

THE DEATH OF MATERNITY?

Simone de Beauvoir's *A Very Easy Death*

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When I first read *A Very Easy Death*, I was taken with Simone de Beauvoir's admission of *surprise* when she finds herself deeply moved by her mother's illness and subsequent death. I saw an attempt to reconcile an outlook and a philosophy, based on reason and a kind of life-affirming humanism, with a life-shattering experience. In some ways, it made Beauvoir, as smart and productive as she was, seem like a deer in the headlights, facing one of the most challenging events in life, the loss of a parent. But I also recognized that it was a brave gesture to write and admit what might seem like a failing. Upon reflection, I am struck as well by the way in which illness allowed Beauvoir to enter into a complex narrative about the choices one makes in the meaning given to life, the reversals between child and parent that unfold over a lifetime, and the revelations about self that this crisis of reversals reveals. I first wish to consider briefly the way in which Beauvoir viewed motherhood prior to writing about her own mother.

The Second Sex

In 1949, Simone de Beauvoir called for a *revolution* in the family, focusing on the question of maternity. In *The Second Sex*, she wrote that maternity had been traditionally considered to be both a psychological and a biological destiny for women in order to perpetuate the species; that this very destiny was what placed women in a position of inferiority to men on the job market, in particular, and in society, in general. She argued that woman need no longer consider the act of childbirth as that which makes her "a being *in itself*, a ready-made *value*." A woman "does not really make the child, it is made in her;

her flesh only engenders flesh.” Maintaining the binaries of opposing nature to culture, Beauvoir pitted the fully human being, whose emergence depends upon mental life, against biology. She proclaimed that nature must be transcended by culture in order for woman to become an existentially free subject. In the Western tradition, which, in her terms, had represented woman as immanence and man as transcendence, only his “creations ... spring from freedom [and] posit the object as a value and endow it with a necessity...”¹ She asserted that there is no such thing as a maternal instinct, or that in any case the word could not be applied to the human race. For Beauvoir, the mother’s attitude was to be defined by the way in which she assumed motherhood, with all the contextual variables that this might involve. At issue here is the rejection of a teleology in nature, upon which the social contract would be based, in favor of *choice*: the freedom to choose a life path via legal birth control and legal abortion, and thus the right to refuse biological reproduction in favor of other forms of creation (the writing of philosophy or literature, for example). In short, de Beauvoir rejected the concept of a female essence by affirming, in her much celebrated phrase, that “one is not born, but becomes, woman.” Her goal was to achieve for woman the status of authentic subject: one whose plenitude did not depend upon otherness.

In the years since the publication of *The Second Sex*, Beauvoir’s position has worked itself out in many different ways. We can now recognize in her attempt to establish independence, equality, and rationality for women a critique of feminine values and norms at a time that may seem long ago, even though many of the problems she identified persist. The status of women in the literary canon, on the job market, and at home has been intensely discussed over the years; President Obama’s first signed bill, the Lily Ledbetter Fair Pay Act of 2009, shows that action to improve inequalities between men and women is still needed (and welcome, if belated). In Beauvoir’s attempt to establish independence, equality, and rationality for women she offered a critique of the way in which women were sanctified as mothers (by men and women) while excluded contemptuously as equals in the work place. Her frank rejection of and clear distaste for maternity suggested that women should attempt to become more like men on the issue of procreation. And that is in fact what happened during the 1960s and 1970s, when some women chose either to put off having babies until well into their thirties and others decided not to have them at all in favor of gaining equality on the job market. More recently, working women have integrated having children as part of a woman’s life; some “having babies” biologically, others adopting either as part of a gay or heterosexual couple, and still others turning to surrogate mothers for a variety of reasons.

