationally despite this pain, is constructed as worthy of recognition and “respect”. At the same time, and although by no means explicit, Stephen’s construction of pain-bearing as commendable may perhaps be interpreted as drawing on patriarchal gender discourses where the ability to withstand pain is constructed as remarkable and as one of the requirements, features, and measurements of masculinity (Samulowitz, Gremyr, Eriksson & Hensing, 2018), and successful cis womanhood vis a vis childbirth (Malacrida & Boulton, 2012). Furthermore, the framing of birthing pain as a distinctive feature of childbirth may reproduce repronormative discourses where vaginal birthing is constructed as definitive of childbirth and caesarean births are discursively marginalised (Malacrida & Boulton, 2012).

Ted also draws on gender discourses to construct pregnancy as an incredibly challenging experience that few cis “males” would be willing to undergo, despite, it is implied, the toughness and strength essentialised through patriarchal (cis) masculinity. Most cis men’s unwillingness to be pregnant is also, it is implied, tied to normative constructions of (cis) masculinity/manhood as self-focused in contrast to the normatively constructed other-/foetus-centred self-lessness of (cis) femininity/womanhood. Importantly, also in his micro-narrative, anti-abortion discourses are called to mind, reproducing a canonical narrative where pregnancies must end in childbirth, and taking a pregnancy away before that is constructed as a self-centred shirking of responsibility, a failure to uphold one’s commitment to and prioritisation of the foetus/child. Finally, Ted draws on anti-fat discourses: fatness is a ‘sacrifice’ (albeit framed as a necessary one), a challenging aspect of pregnancy, and the pre-

and post-pregnancy body is described as not-fat. Like some of the men interviewed for our study, Ted's use of anti-fat discourses is devoid of the normative injunction to *get* the presumably not-fat pre-pregnancy body back. Thus, non-fatness is idealised and even inevitable (to a certain extent) post-pregnancy, but a return to a 'pre-pregnant state' is constructed as outside of one's control and is something that may take some time ("at least a year until your body starts coming back to what it was um similar to what it was before").

In the two extracts below, Mambane and Richard speak about the socially challenging aspects of being a gestational parent, and of being pregnant.

I just wish that us men, too, could become pregnant as well so that we can feel what women feel. *Ja*, there are women who are the single parent, do you get my point? *Ja*, there are women who are single parents. I wish that could happen to me because some of the men are running away when they impregnate women. They will run away. So, I wanted to feel this as a man and feel *ukuthi* [isiZulu: that] what if this was happening to me? I wanted to feel that. *Ja*, I wanted to feel that and see how women do to their children in order to [raise them] as a single parent, that what if this was happening to me as a man as I am. Ok let's say my man goes away, or my woman, let's say the women are the ones who are making us pregnant, then the woman makes me pregnant and the woman runs away, so, I wanted to feel that as a pregnant man and single as well (Mambane, black, 42, married to a woman, father of two young children, South Africa)

Yeah. Well, I think I mentioned that in relation to when you first start learning about sort of gender studies, gender equality, women's studies and things like that and as a cis man in these modules and learning about feminism and, you know, I consider myself a feminist now, you learn about these things and pregnancy isn't the main one but that's obviously part of it, things I mentioned like gender pay gap is clearly linked and so, there's this sort of disconnect I guess from what you're learning about and yourself, I guess like [...] on some level there is a desire to experience as I say the biological and social things. So, the biological things are physically {chuckles} existing in the world and trying to go to work and trying to do your everyday life in a world that's not necessarily gonna be super receptive to it at all times? Like, we— you know, depending on what country you're in there's different kinds of laws obviously around, like, maternity leave and, like, childcare provisions like that but for the most part I'd say at least in the context of the UK it could be— it could be better is how I'd describe it, I guess? Um, so, you know, on some level there's a desire to experience that, kind of trying to go through the everyday life, your social life with this— going through this gabos carrying a pregnancy to get a *better* {chuckling}— on some level to get a better understanding, I suppose, of the way that that builds into societal and kind of sexist inequalities (Richard, white, heteroromantic asexual in a relationship with a woman, without children, employed, United Kingdom)

Mambane describes patriarchal gender dynamics where cis women are abandoned by their cis male partners and left to raise children alone. His desire to experience pregnancy is thus in part a desire to be a gestational single parent, to see how he would cope with single parenting, and to learn/understand what it takes to raise children as a single gestational parent.

