

The Rhetoric of Cyber-Mourning: The Case of “10th Anniversary of Baby Casey”

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In American society miscarriage is often a silent and embarrassing event for women. Since a miscarried child is never born, it does not neatly fit into social and cultural notions of public death. Added to this, continually mourning an unborn child is considered counterproductive. Using primarily Derridean challenges to Freudian conceptions of mourning (which is productive) and melancholia (which is destructive), this paper shows how the “10th Anniversary of Baby Casey,” a posting by Deanna Roy on her website, pregnancyloss.info, resists social norms of mourning. Through devices such as sonogram images, narrative, and hyperlinks, Roy convinces her readers that Casey can remain attached to her unborn child Casey and other mothers of unborn children who come to her website. The site materializes Casey, who has never physically appeared, and restructures an approximate date for Casey’s death. The achievement of perpetual mourning in cyberspace shows how Western norms of instrumentality can be rhetorically resisted.

Introduction

In 2009, after Jessica Tebow of Glendale, California learned that her unborn baby’s heart had stopped at four weeks, she and her husband Michael Olhde decided that she would pass the remains at home. However, once this was done, they did not know what to do with the remains. Confused and grief-stricken, they did not feel right disposing of the remains in the trash or toilet. They called their doctor, who told them to contact a mortuary. The mortician in turn asked for a death certificate, but since the couple did not have one, they were told to contact the city coroner’s office. When police got word from the coroner’s office that human remains were being stored in a refrigerator, they immediately entered and searched the couple’s apartment. Although this was all a misunderstanding, Tebow said, “I can’t help but feel that we would have been better off ignoring our grief, burying our loss, hiding it from the world and suffering silently” (Lopez).

This incident, though extreme, illustrates that miscarriage is often a personal and embarrassing ordeal due to the lack of protocol and social awareness. According to Renner et al., even when there are family and friends who have the best intentions and want to help, they do not address the grief. Instead, they may attempt to convince the woman that miscarriage is a natural process and therefore a positive outcome ("It was better to have a miscarriage than to have a child with severe birth defects") or direct attention to replacing the lost baby with a new pregnancy ("You can have another child anytime you want"). Despite estimates that 20 to 50 percent of all women, depending on how miscarriage is tracked and defined, miscarry (Renner et al.; Legge and Jenks), managing grief after miscarriage can still be an obstacle for women.

Women who miscarry face two social obstacles in their mourning. First, there is no public mourning ritual, such as a funeral, so miscarriage is considered a private, even embarrassing, affair. In addition, family, friends, and institutions (as the couple in Glendale above illustrate) do not know how to react. Second, socially and clinically, mourning is considered to have a finite beginning and end, beyond which the lingering grief is considered to be abnormal and even destructive. Instrumentally, mourning the loss of a miscarried baby should result in acceptance of the loss of the baby.

Via the Internet, one woman is able to memorialize and mourn the loss of her unborn child. *Pregnancyloss.info* is a website created by Deanna Roy, a woman who has miscarried. The site allows women to electronically participate in a forum that is accepting and understanding of the experience of miscarriage. Whether known as a "person," "fetus," "embryo," or "thing," the mother has already created a physical and emotional bond before miscarriage. Leaving aside the legal and religious definitions of life, this paper will simply refer to a miscarried being as a "baby." This paper argues that Roy's posting "10th Anniversary of Baby Casey" electronically materializes Casey, Roy's miscarried baby, who in cyberspace defies physical space and time and acts as a hub of interconnectivity with other mothers who have miscarried. Roy's cyber-mourning achieves Derrida's "work working at its own productivity" (174). This paper will use postmodern and feminist reactions to the Freudian binary opposition of melancholia and mourning, both of which are the foundation for today's instrumental view of mourning. Given that society lends few avenues for women to publically mourn their loss, this paper contributes to rhetorical theory in that it shows how a woman can combine narrative and web technology to publicly address the exigency of miscarriage. Roy's posting reminds us that

anniversaries are “rhetorical embodiments of retrospective experiences” (Morris 557).