Beauvoir’s work was groundbreaking in setting out the major areas of this debate for subsequent decades. The terms in which she elaborated these issues involved a rereading of traditional patriarchal values, in which woman was considered Other, as well as an ongoing dialogue with Sartre’s existentialist

philosophy, in which existence preceded essence.² They would ground her rejection of motherhood as the passive agent through which others may achieve subject-hood, but for whom access to it is denied. They would also disallow any specifically feminine or masculine form of thinking or writing. Beauvoir set the example of a woman whose achievements depended upon and were articulated around the refusal of biological motherhood. Yet in writing about her own mother, when she was ill and facing death, something quite different emerged.

A Very Easy Death

Beauvoir recounts how she returned to Paris from Rome when her mother broke a bone, suffered from perhaps a slight stroke, and entered the hospital. From then on, things deteriorate; an internal blockage resulting from a grave cancerous tumor is discovered. The story, as Simone realizes, will not unfold as convalescence, but as a description of dying. She maintains several narrative strands at once: first, a sketch of her mother's life and fear of getting cancer, which she considers "infantile"; second, the day-to-day narrative of what happens in the hospital and nursing home, including exchanges with doctors and nurses, her sister's care and closeness to her mother, and her determination not to let her mother suffer; and third, a retrospective of the mother/daughter relationship—in which each made the other suffer—and the attempt to change the relationship through caregiving. Finally, the narrative strand that I find most intriguing results from the dilemma of identification between Simone and her mother, and the sense of "betrayal" that emerges for Simone.

What we know of Françoise de Beauvoir (1886-1963), née Brasseur, is that she grew up in a well-do-do family in Alsace-Lorraine, where she received a Catholic education. Her marriage to Georges de Beauvoir by her family in 1907 was marred by her father's bankruptcy and fraud conviction, followed by the collapse of her husband's business ventures. She was a devoted Catholic mother to her children, Simone and Hélène, watching over them to the point of suffocation and spying, reading their books and all of their letters. As Beauvoir wrote about her mother, "She treated me like a specimen under a microscope. She probed into everything I did."³

Beauvoir writes that when her father died, she did not shed a tear:

I had said to my sister, "It will be the same for Maman." I had understood all my sorrows up until that night: even when they flowed over my head I recognized myself in them. This time my despair escaped from my control: someone other than myself was weeping in me. I talked to Sartre about my mother's mouth as I had seen it that morning and about everything I had interpreted in it—greediness refused, an almost servile humility, hope, distress, loneliness—the loneliness of her death and of her life—that did not want to admit its existence. *And he told me that my own mouth was not obeying me any more: I had put Maman's mouth on my own face*

and in spite of myself, I copied its movements. Her whole person, her whole being, was concentrated there, and compassion wrung my heart.⁴

The distance thus collapses between a person from whom Simone had taken great distance on matters of choice (religion in particular, but also style of life); the self becomes Other through the image of superimposed mouths.⁵ There is much to analyze in the image of the mouth (in the work of Sartre, Levinas, Derrida, and Beckett), but I am interested here in *The Second Sex* and the way in which Beauvoir generalized sociologically and philosophically about the mother's vision of her daughter as a double, projecting her own conflicted feeling onto her daughter. The mother resents her own apparent lack of choice and wishes it for her daughter, but cannot negotiate it between the two of them—feeling both guilt and anxiety at her daughter's separation and independent status as another being. In *A Very Easy Death*, Simone displaces the analysis. Now that there is really no apparent choice, and the body is being ravaged by illness, she overcomes her initial repugnance at seeing her mother's body and becomes its advocate and protector. She wants to prevent her mother from physical suffering, from the torture of pain in the body and the testing of it that occurs in the hospital.

Beauvoir's adamant rejection in *The Second Sex* of any natural maternal sentiment or love leaves without rational explanation her own strong filial impulse to protect her mother from harm, as evidenced in *A Very Easy Death*. This is an example, it seems to me, of what Levinas sees as the best thing about philosophy: that in some sense it fails. He writes that in the course of thinking and questioning the presuppositions of its own arguments, philosophy both strives for intelligibility (of the other) and yet cannot achieve unification and totality of meaning, and thus remains open.⁶ Beyond the limits of all philosophizing, it may be that de Beauvoir's deliberate choice to write a socio-historical analysis of motherhood in *The Second Sex*, and the negative closure it seemed to bring, both forcefully propelled the arguments she set forth and, at the same time, prevented her from engaging with other, more positive, views of motherhood.