Mambane draws on gender discourses in which the absent-father figure is not only fairly common but is also characteristic of patriarchal masculinity and manhood. Problematizing this aspect, Mambane positions himself within a progressive, and caring fatherhood and masculinity discourse as a loving, committed, responsible and involved father distinct from men who are at best minimally involved and shirk their parental responsibilities. At the same time, by constructing a world where women impregnate men and abandon them, leaving their partners to do the child-rearing, as *imaginary*, Mambane's narrative draws on the cisheteropatriarchal sex/gender binary to understand gestational reproduction and single parenthood as intertwined, and as cisnormative and heterosexual. In doing so, Mambane constructs as fantastical, thereby negating the current realities, of women who do impregnate their partners, and men who become single parents through partner abandonment.

Furthermore, while Mambane wants to be a single gestational father, two-parent families are nevertheless implicitly constructed as the norm because single parenthood is constructed within the bounds of partner abandonment.

Finally, drawing on feminist and progressive masculinity discourses to position himself as a transformed feminist cis man, Richard constructs pregnancy as challenging because of the ways in which pregnancy and femininity are socially and politically devalued within patriarchal, sexist systems. For Richard, his desire is, on some level, to experience this while pregnant and therefore to have a better, deeper understanding, as a cis man, of cis women's gestational oppression. In doing so, like Mambane he implicitly sets himself apart from patriarchal men. Thus, for both Mambane and Richard, their desire to be pregnant is

firmly situated within (cis) masculinity, as something that other, like-minded, progressive cis men might and even *should* want to do. Indeed, implicit in both their micro-narratives is the desire to appreciate cis women's reproductive labour and experiences. Simultaneously, however, Richard draws on a discourse that constructs pregnancy as almost 'causing' patriarchal inequalities, thus naturalising these inequalities, and gestational oppression is constructed as something uniquely experienced by cis women. Furthermore, the extent that reproductive oppression impacts pregnancy experiences is somewhat downplayed ("a world that's not necessarily gonna be super receptive to it at all times", "it could be better is how I'd describe it").

Discussion

In this article, we have used a narrative-discursive approach to analyse cisgender men's interview talk about their desires to be pregnant, experience pregnancy, and/or gestational parenthood. Doing so has enabled us to shed further light on some of the patterned ways in which pregnancy and parenthood/parenting are understood and sex/gender is re/figured. As such, our analysis visibilises the dominance of certain 'truths' around pregnancy which were drawn on and reproduced by the cis men in our study: (i) the taken-for-granted entanglement/coupling of pregnancy with cis-womanhood, (ii) the confinement of fatness to pregnancy, (iii) pregnancy as an overridingly amazing experience, and (iv) pregnancy as inherently engendering an unparalleled parent-child bond. Similarly, normative ideas about parenthood re-circulate: a nurturing gestational parent-child bond, essentialised gendered differences in parenting, and the idealisation and normalisation of two-parent, and bio-genetic families.

Beyond visibilising some of the patterned ways of speaking about and understanding pregnancy, parenthood/parenting, and sex/gender, a narrative approach allows us to consider the broader socio-political effects of these normativities. Even when avoiding the incitement

for recently-pregnant people to ‘*get* their thin bodies back’ and when constructing a ‘return to thinness’ as entirely outside of individual control, the anti-fat expectation of thinness pre- and post-pregnancy ultimately idealises thinness as the standard and upholds the stigmatisation and problematisation of fatness outside of and during pregnancy. It invisibilises fat people as pregnant people and as parents, with harmful consequences for fat gestational parents’ well-being and gestational experiences (Parker & Pausé, 2019), and has important, harmful implications for people’s fat embodiment during and beyond pregnancy.