The paper starts by orienting the reader to the social, cultural and personal pressures that women endure while they are pregnant and then miscarry. Then, a description of Deanna Roy’s posting “10th Anniversary of Baby Casey” will be presented. Next, a review of the Freudian definitions of mourning and melancholia and subsequent reactions from Derrida and feminists will be presented. A brief review of the challenges of memorializing and the issue of embodiment in cyberspace are then presented. After this, an analysis of “10th Anniversary of Baby Casey” will reveal how, through melancholia, Roy achieves an interconnectivity with other mothers who have lost their children to miscarriage; materializes Casey through sonogram images and a YouTube video; and uses narrative to create new time and space that resists an end to mourning. Finally, conclusions and recommendations for further study will be presented.

Miscarriage in the United States

For a woman, the pressures of a successful pregnancy are enormous. Today, with lower infant mortality rates, the death of an unborn child is embarrassingly seen as a tragic failure (Kempson et al.). Advanced medical technology has caused greater expectancy of a live birth and stigmatizes those that are not able to achieve this (Renner et al. 68). With these pressures, it is no wonder that many soon-to-be parents often choose to be silent about announcing their pregnancy in the early stages (Renner et al.).

Over the course of the 20th and into the 21st Century, the miscarriage event has changed from a “hazard” (to the health of the mother) to a “blessing” (for example, that the baby will not be born with birth defects) to a “tragedy” (of a loss of life). All of these perceptions still reside in society and provide means by which others attempt to comfort the mother (Reagan). At the same time, silence on the part of both the mother (and partner) on the one hand, as well as silence on the part of friends and family on the other, oftentimes is the means by which people deal with miscarriage (Reagan). People are simply too uncomfortable with speaking about miscarriage. Added to this is confusing legal and political terminology related to the miscarriage event. What the “thing” inside a woman is called depends on the stage of the baby’s gestation and the manner or procedure by which the baby is removed or passed out from the mother (Renner et al.). For example, although up to eight weeks a baby is legally known as an “embryo,” after which it is known as a “fetus,” the woman still

feels an emotional and psychological attachment for which she and others have no name.

The emotional and psychological duress that women experience during and after miscarriage stems from the feeling of failure. Grief is associated with the hopes and dreams of what might have been but never was and with someone whom the woman has never gotten to know (Kempson et al.). According to Betz and Thorngreen, miscarriage is a type of “ambiguous loss” in which the person is “physically absent but psychologically present” (359), with no “body to bury or funeral to attend” (361). Others compound the stress by viewing “the death [of the child] as simply an end to a pregnancy—an inconvenience—rather than as a real loss” (Bosticco and Thompson 273).

As a result, women feel a sense of guilt, lower self-esteem, and blame (Hsu et al.). To deal with the loss, women may develop argumentative strategies that deny that the miscarriage has occurred, accept it as Nature’s way, and reframe their loss by comparing it to other successful pregnancies or others’ miscarriage experiences (Legge and Jenks). A woman’s grief can even continue into later generations and have a “lasting influence on a family” because the death of an unborn child was “not adequately acknowledged or mourned” (273). And due to the attention that grieving parents still give the tragic event years afterward, other surviving children and siblings may sense a “ghost” in their family (Kempson et al.).

However, contemporary movements have made attempts to reframe the social and cultural perceptions of miscarriage. Today miscarriage is seen as a “personal tragedy” (Reagan 365), and anti-abortionists and feminists have used rhetorical strategies to define miscarriage, female emotion, and motherhood in magazines, newspapers, television, and the Internet (Reagan 358-9). Nowadays more attempts are made by grievance counselors and popular websites to define the loss of a child in a publically ritualized manner and achieve some sort of parenthood (Betz and Thorngreen; Reagan). Mourning rituals such as arranging funerals, reading biblical passages, wearing jewelry with the baby’s name, producing handicrafts, and hanging Christmas tree ornaments (Reagan 366) have been suggested as means to deal with the grief associated with miscarriage.