A Very Easy Death was published in 1964, fifteen years after *The Second Sex* and a year after her mother's death in 1963. In it, something happens within Beauvoir's narrative that unlocks a part of her, feelings previously unknown to her about herself and her mother. In a dream towards the end of the memoir, her mother and Sartre fuse together, creating at first a sense of well-being. Quickly, however, this turns into a nightmare, with the thought of living once again with her mother. Whatever childlike dependence on her mother remains in Simone is both detested and cherished. In fact, her identification and compassion seem predicated on a reversal of roles, in which she becomes the parent and her mother the child. Looking at old photographs she writes, "I am eighteen, she is nearly forty. Today I could almost be her mother and the grandmother of that sadeyed girl [her own grandmother]."⁷ Understanding

cannot change the repetition of her mother's unhappy childhood that in turn made her unhappy. She is sorry for her mother because, in the photograph, her "future is closed and she has never understood anything."⁸ It is the blockage of knowledge and understanding that will be the price for Simone's identification with her mother in this health crisis.

From the moment that the diagnosis of cancer is made, everyone around the mother colludes in a lie: that she was operated on for her leg and that she will recover. The doctors treat her as a child and as an experiment, and Simone feels remorse because she has capitulated to the system; she is unable to defend her mother against technology and the power of the doctors. The words "lie," "liar," and "traitor" ("mensonge," "menteur," and "trahison") recur again and again. But it is not only due to a sense of helplessness. Rather, it is because Simone does not, and cannot, speak to her mother about the reality of her illness. She knows that her mother has no chance for recovery, but just as when she was a child and her mother considered her more of a son than a daughter, so now Simone plays a role similar to a lying surrogate father (someone like the doctor) who, for the child's good, tells her stories of a recovery that can never happen. Simone, her sister, and the doctors all try to keep this woman in ignorance of what is happening to her body. The six weeks of the illness were, she writes, "rotted by betrayal" ("pourries par la trahison").⁹

But can one lie to another person about her own body? Beauvoir narrativizes what she cannot fully acknowledge: her sister Poupette had learned that too much pain medication could render their use ineffective at the moment of greatest suffering. As she writes, "Questioned closely, [one of the health care workers] explained that generally speaking, in cases like Maman's, the patient died in hideous torment." Then a voice breaks in italics: "*Have pity on me. Finish me off.*" She continues, "Had Dr. P lied, then? Get a revolver somehow: kill Maman: strangle her. Empty Romantic fantasies."¹⁰ In Simone's inner voice, both mother and daughter cry out for euthanasia, which no doctor will entertain. Yet when her mother actually overhears the doctors talking about knocking her out for pain, she says "'yes,' ... 'reproachfully, but these are days that I lose'" (83).

And this is when her identification with her mother gives hope to Simone: "'Today I haven't lived.' 'I am losing days,'" she repeats her mother's phrases. "Every day had an irreplaceable value for her. And she was going to die. She did not know it: but I did. In her name, I revolted against it."¹¹ Here is the existential sense that death gives meaning to life, this life, and that what separated them, among other things, was her mother's mystification (particularly her religious piousness); what now brings them together—even though her mother can't know this—is a sense of revolt. It is possible to renew a broken dialogue with her mother now because of a leitmotif that seems located neither completely in Beauvoir's narrative nor completely in the reprise of her mother's thoughts: "Live!" "Live!" ("vivre! vivre!")¹² When Beauvoir writes that her mother was perfectly present and conscious, and also perfectly

unaware of what was happening to her, we see a contradiction; this contradiction is as touching as the direct statements of mental anguish. After all, her mother says pointedly, the doctors tell her every day that she is getting better, and every day she feels worse; she would no longer even look in the mirror. And the reader learns at the end of the short memoir that Françoise de Beauvoir has left instructions scribbled on a piece of paper about her wishes for the funeral. Her mother knew she was dying; her body was telling her what no one else would.