The romanticisation of pregnancy, constructions of pregnancy as an inherently special and essentially happy time, and of the pregnant subject as blissful may mean that happy/joyful and profoundly remarkable pregnancies are the only accounts that are socially allowable/sayable. Furthermore, this romanticisation of pregnancy masks repronormativity (Franke, 2001), that is, the ways in which the injunction to reproduce (gestationally) is effected (albeit for some) through the untellability and stigmatisation of experiences that contradict this discourse (e.g. abortion and adoption placement, depression during and post-pregnancy, unremarkable or unpleasant pregnancy experiences). It also discursively conceals harmful experiences from the realm of visibility (e.g., obstetric violence). Relatedly, an essentialised gestational parent-child bond abnormalises experiences that depart from this expectation, whilst framing gestational parenthood as ‘parenthood proper’ and elevating it above social/non-gestational parenthood. The latter can be seen, for example, in the way that parental rights are afforded or denied on this bases, or the extent to which support for reproductive loss is given or withheld by family and friends, and the psy-medical industry (Craven, 2019).

Pregnancy-as-ciswomanhood and masculinity as non-gestational and non-uterine are produced by, and reinforce, the patriarchal sex/gender binary. This has important and harmful consequences for people of all genders and sexes, including cis men. These normative frames

invisibilise and constrain trans men's and cis men's, trans women's, and non-binary people's desires for and experiences of pregnancy and gestational parenthood. They also mask and abnormalise intersex and non-intersex, trans and cis women's experiences of voluntary and involuntary gestational childlessness, and uphold the patriarchal woman-as-mother construct, thus reinforcing (gestational) motherhood as an obligatory condition for womanhood. Cis womanhood is reinforced as an identity that is socially meaningful (and legitimate) predominantly via the enactment of reproductive (especially nurturing) desires, intentions, and experiences. These powerful discourses mean that gestational parenting continues to be gendered/essentialised as maternal/mothering with the attendant prioritisation of breast-feeding, invisibilisation of chest-feeding, and problematisation of bottle-feeding.

Turning to masculinity, manhood, and fatherhood, participants' accounts at times relied on and reinforced cisheteropatriarchal masculinity. Thus, men and fathers were constructed as less emotional/un-nurturing, pregnancy as undesirable to most men, and men as non-gestational and non-uterine through an absence of discussion on trans and intersex men's pregnancies. These constructions of masculinity, manhood, and fatherhood, have important and harmful consequences. They abnormalise masculine peoples' and men's gestational desires, and their experiences of pregnancy and gestational parenthood/fatherhood. Such normative patriarchal constructions may keep some men and masculine people from realising their own gestational desires (as the first author's upcoming publication demonstrates). Furthermore, such patriarchal ideas already control the reproductive lives of men and masculine people in various ways: they restrict some from engaging in nurturing forms of parenthood (whether gestational or not); and pregnancy healthcare, pregnancy-related policies and legislation, and support for gestational parenting and primary care-giving are often designed around cis women, with men and masculine

people being pathologised and abnormalised in these spaces or being denied access altogether.

Simultaneously, cis men's body talk in narrating their desires to be pregnant and/or experience pregnancy, makes some important challenges to these patterned ways of speaking about masculinity and manhood, pregnancy, and parenthood. Their desires to be pregnant and to have a pregnant body that has breast-/chest-feeding capacity; their desires for a nurturing gestational parenthood/fatherhood, and a deepened and embodied relationality of care towards their children; and to receive a relationality of care from loved ones, are significant. As reported in other studies on masculinities (Hunter et al., 2017; Hunter et al., 2020; Ratele et al., 2012), their accounts do not eschew patriarchal masculinity entirely but do challenge some of the patriarchal conditions for masculinity and manhood. In our own study, their interview talk subverts, firstly, corporeal requirements that masculinity is non-gestational and non-uterine, and that pregnant masculinity must mean an absence of breast-/chest-feeding capacity (Ingram-Waters, 2015). Secondly, they counter emotional conditions that masculinity is non-nurturing, and that men and masculine people should not be recipients of care from others (Skovdal et al., 2011). Thirdly, the micro-narrative of one participant in particular challenges the patriarchal idea that men and masculine people are necessarily always-already, can and *should* only be fathers (Hunter et al., 2017; Hunter et al., 2020). Consequently, and similar to trans men's accounts of their gestational experiences (e.g., Light et al., 2014), the cis men's narratives expand notions of caring, nurturing, and primary caregiving (Hunter et al., 2017; Hunter et al., 2020; Ratele et al., 2012) to include masculinities and manhood in gestational relationalities of care.