“10th Anniversary of Baby Casey”

The general purpose of pregnancyloss.info is to inform women about “not just the medical issues [of lost pregnancies], but also the emotional implications.” Its author, Deanna Roy, originally put up the website in 1998 after she had quit her

teaching job and lost her son Casey at twenty weeks gestation. The website includes frequently asked questions, facts, blogs, testimonies, and comments regarding pregnancy loss. Visitors can also purchase suggested miscarriage-related books, comfort music, and Roy-designed sympathy cards. Soft toned colors are used on the website, and the home page heading is a photograph of a baby with angel wings sleeping in a clouded, blue sky.

"10th Anniversary of Baby Casey" was posted on April 28, 2008, the tenth anniversary of when Roy discovered that Casey, the first baby that Roy lost (of a total of three), had died. The posting is comprised of a single column of text almost 800 words long in eighteen short paragraphs. It begins with a paragraph describing Roy at twenty weeks pregnant, waiting in her obstetrician's waiting room in anticipation of her regular checkup. The text of this first paragraph wraps around a sonogram image of Casey dated March 31, 1988. Roy then flashes back to earlier in the day when she is with her high school students, who are betting on the sex of the baby and instruct Roy to call them as soon as she finds out the sex of the baby later that day.

In the next three paragraphs, Roy and her husband are again with the nurse in an examination room. Roy tells the nurse that she thought that she had been losing weight. The nurse, who with a Doppler cannot find the baby's heartbeat, tells Roy not to worry and that the doctor will find the heartbeat with a sonogram. In the next four paragraphs, Roy and her husband are with the doctor, who has strangely arrived more quickly to their room than usual. The doctor also tells them not to worry but works frustratingly with the sonogram. Roy describes this moment as "agonizing slow," and has already begun to cry. Finally, the doctor tells Roy and her husband that there is no heartbeat.

Roy then flashes back to a month earlier, on March 31, when the baby is between sixteen weeks, and she and her husband are watching sonogram video footage of the baby. This paragraph is followed by a YouTube sonogram image of Casey, which readers can click and watch. The approximately one-minute video sequence has no sound. Below this image, Roy states, "The rest of my story is well documented on this site," followed by a link to a detailed account of Roy's miscarriage and subsequent journal entries about the aftermath of the miscarriage. Roy next explains what has happened since then—other births and miscarriages, a surgery to repair her uterus, and separation from her husband—and why she has created this website. She says that the website has been a "labor of love" and also the cause of "great anguish," but that she gets strength from the thousands of women who come to her website.

The last four paragraphs explain the two things Roy has done to commemorate the anniversary. First, Roy announces that she has set up a “community” Facebook page and invites women to join her “to tell our stories, leave our pictures, and find each other.” Then there is a link to this page. Second, Roy announces that she has created another miscarriage sympathy card, which contains a sonogram image of Casey floating among the stars and includes a quote by Og Mandino: “I will love the light for it shows me the way; yet I will endure the darkness for it shows me the stars.” Roy then states that she enjoys making these cards. Roy ends the posting with a list of the four babies she lost, along with their dates of conception and discovered death dates, and the two children she bore, along with their birthdates.

Theoretical and Methodological Framework

Freudian Mourning and Melancholy

In Western culture, the Freudian models of mourning and melancholia have defined grief as a “goal-directed activity” rather than a “state of being;” in essence, the perception today is that those who grieve are expected to let go and move on “in order to return to ‘normal’ functioning” (Valentine 59). Freudian terms, mourning and melancholia are two possible responses to loss. While mourning after a loss is considered normal because it has a finite end, melancholia is deemed unending and therefore abnormal and detrimental (Tettenborn 103). The process of mourning begins, in Freudian terms, when the ego realizes the loss and erasure of the object from the ego’s experiences and begins to withdraw from the object. Once mourning has concluded, the ego is “rewarded by the experience of freedom” (Tettenborn 104); in short, the ego lets go and detaches from the object (i.e., a mother detaches from her miscarried child).