The dialogue about pain, dying, and death cannot take place between Simone and her mother because naming the disease is banished for her family, friends, and doctors from all discussions with Françoise the patient. Simone de Beauvoir's dialogue takes place within herself as the word "cancer" comes to signify metaphorically her own "remorse," her inability to control the care of her mother's illness, and, by extension, control of her inoperable relationship to her mother. Could she have prevented the operation? The pain? Should she have told her mother? Why did her mother not ask for a priest near the end? Because she didn't know?

We now know that this silence was not unusual, given the way illness was dealt with in the 1950s and 1960s. Often, the family was informed about the gravity of an illness, but the patient was not. As scholars today can write, "Review of the literature of the 1950s and 1960s suggests that the majority of physicians would not discuss a diagnosis of cancer with a patient."¹³ The intent (of both doctors and families) was to "protect" the patient from suffering, in a paternalistic gesture that protects the patient not from the disease, but from the debilitating effects of receiving a dire prognosis—the possibility of losing "the will to live." As Dr. Abraham Fuks, former Dean of Medicine and Professor of Medicine at McGill University, has pointed out, there was also often a difference in the way men and women were treated by doctors: men might have had to settle their affairs before death, for example, and in any case, were considered better able to cope with bad news.¹⁴ Beauvoir writes twenty years later in her *Farewell to Sartre* that when she realized that Sartre's illness was terminal and could be accompanied by great suffering, "I burst into tears and flung myself into [Dr.] Housset's arms. 'Promise me that he won't know he's dying, that he won't go through any mental anguish, that he won't have any pain.'" The doctor responds, "I promise you that, Madame."¹⁵ Her desire to protect Sartre is as strong as it was for her mother, although he seems to need it less. Sartre indicates anxiety to his doctor, but in the end, the doctor reports that he was "resigned," no "assured." Sartre dies peacefully.¹⁶

Beauvoir's questions are important, but she displaces her own complicity in the *silence* around illness into a religious issue, convincing herself that religious zealots would say that she should have told her mother, presumably in order to prepare for death. In Beauvoir's view there is no consolation through religion, but this is not her mother's view. The question is whether she has not done to her mother exactly what she rejected in her mother's behavior: impos-

ing her own values on another. Simone supposes that one of the reasons her mother does not pray at the end of her life is because she does not want to be *insincere* (although insincerity is the accepted manner of dealing with her mother throughout her illness). Yet Beauvoir has brought her mother closer to her own world view without giving her mother the benefit of what she herself considers the most important value: the freedom of choice through knowledge. It is possible that one of the qualities she reproaches in her mother (of being too quick to try to please others) may be the very reason her mother does not ask for a priest or pray: she is intimidated by her daughter even as she looks to her for protection. In the scribbled notes found after her death, her mother requests no flowers at her funeral, only many prayers.

How then could this be “a very easy death”? The irony of the title, that this is, all things considered, a privileged and relatively “easy” death, with family and modern medicine available to support the sick person, only heightens the sense of psychological anguish of the daughter who cannot change what is happening. One encounter with the doctors stands out. After a night spent near her mother, Beauvoir realizes that her mother “was as much afraid of the nightmares as she was of pain.” As she describes, “When Dr N came she begged, ‘Let them inject me as often as necessary ...’ The doctor begins to joke: ‘Ha, ha, you are going to become a real drug-addict!’ ... ‘I can supply you with morphia at very interesting rates.’” To which Beauvoir, who has confronted this doctor before about the need to eradicate her mother’s pain, writes: “His expression hardened and he coldly said in my direction, ‘There are two points upon which a self-respecting doctor does not compromise—drugs and abortion.’”¹⁷ Why withhold painkillers (narcotics) from a dying woman in the guise of not creating a drug addict, we may well ask? Is this a view, like Mother Teresa’s, that people should welcome suffering? And what does this view have to do with abortion? Is it another displaced discussion: between euthanasia (of the very sick) and murder in the hard line pro-life position? Has Beauvoir opened up here, without being able to resolve or push further, controversies that continue today (some without any more consensus in the differing political viewpoints)? And had she not, by keeping her mother in what she thought of as ignorance of her illness, withdrawn from her mother the very capacity for choice that humans need to retain according to her own philosophy—even and perhaps especially when facing death?