Lastly, the cis men's interview talk about their gestational desires, including their joy when talking about, and the taken-for-grantedness of, their desires is significant. Their talk runs counter to the problematisation of cis men's gestational desires as comical, fantastical,

and monstrous/horrific discussed at the start of this article. It contributes to the untethering, from femininity and womanhood, of pregnancy desires and the relationality of care that pregnancy *sometimes* enables. Their talk, then, contributes to the expansion of possibilities for parenthood, fatherhood, and masculine (including gestational) subjectivities.

Conclusions

Our study is limited, firstly, by the small number of cis men who were interviewed for the study and, secondly, by the use of English to conduct interviews. Certainly, these shaped our data collection and analysis. Thus, the micro-narratives presented here are only a fraction of cis men's desires to be pregnant, and the discursive resources available to narrate these desires. More work is needed that affirms and visibilises cis men's gestational desires, and gestational experiences. In particular, research that showcases non-patriarchal constructions of cis men's pregnancies, and gestational desires is vital to disrupt patriarchal normativities.

Possible limitations notwithstanding, the diversity of participants (albeit limited) broadens the intelligibility of cis men's desires beyond narrow normative frames. That participants included men who, at the time of the study, were already fathers and those who were not; those who were partnered and those single; those who were in heterosexual relationships, one who was in a heteroromantic asexual relationship, and another in a gay relationship; destabilises ideas about who can and does desire to be pregnant, and which men might do so. Furthermore, that participants included black heterosexual and white gay cis men living in South Africa counters normative ideas about where challenges to the requirements of patriarchal cis masculinity are likely to come from.

As our analysis shows, discourses that entangle sex/gender, pregnancy, and parenthood, and essentialise this entanglement, shape the ways in which pregnancy and gestational parenthood desires are narrated. These discursive frames also shape discursive knowledge production (empirical and literary) on reproduction, masculinities, and the

intersection of these, as our introductory discussion highlights. But, beyond shaping discursive knowledge production on pregnancy and gender, normative discourses on gender/sex, pregnancy, and parenthood shape reproductive practices: they underpin reproductive governance for people of all genders and sexes. Indeed, on the basis of these discourses, gestational embodiment, reproduction, and family-making is tightly controlled, with the stigmatisation, invisibilisation, and curtailment of various groups' gestational non-/reproduction. Thus, more work that challenges, and visibilises challenges to, these discursive frames is important. Such work is needed to expose and challenge restrictions imposed on people's non-/reproductive and non-/gestational desires and lives.

In light of this, an important strength of this study is that it challenges the socio-cultural construction of masculinity as an absence of the desire to be pregnant and/or be a gestational parent, and challenges the social problematisation of this desire. Our wish, then, is that our study on some cisgender men's pregnancy and gestational parenthood desires is not only further evidence of the possibilities for masculine gestational subjectivities. Our wish is that it also contributes to the disruption of restrictive reproductive frames that limit peoples non-/engagement in gestational reproduction, precisely by contributing to knowledge production on gestational masculinities, manhood, parenthood, and fatherhood. We also hope that it contributes to a broadening of reproductive and family-making possibilities and realities for all those who wish to embark on gestational, and reproductive journeys.

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1. We use “men” and “males” (and “women” and “females”) to refer to *all* who identify as such, with “trans” and “cis” being used, where relevant, for specificity.
2. We recognise the gender and sex diversity of pregnant people and people who desire to be pregnant. As such, we use “gestational/pregnant/procreative subjectivities” to disrupt the conflation of pregnancy with cis females, cis womanhood and cis femininity, and to recognise that pregnancy-related ways of being (both hoped for and embodied) are distinct from yet interact and are not synonymous with gendered subjectivities.

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