On the other hand, with melancholia, Freud argues that the ego withdraws into itself and continues to identify with the lost object. The ego cannot properly detach itself from the lost object and begins to split: all of the negative feelings that are meant for the object are directed onto the self. The individual is caught in a destructive loop. When the loved object is turned inward onto an individual’s ego, the criticisms and reproaches directed toward the object then become self-criticisms and self-reproaches (Morris 662). Though not in Freudian terms, Western culture views mourning as a natural, temporary process that becomes destructive if allowed to continue too long (Tettenborn 105). This is the foundation for how clinical psychologists today (as well as the loved ones of

those who grieve) view the grieving process—mourning is purposeful if the goal is to get back to normal.

Mourning and Melancholia Reconsidered

Derrida rejects Freud's binary opposition of mourning and melancholia and instead argues that humanity is in a continual state of mourning (Engle 61). Since mourning has no end (Derrida) and is even a means by which individuals can connect with all of humanity (Butler), melancholia is not failed mourning (Derrida 174). Mourning, in turn, is not instrumental but "a work that would have to work at failure" (Derrida 174), a process that requires continuity in order to succeed. Furthermore, instead of mourning as the process of removal of the mourned object from memory, Derrida views mourning as "an operation that seeks not to reduce or erase the other, but to let the other be in their absence" (Engle 61). The function of mourning may in fact be to promote the absent presence of a lost one and provide personal understanding of what this loss entails. Understanding and significance does not necessarily demand an end. Mohr agrees when he makes the conclusion that mourning "remind[s] us... why, in a world where suffering regularly dwarfs well-being, life is worth living in the first place" (Morris 562). In fact, Julia Kristeva argues that melancholia allows the individual to become not only aware of suffering but also achieve catharsis (24).

Remembrance, Memorials, and Disembodiment versus Embodiment

Memorials allow those people or things that are lost or gone to be remembered. In Western culture, in order for this process to occur, memorials require physicality. Monuments and memorials, such as war memorials, are constructed so that they assume "lived space" and the "intangibility [of the lost object] can take on a form" and be "understood" (Socolovsky 470). Physical memorials also rhetorically build "public memory" (Rand 656). However, when women who miscarry want to erect memorials for their grief, they are presented with the dilemma that they have lost babies that have not come to full term, and hence have not physically materialized.

However, these definitions of physical space have been challenged. Geographer Doreen Massey, in her attempt to introduce geography to the social sciences, describes space "not as some absolute dimension, but as constructed out of social relations" and that it is "dynamic and shifting" (Skogheim 278). The Internet holds some promise in that infinite space for data is both socially constructed by online users and continually changes with the participation of

these users. In the age of the Internet, as individuals have adapted to their lives online, they have accepted spaces that are, according to Mark Poster, “multiplied by databases, dispersed by computer messaging and conferencing” (qtd. in Socolovsky 469). These spaces are also where individuals can perform public mourning. When referring to those individuals who expressed their grief at the Columbine High School massacre, Maya Socolovsky describes “cyber-spaces of grief” (467).

The Internet, with its newly “accepted spaces,” also seems to remedy the issue of embodiment. In the late 20th Century, initially the web was often seen as a space where marginalized members of society could create and participate in these communities. For example, women could remove their gender and participate on equal footing with men. Their bodies were in fact what held them behind; without bodies in cyberspace, they could embody text (in blogs) and avatars (as animals or other genders) and visually re-represent themselves as someone else. Howard Rheingold once saw this potentiality of electronic communities that create a sense of community that cannot be realized in real life (Wolmark 215). However, Boler rejects this notion of the “hopes” and “hypes” of neo-Cartesian disembodiment in cyberspace. Individuals who communicate online in fact “rely on markers such as age, sex and location to make sense of online communication” (Boler 153) and thus give away their physical bodies.

Ironically, this failed promise of disembodiment in cyberspace may present the ideal solution for those who wish to memorialize those who have already been disembodied (such as war veterans whose remains are never returned) and those who have never embodied (such as babies who have not come to full term). The inability to become bodiless in cyberspace may allow a miscarried baby to materialize even when it has never been born.