If patients today ought to be and often are knowing subjects, empowered by awareness of their own condition (more than four decades after the publication of *A Very Easy Death*), they also face burdens at many levels. In addition to coping with an illness and the side effects of treatment, the patient with a life-limiting disease enters into a historically-formed discourse that no individual controls. Susan Sontag, upon whom Beauvoir had an enormous influence¹⁸ and who herself became a cancer patient, argued eloquently about the negative effects of myths and attitudes when she wrote about illness in her book, *Illness as Metaphor*: “Punitive notions of disease have a long history, and

such notions are particularly active with cancer. There is a 'fight' or 'crusade' against cancer ... people who have cancer are 'cancer victims.' Ostensibly, the illness is the culprit. But it is also the cancer patient who is made culpable."¹⁹ Sontag argued powerfully that it was important to take the metaphors out of disease to allow for treatment (cure when possible) and for recognition of individual situations along with the care each required. What I take away from these arguments is a sense that the limits of knowledge and the need for control create the need for an enemy—something or someone to blame. The militaristic discourse attached to medical practices is now itself under analysis.²⁰ As Sontag put it, "chemotherapy is chemical warfare, using poisons. Treatment aims to 'kill' cancer cells (without, it is hoped, killing the patient)."²¹ So how does one make peace with an illness in the environment of these dominant narratives and the harsh effects of both disease and treatment? Overcoming an illness is perceived as a fight to survive, but the problem with such metaphors is the responsibility they impute: what if one is not fighting hard enough? What if the battle is not so much about winning or losing as about coping and living? As Montaigne wrote, "The usefulness of living lies not in duration but in what you make of it. Some have lived long and lived little. See to it while you are still here. Whether you have lived enough depends not on a count of years but on your will."²²

Beauvoir admits from the beginning that she had never truly imagined that her mother might disappear; it is one thing to separate from her mother, and an entirely other experience to be separated from her mother. It is this shock that necessitates, in a sense, writing *A Very Easy Death*. At a conceptual level, Beauvoir had spelled out the generational cycle in *The Second Sex*: "Trapped in the great cycle of the species, she affirms life against time and death: she is thus promised to immortality; but she also experiences in her flesh the reality of Hegel's words: 'The birth of children is the death of parents.'"²³ In *A Very Easy Death* she chooses to face the lessons of life, advocating an ethics of choice and responsibility, as the child becomes the mother of the daughter to acknowledge change in the passage of generations. In so doing, Beauvoir has in fact not described the death of maternity through her mother's illness (nor, I think, the need to kill the mother or the mother in us), but rather has suggested through her own narrative how confusion about and the extension of the maternal (without recourse to instinct) may encompass all those who in some way enable life: birth mothers, surrogates, adoptive parents, and perhaps also mentors, caregivers, extended family, even leaders of a movement. It is metaphorical (and something of a cliché now) to say that Beauvoir was the mother of the second-wave feminist movement. It is less so to think about how the experience of her mother's death modified the conceptions of motherhood from those expressed in *The Second Sex*. Ideas, like children, need to be nurtured and developed, and they may also die; but they are not forgotten. That may be part of the extraordinary legacy that Simone de Beauvoir has left for the generations that followed.