Analysis

Since social norms offer few public avenues for mourning her lost child, Roy turns to the Internet, where she has a ready-set audience in the thousands of women who have also miscarried. Roy is presented with a two-fold problem: she must convince her audience that she mourns as her audience mourns, and she must convince them that Casey is a human being deserving of the public rituals of mourning. To do this, Roy first establishes an interconnectivity with mothers who have miscarried (through narrative and a sympathy card) and second, materializes Casey physically (through sonogram images and a YouTube video) and chronologically (through hyperlinks).

The Rhetoric of Interconnectivity with Other Women Who Have Miscarried

By resisting the end of mourning, “10th Anniversary of Baby Casey” asserts an interconnectedness with mothers who have miscarried. The posting sits just below the top of the column title, “Facts About Miscarriage,” and a photo of a baby with angel wings sleeping on a cloud. Both the word “Facts” and the sleeping baby remind mourning mothers that their miscarriages are indeed “facts” that they share. Roy adds that her site is “a source of strength and pride and comfort for both myself and the wonderful mothers who come here,” which means that the mourning on this site is not withdrawal into the self, as Freud might suggest. Instead, the assertion of “strength,” “pride,” and “comfort” in this posting suggests that Roy is projecting outward, toward all mothers who share her loss. These words attempt to turn mourning into a noble event. Finally, Roy states that her site receives “25,000 hits every day,” a fact, whether true or not, which establishes the website as a rhetorical hub for consolation. Women are continuing to visit the site, so Roy’s mourning—as well as the mourning of other mothers—cannot end, for this would sever the ties—the “source of strength and pride and comfort”—that she has with those who come to her website.

Though women who have lost their children suffer physical pain, which is treated by their doctors and loved ones, dealing with the loss of the child and the shame afterward is never addressed. Roy rhetorically addresses this need. While much of “Baby Casey’s 10th Anniversary” is about her discovery of Casey’s death, Casey’s death is not the impetus that draws readers to her website. Neither is her own suffering. Instead, it is Roy’s own experiences after the miscarriage which enable readers to empathize with her. This is why she lists other tragic events in her life matter-of-factly: she “quit teaching,” “had surgery to fix my uterus,” “had complicated pregnancies where I lost other babies,” and “eventually separated” from her husband. Women who have miscarried know these experiences. In fact, the events after the miscarriage are the “state of being” of her mourning. Rather than a move towards acceptance, as Freud argues, Roy is letting, as Derrida argues, “the other be in their absence” (Engle 62).

The miscarriage sympathy card is another means by which Roy connects with her readers. Roy creates depth in the sonogram image by placing Casey in space. The black background and sprinkle of white stars complement the black and white sonogram image—the only image that women have of their unborn babies. The vastness of space suggests the vastness of possibilities in a mother’s womb: the promise of future babies who are lost or are born. The religious

notion that Casey is in heaven could be here; one cannot ignore the image directly above this posting of a winged girl holding a baby in her arms and sitting among the clouds and blue sky. Alternatively, Casey in space suggests the omnipresence of Casey on the website, again reinforcing the interconnectivity of mothers with similar experiences. Roy also promises that more cards will appear on her site.

The Rhetoric of Physical Materialization

Roy's mourned object, Casey, certainly satisfies the Freudian conditions for "libidinal attachment" (Tettenborn 104). For Freud, this attachment of the object to the subject is primarily visual but also psychological and symbolic. While Casey, in the sixteen to twenty weeks that he was alive inside Roy, physically established this attachment to Roy, this attachment is internally physical, psychological, and emotional and thus cannot be relayed on the website. Although she may have sensed Casey inside of her and experienced the hormonal, emotional, psychological, and physical experiences of pregnancy, these do not appear in her "Anniversary." The technology of the website at least has this limitation. Roy instead must turn to sonogram images to establish this "attachment" to Casey.

The sonogram image is particularly interesting in the seeming lack of depth of the grainy image. Like grainy black and white photography, the sonogram image defies definition and invites interpretation of the object. Originally, the purpose of a sonogram image is not to give an accurate portrayal of Casey; it is a piece of data. The image is bordered on both sides with columns of acronyms, abbreviations, and numbers like "DEPTH 160 MM," "GREY 3," "3 BPD," and "8 AC." The date and time of the sonogram, "1998 31 MAR 09:32," are in the upper left-hand corner, while her expected delivery date, "12 SEP 1998," is in the upper right hand corner. The entirety of Roy's expectations of a successful pregnancy is clinically laid in these acronyms, abbreviations, and numbers, the familiarity of which mothers recognize and find convincing. Her statement that in the waiting room she was "trying to decide who [of the other women in the waiting room] was farthest along, and if I was above or below the curve" reveals that at that time she believed in modern medicine and technology, both of which would bring her toward a successful delivery. Possibly a visitor to this website (who has miscarried or knows someone who has miscarried) may understand these symbols, but their presence as a component of a sonogram image lends legitimacy to Casey's materiality. It is as if the image is telling the

viewer that modern medicine and technology may not have saved Casey, but they provide ample evidence that Casey had humanity.

Since this is the only visual representation of Casey available, she must interpret these images that surround her “Anniversary” posting. In her interpretation, Roy assigns emotional attachments to the visual cues. Her language consists of approximations of Casey and descriptions of the anticipation of being a mother and her emotions at the day that she learned that she had miscarried. The visitor is invited to view a sonogram image of Casey at the start of the first paragraph of the posting. In this first image, the viewer can make out a round body and a head with ears and a jaw line, all of which are enough to establish Casey’s humanity. The image resembles a baby portrait that any mother may have taken. The language wrapped on the left side and under this image suggests that this may be the image that Casey had in her mind while she was waiting for her twentieth week checkup. The beginning of her posting—“Ten years ago at this very moment”—reminds visitors that the hopes she had of seeing Casey alive ten years ago are still the same hopes that she has today. A reader who has miscarried remembers these feelings, too. In addition, Roy is unable to find the words to encapsulate her emotions at the moment of waiting, but they have something to do with the triviality of “flipping through baby magazines and glancing at the pregnant women around me,” the community of being among women who will one day become mothers. The banality of such experiences is taken for granted in an age when the sonogram promises so much. However, Roy uses a seemingly everyday experience like sitting in a waiting room to contextualize the first sonogram image of Casey, even when this is the twentieth week and Casey has already died.

The YouTube video serves as another means of materializing Casey as a living being at sixteen weeks, even after Roy learns that Casey has died at twenty weeks. The image and link appear after Roy has learned that Casey has no heartbeat and “the rest of the words [of the doctor] sort of slurred in my mind.” The fading away of the doctor’s words allows Roy in her narrative to move back in time to when Casey was approximately alive at sixteen weeks. On this day, Casey “was measuring out at 16 weeks,” which approximates Casey’s age of death at some time after sixteen weeks. Casey then describes two visual cues for the viewer to see in the YouTube video, a “heartbeat” and “shifting shoulders,” which then prompts the viewer to click on the YouTube video link. However, the movement of Casey’s shoulders and heartbeat are not easily visible in the YouTube video; in fact, the paddle held by the obstetrician moves back and forth, searching for the best image so that the length and width of

Casey can be measured. Therefore, either Roy is referring to another piece of video footage that is not on the website or she is creating Casey's physicality through her words. The assertion in her narrative that the video made Roy and husband "realize he was alive, so alive, and going to be with us soon" adds to the context of Casey's being. His parents' love for a being that has publically materialized only in the video image of a sonogram, not the death of this being, is still the focus of this posting. Although Freud argues that the trigger for either mourning or melancholia occurs when "the object has vanished from the realm of the ego's experiences" (Tettenborn 104), Casey, the object, never vanishes. Instead, he is materialized each time the images are viewed and the corresponding narrative is read.

The Rhetoric of Chronological Materialization

Roy's time-shifts in her narrative assert a new conception of time based on the inexactness of Casey's date of death, somewhere between sixteen and twenty weeks. It has been argued that, based on their biological clocks, women view time as cyclical and not linear (Cowman and Jackson 48). Linear time would demand that a specific point along the timeline be chosen as the date of Casey's death. According to linear time, Casey loses the legitimacy of the life-death cycle. The fact that he was never born also confounds this life cycle since birth is the necessary first point in determining the beginning of an individual's life.