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Notes

1. Simone de Beauvoir, *The Second Sex*, trans. Constance Borde and Sheila Malovany-Chevallier (New York: Alfred A. Knopf, 2010), 539.
2. See Toril Moi, *Simone de Beauvoir: The Making of an Intellectual Woman* (Oxford: Black, 1994).
3. Deirdre Bair, *Simone de Beauvoir: A Biography* (New York: Summit Books, 1990), 95.
4. Beauvoir, *A Very Easy Death*, trans. Patrick O'Brian (New York: Pantheon Books, 1965), 31, emphasis added. "Quand mon père est mort, je n'ai pas versé un pleur. J'avais dit à ma soeur: 'Pour maman, ça sera pareil.' Tous mes chagrins, jusqu'à cette nuit, je les avais compris: même quand ils me submergeaient, je me reconnaissais en eux. Cette fois, mon désespoir échappait à mon contrôle: quelqu'un d'autre que moi pleurerait en moi. Je parlais à Sartre de la bouche de ma mère, telle que je l'avais vue le matin et de tout ce que j'y déchiffrais: une gloutonnerie refusée, une humilité presque servile, de l'espoir, de la détresse, une solitude—celle de sa mort, celle de sa vie—qui ne voulait pas s'avouer. Et ma propre bouche, m'a-t-il dit, ne m'obéissait plus: j'avais posée celle de maman sur mon visage et j'en imitais malgré moi les mimiques. Toute sa personne, toute son existence s'y matérialisaient et la compassion me déchirait." Beauvoir, *Une mort très douce* (Paris: Gallimard, 1964), 44.
5. See Moi's analysis of *L'Invitée*, with the murder of the mother in *Simone de Beauvoir*, 95-125.
6. "De la phénoménologie à l'éthique. Entretien avec Emmanuel Levinas," "Lectures d'Emmanuel Levinas," *Esprit* (July 1997), 130.
7. Beauvoir, *A Very Easy Death*, 103.
8. *Ibid.*, 103.
9. *Ibid.*, 137; *Une mort très douce*, 96.
10. Beauvoir, *A Very Easy Death*, 82.
11. *Ibid.*, 83.
12. *Ibid.*, 64; *Une mort très douce*, 90.
13. Peter Angelos and Muneera R. Kapadia, "Physicians and Cancer Patients: Communication and Advance Directives," in *Ethical Issues in Cancer Patient Care*, ed. Peter Angelos (New York: Springer 2008), 15.
14. I thank Dr. Abraham Fuks for his reading of this talk and for his thoughtful comments about many of the questions it raises.

15. Beauvoir, *Adieux: A Farewell to Sartre* (New York: Pantheon Books, 1984), 7.
16. For a discussion of the death of both Beauvoir and Sartre, see Alice Jardine, "Death Sentences: Writing Couples and Ideology," in *The Female Body in Western Culture*, ed. Susan Suleiman (Harvard: Harvard University Press, 1986).
17. Beauvoir, *A Very Easy Death*, 79.
18. See Elaine Showalter, *Inventing Herself: Claiming a Feminist Intellectual Heritage* (New York: Scribner, 2001).
19. Susan Sontag, *Illness as Metaphor* (New York: Farrar, Straus and Giroux, 1978), 57.
20. In an article titled "Cancer as Metaphor," oncologist Richard Penson and associates worry about the current psycho-social aspects of medical language: "our experience in Vietnam and Iraq has taught us that there are a lot of negative aspects to war"; that "there is collateral damage in the language, but aggressive language is applied to virtually everything we do in medicine"; "there is a seduction that aggressive treatment is better." Richard T. Penson, Lidia Schapir, Kristy J. Daniels, Bruce A. Chabner, and Thomas J. Lynch, Jr., "Cancer as Metaphor," *Oncologist* 9 (2004), 712.
21. Sontag, *Illness as Metaphor*, 65.
22. Michel de Montaigne, *The Complete Essays*, I: 20, trans. M.A. Screech (New York: Penguin Classics, 2003), 106.
23. Beauvoir, *The Second Sex*, 540.