Time as cyclical, on the other hand, enables Roy to move back and forth through the four-week period between weeks sixteen and twenty of her pregnancy. The narrative jumps from the waiting room to earlier that day at school. It then jumps back to the waiting room, only to return to a few days before in a room with a school nurse, and then jumps back again to the examination room with the nurse and then the doctor. At one point, it is difficult to distinguish between which nurse Roy is referring to: the school nurse or the obstetrician's nurse. But this distinction adds to, in Derridean terminology, the exactness of the inexactness of Casey's death.

Hyperlinks extend the "Anniversary" mourning narrative through space and time, further solidifying Roy's attachment to Casey and other mothers who have miscarried. Unlike a linear narrative, which forces readers to follow a prescribed order of narrative, the hyperlinks are clicked at the choice the reader. Visitors can click on links to a YouTube video, the full story of Roy's miscarriage, a page of miscarriage sympathy cards for purchase, and a new Facebook page, all of which invite the visitor to prolong the state of mourning along with "the wonderful mothers" who come to this website. Hyperlinks create a mysterious

web of channels and interconnectedness that have no end, for Roy can always create new links. And these links in the “Anniversary” posting are not the only links. There are other links in the right periphery of the viewer, other columns of links to, for example, “Questions about Physical Recovery” and “Question about Your Next Pregnancy.” These give the freedom and promise of narratives from other women who have miscarried. Roy even makes mention of links to some of these questions at the end of “Anniversary.” Without an end to the number of possible hyperlinks, Roy’s posting resists instrumentality and, through mourning, is “a work working at its own unproductivity” (Derrida 174). There is no end to this mourning; the website is a state of being.

Conclusion

“10th Anniversary of Baby Casey” reminds us that, according to Reagan, “one of the mistakes of the current demand for grief and mourning following a miscarriage is the thought that one’s own individual emotional response to a given event is universal” (359). Roy’s individual account of how she electronically deals with miscarriage attempts to invite those who want to understand and persuade them that mourning is not a destructive process. Roy has not only created a memorial to her unborn son, but also an interconnectedness in which other women who have miscarried can participate. The responsibility of maintaining this interconnectedness, for there will always be women who miscarry, falls on Roy. However, this is not a heavy burden, for Roy is not part of the destructive process of Freudian melancholia. Instead, by contradicting the clinical utility of sonogram images and video, Casey becomes a living being. In addition, Roy uses narrative to interpret these sonogram images and conceive a piece of time that operates on her and Casey’s terms. Derridean mourning, as Roy achieves in her posting, is an infinite process.

“10th Anniversary of Baby Casey” illustrates how women can publically continue to mourn without social repercussions. While cyberspace is not a magic pill, it promises collective spaces for discussion of what may be embarrassing social facts. In addition to miscarriage, women also experience their first menstruation, pregnancy unwanted by others in the family, and domestic abuse. All of these require spaces for participation and discussion. The aim of cyberspace should not always be to provide answers, problem-solve, and bring closure to tragedies and experiences that women must remain silent about. Instead, as Roy’s website achieves, cyberspace should permit women to share their narratives, post photographs, and if comfortable, contact one

another. The goal here is the perpetuation of dialogue and storytelling. Men need to be part of the process as well.

A larger study of other pregnancy-loss websites could provide further insight into how collective mourning occurs. Other sites such as miscarriagesupport.org, dailystrength.org, miscarriagehelp.com, and mend.org invite comparative studies and may suggest how hospitals and clinics can change their views of miscarriage as a clinical event and support and facilitate the mourning process of these women. As Kunkel and Dennis argue, "the reconsideration of the relationship with the deceased, rather than its outright termination, may be critical to the overall health of the bereaved" (6). When women lose children, the purpose of mourning should never be the end of mourning, for the loss of a loved one is never forgotten, but at least one grows closer to understanding what has happened.

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